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About OMSB

Mission

To set high standards for post-graduate medical education of healthcare professionals, that will continuously improve the standards and the quality of healthcare in Oman.

Vision

Quality healthcare through quality medical education

Objectives

OMSB aims and objectives are achieved through the following:

1. To set up and supervise Postgraduate Medical Specialty Programs as well as set up Continuing Professional Development (CPD) programs in health specialties in the framework of the general policy of education.
2. To form Medical Scientific Committees and Supporting Committees which are necessary for the function, supervision, and adoption of OMSB recommendations.
3. To accredit health institutions for training and specialization purposes after evaluating them.
4. To supervise specialty examinations and approve the results through specialized Scientific Committees and the Executive President's Office.
5. To issue professional certificates such as diplomas, fellowships and memberships whether the examination is conducted directly by OMSB or in corporation with other organizations.
6. To coordinate with other professional health boards,

organizations, associations and colleges within or outside the Sultanate.

7. To evaluate professional health certificates and equivalent.
8. To encourage research and publication of scientific articles in peer reviewed journals and issue OMSB's own journals, and periodicals.
9. To participate in proposing general plans for preparing contracts and developing manpower in health field.
10. To organize symposia and conferences in medical education and follow up the implementation of the related recommendations and decisions.
11. To recommend establishing Scientific Associations for medical specialties in Oman.
12. To coordinate with the Ministry of Health and the other governmental authorities to set the foundations and standards in practicing medicine; to register physicians and report about personnel who are barred from practicing medicine in the Sultanate.
13. To encourage, propose topics and provide financial support for health research.
14. To approve the system of postgraduate medical studies for health professionals.
15. To participate in organizing Continuing Professional Development (CPD) activities; for example, medical conferences and workshops in the Sultanate.
16. To send Health Professionals abroad and follow up their academic affairs.
17. To coordinate with medical institutions and concerned authorities to find out training opportunities for physicians sent abroad.
18. To issue and manage Oman Medical Journal (OMJ) and organize its publication locally and internationally.

19. To approve Medical Simulation System as one of the methods of medical training.
20. To approve Continuing Professional Development hours and activities in the Sultanate and monitor the completion of required training hours for physicians and other health professionals as approved by OMSB.

Scientific Committees

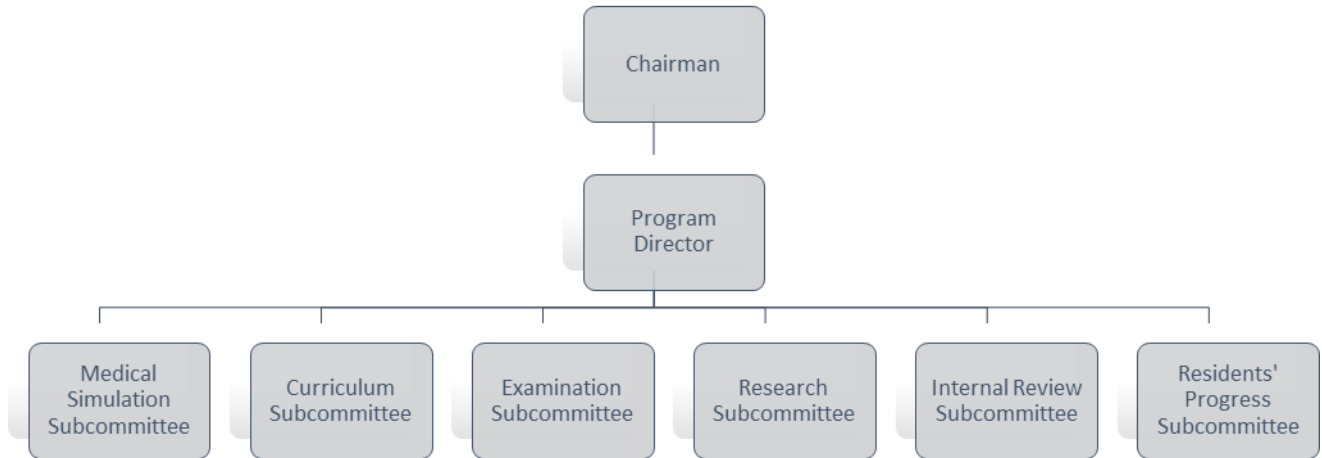
1. Rules & Regulations of Scientific Committee Members

1.1. Administrative Regulations of the Scientific Committee

- 1.1.1. The duration of the Scientific Committee Membership is for 4 years and renewable
- 1.1.2. The Committee must choose one of its members to be the Chairman/Chairperson.
The members will choose the Vice Chairman who will also be the Program Director, In addition, Members should choose as Assistance Program Director from each Training Center and the membership will be for three years
- 1.1.3. The Program Director has the right to choose the Chief Resident to assist him in supervising Residents' affairs
- 1.1.4. The Executive President of the OMSB shall issue a Qarar to form the Scientific Committees. The Qarar will include the Chairman of the committee, the Program Director, and the Assistant Program Director.
- 1.1.5. Any member that misses three consecutive meetings without a valid excuse is considered resigned and his position will be given to another member.

1.2. Organization Structure

OMSB Scientific



1.3. Functions of the Scientific Committee

- 1.3.1. Preparing Training Curricula & Programs
- 1.3.2. Selecting Residents & distributing them equally in the training centers
- 1.3.3. Selecting the faculty trainers to train in accordance with the qualification determined by the OMSB Trainers Guidelines
- 1.3.4. Preparing examinations, and the execution and results
- 1.3.5. Preparing guiding booklets about the programs
- 1.3.6. Having periodical meetings & sending minutes to the Trainee Affairs Department
- 1.3.7. Forming sub-specialty committees
- 1.3.8. Supervising the Training Programs in coordination with the Training bodies in charge
- 1.3.9. Preparing periodical reports about the activities, accomplishments and proposals for improving them, then submitting reports to the Executive Board
- 1.3.10. Encouraging scientific research and publications
- 1.3.11. Approving Completion of Training Programs Certificates
- 1.3.12. Selecting the examiners, date & place of examinations
- 1.3.13. Completing & sending the evaluations to the Trainee Affairs Department every two months & submitting them to the Executive Board every six months
- 1.3.14. Preparing logbooks for Residents (if applicable)
- 1.3.15. Evaluating the specialty programs annually & proposing necessary changes & submitting them to the Executive President
- 1.3.16. Implementing the Program Director's recommendations after approval

1.4. Scientific Committee Meeting Rules

- 1.4.1. Each Scientific Committee should meet a minimum of eight (8) times per calendar year (January to December)
- 1.4.2. Quorum should be 50% of total number of Committee Members
- 1.4.3. If the member's attendance is less than 75 % of meetings, he/she will be paid based on the number of meetings attended per year.
- 1.4.4. Sub-Committees should meet at least 4 times per academic year or as directed by the Chairman of the Scientific Committee

1.5. Chairman/Chairperson

- 1.5.1. A Chairman/Chairperson will head every Scientific Committee of OMSB. He / She will be elected by the Scientific Committee Members from amongst the membership
- 1.5.2. The Chairman/Chairperson will chair all the meetings of the Committee. In his/her absence, the Program Director will chair the meetings
- 1.5.3. The Chairman/Chairperson will represent the Specialty Training Committee at the OMSB Executive Board
- 1.5.4. The Qualifications of the Chairman/Chairperson include but are not limited to the following:
 - 1.5.4.1. The Chairman/Chairperson must be a qualified specialist or sub-specialist in the field of specialty Training Program, with appropriate and acceptable specialty degree/qualification recognized by OMSB
 - 1.5.4.2. The Chairman/Chairperson must have a minimum of three years of experience after the recognized specialty degree/qualification

- 1.5.5. The Responsibilities of the Chairman/Chairperson include but are not limited to the following:
- 1.5.5.1. The Chairman/Chairperson should provide overall vision of the program including goals and objectives
 - 1.5.5.2. The Chairman/Chairperson, together with the Program Director and Scientific Committee members, are responsible for the performance record of the specialty Training Program and maintenance of the scientifically sound and stable educational environment
 - 1.5.5.3. The Chairman/Chairperson, together with the Program Director, is responsible for overseeing and managing the specialty Training Program
 - 1.5.5.4. The Chairman/Chairperson, together with the Program director, is responsible for the annual review and revision, if necessary, of the residency-training curriculum and educational activities.
 - 1.5.5.5. The Chairman/Chairperson has an obligation to protect and safeguard the welfare and the rights of the Residents
 - 1.5.5.6. The Chairman/Chairperson is accountable for the performance of the specialty Scientific Training Committee
 - 1.5.5.7. The Chairman/Chairperson is responsible for reviewing the objectives, scheduling and other issues pertinent to rotations. In addition, he/she is also responsible for ensuring that the Rotations of the Residents (as suggested by the Program Director) are reasonable, fair, and responsive to the requirements of the specialty and OMSB
 - 1.5.5.8. The Chairman/Chairperson should review the program regularly to assess the quality of the educational experience. This review must include:

- 1.5.5.8.1. Assessment of each component of the program to ensure that the educational objectives are being met.
- 1.5.5.8.2. Assessment of the resource allocation to ensure that resource/facilities are being utilized for optimal effectiveness.
- 1.5.5.8.3. Assessment of teaching in the program, including teaching didactic, cognitive research and communication skills.
- 1.5.5.8.4. Overseeing the consultant/resident interaction, communication and ensure that this takes place in an open and collegial atmosphere so that free discussion of the strengths and weaknesses of the program can occur without hindrance.
- 1.5.5.9. The Chairman/Chairperson, together with the Scientific Committee is responsible for selecting candidates for admission to the program.
- 1.5.5.10. He/ She should review performance evaluations of the Residents
- 1.5.5.11. He/ She should review Resident examinations including OMSB results
- 1.5.5.12. He/ She should organize plans towards recognition of OMSB specialty Training Programs
- 1.5.5.13. He/ She should review and is responsible for recommending disciplinary action procedures or any other major training concerns brought to the committee and providing and maintaining appeal mechanism
- 1.5.5.14. He/ She is responsible for evaluating Residents for annual promotion in accordance with the OMSB Rules & Regulations
- 1.5.5.15. He/ She should establish mechanisms to provide career planning and counseling for Resident and to

deal with personal problems or other difficulties during the training.

- 1.5.5.16. The Chairman/Chairperson should ensure that the teaching faculty responsible for training residents is performing to the expectations of the program and of OMSB. This will include periodic evaluation of the teaching faculty members by the residents and giving feedback to the respective faculty
- 1.5.5.17. The Chairman of the Scientific Committee is responsible to call for meetings as stated in the OMSB Academic By-Laws

1.6. Program Director

- 1.6.1. There will be a single Program Director responsible for the Program. The person designated with this authority is accountable for the operation of the program. In addition, there will be assistant program director at each training center.
- 1.6.2. Qualifications of the Program Director are as follows:
 - 1.6.2.1. The Program Director must possess the requisite specialty expertise, as well as, documented educational and administrative abilities.
 - 1.6.2.2. The Program Director must be certified in the specialty & possess qualifications judged to be acceptable by the OMSB
 - 1.6.2.3. The Program Director must be appointed in good standing and based at one of the main training centers
- 1.6.3. Responsibilities of the Program Director include, but are not limited to, the following:
 - 1.6.3.1. The Program Director, together with the faculty, is responsible for the general administration of the

- program, and for the establishment and maintenance of a stable educational environment.
- 1.6.3.2. The Program Director must oversee and organize the activities of the educational program in all institutions that participate in the program.
 - 1.6.3.3. He/ She should monitor Resident supervision in all participating institutions
 - 1.6.3.4. Conduct orientation for Residents to OMSB, Departmental and Hospital policies and procedures
 - 1.6.3.5. The Program Director is responsible for preparing an accurate statistical and narrative description of the program as requested by the OMSB, as well as updating annually both program and resident records through the OMSB data system
 - 1.6.3.6. The Program Director must ensure the implementation of fair policies, grievance procedures, and due process, as established by the sponsoring institutions, training centers and OMSB policies.
 - 1.6.3.7. Organization of rotation and on-call schedules of residents
 - 1.6.3.8. Planning educational activities and monitoring of Residents' attendance in these activities
 - 1.6.3.9. Counseling residents as necessary from time to time
 - 1.6.3.10. Monitoring all types of leave and ensuring compliance by Residents
 - 1.6.3.11. Ensuring that the resident's performance evaluation process is adhered to as stated in the Performance Evaluation Process
 - 1.6.3.12. Reviewing the Training Program planning with the Scientific Committee. Any proposed revisions will be submitted to the OMSB after the approval by the Scientific Committee

- 1.6.3.13. Informing the Chairman of the Scientific Committee and the OMSB of any withdrawal, resignation, interruption and absence of any Resident enrolled in the program.

1.7. Assistant Program Director

- 1.7.1. There will be an Assistant Program Director at each training center to assist the Program Director in operating the Residency Program
- 1.7.2. Responsibilities of the Assistant Program Director include, but are not limited to, the following:
 - 1.7.2.1. He/ She should monitor Resident supervision in the participating institutions
 - 1.7.2.2. He/ She should be a member in the Resident Progress committee.
 - 1.7.2.3. Conduct orientation for Residents to OMSB, departmental and Hospital policies and procedures
 - 1.7.2.4. The Assistant Program Director is responsible for updating annually both program and Resident records through the OMSB data system together with the Program Director.
 - 1.7.2.5. The Assistant Program Director must ensure the implementation of fair policies, grievance procedures, and due process, as established by the sponsoring institutions, training centers and OMSB policies.
 - 1.7.2.6. Organization of rotation and on-call schedules of residents
 - 1.7.2.7. Planning educational activities and monitoring of Residents' attendance in these activities
 - 1.7.2.8. Counseling residents as necessary from time to time

- 1.7.2.9. Monitoring all types of leave and ensuring compliance by Residents
- 1.7.2.10. Ensuring that the resident's performance evaluation process is adhered to as stated in the Performance Evaluation Process

1.8. Education Supervisor

- 1.8.1. To oversee the medical education of Residents and ensure that Residents make the necessary clinical and academic program
- 1.8.2. To monitor educational supervision, regular appraisal, and feedback on the Residents' academic and clinical progress
- 1.8.3. To facilitate problem solving, and identifying strengths and weaknesses of the Residents
- 1.8.4. To maintain the standards of training at each level of Residents
- 1.8.5. To develop a learning agreement and educational objectives with the Residents, which is mutually agreeable and is the point of reference for future appraisal. The Program Director or Assistant Program Director should agree upon these action plans
- 1.8.6. To ensure the Residents maintain and develop their specialty learning portfolio and participate in the specialty assessment process.
- 1.8.7. To guide Residents through their program, identifying learning and development opportunities.
- 1.8.8. To provide an appropriate role model and mentorship
- 1.8.9. To ensure that rotation objectives are met
- 1.8.10. To make sure that master schedule of the specialty is adhered to

- 1.8.11. To help Residents with difficulties and coordinate efforts to find solutions to their problems
- 1.8.12. Counsel the Residents about complaints related to training and well-being (social & psychological issues) and work with the Program Director and Assistant Program Director to find solutions
- 1.8.13. Follow the OMSB requirements of clinical progress of the Residents and make sure that the Residents are progressing and receiving medical support if necessary.
- 1.8.14. Educational supervisors should counsel the Residents on issues regarding professionalism
- 1.8.15. Keep the balance of education versus excessive clinical commitments (service needs)

1.9. Chief Resident

A Chief Resident should be a senior-level Resident, R3 or R4. He/ She is assigned administrative and training responsibilities within the Residency Training Program. These are in addition to those regularly performed by other Residents in his or her program and post-graduate year.

Specific duties and responsibilities include:

- 1.9.1. Schedule and maintain regular meetings with the Program Director.
- 1.9.2. Maintain communication among the Residents in the form of meetings, electronic, or written memoranda, or by other means. Schedule monthly resident meetings with the Program Director.
- 1.9.3. In conjunction with the Program Director, arrange yearly Resident rotation schedules, and make appropriate changes during the year as necessary.

- 1.9.4. Maintain and schedule daily work schedules, including on call coverage, coordinate vacation time, meeting / conference time, and yearly in-service examination, in additions to, re-assigning Residents as necessary for coverage issues when unplanned absences occur, due to illness, etc.
- 1.9.5. Maintain and monitor resident vacations in accordance with departmental and institutional policies
- 1.9.6. Schedule and coordinate educational activities. Ensure that residents are aware of upcoming responsibilities to present at various educational activities
- 1.9.7. Assist the Program Director and faculty/staff with New Resident Orientation
- 1.9.8. Assist in ensuring that residents complete their appropriate rotation and faculty evaluation forms
- 1.9.9. Strive to maintain morale among residents
- 1.9.10. Encourage and arrange resident representation and/or presence at appropriate meetings
- 1.9.11. Coordinate resident participation in the residency candidate interview and evaluation process
- 1.9.12. Keep the Program Director informed of important issues involving Residents.

1.10. Sub-Committees of the Scientific Committee

1.10.1. Curriculum Sub-Committee

- 1.10.1.1. To provide a detailed written curriculum for the program according to the criteria set by the OMSB, including rotations, didactic lectures, Journal Club, and all teaching activities
- 1.10.1.2. To periodically review the curriculum of the program, identifying areas of strength and weakness, and revise the curriculum as needed.

