THE UGANDA HEALTH PROFESSIONALS’ COUNCILS

Continuing Professional Development Accreditation System for Uganda

June 2009
Acknowledgements

We express our sincere gratitude to Professor Sam Luboga, who led the process of developing the Guide for Continuing Professional Development Accreditation System for Uganda. We also thank the chairpersons and registrars of the four health professional councils (Uganda Medical and Dental Practitioners Council, Uganda Nurses and Midwives Council, Uganda Pharmacy Council, Allied Health Professional Council) for recognizing the importance of continuing professional development (CPD) and seeking to formulate a CPD accreditation system for the country. We are greatly indebted to them for assigning to us the important responsibility of developing these guidelines. They also participated in the CPD opinion study conducted prior to writing this document, for which we are grateful. We thank the Capacity Project, led by IntraHealth International, for financially supporting this effort.

Many thanks also go to the principals of health training institutions (both public and private) and other stakeholders in several parts of Uganda for sparing valuable time to complete questionnaires and give their opinions on how best the CPD accreditation system should be organized.

We thank all of the research assistants who travelled upcountry to gather valuable information, and to data entrants and analysts. We highly appreciated Drs. Ian Munabi and Moses Galukande for reviewing several drafts and offering invaluable comments.

Additionally, we thank the chairperson of the Health Service Commission; officials from the Ministry of Health and Ministry of Education and Sports; Dr. Vincent Oketcho, chief of party for the Capacity Project/Uganda; and Mrs. Rita Matte for valuable support and useful comments.

We hope that generations of CPD accreditors, providers and participants as well as the patients and communities they serve will always be grateful that these people stepped forward to help.
Table of Contents

Abbreviations and Acronyms .............................................................................................................. v
Background ................................................................................................................................................ 1
Purpose of this Document ........................................................................................................................ 1

CHAPTER 1 ....................................................................................................................................................... 2
Mandate ......................................................................................................................................................... 2
Autonomy and Accountability ..................................................................................................................... 2
National Headquarters ............................................................................................................................... 2
Regional Accreditation Centers .................................................................................................................. 2
Purpose of the Agency ................................................................................................................................. 2
Vision ......................................................................................................................................................... 2
Mission Statement .................................................................................................................................... 2
Goal .......................................................................................................................................................... 3

Strategic Objectives .................................................................................................................................. 3
Interim CPD Accreditation Mechanism ..................................................................................................... 3
Board of Directors ..................................................................................................................................... 4
The CPD Accreditation Coordinators ......................................................................................................... 4
The Executive Director ............................................................................................................................... 5
Departments .............................................................................................................................................. 5
Specialty Committees ................................................................................................................................. 5
The Activities of the Accreditation Agency ................................................................................................. 5
Accreditation Statement ............................................................................................................................... 6
Types of Accreditation ................................................................................................................................. 6
Duration of Accreditation ............................................................................................................................. 7
Application Lead Time ................................................................................................................................. 7
Other Roles and Functions of the Agency ..................................................................................................... 7
Elements of CPD for Which Accreditation Must Be Sought ..................................................................... 9
Relicensure ............................................................................................................................................... 9
Level of Participation in CPD Required for Relicensure .......................................................................... 9
Financing of CPD Accreditation .................................................................................................................. 9
Financial and Technical Assistance ............................................................................................................ 9
Communication ......................................................................................................................................... 10

CHAPTER 2 .................................................................................................................................................... 11
CPD Provider .............................................................................................................................................. 11
Purpose and Mission .................................................................................................................................... 11
Needs Assessment ....................................................................................................................................... 11
CPD Facilitators ......................................................................................................................................... 12
Writing Learning Objectives ....................................................................................................................... 12
CPD Accreditation ..................................................................................................................................... 13
Mode of Delivery of CPD Activities .......................................................................................................... 14
Venue for the Implementation of the CPD Activity .................................................................................... 14
Other Requirements .................................................................................................................................... 15
Timeline .................................................................................................................................................... 15
Budget ....................................................................................................................................................... 15
Advertising and Publicizing the CPD Activity ........................................................................................... 16
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motivating Health Professionals to Participate in CPD Activities</td>
<td>16</td>
</tr>
<tr>
<td>Documentation</td>
<td>17</td>
</tr>
<tr>
<td>Evaluation of the CPD Activity</td>
<td>17</td>
</tr>
<tr>
<td>Professional Ethical Guidelines on Funding CPD Activities</td>
<td>18</td>
</tr>
<tr>
<td>Annex A: Application Form</td>
<td>19</td>
</tr>
<tr>
<td>Annex B: Documentary Evidence to Be Submitted with the Application</td>
<td>22</td>
</tr>
<tr>
<td>Annex C: Course Evaluation Form</td>
<td>23</td>
</tr>
<tr>
<td>Annex D: Sample of CPD Accredited Certificate for Activities</td>
<td>24</td>
</tr>
<tr>
<td>Annex E: CPD Certificate of Attendance</td>
<td>25</td>
</tr>
<tr>
<td>Annex F: Sample of Training Capacity Survey Tool</td>
<td>26</td>
</tr>
<tr>
<td>Annex G: Bloom’s Taxonomy of Learning Needs</td>
<td>27</td>
</tr>
<tr>
<td>Annex H: Sample of Timeline</td>
<td>29</td>
</tr>
<tr>
<td>Annex I: Sample of Type B Timeline</td>
<td>30</td>
</tr>
</tbody>
</table>
## Abbreviations and Acronyms

