



Policy Name: Break in practice policy
Policy Code:
Version Number:
Developed by: Registration Section - DHP
Reviewed by/Date:
Approved by/ Date:
Date Effective:
Date of Due Revision:
Validity:

DOCUMENT CONTROL

REVISION HISTORY

Name	Date	Changes	Version

REVIEWS BY REGISTRATION DEPARTMENT - DHP

Name	Date	Organization/Position	Version



1. Introduction

As part of the Department's mandate, DHP continues to develop and/or amend policies to address concerns that pose threats or risks to patients' safety. One of the issues that the department considered to affect the delivery of quality care is the break in practice of healthcare practitioners. There is evidence that the absence of clinical practice in one's profession has a huge impact on the person's skills, performance, and competence that may affect licensing / maintenance of license processes.

The break in practice policy aims to:

- Provide terms and conditions that will serve as a guide for healthcare practitioners with the non-continuous practice for a period of time.
- Define the length of non-continuous practice which will constitute a break in practice.
- Define the period of supervised practice that will be required for those practitioners with a break in practice.
- Uphold the department's responsibility to ensure that the public receives healthcare services from qualified/competent practitioners at all times.

2. Policy Statement

- All healthcare practitioners who have a break in practice should undergo a specified period of supervised practice based on the break duration prior to granting the license /renewal of the license.
- All Qatari and family residents' healthcare practitioners who have a break in practice should undergo a specified period of supervised practice based on the duration and length of experience before the break and period of break prior to granting the license /renewal or restoration of the license.
- DHP/Registration team should abide by the break in practice policy.

3. Definitions

Clinical practice- refers to activities undertaken by a healthcare practitioner and using their skills and knowledge in providing direct care to patients.

Non-clinical practice- refers to activities undertaken by a health practitioner that does not directly relate to the provision of patient care. However, there are also non-clinical activities that require professional knowledge within the roles and responsibilities of the healthcare practitioner that impact the safe and effective delivery of healthcare services. These include healthcare professionals working in administration and management, research, quality healthcare roles, education, regulatory, and policy development, among others.

Break in practice- is the period of time during which a healthcare practitioner has not been working in their scope of practice or in active clinical practice.

Supervised practice - is a process whereby a healthcare organization/supervisor will accept to supervise the healthcare practitioner with a break in practice in order to improve the practitioner's knowledge and competencies and provide opportunities for professional development.



Recency of practice- means that a healthcare practitioner has maintained an adequate connection with and recent practice in the profession/s since qualifying for or obtaining registration.

Healthcare sector- consists of businesses that provide medical services, manufacture medical equipment or drugs, provide medical insurance, or otherwise facilitate the provision of healthcare to patients.

4. Abbreviations

DHP: Department of Healthcare Professions

RN: Registered Nurse

RM: Registered Midwife

5. Scope

This policy applies to:

- Applicants who have a break in clinical practice.
- Practitioners who previously held a license in Qatar and plan to renew the license after a period of break in clinical practice.
- Practitioners who have been removed from the registry and plan to be restored after a period of break in clinical practice.

6. Procedures/Guidelines

6.1.A. Length of break and the required practice for Overseas

Table. 1. Pharmacists, AHP, Nurses/Midwives, and Complementary Medicine.

Break in practice for less than 2 years	No additional requirements are needed*.
Break in practice for 2- less than 4 years	3 months supervised practice/ Clinical Attachment (full-time)
Break in practice for 4-less than 7 years	6 months supervised practice/ Clinical Attachment (full-time)
Break in practice for more than 7 -10 years	1-year supervised practice/ Clinical Attachment
Break in practice for more than 10 years	Not eligible to be registered



Table 2. Physicians and Dentists

Break in practice	Recency of practice
Break in practice for less than 1 year	No additional requirements are needed
Break in practice for 1- less than 3 years	6 months practice (full time)
Break in practice for 3- less than 5 years	1 year practice (full time)
Break in practice for 5- less than 7 years	18 months practice
Break in practice for 7-10 years	2 years practice
Break in practice for more than 10 years	Not eligible to be registered/licensed

***Note:** for Overseas applicants with a break in practice for 1 year or more, he/she will not be eligible to be registered and licensed in the state of Qatar until finishing the required period of clinical practice (after the break) outside Qatar in Governmental/semi-governmental institution/hospital or teaching hospital (applicable for physicians) according to Table 2.

