

## GUIDELINES

---

# TECHNICAL CLEARANCE REVIEW OF MEDICAL PERSONNEL FOR DEPLOYMENT TO UN FIELD DUTY STATIONS

---

**Approved By** : UNMD Bernhard Lennartz

**Signature** \_\_\_\_\_



**Date**: xx/04/2023

**Effective Date** : XX April 2023

**Contact**: Medical Workforce Management Section, DHMOSH (email: [technicalclearance@un.org](mailto:technicalclearance@un.org))

## TABLE OF CONTENTS

1. PURPOSE .....	2
2. SCOPE AND APPLICABILITY.....	2
3. CREDENTIALING PROCESS .....	2
3A. OFFICIAL REQUEST .....	2
3B. CREDENTIALING REVIEW .....	2
3C. TECHNICAL CLEARANCE REPORT .....	3
4. TECHNICAL SKILL FRAMEWORK FOR UN MEDICAL STAFF .....	4
ANNEX A TECHNICAL CLEARANCE MATRIX .....	5
ANNEX B TECHNICAL CLEARANCE DOCUMENTATION (FOR TROOP CONTRIBUTING COUNTRIES/POLICE CONTRIBUTING COUNTRIES AND CONTRACTED PROVIDERS).....	7
ANNEX C TECHNICAL CLEARANCE DOCUMENTATION (FOR UNOE CLINIC, UNDP ADMINISTERED CLINIC MEDICAL PERSONNEL AND OTHERS ADMINISTERED BY THE UN SECRETARIAT).....	1
0	
ANNEX D PERSONAL HISTORY PROFILE.....	14
ANNEX E CORE MODULES RECOMMENDED FOR TRAUMA LIFE SUPPORT TRAINING .....	18
ANNEX F TECHNICAL CLEARANCE VERIFICATION IN FIELD MISSIONS .	19

## 1.PURPOSE

This guideline establishes standards for the professional qualifications of medical personnel that are accepted by the United Nations (UN) and outlines the technical clearance process, including the review of qualifications of all medical personnel to ensure that prescribed or desired qualification requirements are always met and in all duty stations.

This guideline introduces the technical clearance mechanism to be implemented by the Division of Healthcare Management and Occupational Safety and Health (DHMOSH) in conjunction with the Office of Military Affairs (OMA)/DPO and Office of Supply Chain Management (OSCM)/DOS for the purpose of generation and deployment of medical personnel staffing the TCC/PCC and UNOE medical facilities, Contracted Medical Facilities and those in the UNDP administered clinics.

The guideline outlines the technical clearance methodology and the standardized clearance request and reviewing procedures.

This guideline should be read in conjunction with the Medical Support Manual for United Nations Field Missions, which stipulates minimum professional qualification requirements and technical clearance procedures for the deployment of medical personnel in field missions (2015, 3<sup>rd</sup> Edition, Chapter 8).

## 2.SCOPE AND APPLICABILITY

The technical clearance review is mandatory for all staff employed or contracted as medical personnel under the UN Flag Troop Contributing Country (TCC), Police Contributing Country (PCC), UN, United Nations Volunteers (UNV), United Nations Examining Physician (UNEP), and Commercial Providers).

**Compliance with the guideline is mandatory for all UN medical personnel providers.**

## 3.CREDENTIALING PROCESS

This guideline introduces the technical clearance mechanism based on related UN medical policies and will be implemented by DHMOSH jointly with OMA/DPO and OSCM/DOS for the generation and deployment of medical personnel staffing the TCC/PCC and United Nations Owned Equipment (UNOE) medical facilities, Contracted Medical Facilities and those in the UNDP administered clinics.

### 3A. OFFICIAL REQUEST

The official technical clearance request should be submitted to DHMOSH through the focal points of contact in the Permanent Mission (PM) of the Member States, field duty stations or other medical personnel providing parties no less than 3 months prior to the desired deployment date. The requested documents should cover all the information and documentation required in the Technical Clearance Matrix (see Annex A), Technical Clearance Documentation (see Annexes B, C), and Personal History Profile (see Annex D). All document files submitted should be in either English or French. Alternatively, an official translation should be provided. Candidates' credentialing package preparation needs to follow the structure elaborated in Annexes B and C, and one (1) Portable Document Format (PDF) file should be compiled for EACH candidate. Based on the credential documents submitted (technical clearance matrix and the single PDF credential file for each candidate), the Medical Workforce Management Section of DHMOSH will conduct a technical review and assessment. The focal points of contact should ensure that the submission is complete since any incomplete submission will not be processed for clearance. The focal points of contact will be contacted regarding any incomplete submissions.