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AAF</td>
<td>Accreditation Application Form</td>
</tr>
<tr>
<td>AGM</td>
<td>Annual General Meeting</td>
</tr>
<tr>
<td>CME</td>
<td>Continuing Medical Education</td>
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<tr>
<td>CPD</td>
<td>Continuing Professional Development</td>
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<td>HPC</td>
<td>Health Professional Council</td>
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<td>MOH</td>
<td>Ministry of Health</td>
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<td>PFP</td>
<td>Private for Profit</td>
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<td>PNFP</td>
<td>Private Not-for-Profit</td>
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<tr>
<td>RCA</td>
<td>Regional Accreditation Center</td>
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<td>UCPDAA</td>
<td>Uganda Continuing Professional Development Accreditation Agency</td>
</tr>
</tbody>
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Background
Education plays a vital role in the development of any nation; therefore, there is a premium on both quantity (increased access) and quality (relevance and excellence) of medical education programmes that offer continuing professional development (CPD).

Purpose of this Document
In order to renew their practicing licenses, health professionals in Uganda must have satisfactorily participated in accredited CPD activities and been awarded 50 credit hours per year. The purpose of this guide is to outline the process to be followed by:

- The Uganda Health CPD Accreditation Agency in processing applications by CPD providers for accreditation of a CPD provider activity or course
- Providers of CPD in applying for accreditation of CPD activities they intend to offer
- Health professionals in applying for re-licensure after undertaking appropriate and duly accredited CPD training.

This document will articulate the mandate and roles of the health professional councils (HPCs), the information a CPD organizer seeking accreditation for a CPD activity must provide regarding purpose and mission, education planning and administrative arrangements. It also offers guidance on allocation of credits, documentation the CPD organizer must undertake, quality assurance and monitoring and evaluation. It also gives samples of a CPD Accreditation Application Form (AAF) (see Annex A) and the documents that should be attached (see Annex B) as well as session evaluation and program evaluation forms (see Annex C).
CHAPTER 1

The Uganda Continuing Professional Development Accreditation Agency (UCPDAA)

Accreditation of CPD activities will be the responsibility of the UCPDAA, hereafter to be referred to as the Agency.

Mandate
The Agency is established by all the health professional councils (HPCs) (Uganda Medical and Dental Professional Council, Nurses and Midwives Council, Pharmacy Council and Allied Health Professions Council) with representation of other key stakeholders namely the Ministry of Health (MOH), HPCs and CPD providers.

Autonomy and Accountability
Although independent the Agency will be answerable to the stakeholders through an Annual General Meeting (AGM).

National Headquarters
The Agency’s national head office is located on (specify physical address of the agency).

Regional Accreditation Centers
CPD Regional Accreditation Centers (RAC) will be established gradually (one at a time). RCAs will exercise delegated responsibility for CPD accreditation for designated geographical areas. The Regional Centers will be required to make regular returns to the national Agency and will be subjected to regular supervisory visits to ensure consistency.

Purpose of the Agency
Recognizing that health is vital to the development of any nation, and that continuing education is essential to the maintenance and provision of high standards of health care for individuals, families and communities, the Agency is committed to increasing quantity (access) and quality of CPD.

The Agency will develop and communicate, for CPD providers to complement, its overarching missions, vision and strategic objectives.

Vision
All health professionals in Uganda have access to the latest available relevant information, are continually renewing their competencies and have appropriate feedback as they apply them to their practice.

Mission Statement
The Agency aims at assisting all health professionals to keep up with developments in their specialties and in fields (such as leadership and management, team building, etc) that impact their practices. The competencies that practitioners would gain from accredited CPD opportunities would improve their performance, and ultimately raise the quality of the health care they provide to the patients and communities they serve.
Goal
To ensure that CPD provided to and participated in by health professionals in Uganda meets nationally and internationally acceptable levels of quality.

Strategic Objectives
By the year 2014 the Agency will ensure:

1. Availability of at least five accredited CPD providers in Uganda
2. All health professionals applying for relicensure have participated in accredited CPD programs
3. The quality of health care provided to individuals and communities is of the highest standard possible
4. Increased access to accredited CPD programmes by all health professionals (and not limit to urban centres or to those identified to be underperforming)
5. Existence of a standardized mechanism, easily accessible to all health professionals, for documenting their participation in accredited CPD activities
6. Existence of a standardized mechanism for approving accredited providers of CPD and individual CPD offerings
7. CPD activities/courses provided by all CPD providers meet nationally and internationally approved standards.

