المجلس القطري للتخصصات الصحية QATAR COUNCIL FOR HEALTHCARE PRACTITIONERS (QCHP)

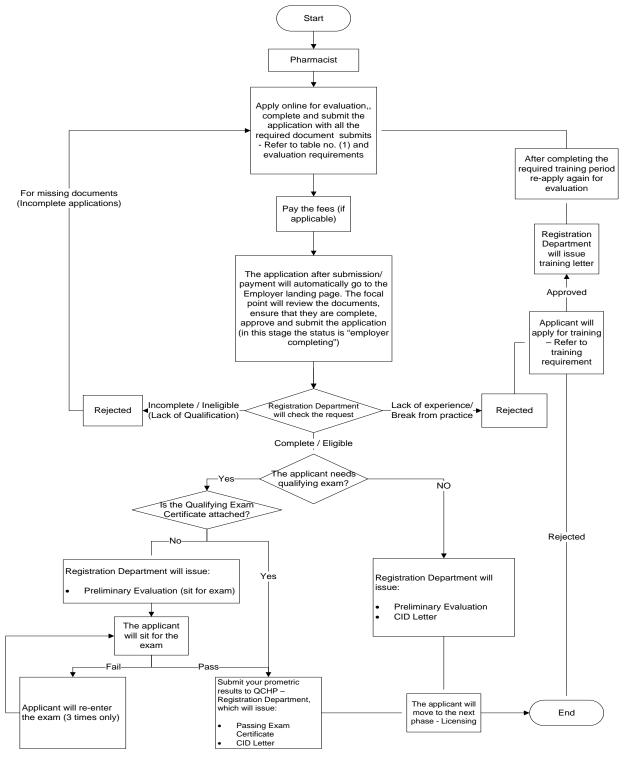
إدارة التسجيل REGISTRATION DEPARTMENT

Guidelines for Pharmacists

المجلس القطرى للتخصصات الصحية

QATAR COUNCIL FOR HEALTHCARE PRACTITIONERS (QCHP)

1. Registration / Evaluation Process Map



- The applicant should follow up on the request with the focal point.
- For Break from Practice policy please refer to Attachment "1".
- Preliminary evaluation is valid only for 6 months.
- The only pharmacists exempted from the qualifying exam are HMC pharmacists.

المجلس القطري للتخصصات الصحية

QATAR COUNCIL FOR HEALTHCARE PRACTITIONERS (QCHP)

Registration / Evaluation Requirements

Please apply through the electronic registration and licensing system on the website of Qatar Council for Healthcare Practitioners (<u>www.qchp.org.qa</u>), complete the online application and pay the required fees (if applicable).

Submit an electronic evaluation request and upload all the below mentioned documents:

- 1. Copy of Valid Passport.
- 2. Copy of Valid QID (if applicable).
- 3. One recent photo (according to photo criteria stated in attachment 2).
- 4. Curriculum Vitae (C. V).
- 5. Copy of all academic certificates with official transcript (refer to table no. 1).
- 6. Copy of all work experience certificates (refer to table no. 1).
- 7. Copy of valid medical/registration license from home country or medical/registration licenses accompanying the required years of work experience (if applicable).
- 8. Copy of proof of submission to the verification company (if applicable).
- 9. Copy of the passing certificate of the qualifying exam (if available).

Notes

- Applications that do not meet the requirements mentioned above will be rejected.
- The evaluation shall not obligate the Qatar Council for Healthcare Practitioners to grant the applicant any specific degree or title.
- Please note that verification process by the verification company replaces attestation of certificates by related competent authorities.
- The verification report and certificate of good standing shall be received in the licensing phase unless the case requires otherwise.
- It shall be the applicant's responsibility to follow up on receiving the report regarding verification and the certificate of good standing.
- Original documents / certificates if required shall be submitted upon request.
- Any other documents required to support the application that are not mentioned above must be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated and attached to a copy of the original documents.
- Please refer to the website of the Supreme Council of Health frequently to check the updates of the evaluation requirements.