**The DHMOSH correspondence email for technical review:** [technicalclearance@un.org](mailto:technicalclearance@un.org)

### 3B. CREDENTIALING REVIEW

Upon receipt of a clearance request, the Workforce Management Team Assistant will organize all clearance documents (in PDF format) into their prospective folders in the UN SharePoint. Then, a preliminary review will be conducted by a Medical Officer, and a comprehensive assessment by the whole team will be initiated as needed. The review will be based on the minimum qualification requirements for different categories of medical personnel (see Annexes B and C), MOU signed with TCCs/PCCs, the Statement of Unit Requirement (SUR) for TCC/PCC Medical Units, Statement of Requirement (SOR) for commercial providers, and related Terms of Reference (TOR) for dedicated job posts.

Incomplete clearance request submissions or documentation that requires further review or investigation will result in the halting of the review process until additional information or clarification is provided by the PM. Technical review and assessment will not be completed until all required documentation is provided.

If the documentation submitted does not meet the standards specified in Annexes B and C, the candidate will not be cleared for deployment, and the submitting party will be notified of the decision.

The review process should be completed within 21 days upon receipt of the complete documentation.

#### **MEDICAL WORKFORCE MANAGEMENT: Team Assistant**

The Team Assistant will prepare and archive the clearance request files prior to forwarding all documents to a Medical Officer. The Team Assistant keeps a detailed record of the request, assignments, and reports and updates the file as appropriate.

#### **MEDICAL WORKFORCE MANAGEMENT: Medical Officer**

The Medical Officer is responsible for reviewing the credentials. Technical clearance will be granted after all required documents are assessed and verified against the Guideline, MOUs, SURs, SORs, TORs, etc., as needed. Working-level coordination and communication with related sectors in OSCM/DOS (movement control, medical supply, reimbursement policy and claim management) and OMA/DPO (force generation, military planning) should be established and maintained.

#### **MEDICAL WORKFORCE MANAGEMENT: Senior Medical Officer**

The Senior Medical Officer is responsible for overseeing the technical clearance process, able to call for a whole team assessment or provide direct advice regarding technical review cases. Ultimately, the Senior Medical Officer has the final decision on all technical clearance reviews.

In case of position-specific recruitment, the hiring manager will contact the background check unit requesting to perform a background check on the selected candidate(s) independent of the technical review.

### **3C. TECHNICAL CLEARANCE REPORT**

The technical clearance report is the official document in which DHMOSH informs the focal points of contact in the PM of the Member States or other medical personnel-providing parties about the clearance status of the personnel to be deployed to UN field missions and duty stations. The report is signed by the Senior Medical Officer in charge of the Medical Workforce Management Section, DHMOSH and will be copied to related stakeholders in the UNHQ, field missions, and duty stations. To optimize technical clearance review and verification through the joint efforts of UNHQ and field missions and improve and strengthen accountability for quality medical services and support in field missions, concrete procedures for technical clearance verification for uniformed medical personnel deployed in field missions are established (see Annex F).

## 4. TECHNICAL SKILL FRAMEWORK FOR UN MEDICAL STAFF

In all field duty stations, medical services and support must meet standards acceptable to the United Nations<sup>1</sup> and all participating member states.

Defining a full spectrum of skills, competencies, and required capabilities within the specialty for each medical role will help harmonize the differences in national education and medical practices among countries from which medical personnel are deployed or recruited. Medical personnel need to demonstrate the right mix of skills, knowledge, and on-the-post competencies required by dedicated posts.

UN organizational statements of ethics in occupational health matters or group-specific professional, ethical codes (e.g., for physicians, nurses, hygienists, dentists, etc.) should be guided by and consistent with the International Health Professionals Code of Ethics for Occupational Health Professionals and other health profession-related codes of ethics.<sup>2</sup>

Providing detailed qualification criteria, such as the number of years of practice, national accreditation for unsupervised practice, and the full spectrum of required capabilities within the specialty, will support the deployment of qualified medical personnel that meet operational requirements.

Outlining healthcare providers' minimum competencies helps to define how the medical personnel should perform their specific roles successfully and delineate clear expectations of the individual and team performance out of the capacities. General competencies and skillsets for different categories of health professionals may refer to related international medical organizations' policies (see reference documents in the footnote).<sup>3</sup>

---

<sup>1</sup> Medical Support Manual for United Nations Field Missions

<sup>2</sup> see World Health Professionals Alliance INTERNATIONAL CODE OF ETHICS FOR OCCUPATIONAL HEALTH PROFESSIONALS; International Pharmaceutical Federation - Codes of ethics for pharmacists; International Council of Nurses - CODE OF ETHICS FOR NURSES; World Dental Federation - Ethical International Oral Health Professionals; World Medical Association- Medical Ethics manual.