6.1.B. Length of break and the required practice under supervision for Qataris/ Residents of Qatar* / Offspring of Qatari women

The length of supervised practice is calculated based on the period of applicant's/ practitioner's clinical practice before the break in practice as classified in the below tables (table 3 and table 4)

Table 3. Pharmacists, AHP, Nurses/Midwives, and Complementary Medicine.

Clinical experience of the practitioner before the break in practice	Period of break in clinical practice	Required periods of supervised practice (full time)
2 years -less than 10 years	Less than 2 years	No additional requirements
	2 years- less than 4 years	3 months
	4 years -less than 7 years	6 months
	7 years - 10	one year
	More than 10 years**	Case by case
10 years -less than 15	Less than 3 years	No additional requirements
	3 years- less than 5 years	3 months
	5 years- less than 7	6 months



	7-10 years	One year
	More than 10**	Case by case
15 years- less than 20 years	Less than 4 years	No additional requirements
	4 years- less than 7 years	6 months
	7-10 years	One year
	More than 10 years**	Case by case
20 years and more	Less than 5 years	No additional requirements
	5 years - less than 7 years	6 months
	7-10 years	1 year
	More than 10 years**	Case by case

Table 4. Physicians and Dentists

Clinical experience of the practitioner before the break in practice	Period of break in clinical practice	Required periods of supervised practice
5 years - less than 10 years	Less than 2 years	No additional requirements are needed
	2 years- less than 5 years	6 months
	5-7 years	1 year
	7-10 years	18 months
	More than 10 years	Case by case
10 years - less than 15 years	Less than 3 years	No additional requirements are needed
	3 years- less than 5 years	6 months
	5- less than 7 years	9 months
	7-10 years	1 year
	More than 10 years	Case by case
15 years and more	Less than 4 years	No additional requirements are needed
	4 years - less than 7 years	6 months
	7-10 years	1 year



	More than 10 years	Case by case
--	--------------------	--------------

*** Residents of Qatar category includes the following:**

- Family-sponsored QID holders.
- Non-Family sponsored QID holders who are working in the healthcare sector or relevant Institutions.

7. Notes

- Physicians/Dentists - who have approved surgical privileges with a break in practice will be considered for re-evaluation of their surgical privileges after completing the required supervised practice.
- Physicians/Dentists - certain specialties such as public health, community medicine, preventive medicine, and public health dentistry – are not involved in active clinical roles. Their clinical roles involve activities such as community assessment, health awareness, and strategic direction for population health programs.
- Nursing/Midwifery Practice- is defined as working in some capacity by virtue of licensure as an RN or RM. It can include administrative, supervisory, teaching, research, or managerial roles and provide direct patient care. Hence, a break in practice is considered if the nurse/midwife only works in management, administration, education, research, advisory, regulatory, or policy development roles.
- Supervised practice should only start after the practitioner receives approval from the Registration Section (if the supervised practice will take place in the state of Qatar).
- As per circular 10-2020, practice under-supervision before 6th July 2020 (even without DHP’s approval) from Governmental/Semi-governmental Institutions is accepted.
- Physicians who are GPs with a break in practice have to apply for “GP (supervised)”, while specialty physicians with a break in practice have to apply for “Assistant Specialty” as per their scope.
- Dentists, pharmacists, nurses, and Allied Healthcare Practitioners can be supervised in a licensed healthcare facility of the government and private sector.
- Tables 1,2,3, and 4 describe minimum additional registration requirements. In some cases, depending on their individual circumstances, applicants may be required to undertake an additional assessment to satisfy the Registration Section of their eligibility for registration.

8. Charts

For process maps, please refer to the guidelines in each profession.

9. References

- Circular 23/2016, DHP, Registration Section, <https://dhp.moph.gov.qa/>
- Nursing and midwifery board of Australia, <http://www.nursingmidwiferyboard.gov.au/>
- Federation of State Medical Boards, <https://www.fsmb.org/>
- Royal College of Ophthalmologists, <https://www.rcophth.ac.uk/>



10. Related Policies/Circulars/Guidelines

- Break from practice policy, PLC Minute 24 September 2008, paragraph 3
- Circular (23-2016), DHP Registration Section
- Circular (1-2020), DHP Registration Section
- Circular (21-2020), DHP Registration Section
- Circular (22-2020), DHP Registration Section
- Guidelines for Dentists
- Guidelines for AHP/pharmacists and nurses

11. Attachments

N/A