Interim CPD Accreditation Mechanism
It is recommended that for now the following form an Interim CPD Accreditation Board: chairpersons and registrars of the four HPCs; head of human resources for the MOH; assistant commissioner for health services (Human Resource Development/MOH); a representative from private not-for-profit (PNFP) hospitals; a representative from private for-profit hospitals. They should elect from among themselves a chairperson and select one of the registrars to act as the secretary or coordinator. This will permit the process of CPD accreditation to begin while efforts are made to develop a formal national CPD accreditation system, described here.
Board of Directors
It is the responsibility of the four HPCs (individually) to accredit CPD activities. However, that would be very difficult to implement since some CPD activities are often multidisciplinary. The HPCs have, therefore, agreed to form the Agency to undertake the functions of accrediting CPD activities.

The Board of Directors will, therefore, initially be constituted by representatives of the HPCs. In future other selected stakeholders will be invited to participate. The Board will be the policy-making organ of the Agency and oversee its operations. The Board will hold quarterly meetings as well as any extraordinary meetings as may from time to time be required. The chairperson, deputy chairperson and treasurer of the board will be elected at the AGM of the HPCs and other key stakeholders.

The CPD Accreditation Coordinators
The CPD accreditation coordinators are the representatives of each of the four HPCs to the Board. They coordinate all the CPD activities of the specialties (or HPCs) they represent. Specifically the CPD accreditation coordinators serve the following functions:

- Convene and chair of the Specialty Committee (or Accreditation Review Committee)
- Act as the link between the Agency and specialties and the CPD providers
• Serve as members of the Board of Directors of the Agency
• Prepare the annual CPD program of the specialty and forward it to the Agency
• Provide adequate publicity to CPD activities organized by accredited CPD providers
• Validate the CPD credits earned and document participation by members of the specialty in accredited CPD programs
• Provide monitoring and evaluation for the implementation of the CPD programme.

The Executive Director
The executive director is responsible for the day-to-day operations of the Agency, and is assisted by a deputy and a secretary.

Departments
Initially there will be three departments:

1. CPD Management
2. Finance and Administration
3. Communication and Information Technology.

Each of these departments will be headed by a director.

Specialty Committees
Specialty committees represent the different HPCs and are chaired by CPD coordinators. In the future, other specialty committees will be formed representing the different specialties and subspecialties (e.g. Pharmacy, Nursing, Paediatric Nursing, Medicine, Cardiology).

Ad hoc specialty committees may be constituted from time to time in order to evaluate an application for accreditation of a CPD activity addressing an issue that falls outside of the Board of Directors’ specialties.

The Activities of the Accreditation Agency
Accreditation is a process through which the Agency ensures that the CPD activities meet acceptable standards of educational and scientific merit, as well as existing standards of practice. For the CPD activity to be accredited the CPD organizer (on behalf of the CPD provider) must submit all relevant documents as required by the Agency. Upon receipt of the information requested, the Agency will assign a registration number to the activity and classify it into one of the following two categories:

• A Category 1 CPD activity is a formal and highly structured learning activity or opportunity (lectures, workshops, etc)
• A Category 2 activity is a self-learning undertaking usually conducted individually or in groups (journal clubs, patient reviews, etc).

For more details refer to the CPD guidelines.
The activity will be evaluated against the following criteria:

1. The target audience is clearly identified
2. The activity is planned based on perceived and/or objective needs
3. The learning objectives of the CPD activity are clearly stated
4. The educational methods selected allow the stated learning objectives of the activity to be achieved
5. The audience will be able to actively participate during the sessions
6. The participants will be given an opportunity to evaluate the activity at its conclusion
7. The activity, if funded by an external commercial entity, is organized adhering to an approved ethical code of conduct regarding sponsorship for CPD activities.

Taking into account the duration of contact hours, the Agency will allocate a credit value to the activity. Once the activity is approved, a certificate of accreditation (see Annex D) will be awarded to the CPD organizer, specifying the following details:

- Registration number
- Category of CPD activity
- Credit value.

These details must be indicated in the accreditation statement, in all announcements (advertisement to the target audience) of the activity and on participation certificates (see Annex E) issued to participants at the activity.

**Accreditation Statement**

Advertisement of accredited CPD activities will bear the following statement:

*The (name of the accredited provider) is accredited by the (name of accreditation agency) to provide continuing professional development for (group of professionals being trained).*

**Types of Accreditation**

The Agency may grant one of the following:

1. Full accreditation (prepare and award accreditation certificate)
2. Provisional accreditation (while still developing the activity, but needs accreditation to book dates and start advertising the program)
3. Probationary accreditation (when only a few concerns still need to be addressed)
4. Nonaccreditation (when major changes need to be made before reapplication).