<sup>3</sup> see Competency Framework for family physicians; ICN Nursing Care Continuum Framework and Competencies; ICN Framework for the Nurse Specialist; FIP REFERENCE GUIDE ON GOOD PHARMACY PRACTICE IN COMMUNITY AND HOSPITAL SETTINGS; FDI Basic Dental Education; FDI Dental Laboratory technician; WONCA World Organization of Family Doctors.

## ANNEX A TECHNICAL CLEARANCE MATRIX

Member States contributing medical personnel for UN field missions, field duty stations and other medical personnel providers are requested to provide all the information listed in the technical clearance matrix below. The following professional categories are evaluated for technical clearance:

- Physician/Medical Doctor/General Practitioner/Aero Medical Evacuation Team (AMET) Doctor  
Specialist Physician/Specialist Doctor/ Dentist
- Pharmacist
- Registered Nurse/Nurse
- Specialist Nurse
- Medical Technician
- Paramedic/Nursing Assistant/Ambulance Medic

### Technical Clearance Matrix

Submission Date		TCC/PCC Country of Origin	Mission	Clearance Type	Contracted Provider Name
Deployment Date		Name of Medical Facility		Type of Medical Facility	
S/N	Rank	Job Title	First Name	Last Name	Gender
1					
2					
3					
4					
5					
6					

- **Column A** “Submission date”. The date (dd/mm/yyyy) should be the same as the date that the matrix was initially submitted to DHMOSH for review.
- **Column B** “Deployment Date”. The date when the deployment of the candidate(s) to the field duty station is scheduled.
- **Column C** (S/N). These numbers represent each candidate and should be kept the same in the matrix as they are named in the PDF credential document. For example, candidate S/N 1 should have their consolidated PDF credential document labeled as “1.”
- **Column D** “TCC/PCC Country of Origin”. This column is for troop contributing/police contributing countries for UN peace operations, indicating the country from which the candidate will be deployed. Information is to be selected and filled in through the drop-down menu.
- **Column E** “Medical Facility”. This column describes the type of facility in which the candidate will operate (including AMET Aviation Unit, FPU Level 1, Level 1, Level 1+, Level 2, Level 2+, Level 3, Contracted AMET Team, Contracted Surgical Unit and Contracted Clinic). Information is to be selected and filled in through the drop-down menu.
- **Column F** “Rank”. The rank information is only for Military and Police personnel.
- **Column G** “Job Title”. The job title of the candidate should be selected through the drop-down menu reflecting the position and role s/he is to perform after deployment.
- **Column H** “Mission,”. The mission information should be selected through the drop-down menu, showing the field mission/duty station where the candidate is to be deployed.
- **Column I** “First Name”. The candidate’s first name should be filled in the column.
- **Column J** “Clearance Type”. The clearance type should be selected through the drop-down menu, corresponding with the respective submission entity. It includes: “DPO\_TCC\_PCC”, which refers to Troop Contributing Countries/Police Contributing Countries for UN peace operations, "Contractors" referring to UN contracted commercial providers, “Office Away from HQ”, “Tribunals”, “Economic mission”, and “UNV”.
- **Column K** “Last Name”. The candidate's last name should be filled in the column.

- **Column L** “Contractor”. The column is for contracted vendors. Information is to be selected and filled in through the drop-down menu.
- **Column M** “Gender”. The gender information should be selected through the drop-down menu.

## ANNEX B

# TECHNICAL CLEARANCE DOCUMENTATION (FOR TROOP CONTRIBUTING COUNTRIES/POLICE CONTRIBUTING COUNTRIES AND CONTRACTED PROVIDERS)

Technical clearance documentation is the key basis for technical review and assessment. The DHMOSH medical workforce management team will review and verify the documentation against the minimum qualification requirements for medical personnel stipulated in the Medical Support Manual for UN Field Missions.

Technical clearance documentation checklist for TCC/PCC and contracted providers are as below:

- **University Certificate/Diploma**
- **Specialty training certificate (if applicable)**
- **License to practice or valid registration**
- **Trauma life support training certificate (to be stamped and signed by an official medical body or training institute. See Annex E for more information about core modules recommended for Basic Trauma Life Support Training (BTLS) and Advanced Trauma Life Support (ATLS) Training)**
- **Aeromedical training certificate (if applicable)**

### Minimum Qualification Requirements for Medical Personnel by TCC/PCC and Contractors

**Physician/Medical Doctor/General Practitioner/AMET Doctor:** For a position in a Level 1 (+), Level 2 (+), and Level 3 (TCC/PCC/Contractors) medical facility, medical personnel with the functional title, 'Medical Doctor', 'General Practitioner', or 'Physician' must meet the following professional requirements:

- i. A university degree (MBBS/MBChB/MD) in combination with post-graduate experience to be able to practice medicine without supervision in a UN Member State.
- ii. A minimum of three (3) years of continuously progressive post-residency clinical experience in general medical practice. Medical practice time will be calculated starting from the date when the medical license was issued.
- iii. Must have advanced acute trauma care and pre-hospital trauma life support or equivalent training - certification pre-hospital trauma life support or equivalent training within 12 months prior to their deployment.<sup>4</sup>
- iv. Must be currently registered by a national medical board or council to practice medicine in their respective country or another UN Member State. License validity should cover the deployment duration. In lieu of licensure (where applicable), a letter of good standing should be provided by the relevant national authority.
- v. For a position in an AMET, aeromedical evacuation training and related qualifying experiences are required.