- 1.10.1.3. To review other national and international curricula of the Specialty (Saudi Arabia and other Gulf States, Canada, USA, UK, etc.) with a view to improving the curriculum as needed
 - 1.10.1.4. To incorporate into the curriculum, professionalism, ethics, evidence based medicine, and encourage research among the Residents.
- 1.10.2. Internal Review Sub-Committee
- 1.10.2.1. To recommend to the OMSB, policies, standards, and criteria for accreditation of the Training Program and Training Centers for the Specialty.
 - 1.10.2.2. To periodically review the general accreditation criteria of the OMSB for program and training centers
 - 1.10.2.3. To periodically review the residents' rotations to ensure that the training objectives are fulfilled and the exit examination criteria are achieved
 - 1.10.2.4. To ensure didactic training of Residents e.g. lecture series, conferences and seminars satisfy the training requirements
 - 1.10.2.5. To evaluate any new training center that is being considered for addition to the training program.
 - 1.10.2.6. To conduct annual internal review of the program.
- 1.10.3. Examination Sub-Committee
- 1.10.3.1. To review currently available Exit Examinations – local and external, identifying areas of strength and weaknesses.
 - 1.10.3.2. Recommend a format for the End-of Year Examination
 - 1.10.3.3. To provide a written detailed proposal for a new set of Exit Examination (Oman Medical Specialty Board)

with its relevant components e.g. Part I and Part II or even Part III if indicated. The proposal may consider a completely independent examination for Part II or Part III or a joint certificate with an international examination, or initially a joint examination, which could later be an independent OMSB exam.

1.10.4. Resident Progress Sub-Committee

- 1.10.4.1. To follow the day-to-day activities and progress of the residents
- 1.10.4.2. To review all aspects of the Residents' welfare, including investigating complaints of Residents and Faculty of the program
- 1.10.4.3. To review all problems raised by the Residents that are related to, lectures and conferences as well as rotations within the specialty and rotations to other departments
- 1.10.4.4. To propose a Resident to the Scientific Committee for the Chief Resident's position (R4 or above). The Chief Resident will automatically become a member of the sub-committee
- 1.10.4.5. To suggest any additional specific requirements for the specialty program related to admission requirements, or for generally improving the Residents' welfare in addition to the general OMSB requirements.
- 1.10.4.6. To prepare for interviews for admission into the program and present a proposal and to review the requirements annually.

1.10.5. Research Sub-Committee

- 1.10.5.1. Advise & mentor Residents on Research Projects

- 1.10.5.2. Propose a mechanism for finding researchers and research projects
- 1.10.5.3. Organize a research day for the program, to present the various Resident research projects
- 1.10.5.4. Follow up of Residents' projects and encourage publications of the research.
- 1.10.5.5. Develop criteria and select two to three best research projects in the program annually to participate in the OMSB Annual Research Day.

Selection Criteria

2. Selection Criteria for Appointment of Scientific Committee Members

1. Scientific Committee Members must be Full Time Trainers
2. The Scientific Committee may include 1 Non-Physician member as deemed necessary by the Specialty Training Program
3. Each Scientific Committee will consist a maximum of 12 members
4. All members must be a consultant (or equivalent)
5. All members must be board certified (or equivalent)
6. Scientific Committee Chairman may request trainers to participate in Scientific Committee sub-committees when necessary.

3. Generic Selection Criteria for Appointment of Trainers and Associate Trainers

Trainers of OMSB Residency Programs are selected by the Scientific Committees of the concerned Program based on the following Selection Criteria **. The Scientific Committees then nominates them to H.E. the Executive President of OMSB.

1. Board certification or equivalent in the concerned specialty.
2. Evidence of structured training in the concerned specialty.
3. At least 2 years of Post residency experience or Fellowship of the concerned specialty.
4. Evidence of active involvement in teaching, and/or academic activities, and/or research.

5. Review of performance by Peers and HOD.
 6. Attendance of Medical Education in training such as “Train the Trainers” workshops (before or within 1 year of appointment)
 7. Evidence to show that he/she can provide appropriate supervision of the Resident.
 8. He/ She has potential to contribute to the learning culture and environment.
 9. Has experience in providing assessment and appraisal, as well as formative and summative feedback as needed.
 10. The Trainer should be able to play a role in helping the Resident to plan the training and achieve agreed learning outcomes.
 11. Shows commitment to training and to consequences of own actions.
 12. Good communicator and listener.
 13. Approachable and accessible, open-minded.
 14. Fulfill the minimum requirements of specialty specific Trainer criteria (if applicable)
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*** Scientific Committees may add to these criteria in cases where specialty- specific criteria are necessary.*

4. Generic Selection Criteria for Appointment of Non-Physician Trainers

Non-Physician Trainers of OMSB Residency Programs are selected by the Scientific Committees of the concerned Program based on the following Selection Criteria **. The Scientific Committees then nominates them to H.E. the Executive President of OMSB.

1. Graduate of specialty-related studies, preferable with Master's degree (e.g. Medical Physics in Radiology) or Bachelor's degree in the field related to the specialty.
2. At least 2 years of experience in the concerned specialty if has Master's degree, or 5 years of experience for Bachelor's degree
3. Evidence of active involvement in teaching, and/or academic activities, and/or research.
4. Review of performance by Peers and HOD.
5. Evidence to show that he/she can provide appropriate supervision of the Resident.
6. He/she has potential to contribute to the learning culture and environment.
7. Has experience in providing assessment and appraisal, as well as formative and summative feedback as needed.
8. Shows commitment to training and to consequences of own actions.
9. Good communicator and listener.
10. Approachable and accessible, open-minded.

*** Scientific Committees may add to these criteria in cases where specialty- specific criteria are necessary.*

5. Number of Trainers & Maintenance Criteria

The number of Trainers suggested by the Scientific Committee is limited. Thus to be appointed as a Trainer or, to remain as a Trainer the following criteria are considered:

1. **Clinical Contact Time with Residents**

Minimum six blocks per year clinical and/or minimum of 15 hours a week

2. **Resident – Trainer Ratio in the Program**

Maximum number of full time Trainers per program is One
Trainer: Two Residents

3. **Academic Teaching**

Leading or facilitating a minimum of four lectures (in the program's academic days), seminars, and workshops per year for residents.

4. **Involved in Supervisory activities** (mentoring, research mentors)

6. Number of Associate Trainers & Maintenance Criteria

The number of Associate Trainers suggested by the Scientific Committee is limited. Thus to be appointed as an Associate Trainer or, to remain as an Associate Trainer the following criteria are considered:

1. Clinical Contact Time with Residents

Minimum three blocks per year clinical and minimum of 8 hours a week

2. Resident – Trainer Ratio in the Program

Maximum number of Associate Trainers per program is Two
Associate Trainers: One Resident

3. Academic teaching

Leading or facilitating a minimum of two lectures (in the program's academic days), seminars, and workshops per year for residents.

4. Involved in Supervisory activities (mentoring, research mentors)

7. Number of Non-Physician Trainers & Maintenance Criteria

The number of Non-Physician Trainers suggested by the Scientific Committee is limited. Thus to be appointed as a Non-Physician Trainer or, to remain as a Non-Physician Trainer the following criteria is considered:

1. Clinical Contact Time with Residents

Minimum six blocks per year clinical and/or minimum of 15 hours a week

2. Resident – Trainer Ratio in the Program

Maximum number of Associate Trainers per program is One
Non-Physician Trainer: Three Residents

3. Academic Teaching

Leading or facilitating a minimum of two lectures (in the program's academic days), seminars, and workshops per year for residents.

4. Involved in Supervisory activities (mentoring, research mentors)

Trainer Responsibilities

8. Responsibilities of Trainers & Associate Trainers

1. Be familiar with the objectives of the rotation he/she is supervising.
2. Orient the resident at the beginning of the rotation regarding the objectives of rotation and the responsibilities during the rotation.
3. Supervise and teach the resident daily based on the graded responsibility according to level of training.
4. Each patient seen by the Resident should be discussed with the Trainer prior to decision making (keeping in mind, graded responsibility).
5. Trainer should provide continuous feedback during the rotation to the Resident so that corrective measures can be taken in a timely manner.
6. Trainers along with other supervisors should appraise the Resident at the end of the block using the OMSB evaluation form. Sufficient time should be allocated to discuss the evaluation with the resident and provide advice.
7. Trainer should provide opportunity for Resident to perform procedures.
8. Trainer should be approachable for help, feedback, and resident support.
9. Trainer should promote comprehensive approach to patient care.
10. Trainer should allow for protected teaching time.
11. Trainer should demonstrate strong interest in education.
12. Maintain educational environment conducive to resident education in each of the OMSB Medical Competencies.