In situations 2, 3 and 4, the Agency will work with applicants to help them address any Specialty Committee concerns before reapplication.
Duration of Accreditation
The duration of accreditation will extend from the date of decision by the Specialty Committee for a period of three years. During that period the CPD activity can be delivered over and over. Just before it expires the CPD organizer will have to reapply for reaccreditation citing updates and improvements based on evaluation feedback.

Application Lead Time
CPD providers must apply for accreditation of a CPD activity lesson less than three months before implementing the activity.

Other Roles and Functions of the Agency
To meet its above stated commitments, the Agency will undertake the following roles and functions:

1. The Agency will maintain under safe custody and restricted use the Agency seal.
2. It will develop, archive, produce (in adequate amounts) and disseminate the following information:
   
   Contact information:
   i. Physical address
   ii. Postal address
   iii. E-mail
   iv. Website
   v. Phone contacts.

3. Develop and communicate guidelines to CPD providers on:
   i. Development of appropriate CPD purpose and mission
   ii. Planning of a CPD activity
   iii. Administration of the CPD
   iv. Allocation of credits to a CPD activity
   v. Documentation required
   vi. Quality assurance
   vii. Monitoring and evaluation
   viii. Application for accreditation of a CPD activity (and other CPD related elements).

4. Develop and make available institutional self-study guides for CPD providers
5. Develop and make available application forms for CPD accreditation
6. Develop CPD participation certificates carrying the Agency logo/emblem
7. Maintain an up-to-date website with electronic copies of downloadable guides, forms, etc
8. Maintain an effective electronic communication link with all accredited CPD providers
9. Maintain a database including the following information:
   i. Credits earned by health professionals following participation in accredited CPD activities, sent by CPD providers
   ii. Information on monitoring and evaluation of CPD activities and programs
   iii. Practice improvements as a result of participation in accredited CPD activities
   iv. All applications for CPD accreditation.

10. Receive enquiries from all stakeholders and communicate to them the above-mentioned information as well as feedback on status of their applications.

11. Communicate when to apply for accreditation:
    - Types of applications
    - Levels of accreditation.

12. Whenever necessary call upon and prepare CPD provider institutions for self-study:
    - Supply tools for self-study
    - Receive and review results of self study.

13. Whenever necessary, the Agency will institute a visitation of a CPD provider by an accreditation study team. Specifically the Agency will:
    - Notify the CPD provider of the impending visitation
    - Compile a visitation team and give it terms of reference.

The visitation will, among other things, check on the following:
   i. Availability of teaching facilities and staff (see Annex F)
   ii. Administrative capacity
   iii. Commitment to CPD as demonstrated by the mission and vision
   iv. Capacity to plan and implement CPD
   v. Availability and adequacy of library facilities
   vi. Adequacy of a website and whether it is up to date.

14. The Accreditation Agency may also from time to time drop in on CPD activities to check compliance with agreed standards of presentation:
    - Receive and review visitation reports
    - Communicate decisions taken to CPD provider.

The survey team makes recommendations for the accreditation of the applicant and cites deficiencies, weaknesses or concerns, if any, with respect to conformity with Essential Areas and Elements.

15. Review and approve or recommend modification of plans for improvement with regards to suitability and or feasibility.
16. Provide guidance on how resources offered by private sponsors can be utilized to avoid undue influence and conflict of interest.

17. Define and communicate benefits of accreditation.

**Elements of CPD for Which Accreditation Must Be Sought**

All of the following components of CPD must be accredited:

1. CPD providers: Training institutions or organizations that have the capacity to develop and implement CPD activities, e.g. faculties and colleges of health sciences, private for profit (PFP) and PNFP organizations, professional associations and specialty sections of the MOH. Library and information capabilities, as well as CPD experts or trainers—with regards to qualifications, commitment and experience—will be accredited alongside the CPD providers.

2. CPD activities: Courses, symposia, conferences, workshops, etc.

**Relicensure**

Relicensure for practice will remain the responsibility of the respective HPCs based upon evidence of adequate involvement in accredited CPD by the CPD accreditation agency. Relicensure will be issuance of a certificate specifying that the holder completed the required 50 hours of participation in accredited CPD activities, and stamped with the Agency-embossed seal.

**Level of Participation in CPD Required for Relicensure**

Health professionals seeking relicensure for practice will have to show evidence of 50 hours of satisfactory participation in accredited CPD every year. There will be two sources of evidence:

1. Certificates obtained by the health professional, specifying number of credits received and presented to the Agency

2. Database held by the Agency into which credits-received information is communicated by the CPD provider at the end of each CPD activity.

The documentation maintained by the CPD organizer will be reviewed regularly to ensure accuracy and consistency. It will include attendance lists, evaluation reports and credits earned.