**Specialist Physician/Specialist Doctor:** For a position in a Level 1(+), Level 2 (+), Level 3, or AMET (TCC/PCC/Contractors), the job title of Specialist Physician/Specialist Doctor covers the specialty categories of the surgeon, anesthesiologist, orthopedic surgeon, gynecologist, internist, etc. The specialist candidate must meet the following qualifications apart from those requirements outlined under the "Physician/ Medical Doctor/ General Practitioner":

- i. Completion of board-certified/post-graduate certified specialty training by an appropriate body in a UN Member State.

---

<sup>4</sup> Training should be equivalent to advanced trauma life support, early management of severe trauma, or similar as defined in Annex D.



- ii. At least two (2) years of clinical practice as a licensed specialist after completing the relevant specialty training.
- i. Must be currently registered by a national medical board or council to practice medicine and licensed to apply specialty without supervision in their respective country or another UN Member State. License validity should cover the deployment duration. In lieu of licensure (where applicable), a letter of good standing should be provided by the relevant national authority.

**Dentist:** For a position in a Level 1(+), Level 2 (+), and Level 3 (TCC/PCC/Contractors) medical facility with the functional title of 'Dentist', the following qualifications must be met:

- ii. A university degree in dentistry in combination with qualifying experience.
- iii. A minimum of two (2) years of progressively responsible clinical experience following licensing as a dentist.
- iv. Must be currently registered by a national medical board or council to practice dentistry in their respective country or another UN Member State. License validity should cover the deployment duration. In lieu of licensure (where applicable), a letter of good standing should be provided by the relevant national authority.

**Pharmacist:** For a position in a Level 2 (+) and Level 3 (TCC/PCC/Contractors) medical facility with the functional title of 'Pharmacist', the following qualifications must be met:

- i. A university degree in pharmacology with a combination of qualifying practice experience.
- ii. A minimum of two (2) years of practice experience after being licensed as a pharmacist.
- iii. Must be currently registered by a national medical board or council to practice as a pharmacist in his/her own country or another UN Member State. License validity should cover the deployment duration. In lieu of licensure (where applicable), a letter of good standing should be provided by the relevant national authority.

**Registered Nurse/Nurse:** For a position in a Level 1 (+), Level 2 (+) and Level 3 (TCC/PCC/Contractors) medical facility with the functional title of 'Registered Nurse' or 'Nurse', the following qualifications must be met:

- i. Completion of an accredited baccalaureate nursing programme (university) or accredited diploma programme (three to four years) after high school graduation.
- ii. A minimum of two (2) years of progressively responsible clinical experience in general nursing, intensive care, emergency medicine, and health service administration.
- iii. Must have advanced acute trauma care and pre-hospital trauma life support or equivalent training certification within 12 months prior to their deployment.<sup>5</sup>
- iv. Must be currently registered by a national nursing board or council to practice in their respective country or another UN Member State. License validity should cover the deployment duration. In lieu of licensure (where applicable), a letter of good standing should be provided by the relevant national authority.
- v. For a position in an AMET, aeromedical evacuation training and related qualifying experience are required.

**Specialist Nurse:** For a position in a Level 2 (+) and Level 3 (TCC/PCC/Contractors) medical facility with the functional title of 'Specialist Nurse' (e.g., Intensive Care Unit nurse, operation theatre nurse, nurse anesthetist, etc.), the candidate must meet the following qualifications apart from those requirements outlined under the "Registered Nurse/Nurse":

- i. Completion of board-certified/post-graduate certified specialty training by an appropriate body in a UN Member State.
- ii. At least two (2) years of clinical practice as a licensed specialist nurse.
- iii. Currently registered to practice nursing and licensed to apply specialty without supervision in his/her own country or another UN Member State.

---

<sup>5</sup> Training should be equivalent to advanced trauma life support, early management of severe trauma, or similar as defined in Annex D.