13. Participate in Faculty Development program to enhance teaching effectiveness and promote scholarly activity.
14. Trainer must regularly participate in organized academic activities, e.g. rounds, journal clubs, conferences, etc.
15. Scientific Committee Chairman may request Trainers to participate in Scientific Committee sub-committees when necessary

9. Responsibilities of Non-Physician Trainers

1. Be familiar with the objectives of the rotation he/she is supervising.
2. Orient the resident at the beginning of the rotation regarding the objectives of rotation and the responsibilities during the rotation.
3. Supervise and teach the resident based on the graded responsibility according to level of training.
4. Trainer should provide continuous feedback during the rotation to the Resident so that corrective measures can be taken in a timely manner.
5. Trainers along with other supervisors should appraise the Resident at the end of the block using the OMSB evaluation form. Sufficient time should be allocated to discuss the evaluation with the resident and provide advice.
6. Trainer should provide opportunity for Resident to perform procedures.
7. Trainer should be approachable for help, feedback, and resident support.
8. Trainer should allow for protected teaching time.
9. Trainer should demonstrate strong interest in education.
10. Maintain educational environment conducive to resident education in each of the OMSB Medical Competencies.
11. Participate in Faculty Development program to enhance teaching effectiveness and promote scholarly activity.

12. Trainer must regularly participate in organized academic activities, e.g. rounds, journal clubs, conferences, etc.
13. Scientific Committee Chairman may request Trainers to participate in Scientific Committee sub-committees when necessary

Performance Monitoring

10. Monitoring Performance of the Scientific Committees

Scientific Committees must be assessed based on:

1. Established objectives/plan set at the start of the academic year.
2. Scientific Committee Achievements
3. Number of Committee meetings where quorum was achieved
4. Academic activities conducted during the year
5. Research produced by the program
6. Regular Internal Reviews were conducted
7. Evidence of steps taken to rectify the deficiencies in assessment reports (Internal or External)
8. Progress of Residents at each training level (examination results, evaluations, etc.)
9. Number of Residents graduated from the program per year
10. Continuous review and management of the Curriculum
11. Integration of Simulation into the training of Residents
12. Adherence to OMSB policies, regulations, and By-Laws
13. Satisfactory Implementation of OMSB Quality Standards
14. Satisfactory performance of all sub-committees
15. Resident Satisfaction with the committee's performance

11. Monitoring of Trainers & Associate Trainers

1. The Trainer should be in good standing as person and practicing clinician
2. The Trainer should maintain a teaching portfolio that should be annually evaluated by the Scientific Committee.
3. The Trainer should be working as a full time clinician in an OMSB recognized institution, and has to have more than 50% of his/her time devoted to that specialty/subspecialty.
4. The Trainer should have positive evaluations by residents most of the time.
5. The Trainer should complete a medical education course recognized by OMSB, either before or during the first year of appointment.
6. The Trainer should attend at least once a year medical education faculty development event aiming at improving their teaching and learning skills.
7. A Trainer will be reappointed annually, subject to satisfactory monitoring report.

12. Monitoring of Non-Physician Trainers

1. The Trainer should be in good standing as person and professionally
2. The Trainer should maintain a teaching portfolio that should be annually evaluated by the Scientific Committee.
3. The Trainer should have positive evaluations by residents most of the time.
4. The Trainer should complete a medical education course recognized by OMSB, either before or during the first year of appointment.

5. The Trainer should attend at least once a year medical education faculty development event aiming at improving their teaching and learning skills.
6. A Trainer will be reappointed annually, subject to satisfactory monitoring report.

13. Eligibility of Trainers, Associate Trainers, and Non-Physician Trainers for Payment at the End of the Year

1. Feedback from the resident
2. Trainer evaluation of the resident (Number of residents evaluated)
3. Resident evaluation of the Trainer
4. Academic activities (Lectures, case conferences, participation in examinations locally and internationally, journal clubs, research activity with the Residents)
5. Clinical involvement with the residents (# of blocks/contact hours, interdepartmental meetings, outpatient clinic)
6. Quality Assurance related activities with the residents, e.g. morbidity and mortality, etc.
7. Satisfactory monitoring report from the Scientific Committee Chairman, after consultation with the Program Director and Assistant Program Director.

14. Withdrawal of Privileges from Trainers, Associate Trainers, and Non-Physician Trainers

Trainer Privileges will be withdrawn in the event the Trainer:

1. Does not meet the minimum requirements for maintenance during the year and does not improve after counseling

2. Receives two unsatisfactory reports in an academic year from the following:
 - i. Repeated and verified valid complaints from residents
 - ii. Repeated complaints of inadequate supervision of the Residents
 - iii. Unsatisfactory Trainer evaluations
 - iv. Unsatisfactory Evaluation of the Trainers' academic activities
 - v. Failure to maintain punctuality during lectures
 - vi. Repeated cancellation of academic activities
 - vii. Attitude problems with colleagues, staff, and residents
 - viii. Misconduct (including intimidation, substance abuse, harassment, etc.)

Resident & Faculty Development

15. Resident Development Program

In an effort to develop its residents academically as well as professionally, OMSB has created a comprehensive resident development program to ensure covering all topics essential to the training of residents. The resident development program includes a core program curriculum as well as a research component.

All trainers must be aware that unless residents complete the core curriculum and other requirements, they will not be issued a completion of training certificate. It is the residents' responsibility to ensure the completion of all requirements, and the trainers' responsibility to encourage residents to complete requirements as early as possible.

16. Faculty Development Program

The Oman Medical Specialty Board is committed to educating, training, and developing its Residents as well as Faculty members. Hence, OMSB has developed a comprehensive Faculty Development Program to meet the educational needs of faculty. The programs will provide faculty the opportunity to enhance teaching skills, assessment skills, professional skills, and research and academic skills. Many of the programs provided involve various components of the CanMeds curriculum. Examples of courses include workplace-based assessment, and teaching skills.

Policies and Procedures

17. OMSB Policies and Procedures

All OMSB Scientific Committee members, faculty and trainers are expected to be familiar with OMSB policies and procedures that govern training and education of residents. All OMSB trainers must fully understand the components of their training program curricula, rotation objectives and examination and assessment processes, methods and tools.

Below are important policies that all trainers should know about:

1. Evaluation Process
2. Academic Promotion procedures
3. Remedial Program
4. Grievance Policy
5. Leave policy

The Evaluation Process

1. At the completion of each rotation, the Resident should be given feedback.
2. The evaluation at the end of each rotation is made by the Supervisor/Consultant responsible for the Resident during that rotation. If more than one member is involved in the supervision of a Resident during a rotation, the information will be summarized by one person, and the global evaluation represents a consensus opinion.

3. Ongoing verbal feedback is important for all Residents, and is of particular importance to Residents experiencing difficulty. Supervisors will make every effort to provide such feedback.
4. The Resident bears responsibility for ensuring that the evaluations are completed in a timely fashion, and that he/she has received feedback.
5. Successful completion of a rotation is defined as obtaining a “Meets Expectations” global assessment.
6. An UNSATISFACTORY or BELOW EXPECTATIONS global assessment on any evaluation is not considered a passing grade.
7. A Resident with an UNSATISFACTORY or BELOW EXPECTATIONS global evaluation for any rotation must be notified immediately.
8. An INCOMPLETE ROTATION should be completed, the duration of which is determined by the Scientific Committee.
9. After 6 months of training, a PROGRESS REPORT is prepared by the Scientific Committee for each Resident and will be submitted to the OMSB. This evaluation represents a summary of the Resident's performance over the preceding 6-month period.
10. After 12 months of training (or at the end of the academic year), a summative evaluation is prepared by the Scientific Committee for each Resident. This END OF ACADEMIC YEAR report represents a summary of the Resident's progress and overall performance during the academic year. The Resident must sign the 6-month evaluation as well as the end of the year evaluation.

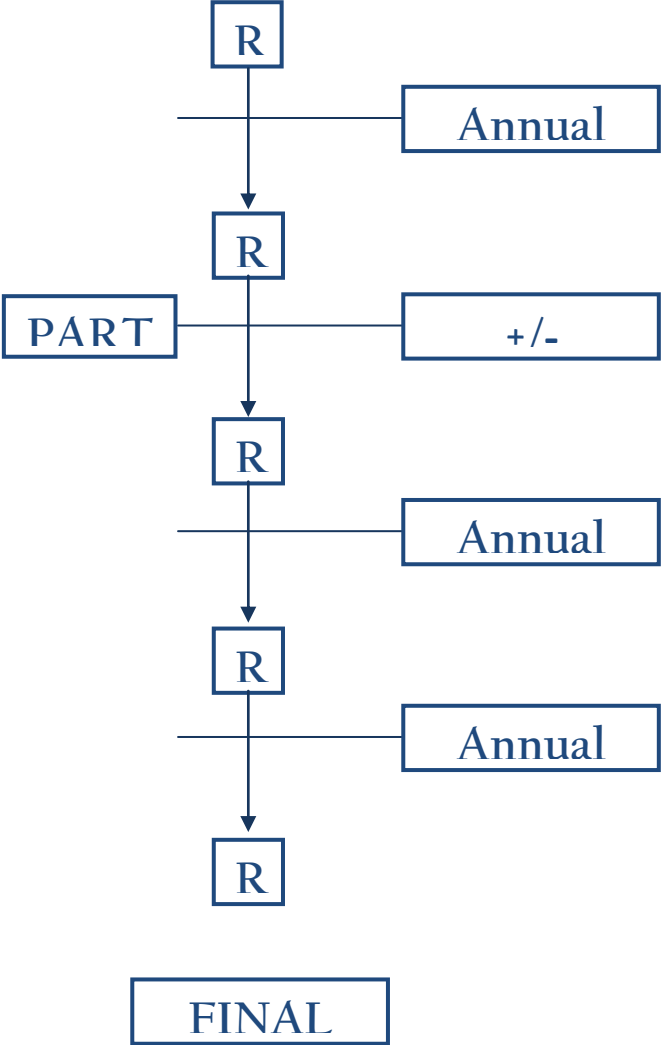
Reconsideration of a Rotation Evaluation