**Financing of CPD Accreditation**

Although the Agency costs will be subsidized by funding from Government and the HPCs, those seeking accreditation for their proposed CPD activities (and other elements related to CPD vide supra) will be expected to pay an accreditation fee to be determined by the Agency in consultation with the stakeholders.

Health professionals seeking relicensure will also be expected to pay an annual relicensure fee to be determined by each HPC in consultation with stakeholders.

**Financial and Technical Assistance**

Preparing and disseminating flyers and brochures announcing the proposed CPD activity is the responsibility of the CPD organizer. In time it will be possible for the illustration unit of the

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Agency to help with design (once the content is provided), printing and distribution to health care facilities.

The Agency may also occasionally provide financial assistance (on a case-by-case basis) to help CPD providers implement an accredited CPD activity.

**Communication**

Communication between the Agency, the CPD providers and the HPCs is vital to the success of the accreditation process. The means of communication will include conducting face-to-face communication with those who visit the Agency, and addressing groups of stakeholders in meetings and workshops. Other means of communication will include:

- Letters
- Circulars
- Telephone
- E-mail
- Website
- Mass media.
CHAPTER 2
Practical Guide for CPD Providers and Organizers

CPD Provider
A CPD provider is a training institution or organization (private or public) which possesses expertise and assumes responsibility for CPD at the national level. Designated departments with faculties or colleges of health science, specialty sections of the MOH, HPCs, PNFP and PFP organizations can be CPD providers. However, they must be legally registered entities (as evidenced by registration certificate and number) and demonstrate commitment to CPD and ample capacity.

In its organizational structure, a CPD provider should be headed by a director and assisted by an executive committee. It should have a number of health professionals with a background in education. For every CPD activity, the CPD provider should designate an individual at a senior position to organize or coordinate the activity. Such a person is known as a CPD organizer or coordinator.

Purpose and Mission
The aim of CPD (education and training) is to continually improve the quality of care that health professionals provide to the individuals, families and communities they serve. Specifically CPD aims to:

- Increase knowledge (both technical/professional and in fields related to practices, e.g. leadership, management, communication)
- Improve skills/competencies
- Aid practitioners in becoming more complete professionals and human beings.

Each institution must develop its own institutional CPD mission, a required component of the accreditation application.

Needs Assessment
To be effective, CPD activities (courses) must be designed to meet an identified need of the target audience. There are different methods for performing a CPD training needs assessment. CPD providers are advised to use more than one method in order to obtain both objective and subjective data.

One available data collection method is to send out needs assessment surveys using written questionnaires distributed to members of the target audience. These should include open-ended questions, such as:

i. What existing skills would you like to refresh?

ii. What new skills (procedures or techniques) would you like to learn?

iii. What subjects, if covered, would improve your confidence and make your practice more enjoyable for you?
iv. Would information from other health professionals be useful for you to incorporate into your CPD activity?

To increase the rate of return of surveys, keep them short, ideally one page. Distribute them using fax and/or e-mail. Include with the survey questions your names, fax number, e-mail address and a return-by date. Send out a survey at least twice a year.

Additional data collection methods include:

- Opinions and feedback from peers and other health professionals
- Evaluations from previous CPD activities, including what future topics participants would like covered
- Analysis of patient records of your hospital/practice, district or country
- Topical issues in the popular press, such as cancer of the cervix, HIV/AIDS, TB and malaria
- Availability of protected time, qualified staff and a budget reflecting capacity to run CPD activities. Access to good library and internet facilities will increase your ability to gather relevant data.

**CPD Facilitators**

You should choose facilitators depending on the subject area. They needn’t necessarily be staff of the CPD provider. The following are examples of categories of facilitators:

- Professional specialists in various fields
- Management consultants
- Legal experts
- Educational gurus
- Public health officers
- Library and information and communication technology experts.

**Writing Learning Objectives**

In writing learning objectives keep in mind specific outcomes of the training for the intended audience. State them in terms of what you would like the participants to be able to do as a result of participating in the CPD activity. Limit the number of objectives to two (maximum five) for a single activity.

Learning objectives must cover one or more of the three learning domains:

- Cognitive—knowledge
- Psychomotor—performance of an observable skill
- Affective—attitude, philosophy or value.
Clearly stated learning objectives meet the following criteria:

- Describe an observable action
- Convey information in terms the learner can understand
- Ensure specificity such that the idea is subject to a single interpretation
- Are measurable, stating the level of performance expected.

Clearly stated learning objectives are written thus: By the end of this activity (lecture, workshop or session) the participants will be able to (use a specific action verb appropriate to the domain), e.g.:

- List three causes of dysphagia
- Describe the application of a plaster cast for Colles’ fracture
- Demonstrate the procedure of pleural biopsy
- Judge when not to perform a laparotomy for acute abdomen.

A comprehensive list of verbs based on the different levels of Bloom’s Taxonomy of Learning is attached for reference (see Annex G).