المجلس القطرى للتخصصات الصحية

QATAR COUNCIL FOR HEALTHCARE PRACTITIONERS (QCHP)

Follow-up on request (After a minimum period of 25 working days)

Table no. 1

Scope of practice	Academic	Experience	Prometric	Other
	Requirements	Requirements	Exam	requirements
Pharmacy	Bachelor Degree in Pharmacy	3 years post graduate experience	Required as Pharmacist	Registration from home country

Note

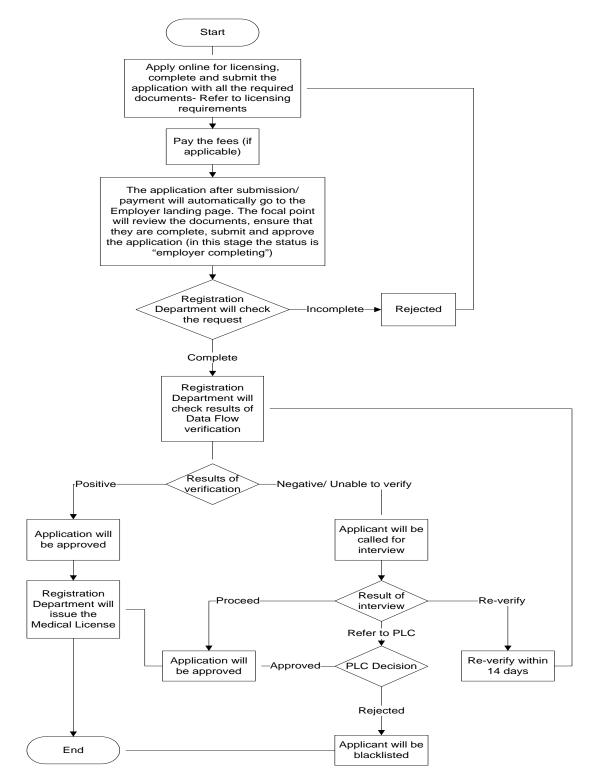
- If the applicant does not meet the appropriate experience requirements they may be eligible to practice as a Pharmacy Trainee, this will be evaluated on a case by case basis.
- Applicants with Break from Practice (Attachment no. 1: break from practice policy) can apply for training then re-apply for evaluation after successfully completing the required experience time frame.
- The applicant will apply for a training letter from the registration department requesting the period of training required in order to achieve the required years experience to become eligible to apply for evaluation/licensing as a Pharmacist. The training **must** be under the direct supervision of a licensed Pharmacist.

Training Letter Requirements

Applicants with Break from Practice or lack of experience can apply for training after providing the Registration Department with the below mentioned documents:

- 1. No objection letter from the employer requesting for approval from QCHP for the applicant to work as a trainee with their institution.
- 2. Valid copy of the Medical License of the supervisor who the applicant will be working under his/her supervision.

2. Licensing Process Map



The applicant should follow up on the request with the focal point.

المجلس القطري للتخصصات الصحية

QATAR COUNCIL FOR HEALTHCARE PRACTITIONERS (QCHP)

Licensing requirements

Please apply through the electronic registration and licensing system on the website of Qatar Council for Healthcare Practitioners (<u>www.qchp.org.qa</u>), complete the online application and pay the required fees (if applicable).

Submit an electronic licensing request and upload all the below mentioned documents:

- 1. Copy of Verification Report payment receipt.
- 2. Copy of Valid passport +Copy of Valid QID (If applicable).
- 3. One recent photo (according to photo criteria stated in attachment 2).
- 4. Copy of Police Clearance Certificate from Qatari Ministry of Interior.
- Copy of valid Recognized CPR Course or its equivalent, (or CPR registration receipt & Undertaking letter signed and stamped by the place of work confirming that copy of the CPR Certificate will be provided once it is received.
- 6. Copy of all academic certificates (refer to table no. 1).
- 7. Copy of all work experience certificates (refer to table no. 1).
- 8. Copy of valid medical/registration license from home country and medical/registration licenses accompanying the required years of work experience.
- Original Certificate of Good Standing must be sent directly from the Registration authority of the last 5 years of work experience, to the: Registration Section, Medical Licensing, Supreme Council of Health, P.O. Box: 7744, Doha, Qatar.

Notes

- Applications that do not meet the requirements mentioned above will be rejected.
- The verification report and certificate of good standing shall be reviewed during this phase; any misleading information provided will result in the application being rejected.
- All documents submitted during the licensing phase shall be in accordance with those documents previously submitted in the evaluation phase. It shall be the applicant's responsibility to follow up on receiving the report regarding the verification and the certificate of good standing.
- Original documents /certificates if required shall be submitted upon request.
- Any other documents required to support the application that are not mentioned above shall be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated and attached to a copy of the original documents.