1. A Resident who does not agree with a rotation evaluation, he/she should discuss that evaluation with the Supervisor/Consultant who wrote it. The supervisor will review the evaluation, speaking with others if indicated, and then has two choices:
 - A. The Supervisor/Consultant may revise the evaluation and the "revised" evaluation becomes the official one, or
 - B. The Supervisor/Consultant may choose not to alter the evaluation believing it is fair and accurate.
2. If a Resident wishes a formal reconsideration of a rotation evaluation, this request must be submitted in writing to the Program Director within 28 days and the Scientific Committee will meet with the concerned Resident to consider the case.
 - A. The Specialty Scientific Committee has several options:
 - The evaluation can remain unchanged;
 - An Unsatisfactory or Below Expectations Global Evaluation can be changed to Meets Expectations;
 - B. Minutes of the meeting should be kept and the decision should be conveyed as soon as possible to the Resident in person, and in writing. The minutes and all written communication should be sent to the OMSB office.

Academic Promotion

- A. Promotion of a Resident to the next academic level occurs if all rotation periods during the year have been completed with “Meets Expectations” or higher global evaluations.
- B. During the academic year, an “UNSATISFACTORY or BELOW EXPECTATIONS” in one rotation period, with “MEETS EXPECTATIONS” completion of all others, requires the Resident to REPEAT a rotation of the same duration.
- C. A “REPEAT ROTATION” should be undertaken before promotion to the subsequent academic year.
- D. When it is recognized that a Resident is in academic difficulty, the Scientific Committee will identify the areas of weakness and will attempt to support and assist the Resident in addressing those weaknesses.
- E. “REPEAT ROTATIONS”, whenever possible, may be undertaken in a different hospital/setting.
- F. An “UNSATISFACTORY or BELOW EXPECTATIONS” evaluation in a REPEAT ROTATION period will require that a Resident be placed on Remedial Program.
- G. During the academic year, an “UNSATISFACTORY or BELOW EXPECTATIONS” evaluation in two rotation periods, will require the Resident to be placed on Remedial Program.

Stages of Academic Promotion



Remedial Program for Resident Failing To Progress Guidelines

Remedial training:

Remediation is a formal program designed to assist the Resident who is failing to progress in clinical, academic, and/or professional performance. Specific goals and objectives for the remedial or probationary period should be developed.

Criteria for Remediation:

1. Two “UNSATISFACTORY/BELOW EXPECTATIONS” evaluations in one academic year.
2. Resident failing in assessment examinations, i.e. End-of-Year Exam, OMSB Part I exam after 2nd attempt.
3. When significant concerns about the professional conduct of the Resident have been raised and are in an area that is deemed remediable.

Remedial Program Outline:

The Program Director, in consultation with the Resident Progress Subcommittee will summarize the remedial program outline in writing and should include:

1. Nature of the remedial program (academic, and/or professional conduct).
2. Identified areas to remediate, addressing areas of weakness and including clinical experience that is appropriate for the Resident’s level of training.
3. Expected outcomes of the remedial program.
4. Timeframe for elements of the remedial program including completion.

5. Outline of the methods of evaluations to be used, e.g. give quizzes, strengthen examination practice skills of Residents, etc.
6. The remedial program may include repeating rotations or program-specific requirements for three (3) to six (6) months.
7. Residents on remedial training for up to 6 months shall not be permitted to take annual leave except in unavoidable circumstances. The Program Director must approve the request for leave in advance.
8. The decision of placing the Resident on REMEDIATION should be conveyed to the Resident by the Chairman/Program Director of the Program Scientific Committee in person and in writing within a week of the Program Scientific Committee meeting held for the purpose.
9. Remedial supervisor will arrange psychological support if deemed necessary.

Evaluation:

1. The Resident must be evaluated, in writing bi-weekly by the faculty who are providing the remedial training.
2. The Resident must meet with the remedial supervisor to review the written evaluation.
3. Successful completion of a Remedial period requires “MEETS EXPECTATIONS” in global evaluation on all rotations.
4. “UNSATISFACTORY or BELOW EXPECTATIONS” evaluations during the remedial period in global evaluation will require referral to the Program Scientific Committee.
5. During the Remedial period, efforts will be made to assist the Resident in addressing areas of weakness.

Duties for Residents on Remedial Training:

1. Increase their knowledge base in the areas of difficulty in basic science and clinical medicine.
2. Improve their clinical performance
3. Improve behaviors and professionalism during clinical rotations.
4. Participate in examinations
5. Meet with the remedial supervisor at biweekly or monthly intervals during the remedial period to discuss progress and ongoing objectives.

Duties for Remedial Supervisor:

1. Provides supervision of the Resident on remedial program during the remedial period.
2. Meets with the Resident biweekly to review and discuss progress or lack thereof in attaining the objectives of the remedial rotation, to keep records of these meetings, and to submit these monthly to the Resident's Program Director.
3. Helps the Resident in achieving the objectives of remediation by:
 - a. Clarifying the difficulties the Resident is having with the knowledge base.
 - b. Providing extra teaching in clinical matters
 - c. Providing supervision and training in procedural skills
 - d. Counseling regarding attitudes
 - e. Directing the Resident to other specific sources of information on teaching.
 - f. Assess the Resident by means of exams, quizzes, etc.
4. At the end of the remedial period, provides a written report whether the Resident has or has not met the objectives of the period of remediation to the Scientific Committee.

Possible Outcomes of Remediation:

Upon completion of the remediation period, the following outcome may occur as determined by the Scientific Committee, depending on the Resident's performance:

1. Reinstatement as a Resident in the program with no loss of time or extension of training.
2. Reinstatement as a Resident, with training extended as recommended by the Program Director and the Resident Progress Subcommittee based on time lost due to unsatisfactory performance.
3. An additional period of remediation.
4. The recommendations should be submitted with a detailed report in case of termination or closure of file. The report should be submitted to the Executive President for final disposition.
5. An "UNSATISFACTORY or BELOW EXPECTATIONS" evaluations during the Remediation Period will require the Scientific Committee to refer the case to OMSB.
6. A Resident may be placed on Remedial Program on only one occasion during postgraduate training. If, during a subsequent academic year, a Resident meets the criteria for Remedial Program for the second time, the Scientific Committee will consider the case and make recommendations, as appropriate.

Any other scenario not mentioned above should be discussed on a case-by-case basis by the Scientific Committee.

Resident's Grievance Policy

1. A Resident may file a grievance if a reasonable basis exists to support allegations that he/she has been treated contrary to the existing policies governing the residency training program.
2. Any alleged grievance must be filed in writing by the Resident to the Program Director within ten (10) days of the date on which the alleged grievance occurred. Any grievance not timely filed shall be waived and not processed. The written complaint should be as specific as possible regarding the action that precipitated the grievance: date, place, people involved, including witnesses, IF ANY. A summary of the incident, efforts made to settle the matter informally, and the remedy sought.
3. The Program Director shall review and investigate the grievance, negotiate, and try to resolve it. The Program Director shall respond to the grievance in writing within 15 days of receipt of the complaint. The response shall outline the actions that will or will not be taken to resolve the grievance.
4. If a Resident is dissatisfied with the Program Director's solution, the trainee may request in writing to the Scientific Committee Chairman within fifteen (15) days of receiving the Program Director's resolution further review of the decision. The Resident shall submit copies of the original grievance and the Program Director's response.
5. The Scientific Committee Chairman shall then appoint an ad hoc grievance subcommittee that will exclude the Program Director and the faculty and Resident involved in the dispute.

6. The Grievance Subcommittee shall review, investigate, negotiate, and come up with a resolution.
7. The Grievance Subcommittee shall make a recommendation to the Chairman as to the merits of the appeal and an appropriate resolution of the grievance within fifteen (15) working days of the formation of the subcommittee.
8. The Chairman shall then render in writing a decision to the Resident and copies will be sent to the Executive President and other parties concerned.
9. If the Resident is not satisfied with the resolution of the Scientific Committee Chairman, he/she may appeal to the Executive President within 15 days of receiving the resolution of the Scientific Committee Chairman.
10. The Executive President may make the decision or refer it to the Education Advisory Committee. That decision will be final. The final decision on any grievance action shall be issued within 30 days of the date that the appeal was filed.