**CPD Accreditation**

To obtain accreditation for a CPD activity:

i. Contact the Agency very early in the process of planning a CPD activity. The Agency will provide guidance on the planning process and the process of applying for accreditation of the CPD activity. They will also provide the CPD AAF.

ii. In some cases the CPD provider may be able to apply for a seed (planning) grant from the Agency.

iii. When the CPD activity is ready for review for accreditation, fill in the AAF and return it with all relevant documentation.

iv. The application should be submitted at least three months before the anticipated date of implementation of the CPD activity. Your application can be lodged at the head office of the Agency in Kampala, at a local representative near you or the district director of health services. No CPD activity will be accredited retrospectively (after it has taken place).

At the Agency, the accreditation officer receiving the application form will:

v. Check the form and attached documents for accuracy and completeness

vi. Assign the application an Application Number and a Professional Category. The number will serve the purpose of a means of tracking progress in the review process.

The CPD officer will then forward the application to the appropriate CPD specialty committee for consideration. In reviewing the application the CPD specialty committee will check the following:
• The CPD mission statement and purpose for the proposed activity
• The activity fits the proposed target audience
• The activity is based on perceived and objective CPD training needs (or results of assessment of training needs)
• The educational methods selected permit the realization of the learning objectives
• Evidence that members of the intended audience will be able to actively participate in the activity
• Arrangements to enable the participants to evaluate the activity with regards to content, process and outcome
• Evidence of compliance with the ethical code of conduct with respect to sponsorship and funding of the CPD activity by commercial interests. Attach a copy of the signed funding agreement between the sponsoring organization and the CPD provider.
• Budgetary evidence of adequate financing for the activity
• The social activities associated with the CPD activity do not unduly interfere with its scientific objectives.

Accreditation of your CPD activity makes it more attractive to the target audience and makes it easier for you to obtain funding for its implementation.

Mode of Delivery of CPD Activities
In selecting the delivery mode for CPD activities, it is important to recognize that adult learners are different from younger learners. They are:

• Autonomous and self-directed and must therefore be actively involved at all stages
• Have accumulated a wealth of knowledge and experiences upon which you must build
• Goal-oriented and learn better if they can see a purpose for doing so
• Relevancy-oriented (what they learn must relate to something important in their work)
• Practical and require hands-on learning
• Equals and need to be shown respect.

Although throughout the world didactic sessions (lectures and workshops) are the most popular, it is recommended including more innovative methods, such as:

• Practice-based learning (doing, receiving feedback, reflecting and doing again)
• Problem-based small group tutorials
• Web-based self-instruction sessions.

Venue for the Implementation of the CPD Activity
Although the choice of location of a CPD activity will depend on many factors, whenever possible it should be held in the context in which the lessons learned will be applied. A CPD
activity located close to the hospital is more likely to attract large attendance. For optimum learning conditions the location should be carefully organized to ensure:

- Adequate and comfortable seating of all participants
- An appropriate room for the number of participants. It should be just large enough (so that it is fairly full) rather than too large and looks rather empty.
- Separate rooms for presentations and exhibitions
- Adequate electricity outlets for laptops and audiovisual equipment
- Adequate lighting
- Protection from noise and other interruptions.

Other Requirements
To ensure smooth implementation of the CPD activity, remember the following:

i. Book audiovisual equipment (LCD projector, overhead projector, flip chart and markers as specified by the CPD facilitator) and try them out well in advance
ii. Ensure availability of photocopies of handouts
iii. Provide nametags
iv. Have certificates, sign-in sheets and evaluation forms ready
v. Prepare lists of participants, exhibitors and sponsors
vi. Indicate clearly in the event’s program the chronology of activities and allow time for coffee and lunch breaks. Make sure it is adhered to.

vii. Allow time for questions
viii. Remind participants to complete evaluation forms.

Timeline
Set for yourself a flexible but realistic timeline. Two types of planning charts are provided as examples (see Annexes H and I). Feel free to modify them to suit your particular needs.

Budget
Budget items include the following:

- Venue hire
- Audiovisual equipment hire
- Meals
- Transport and accommodation for facilitators and staff
- Facilitators’ honorarium
- Stationery
- Photocopying, or otherwise produce the learning materials and handouts.
Note that contracts will have to be signed with commercial sponsors and suppliers (hotels, food vendors, etc).

No sitting or participation allowance should be paid out to participants in the CPD activity.

**Advertising and Publicizing the CPD Activity**
Appropriate advertising directed at the target audience is important for the success of your CPD activity and achieving high attendance. The flyers, posters and brochures should be graphically appealing and contain all the information (at a glance) potential participants need in order to make an informed decision about participating. Academic information should be more prominent than information promoting related social events. Advertise in the popular press and professional publications, such as journals and newsletters. Posters can also be placed in high-visibility places, such as hospitals. Brochures can also be e-mailed and sent by regular post.