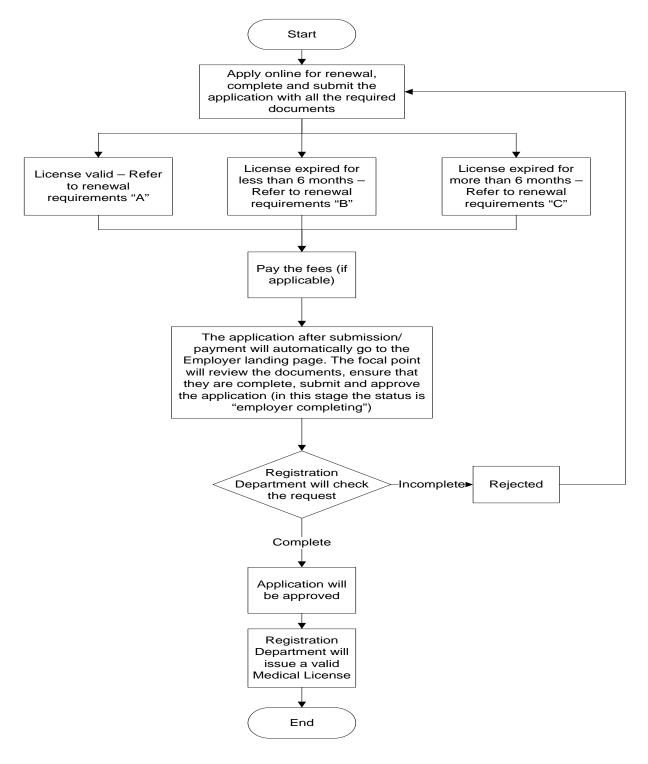
المجلس القطري للتخصصات الصحية

QATAR COUNCIL FOR HEALTHCARE PRACTITIONERS (QCHP)

• Please refer to the Supreme Council of Health website frequently to check the updates of the licensing requirements.

Follow-up on request (After a minimum period of 20 working days)

3. License Renewal Process Map



The applicant should follow up on the request with the focal point.

License Renewal Requirements

Please apply through the electronic registration and licensing system on the website of Qatar Council for Healthcare Practitioners (<u>www.qchp.org.qa</u>), complete the online application and pay the required fees (if applicable).

Submit an electronic license renewal request and upload all the below mentioned documents:

A. If License is valid

- 1. Copy of valid QID (if applicable).
- 2. Copy of valid passport.
- 3. One recent photo (according to photo criteria stated in attachment 2).
- 4. Copy of valid Recognized CPR Course or its equivalent, (or CPR registration receipt & Undertaking letter signed and stamped by the place of work confirming that copy of the CPR Certificate will be provided once it is received.
- 5. Any other additional requirements.

B. If License expired for less than 6 months

- 1. Copy of valid QID (if applicable).
- 2. Copy of valid passport.
- 3. One recent photo (according to photo criteria stated in attachment 2).
- 4. Copy of valid Recognized CPR Course or its equivalent, (or CPR registration receipt & Undertaking letter signed and stamped by the place of work confirming that copy of the CPR Certificate will be provided once it is received.
- 5. Declaration letter signed and attached to the comments page of the Registration/Licensing Electronic System (Refer to Declaration letter attachment).
- Verification (Retrospective): Verify academic qualifications through verification company & attach a copy of the receipt in the comments page of the Registration/Licensing electronic system.

C. If License expired for more than 6 months

- 1. Copy of valid QID (if applicable).
- 2. Copy of valid passport.
- 3. One recent photo (according to photo criteria stated in attachment 2).
- Copy of valid Recognized CPR Course or its equivalent, (or CPR registration receipt & Undertaking letter signed and stamped by the place of work confirming that copy of the CPR Certificate will be provided once it is received.
- 5. Declaration letter signed and attached to the comments page of the Registration/Licensing electronic system (Refer to Declaration letter attachment).

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QATAR COUNCIL FOR HEALTHCARE PRACTITIONERS (QCHP)

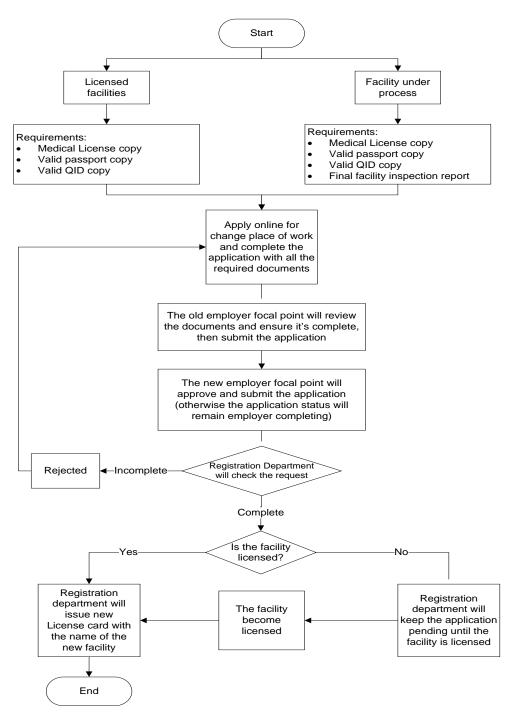
- Verification (Retrospective): Verify academic qualifications through verification company & attach a copy of the receipt in the comments page of the Registration/Licensing electronic system.
- 7. Justification Letter signed by the practitioner/ employer explaining the reason behind the late renewal (except PHCC & HMC).
- 8. Only for HMC & PHCC Qualifying Exam (if applicable).