Resident's Leave Policy

RESIDENT GUIDELINES FOR ANNUAL LEAVE APPLICATION PROCESS

**Concerned Residents must follow through all processes (flowcharts A & C)*

1. Residents shall be entitled to an Annual Leave of 30 days in addition to a maximum of 10 days in lieu of Eid Holidays, and Official Holidays, if the Resident is required to work during these holidays and leaves.
2. Annual Leave which is not utilized within the year shall not be transferred to the following year.
3. Residents must submit their proposed leaves prior to the creation of the master rotation schedule to the person-in-charge of the rotation schedule.
4. The Annual Leave can be taken all at once (30 days) or in parts (i.e. one week per block/ 75% of the block must be attended, to receive full credit for the block) throughout the academic year.
5. If the leave is applied for after the creation of the master rotation schedule, then the application must be submitted at least 3 months of the intended annual leave
6. Leave application forms must be submitted to the Chief Residents who will preliminarily approve the leave after checking the number of residents rotating in the affected Training Center.
7. Leave forms must then be signed and approved by the Rotation Supervisor/Assistant Program Director for the affected Training

Center – copy must be faxed to the Program Administrator but not encoded in the database without the approval of the Program Director.

8. Leave forms must then be signed and approved by the Program Director. Copy should be sent to the Program Administrator.
9. OMSB approval
10. Encoding of leave in the Resident Database.
11. When the Resident reports to work from Annual Leave, they must complete the Return from Leave form signed by the Rotation Supervisor of the affected rotation, and Program Director or Assistant Program Director and submit to the Program Administrator for encoding

RESIDENT GUIDELINES FOR SCIENTIFIC LEAVE APPLICATION PROCESS

**Concerned Residents must follow through all processes (flowcharts A & C)*

1. Residents may be granted a leave for scientific purposes (attending scientific conferences and seminars, specialty examinations, etc.), not exceeding 10 days, during each academic year provided that he/she presents proof of attending the activity (e.g. Certificate of Attendance, Exam Certificate, etc.)
2. Residents must submit the leave form at least 3 months before the examination and/or conference.

3. Resident must obtain the approval of the Rotation supervisor/APD of the affected rotation and the PD. Copy of the form should be forwarded to the Program administrator
4. When the Resident reports to work from Scientific Leave, they must complete the following documents and submit to the Program Administrator for encoding:
 - 4.1 Return from Leave form signed by the Rotation Supervisor of the affected rotation, and Program Director or Assistant Program Director
 - 4.2 Proof of attending the activity (Certificate of Attendance, Exam Certificate, etc.).
5. The Resident should submit the above listed documents to the Program Administrator within two (2) weeks from reporting to work from Sick Leave.

RESIDENT GUIDELINES FOR SICK LEAVE APPLICATION PROCESS

**Concerned Residents must follow through all processes (flowcharts B & C)*

1. The Resident should notify the affected rotation supervisor and Assistant Program Director/Program Director, as well as the Program Administrator when the Resident leaves and reports back to work from sick leave.
2. When the Resident reports to work from Sick Leave, they must complete the following documents and submit to the Program Administrator for encoding:

- 2.1. Leave Form signed by the Rotation Supervisor of the affected rotation, and Program Director of Assistant Program Director
 - 2.2. Return from Leave form signed by the Rotation Supervisor of the affected rotation, and Program Director of Assistant Program Director
 - 2.3. Medical Certificate (from an authorized hospital).
3. The Resident should submit the above listed documents to the Program Administrator within two (2) weeks from reporting to work from Sick Leave.
 4. If the leave exceeds seven (7) days, the Resident should compensate that period for an equivalent period before he/she is awarded a Certificate of Completion of Training.

RESIDENT GUIDELINES FOR EMERGENCY LEAVE APPLICATION PROCESS

**Concerned Residents must follow through all processes (flowcharts B & C)*

1. The Resident should have valid and convincing reasons for taking an Emergency Leave
2. Emergency Leaves will be allowed under the following circumstances:
 - 2.1 Death of first degree (parents, siblings, spouse, children, grandparents, immediate Uncles & Aunts),
 - 2.2 Dealing with natural disaster, accidents, & fires that prevent the Resident from reaching the designated rotation

3. A maximum of seven (7) days will be permitted for Emergency Leave. Any other Emergency Leave not listed above will be deducted from the Annual Leave.
4. If the leave exceeds seven (7) days, the Resident should compensate that period for an equivalent period before he/she is awarded a Certificate of Completion of Training.
5. The Resident should notify the affected Rotation Supervisor and Chief Resident.
6. The Chief Resident will inform the Program Director, Assistant Program Director, and the Program Administrator.
7. When the Resident reports to work from Emergency Leave, they must complete the following documents and submit to the Program Administrator for encoding:
 - 7.1 Leave Form signed by the Rotation Supervisor of the affected rotation, and Program Director of Assistant Program Director
 - 7.2 Return from Leave form signed by the Rotation Supervisor of the affected rotation, and Program Director of Assistant Program Director
 - 7.3 Letter from the Program Director, Death Certificate, or letter from the Sheikh.
8. The Resident should submit the above listed documents to the Program Administrator within two (2) weeks from reporting to work from Emergency Leave.

RESIDENT GUIDELINES FOR MATERNITY LEAVE APPLICATION PROCESS

**Concerned Residents must follow through all processes*

1. The Resident will be granted a leave of 50 days from the day of giving birth.
2. Residents must inform the person in-charge of the master rotation schedule of their expected date of delivery as soon as it is known, no later than the 16th week of gestation.
3. Resident must submit their Leave Form with the signature of the Program Director and Assistant Program Director to the Program Administrator.
4. When the Resident reports to work from Maternity Leave, they must complete the following documents and submit to the Program Administrator for encoding:
 - 4.1 Leave Form signed by the Rotation Supervisor of the affected rotation, and Program Director or Assistant Program Director
 - 4.2 Return from Leave form signed by the Rotation Supervisor of the affected rotation, and Program Director or Assistant Program Director
 - 4.3 Child Birth Certificate.
5. The Resident should submit the above listed documents to the Program Administrator within two (2) weeks from reporting to work from Maternity Leave.