<table>
<thead>
<tr>
<th>Table 1. Brochure Guidelines</th>
</tr>
</thead>
<tbody>
<tr>
<td>A brochure should have the following information (leave out some according to the nature and size of the activity)</td>
</tr>
<tr>
<td>Date and time</td>
</tr>
<tr>
<td>Name of facilitator(s), titles and affiliation</td>
</tr>
<tr>
<td>Acknowledgement of sponsors</td>
</tr>
<tr>
<td>Venue with map</td>
</tr>
<tr>
<td>Learning objectives</td>
</tr>
<tr>
<td>CPD accreditation statement (type and # of credits)</td>
</tr>
<tr>
<td>Program</td>
</tr>
<tr>
<td>Accommodation information</td>
</tr>
<tr>
<td>Related social events</td>
</tr>
</tbody>
</table>

Note: Convince reader of the value of the activity and get a response. Make participation in the CPD activity more appealing by offering, such incentives as:
- CPD credits
- Reduced fees for early applicants
- Discounted or free student participation

Promotion should be intense, persistent and carried out with flair.

**Motivating Health Professionals to Participate in CPD Activities**
Motivating busy health professionals to invest time and resources into CPD can be an ongoing challenge for CPD organizers. The following are some methods to promote motivation for CPD activities.

<table>
<thead>
<tr>
<th>Table 2. Motivating Health Professionals: How to Make CPD Fun and Interesting</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Before the CPD event</strong></td>
</tr>
<tr>
<td></td>
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<td></td>
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<tr>
<td></td>
</tr>
<tr>
<td><strong>At the beginning of the CPD activity</strong></td>
</tr>
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<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
| During the CPD activity | Don’t rush; give participants all the time they need  
Keep things interesting and well paced  
Encourage active learning and interactivity  
Pay attention to participants’ comfort  
Be available for and alert to their reactions |
|------------------------|---------------------------------------------------------------|
| At the end of the CPD activity | Ask participants to fill in evaluation forms and give informal feedback  
Give feedback to participants |

(Adapted from the Handbook for Coordinating a CME Event)

**Documentation**

Documentation is vital for both the CPD organizer/provider and participants, for the following reasons:

*For the CPD organizer/provider:*

- The Agency requires documentation in order to accredit and reaccredit CPD programs
- Information collected, such as evaluations, can be used in needs assessment and financial accountability

*For the CPD participants:*

- Certificates of attendance help participants to keep a record of participation in CPD activities and credits obtained for use in applying for relicensure.

Documentation should be kept simple:

- For needs assessment and course evaluations CPD providers are advised to develop a simple generic form that can be modified easily and used again and again (see sample attached). These results will always be required for accreditation purposes.
- Sign-in sheets should be made available for every CPD activity. Used ones should be collected and filed.
- Issue formal receipts and keep copies for financial accountability
- Financial accounting (income and expenditure) is a legal requirement.

**Evaluation of the CPD Activity**

Evaluation to gauge participants’ satisfaction with the CPD activity with regard to organization effectiveness and relevance should be completed immediately after the program. The feedback will serve as a needs assessment and will help improve future content and organization. Evaluation methods can be categorized as formal or informal.

Informal evaluation can include:

- Casually asking, “Did you enjoy it?” or “Was it useful to you?”
- Speaking to members of one’s own and related professions
- Gut feeling.
Formal evaluation methods include:

- Pre- and post-testing
- Evaluation forms or questionnaires that are short (one page), simple and user friendly. Use open-ended questions (see sample attached).

**Professional Ethical Guidelines on Funding CPD Activities**

The following are a sample of sources that can be approached for CPD sponsorship:

- Pharmaceutical companies
- Companies interested in setting up exhibitions, such as bookshops, computer companies, equipment and instrument manufacturers and vendors.

Ethical guidelines on ensuring that commercial interests do not unduly influence the content and conduct of the CPD activity (see attached) should be adhered to. Conflict of interest must always be avoided or declared.
Annex A: Application Form

The Agency is pleased to provide you with this application for continuing medical education accreditation. Please study the document carefully. An understanding of the content will enable an appropriate application and subsequent accreditation.

1. Date of application………………………………………….

2. Date of program (e.g., day, month, year)…………………………………

3. Title of course or event…………………………………………

4. For recurrent (weekly, monthly etc) courses
   Frequency …………….                          Duration ……………..
   Location……………..
   Day of week   ………………..                 Time of Day……………………………..

5. For occasional courses, usually for an extramural audience: A preliminary program must be supplied.)
   Day (s) of week……………………………………. Location
   Date(s)……………………………………………….
   Duration (hours)…………………………………
   Location………………………………………………..