Notes

- Applications that do not meet the requirements mentioned above will be rejected.
- Any other documents required to support the application that are not mentioned above shall be submitted upon request.
- Original documents /certificates if required shall be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated and attached to a copy of the original documents.
- Please refer to the Supreme Council of Health website frequently to check the updates of the license renewal requirements.

Follow-up on request (After a minimum period of 15 working days)





The applicant should follow up on the request with the focal point.

Change Place of Work Requirements

Please apply through the electronic registration and licensing system on the website of Qatar Council for Healthcare Practitioners (<u>www.qchp.org.qa</u>), complete the online application and pay the required fees (if applicable).

Submit an electronic Change Place of Work request and upload all the below mentioned documents:

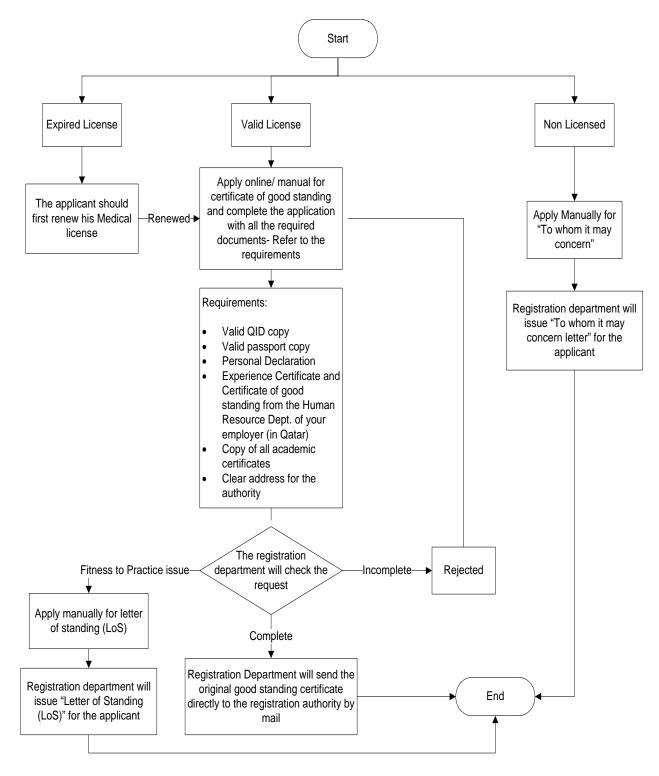
- 1. Copy of valid passport + copy of valid QID (should be changed to the new employer or secondment from the Ministry of Interior or any other adjustment according to the current laws and regulations in the State of Qatar).
- 2. Copy of valid medical license.
- 3. Copy of Final Facility Inspection Report (only for facilities under licensing process).

Notes

- Applications that do not meet the requirements mentioned above will be rejected.
- Original documents /certificates if required shall be submitted upon request.
- Any other required documents required to support the application that are not mentioned above shall be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated and attached to a copy of the original documents.
- Please refer to the Supreme Council of Health website frequently to check the updates of the change place of work requirements.

Follow-up on request (After a minimum period of 15 working days)

5. Certificate of Good Standing Process Map



Certificate of Good Standing (CoGS) Requirements

Please apply through the electronic registration and licensing system on the website of Qatar Council for Healthcare Practitioners (<u>www.qchp.org.qa</u>), complete the online application and pay the required fees (if applicable).

Submit an electronic Certificate of Good Standing request and upload the below mentioned documents:

- 1. Copy of valid passport + copy of valid QID (if applicable).
- 2. Copy of current or last Medical license in the State of Qatar.
- 3. Experience Certificate from Human Resource Dept. of your employer in State of Qatar.
- 4. Copy of all academic certificates.
- 5. Certificate of good standing from place of work (in Qatar).
- 6. Clear address for the required Registration Authority.

Notes

- Applications that do not meet the requirements mentioned above will be rejected.
- Original documents /certificates if required shall be submitted upon request.
- Any other required documents required to support the application that are not mentioned above shall be submitted upon request.
- Please be informed that the original certificate of good standing will be sent directly to the department of request.
- Any documents presented in languages other than Arabic or English must be translated and attached to a copy of the original documents.
- Please refer to the Supreme Council of Health website frequently to check the updates of the certificate of good standing requirements.
- If the license is expired and the practitioners left the country or out of practice , Manual application can be accepted with the expired license

Follow-up on request (After a minimum period of 25 working days)