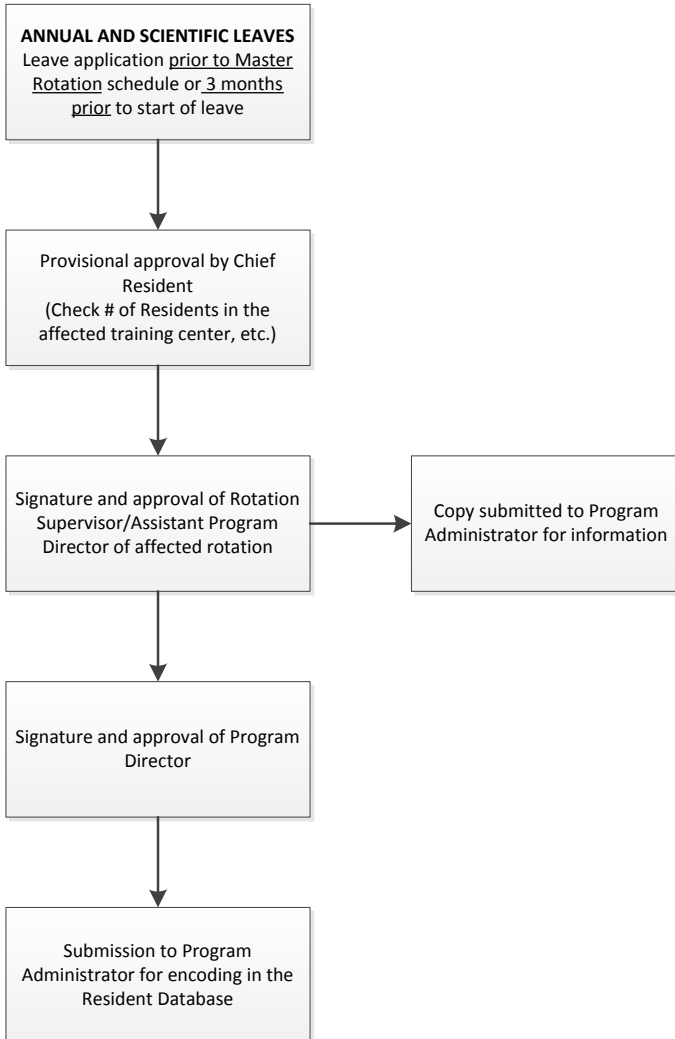
RESIDENT GUIDELINES FOR COMPENSATION LEAVE FOR PUBLIC HOLIDAY

**Concerned Residents must follow through all processes*

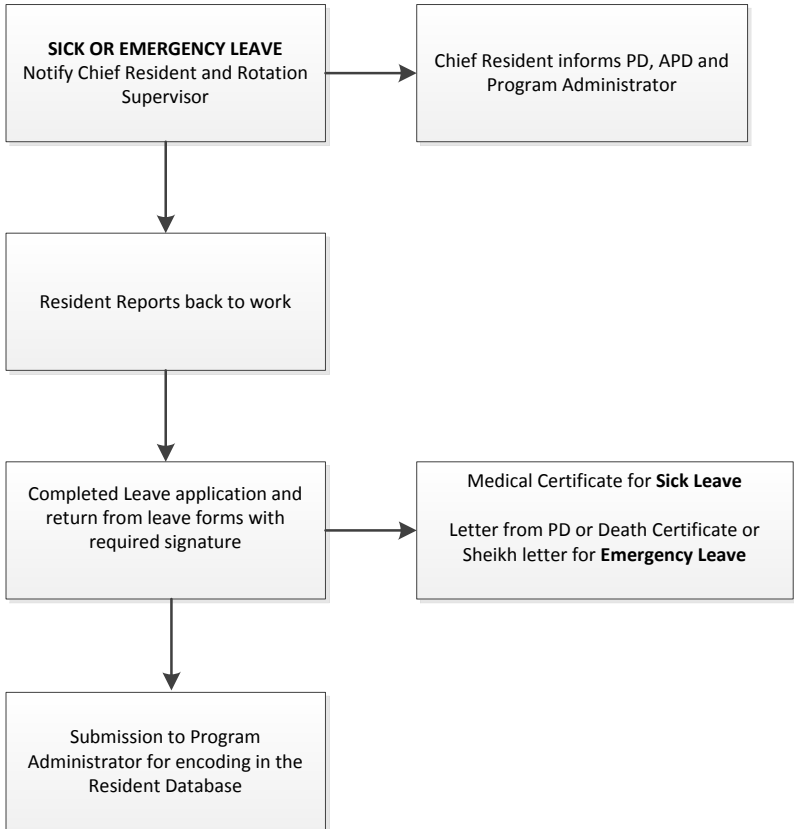
1. The Resident is entitled to a maximum of 10 days leave to compensate days worked during Public Holidays
2. Regular On-Call or Weekend duty does not qualify as part of the Compensation Leave
3. The Resident must submit a letter signed by the Program Director or Assistant Program Director, in addition to, the Rotation Supervisor of the affected rotation which proves that he/she worked during Public Holidays within two (2) weeks from the Public Holiday.
4. The Training Program will then arrange and schedule for the Resident's Compensation Leave subsequently.

FLOWCHARTS FOR RESIDENT LEAVE APPLICATION PROCESS

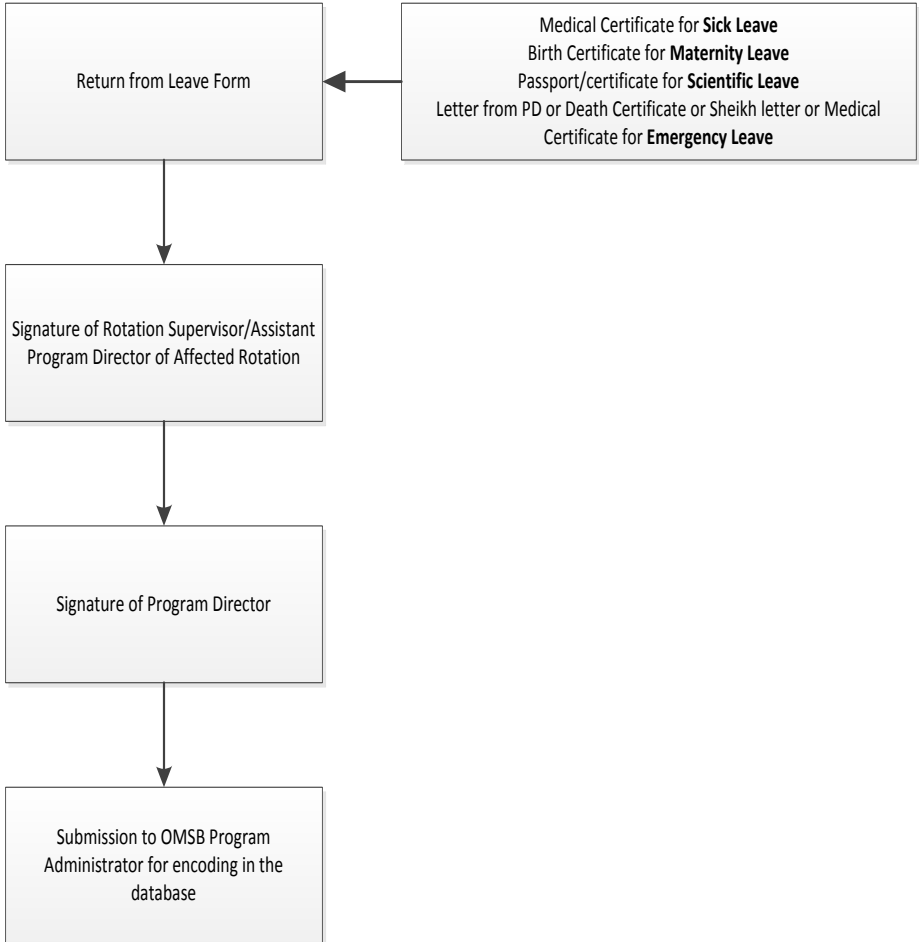
A. Resident Guidelines for ANNUAL & SCIENTIFIC LEAVE Application Process Flowchart



B. Resident Guidelines for SICK & EMERGENCY LEAVE Application Process Flowchart



C. Resident Guidelines for RETURN FROM LEAVE Application Process Flowchart



OMSB By-Laws

18. OMSB Academic By-Laws

RULES & REGULATIONS FOR RESIDENCY TRAINING PROGRAM:

General Principles:

Article (11): The Resident must adhere to this bylaws as well as the training rules and regulations issued by the OMSB, the Scientific Committee of the specialty, and the training center in which the Resident receives his/her training. The Resident is strictly prohibited from working in the private sector during his/her training program.

Article (12): OMSB shall decide the necessary training period for each training program. If the Resident does not complete his/her training within the period approved, he/she may be granted an additional period of no longer than two years.

Article (13) OMSB may send the Resident abroad for a period of no longer than six years. This period may be extended to one additional year if necessary.

OMSB may also send the Resident abroad to attend a conference, a seminar, and specialty examinations, for a period of no longer than two weeks. In all cases, the Resident must submit a document that proves his/her attending these activities.

Admission to the Residency Training Program:

Article (14) of Academic Bylaws: Requirements for acceptance in the

training programs of the specialty:

1. The Resident must be a holder of a Bachelor's Degree in Medicine & Surgery or equivalent from a recognized university.
2. The Resident must have completed a year of internship.
3. The Resident must be medically fit for the training.
4. The Resident must provide three letters of recommendation from three consultants with whom he/she has worked confirming his/her ability and capability of training.
5. The Resident must submit a letter of approval from his/her sponsor confirming their permission to release him/her to join training program of the specialty on a full time basis.
6. The Resident must pass the interview.

After the approval of OMSB, the Scientific Committees may add other conditions, oral or written exams, or tests for admission. The Residents are selected as per OMSB rules & regulations and available slots.

Registration with the OMSB:

Article (15): The names of the Residents accepted for admission in one of the training programs, together with their "Release Qarars", shall be sent to OMSB. Registration must be completed no later than one month prior to the beginning of the training year.

Article (16): All Residents who are enrolled in one of the OMSB Medical Specialty Training Program and who wish to

continue their training must register with the OMSB at the beginning of each training year. A Resident is not permitted to register in more than one training program of the OMSB at a time.

Article (17): The Resident or his/her sponsor shall undertake to pay the annual training fees prescribed by the OMSB.

Evaluation & Completion of Residency Training:

Article (18): The Resident must be evaluated by his/her consultant monthly using the approved evaluation form and the reports about Residents shall be sent to the Program Director every month. These reports should then be submitted to the Specific Scientific Committees which will send them to the Training Affairs Department at OMSB to be kept in the Residents' file.

Article (19): The Resident must complete at least 3/4 of the assigned training period for it to be considered valid.

Article (20): The Resident must spend equal training periods when rotating among the accredited training centers.

Article (21): The Program Director must prepare a report showing the progress of the Resident every six months and at the end of the academic year. The Program Director must use the approved evaluation form for this purpose provided that the report has to be signed by the Resident which is then presented to the Scientific Committee for approval, and submission to the OMSB and the Resident's Sponsor.

Article (22): The Scientific Committees shall conduct annual examinations for the evaluation of the Residents. The

results of these examinations shall be part of the Residents' evaluation process for promotion purposes.