**Medical technician:** For a position in a TCC/PCC/Contractors Level 1 (+), Level 2 (+) or Level 3 medical facility with the functional title of Medical Technician or equivalent (e.g., lab technician, X-ray technician, radiographer, operation theatre technician, anesthesia technician, emergency medical technician, hygiene officer, pharmacy technician, etc.), the following qualifications must be met:

- i. Minimum of two (2) years of theoretical and practical education relating to the special technician field after high school education.
- ii. Minimum of two (2) years of practice after licensing.
- iii. Relevant practice license to practice all elements of specialty. In lieu of licensure (where applicable), a letter of good standing should be provided by the relevant national authority.

**Paramedic:** Paramedics are pre-hospital care providers who practice emergency protocols. The basic professional requirements are as follows:

**For Paramedic:**

- i. No less than three months of paramedic training.
- ii. A minimum of two (2) years of progressively responsible practical experience in CPR or basic life support is required.
- iii. Must have advanced trauma life support training or equivalent training certificate within 12 months prior to deployment.<sup>6</sup>
- iv. For a position in an AMET, aeromedical evacuation training and related qualifying experience are required.

**Alternatively, for Nursing Assistant from Uniformed Forces:**

- i. No less than three months of nursing assistant training or equivalent training in the uniformed forces.
- ii. No less than two (2) years of relevant post-qualification practical experience.
- iii. Must have advanced trauma life support training or equivalent training certificate within 12 months prior to deployment<sup>7</sup>.
- iv. For a position in an AMET, aeromedical evacuation training and related qualifying experience are required.

**Ambulance Medic:** Ambulance medics should meet the following requirements apart from those requirements for paramedics/nursing assistants:

- i. Ambulance driving skills (including appropriate driver's license).
- ii. Skills in map navigation.
- iii. Knowledge of operation of very high frequency (VHF) and high frequency (HF) communication.

---

<sup>6</sup> Training should be equivalent to basic trauma life support, early management of severe trauma, or similar defined in Annex D (*Note: the requirement for paramedics on BTLIS should be differentiated from that for physicians and nurses (ATLS should be applied)*)

<sup>7</sup> Same as footnote 13.

## ANNEX C

# TECHNICAL CLEARANCE DOCUMENTATION (FOR UNOE CLINIC, UNDP ADMINISTERED CLINIC MEDICAL PERSONNEL AND OTHERS ADMINISTERED BY THE UN SECRETARIAT)

Technical credential documentation is the key basis for technical review and assessment. The DHMOSH medical workforce management team will review and verify the documentation against minimum qualification requirements for medical personnel stipulated in the Term of References (TORs).

Technical credential documentation checklist for medical personnel in UNOE Clinics, UNDP Administered Clinics and others administered by the UN Secretariat is as below:

- **University Certificate/Diploma**
- **Specialty training certificate (if applicable)**
- **License to practice or valid registration**
- **Trauma life support training certificate (to be stamped and signed by an official medical body or training institute. See Annex E for more information about core modules recommended for Basic Trauma Life Support Training (BTLS) and Advanced Trauma Life Support (ATLS) Training)**
- **Aeromedical training certificate (if applicable)**

### Minimum Qualification Requirements for Medical Personnel

**Physician/Medical Doctor/general practitioner (UN Health Manager at UN clinic):** For a position in UNOE and UNDP administered clinics, Medical Officer with the functional title 'Doctor,' 'General Practitioner,' 'Physician,' or 'Health Manager' must meet the following professional requirements:

- i. A university degree (MBBS/MBChB/MD) in combination with post-graduate experience to be able to practice medicine without supervision in a UN Member State.
- ii. A minimum of five (5) to ten (10) years of continuous progressively clinical experience in general medical practice (for P3 post: 5 years of experience; for P4 post: 7 years of experience; for P5 post: 10 years of experience). Three (3) years of experience is eligible for UNV.
- iii. Must have advanced acute trauma care and pre-hospital trauma life support or equivalent training certification, covering the service duration, preferably within 12 months prior to their deployment.<sup>8</sup>
- iv. Must be currently registered by a national medical board or council to practice medicine in their respective country or another UN Member State. License validity should cover the service duration. In place of licensure (where applicable), a letter of good standing should be provided by the relevant national authority.
- v. Updated knowledge of clinical (including women's health), occupational, tropical, and travel medicine is desirable.
- vi. Previous UN medical system/international medical experience is desirable.

**Dentist:** For a position in UNOE and UNDP administered clinics with the functional title 'Dentist,' the following professional requirements must be met:

- i. A university degree in dentistry in combination with qualifying experience.
- ii. A minimum of five (5) years of continuous progressive experience following being licensed as a dentist. Three (3) years of experience for UNV.
- iii. Must be currently registered by a national medical board or council to practice dentistry in their respective country or another UN Member State. License validity should cover the service duration. In place of

<sup>8</sup> Training should be equivalent to advanced trauma life support, early management of severe trauma, or similar as defined in Annex D.

licensure (where applicable), a letter of good standing should be provided by the relevant national authority.

**Pharmacist:** For a position in UNOE and UNDP administered clinics with the functional title 'Pharmacist,' the following professional requirements must be met:

- i. Holding a university degree in Pharmacy from an accredited university (the length of technical studies is expected to be at least three years)
- ii. Advanced University degree (Master's degree or equivalent) in pharmaceutical sciences or related fields is acceptable. A first-level university degree with a relevant combination of academic qualifications and experience may be accepted in lieu of an advanced university degree.
- iii. A diploma/certificate in a relevant health-related field, e.g., Public Health, Pharmaceutical Sciences, Health Economics, or equivalent, is desirable.
- iv. A minimum of three (3) to five (5) years of practice experience following being licensed as a pharmacist. Three (3) years of experience for UNV.
- v. Must be currently registered and licensed to practice as a pharmacist in his/her own country or another UN member state. License validity should cover the service duration.

**Registered Nurse/Nurse:** For a position in UNOE and UNDP administered clinics, with the functional title 'Nurse', Registered Nurse, the following professional requirements must be met:

- i. Holding the first-level degree from an accredited Baccalaureate Nursing Program (University) or equivalent (such as an accredited Diploma Program of 4 years' study).
- ii. A minimum of five (5) years of continuous clinical experience in general nursing, trauma, and emergency care; three (3) years of experience for UNV.
- iii. Must be certified and registered to practice in his own country or another UN member state. License validity should cover the deployment duration.
- iv. Must have ACLS, ATLS, and pre-hospital trauma life support or equivalent training certification<sup>9</sup>. The certification validity should cover the service duration, preferably within 12 months prior to their deployment.
- v. Recognized additional training in primary health care, midwifery, Intensive Care and health administration are desirable.
- vi. Knowledge and understanding of relevant UN administrative policies and procedures are desirable. Supervisory experience in UN field missions is an asset.

**Specialist Nurse:** For a position in UNOE and UNDP administered clinics, Level 1 (+) and Level 2 medical facilities, with the functional title 'Specialist Nurse' (ICU Nurse, OT Nurse, Pre-op Nurse, Nurse Anesthetist, etc.), apart from meeting the basic qualifications outlined under the "Registered Nurse/Nurse", the following professional requirements must be met:

- i. Completion of board-certified/post-graduate certified specialty training by an appropriate body in a UN Member State.
- ii. No less than five (5) years of continuous progressive practice as a licensed specialist nurse. Three (3) years of experience for UNV.

**Laboratory Technician:** For a position in UNOE and UNDP administered clinics with the functional title "Lab Technician," the following requirements must be met:

- i. Holding a Medical Laboratory Technician Diploma.
- ii. No less than five (5) years of progressive practice after being licensed as a laboratory technician. Three (3) years of experience for UNV.

<sup>9</sup> Training should be equivalent to advanced trauma life support, early management of severe trauma, or similar as defined in Annex D.

- iii. Relevant practice license to practice all elements of specialty. In lieu of licensure (where applicable), a letter of good standing should be provided by the relevant national authority. License validity should cover the service duration.
- iv. Experience in the usage of computers and office software packages (MS Word, Excel, etc.) is desirable.

**Paramedic:** For a position in UNOE and UNDP administered clinics with the functional title 'Paramedic,' the following professional requirements must be met:

- i. Holding a paramedic diploma certificate (no less than six months of paramedic training from a recognized training institution) or demonstrated experience in emergency care.
- ii. A minimum of five (5) years of progressive practical experience in CPR or BLS, ACLS, PHLTS is required. Demonstrated experience in emergency care and experience working with medical emergencies in conflict areas is an asset.
- iii. Must have advanced trauma life support training or equivalent training certificate within 12 months prior to the deployment.<sup>10</sup>

**Occupational Safety and Health Specialist:** For a position in UNOE and UNDP administered clinics with the functional title 'Occupational Safety and Health Specialist', the following professional requirements must be met:

- i. Holding a university degree or equivalent in medicine, including residency/internship in one of the medical specialties, preferably occupational health.
- ii. A minimum of five (5) to ten (10) years of progressively responsible medical experience, including workplace health and safety (for P3 post: 5 years of experience; for P4 post:7 years of experience; for P5 post:10 years of experience).
- iii. Experience in occupational safety assessment, incident investigation, and reporting.
- iv. Valid license to practice covering the service duration.