Article (23): A Resident's promotion from one level to the next one (e.g. from the first year to the second year) is based on the average of the periodical assessment reports which represents 50%, and the End of Year Examination for training programs which represents 50%. However, the Resident must get a general average of no less than 60% for each part.

Article (24): Completion of training of the Resident is based on the Scientific Committee's recommendation for completion of training approved by the Executive Board. The recommendation should be based on the Resident's periodical evaluation reports, the result of his/her End of Year Examination, and the completion of the log book in the health specialties which requires so.

Transfer to another Specialty:

Article (25) The Resident is allowed to transfer from one specialty to another if the following conditions are fulfilled:

1. The approval of the Scientific Committee of the specialty in which the Resident is registered.
2. The approval of the Scientific Committee of the specialty to which the Resident wishes to transfer and the fulfillment of admission conditions for the specialty.
3. The approval of the sponsor.
4. The approval of the Executive Board.
5. Transfer applications shall be submitted at least four months prior

to the end of the training year. All transfers shall take place at the beginning of the training year only. Thus, the Resident is required to complete his/ her current training year before he/she can transfer to another specialty at the beginning of the training year.

The Scientific Committee, to which the Resident has transferred, must recommend counting the previous training period the Resident has taken, if possible, and must also specify the level at which the Resident shall start. The recommendation should be sent to the Board for approval.

OMSB Certificates & Examinations:

Article (26) OMSB examinations will be as follows:

A. End-Of-Year Examination

1. This examination is conducted at the end of each academic year.
2. The written examination consists of at least one hundred (100) Multiple Choice Questions (MCQs). The Scientific Committees may add other examination such as OSCE, orals, short cases, etc.
3. The passing score is 50% for R1 and R2 and 60% for R3 and above. However, if the percentage of the residents passing the examination is less than 70%, the passing score can be adjusted lower to achieve 70% passing rate.
4. Re-sit exams will be given to a resident three (3) months after failing the End-of-Year Exam.
5. A resident who fails both, End-of-Year and Re-sit Exam will have to repeat the year at the same residency training level.

B. OMSB PART I Examination

1. The examination is a qualifying examination. A resident must pass OMSB Part-I Examination before attempting the Final Examination to obtain the Specialty Certificate.
2. A Resident is allowed three (3) attempts to pass the OMSB Part I Exam. This exam can be attempted at R2; however, the Scientific Committee may selectively allow a resident who is competent to do OMSB Part I Exam at the end of R1.
3. No R3 Residents will be allowed to progress to R4 level without passing the OMSB Part I Exam.
4. OMSB Registration will be cancelled if a resident does not pass the OMSB Part I in three (3) attempts.
5. OMSB will cover the exam fees for the first two (2) attempts only. Examination cost for the third attempt will have to be covered by the resident.
6. The passing score for this examination is 70%. However, if the percentage of the residents passing the examination is less than 70%, the passing score can be adjusted lower to achieve 70% passing rate and that the score can be lowered up to 65% (whichever comes first). Under no circumstances, the score can be reduced below 65%.

C. The Final Examination for the Specialty Certificate

1. The Final Examination will be conducted after a successful completion of the training program of the specialty for the period approved, and passing all End of Training Year Examinations as well as Part I Examination for the Specialty Certificate.
2. The Final Exam is conducted in the final year of the training period. The Resident who fails the exam may repeat it within a year after the approval of the Scientific Committee. The Resident is not allowed to repeat Part II Exam for more than three times. The Residents will be terminated from the Residency training program if he/she does not succeed in the third attempt. However,

in exceptional cases, the Resident may be granted a fourth attempt by OMSB.

3. The Final Examination may consist of written and oral parts, OSCE, and short clinical cases.
4. The passing score is 70%. However, if the percentage of the Residents passing the examination is less than 70%, the passing score can be lowered by one mark aiming at achieving 70% passing rate or reaching a percentage of 65%, whichever comes first. Under No circumstances, the score can be lowered below 65%.

Article (27): The Scientific Committee may change the format and the passing score of the examinations after the approval of the Executive Board.

Article (28): The OMSB shall issue the Oman Medical Board Specialty Certificate following the completion of the training program and passing the final examination.

Vacations:

Article (29): The Resident shall be entitled to an annual leave of 30 days in addition to a maximum of 10 days in lieu of Eid holidays, official holidays and emergency leaves if the Resident is required to work during these holidays and leaves.

Article (30): The training period shall be extended for an equivalent period to compensate for sick leave, maternity leave and exceptional "emergency" leaves before the Resident is awarded a certificate of completion of training if the leave exceeds seven days.

Article (31): Annual leave which is not utilized within the year shall not be transferred to the following year.

Article (32): The Resident may be granted a leave for scientific purposes (attending scientific conferences and seminars, specialty examinations, etc.) not exceeding 10 days in each training year provided that he/she presents the proof for having attended the activity.

Interruption & Withdrawal from the Residency Training Program:

Article (33): The Resident may interrupt his/her training for a period of no longer than one block (28 days) on the occasion of death of spouse, parents, or children, or illness of the Resident, spouse, parents or children if needed after the approval of the Scientific Committee and the Executive President. In all cases the Resident must submit supporting documents for any case of interruption.

Article (34): If the Resident interrupts his/her training with a valid reason for a period of no longer than one block (28 days), the training period prior to the interruption will be counted provided that the Resident must compensate for the period of interruption with an equivalent period during his/her residency training. Interruption is not allowed for more than twice throughout the whole training period.

Article (37): The Resident may withdraw from the residency training program if he/she has a valid reason provided that the consent of the Scientific Committee, OMSB, and sponsor have been obtained.

If the Resident who has withdrawn wishes to rejoin at OMSB, he/she should be evaluated by the Scientific Committee to determine the possibility of accepting him/her into OMSB's residency training program and the appropriate training level.

Cancelling Registration:

Article (38) The Resident's registration is cancelled in the following circumstances:

1. If the Resident does not succeed in the overall annual evaluation (the periodical evaluation together with the End of Training Year Examination) for two consecutive years in the training program.
2. If the Resident fails to pass after exhausting the chances for entering Part I Exam or the Final Examination according to the rules and regulations of examinations.
3. If the Resident exceeds two years in addition to the minimum training period for any training program.
4. If the Resident interrupts the training without a valid excuse accepted by the Scientific Committee and for a period of 15 consecutive days or 30 separate days during the entire period of training.
5. If the Resident withdraws during the training program.
6. If the Resident does not abide by the rules and regulations of the training program, or the OMSB bylaws after being warned (see Article 40-3) and does not improve during the training period.
7. If the Resident has been convicted of an offence violating the public honor or the professional ethics unless he/she is proved innocent.

Article (39): The registration of a Resident is cancelled upon a decision from the Executive Board based on the recommendation of the Scientific Committee. The Resident; however, has the right to appeal against a decision of termination to the Executive President

within 30 days from his/her receiving a written notification of the decision. The OMSB will study his/her appeal and send him/her a reply within 15 days from the date of the Resident submitting the appeal. If the Resident does not receive a reply, then his/her appeal is rejected.

Violation/s:

Article (40) The Scientific Committee will look into the violations related to the training such as absence, neglect and academic attainment, or related to morals, behavior, ethics or professional conduct. After the violation is proved, the Committee is authorized to recommend the following:

1. A written reprimand.
2. A warning letter.
3. The final warning letter in addition to placing the Resident under probation for a period to be specified by the Scientific Committee.
4. Termination of the Resident and closure of the file.

The recommendations should be submitted with a detailed report on the case of the violation to the Executive Board to take the appropriate decision. The Resident's sponsor will be informed about the decision.

Appendix

SELECTION PROCESS FOR NEW APPLICANTS

1. Interview Panel

- 1.1. The Scientific Committee designates the Interview Panel members and submits the names to OMSB prior to the interview process.
- 1.2. The Interview Panel should consist of at least four (4) members, in addition to, the Chief Resident
- 1.3. The duration of each interview should be 10 -15 minutes
- 1.4. Each Interviewer should fill in a separate Interview Evaluation Form for each applicant
- 1.5. The average of all the Interview Evaluation Form scores should be calculated and included in a final aggregate Interview Evaluation Form.
- 1.6. The Interview Panel decision and ranking should be documented in the final aggregate Interview Evaluation Form.
- 1.7. The Training Program ranking list should be submitted to OMSB within three working days of completion of the interviews.

- 1.8. Each applicant should be interviewed for their first and second choices of specialty. Interview for third choice candidates is at the discretion of the Scientific Committee.
- 1.9. If the designated slots are not filled, OMSB may arrange for a second round of interviews.
- 1.10. Should the Scientific Committee decide upon the need for having more than one interview panel, then both panels **must** interview each candidate.
- 1.11. Results of all panels should be combined and ranked accordingly.
- 1.12. Results **should not be disclosed** and **must remain confidential** until authorized by OMSB.
- 1.13. The final list of accepted applicants will be announced by OMSB after its final approval process.