**Disaster/Emergency Medical Officer:** For a position in UNOE and UNDP administered clinics with this functional title, the following professional requirements must be met:

- i. Doctorate (MBBS/MBChB/MD) in medicine with specialization in emergency medicine, anesthesiology, intensive care, or equivalent. A Master's degree in Disaster Medicine is desirable.
- ii. Formal training in AMLS and ATLS, ACLS or equivalent emergency medical care, and disaster management are desirable.
- iii. A minimum of five (5) years of continuous progressively clinical experience in disaster medicine and emergency response, business continuity management of medical facilities and healthcare services delivery in emergency settings.
- iv. Equipped with updated knowledge and experience in "all-hazards disaster approach" planning and hands-on experiences in full-scale exercise preparation and management. Able to instruct training on disaster preparedness and response planning and simulation exercises (tabletop, functional and full-scale exercises).
- v. Expert skills in "business continuity management" of medical facilities and healthcare services delivery in emergency settings are desirable.
- vi. Certified instructor in "Major Incident Medical Management and Support" (MIMMS) and/or "All Hazards Disaster Response" (AHDR) is desirable. Able to conduct MIMMS and AHDR related training.

**United Nations Examining Physician (UNEP):** For a position with the functional title 'UNEP', the following professional requirements must be met:

- i. Doctorate (MBBS/MBChB/MD) in medicine with preferably sub-specialization in General Practice/Family medicine/Internist.
- ii. A minimum of five (5) years of continuous clinical experience as a GP or internist.
- iii. A valid license to practice. Provides integrated contextual comprehensive, concerned with the planning and provision of comprehensive primary health care, regardless of age or sex, on a continuing basis, to

<sup>10</sup> Training should be equivalent to advanced trauma life support, early management of severe trauma, or similar as defined in Annex D

all UN personnel and their dependents with 24/7 emergency coverage and coordination for medical evacuation as well as accompanying the patients if required.

## ANNEX D PERSONAL HISTORY PROFILE

Medical personnel contributing parties should submit a personal history profile for each candidate, covering basic demographic, academic and working experience information. Recommended profile format is as below. All the information reflected in this document should be consistent with the information filled in Annex A and supported by the credential documents provided in Annex B1 or B2. The personal history profile should be compiled into one PDF file together with the corresponding credential documentation for each candidate.

**Personal History profile** **job position** \_\_\_\_\_

### 1.GENERAL Information

Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
 Rank: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_ Gender: \_\_\_\_\_  
 (DD/MM/YYYY)

Education							
List all university degrees or equivalent qualifications obtained.							
<b>(Note: Please give exact titles of a degree in the original language. Do not translate or equate to other degrees)</b>							
<i>University Equivalent</i>	<i>or</i>	<i>City, Country</i>	<i>Attended From MM/YYYY</i>	<i>To MM/YYYY</i>	<i>Main Course of Study</i>	<i>Degree or Academic Requirements</i>	<i>Exact Title of Degree</i>

List schools or other formal trainings or education experience (including all medical related technical school or apprenticeship training).

(Note: Please give exact titles of certificates/diplomas in the original language. Do not translate or equate to other certificates/diplomas)

<i>School</i>	<i>City, Country</i>	<i>Attended From</i> <i>MM/YYYY</i>	<i>To</i> <i>MM/YYYY</i>	<i>Main Course of Study</i>	<i>Certificates or Diplomas Obtained</i>



List trauma life support and/or aeromedical training or equivalent training experiences.  
 (Note: Please refer to Annex D for core modules recommended for trauma life support training)

<i>School</i>	<i>City, Country</i>	<i>Attended From MM/YYYY</i>	<i>To MM/YYYY</i>	<i>Main Course of Study</i>	<i>Certificates or Diplomas Obtained</i>

List all relevant working experiences.

<i>Job Title</i>	<i>From/To</i>	<i>Location</i>	<i>Organization</i>	<i>Field of Work/Specialty</i>	<i>Main Roles &amp; Duties</i>

## ANNEX E CORE MODULES RECOMMENDED FOR TRAUMA LIFE SUPPORT TRAINING

Studies have shown that basic and advanced life support skills, rapid stabilization and transport of trauma victims have a positive effect on the patient's ultimate outcome. In addressing the urgency of reducing fatalities in the volatile operating environments of UN field missions, physicians, nurses and paramedics are required to obtain updated training on advanced life support skills and basic life support skills.

### **Core modules recommended for Advanced TRAUMA LIFE SUPPORT TRAINING (For physicians, AMET members, nurses and paramedics)**

Module 0: The Chain of Survival, specifically the ALS components

Module 1: Initial Assessment and Management, effective communication as a member and leader of a resuscitation team.

Module 2: Airway and Ventilatory Management. Advanced life support skills, including effective management of respiratory and cardiac arrest and peri-arrest conditions such as symptomatic bradycardia

Module 3: Management of Shock, ACS, Stroke, and related pharmacology

Module 4: Thoracic Trauma

Module 5: Abdominal and Pelvic Trauma

Module 6: Head Trauma

Module 7: Spine and Spinal Cord Trauma

Module 8: Musculoskeletal Trauma

Module 9: Thermal Injuries

Module 10: Pediatric Trauma

Module 11: Geriatric Trauma

Module 12: Trauma in Pregnancy and Intimate Partner Violence

Module 13: Importance of teams in multi rescuer resuscitation and performance as an effective team member during multi rescuer CPR and transfer to definitive care.

### **CORE MODULES recommended FOR BASIC TRAUMA LIFE SUPPORT TRAINING (For paramedics and nursing assistants)**

Module 0: The Chain of Survival, specifically the BLS components and important early use of an AED.

Module 1: Initial Assessment and Management

Module 2: Airway and Ventilatory Management. Basic life support skills, including effective chest compressions, use of a bag-mask device, and use of an AED

Module 3: Shock, High-quality CPR for adults, children, and infants.

Module 4: Thoracic Trauma

Module 5: Abdominal and Pelvic Trauma

Module 6: Head Trauma

Module 7: Spine and Spinal Cord Trauma

Module 8: Musculoskeletal Trauma

Module 9: Thermal Injuries

Module 10: Pediatric Trauma

Module 11: Geriatric Trauma

Module 12: Trauma in Pregnancy and Intimate Partner Violence

Module 13: Transfer to Definitive Care

# ANNEX F

## TECHNICAL CLEARANCE VERIFICATION IN FIELD MISSIONS

### Purpose

In line with the Guidelines on Technical Clearance Review of Medical Personnel for Deployment to United Nations Field Duty Stations and related requirement in the Manual on Policies and Procedures concerning the Reimbursement and Control of Contingent-Owned Equipment of Troop/Police Contributors Participating in Peacekeeping Missions (the COE Manual) and the Medical Support Manual for United Nations Field Missions, this document outlines concrete procedures for technical clearance verification for uniformed medical personnel deployed in field missions in order to optimize technical clearance review and verification through the joint efforts of HQ and field missions and improve and strengthen accountability for quality medical services and support in field missions.

### References

- “The technical clearance report is the official document in which DHMOSH informs the focal points of contact in the PM of the Member States or other medical personnel-providing parties about the clearance status of the personnel to be deployed to UN field missions and duty stations. The report is signed by the Senior Medical Officer in charge of the Medical Workforce Management Section, Division of Healthcare Management and Occupational Safety and Health (DHMOSH) and will be copied to related stakeholders in the UNHQ, field missions, and duty stations.” (TC Guidelines, 2022 edition)
- “Technical clearance of all medical personnel is a core requirement for any troop/police contributor medical facility deployed to field missions. All required documents for such technical clearance must be submitted by the troop/police contributor ahead of the planned deployment or rotation to the United Nations for verification in accordance with the procedures and timelines outlined in the most recent edition of the United Nations Medical Support Manual. Failure to fulfil the technical clearance criteria renders the medical support non-operational and ineligible for reimbursement.” (COE Manual, 2020 edition)
- “The standards described above shall be provided to TCC/PCC during the force generation process and shall be applied to all TCC/PCC medical service providers deployed in the field. In the case of any new deployments of Level 1, 2 or 3 medical service providers, copies of all government-certified credentials shall be provided to United Nations HQ for technical clearance, three months prior to any deployment and signature of the MOU. The outcome of the technical clearance exercise of medical staff, which shall be jointly undertaken by DM/MSD (DOS/DHMOSH after latest UNHQ restructure), DFS/MSS (DOS/LS/MSS after latest UNHQ restructure) and the mission, shall be a core requirement for the deployment of any TCC/PCC medical facility in the field.” (Medical Support Manual, 2015 edition, Chapter 8)

### Roles & Procedures

- **Technical Clearance by DHMOSH/DOS:** The Medical Workforce Management Section in DHMOSH is tasked to process and produce technical clearance report (TC report) based on clearance requests submitted by TCCs/PCCs prior to deployment through their Permanent Missions. The TC report, signed by the Senior Medical Officer in charge of Medical Workforce Management, will be forwarded to the Chief Medical Officer (CMO)/ Force Medical Officer (FMO) Office in field missions once the clearance is conducted.
- **Personnel Verification by CMO/FMO Office:** The CMO/FMO should take the lead in establishing working procedures in the mission on medical personnel verification. CMO/FMO or designated medical officer is expected to reach out to Sector Medical Officers and/or Hospital Commanders for comprehensive lists of medical personnel deployed upon their arrival (better with passport info. and copies) and check the lists against DHMOSH TC report. An updated personnel verification report should be submitted to the focal point in DHMOSH within one month of the deployment.

- **Operational Inspection jointly with COE Unit:** Medical personnel should join regular COE inspections together with the field COE unit and check the medical personnel status in TCC/PCC medical facilities apart from that for Major Equipment and Self-sustainment capabilities. Any changes or discrepancy identified should be reflected in the COE inspection report.