6. Target Audience (Check as appropriate)
   • Individuals
   Nurses
   Physicians
   Pharmacists
   Other, please specify…………………………
   • Sub Specialty qualification of Target Audience if any
   • Estimated size of participants

7. Will a fee be charged?  1.  2.
   • If yes, please specify the ranges for each group……………………………..

8. Will the event receive external funding?  1.  2.
   • If Yes, name external source?………………………………
   • Amount $……………..shs………………..
   • Designation: Course expenses………………………….
   • Other (Specify)……………………………………………………..
9. Faculty member responsible for this program
   Name
   First.................................................................................................
   Last.................................................................................................
   Office Address.................................................................
   .................................................................................................
   .................................................................................................
   Telephone (Mobile).................................................Office.........................
   Email(s).................................................................................................

10. Departmental CME coordinator
    Name .............................................................
    First.................................................................................................
    Last.................................................................................................
    Telephone
    (mobile)......................................................................................Office.........................
    Email(s).................................................................................................

In presenting courses which qualify for continuing medical education (CME) credit the school or institution must be responsive to the essentials of CME as set forth by the Accreditation Council for Continuing Medical Education.

11. Needs analysis for all courses is required by the accrediting agency. Describe the needs analysis conducted in choosing to present this course.
    .................................................................................................
    .................................................................................................
    .................................................................................................
    .................................................................................................

12. What are the specific learning objectives of the course? Such learning objectives must be measurable (e.g. participant will learn to interpret and perform a complete intra operative examination of the heart).
    .................................................................................................
    .................................................................................................
    .................................................................................................
    .................................................................................................

13. Educational design and documentation are required with this application. Please provide a record of your planning timetable, e.g., meeting minutes, etc that identify needs, development of objectives, educational strategies and selection of faculty (include title, institution, expertise).
    .................................................................................................
    .................................................................................................
14. Indicate how the presentation will be developed to ensure that it is appropriate for the targeted audience(s).

15. Are special teaching methodologies to be employed? Examples include computer assisted instructions, audiovisual aids, laboratory settings. This information will aid in course design.

16. Outcomes measurements

In order to develop future CME programs and maintain accreditation compliance, the Agency is required to perform an outcome measurement survey within three months of the completion of this educational activity. This short survey will determine the impact of this educational experience on participants’ practice and any changes or improvements in patient care. Please provide survey questions commensurate with your learning objectives that will assist to achieve this goal.

17. Commercial standards of the accreditation agency require the following documentation (included in the CME packet):

- **Letter of Agreement:** If an educational grant was given for the CME activity, a letter of agreement must be on record within the department. It defines the donor, the amount and the purpose of the educational grant. It should contain the signatures of representatives of the company (that provided the grant), the department that received the grant and the CME office.

- **Disclosure.** If an educational grant was given for this CME activity, all speakers must disclose to the departmental coordinator of this CME activity whether his/her presentation will include the use of commercial products or services, and, whether his/her presentation will include linkage to the commercial company that provided the grant. Other documents will include: [TBD].
### Annex B: Documentary Evidence to Be Submitted with the Application

<table>
<thead>
<tr>
<th>For Office Use Only</th>
<th>Provided</th>
<th>NOT PROVIDED</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>What was the involvement of the CPD activity Planning committee in the planning of the program?</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>How were the topics selected?</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>How were the learning needs of the participants considered?</td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>How were the learning needs used to develop the learning objectives?</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>How did you communicate with the speakers regarding the format and learning objectives they were to address and what kind of instruction were they given?</td>
<td></td>
</tr>
<tr>
<td>5a</td>
<td>What is the format of the sessions? How will the participants be able to interact with each other and the speakers? What time is built in for questions and answers?</td>
<td></td>
</tr>
<tr>
<td>5b</td>
<td>Describe the venue (location, rooms, and environment).</td>
<td></td>
</tr>
<tr>
<td>5c</td>
<td>How are learning sessions scheduled in relation to any social activities?</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Describe the process to be used to evaluate the program (e.g. form or discussion group)</td>
<td></td>
</tr>
<tr>
<td>7a</td>
<td>What are the costs to the participants, including registration fees, education materials and social events?</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>Fully describe any outside funding sources.</td>
<td></td>
</tr>
</tbody>
</table>

Also attach a copy of the program materials indicating the following information:

| 1. | Content/sessions for which accreditation is being requested. |
| 2. | Learning objectives |
| 3. | Duration of program/sessions. |
| 4. | Speakers. |
| 5. | Funding sources. |
| 6. | A copy of the evaluation form , where applicable |
Annex C: Course Evaluation Form

**Course Evaluation form**

**Course Name:**

**Date:**

**Overall, I would rate the …………………….. (please check the appropriate response)**

<table>
<thead>
<tr>
<th>Program:</th>
<th>Excellent</th>
<th>Above Average</th>
<th>Average</th>
<th>Below Average</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facilities:</td>
<td>Excellent</td>
<td>Above Average</td>
<td>Average</td>
<td>Below Average</td>
<td>Poor</td>
</tr>
</tbody>
</table>

**This course …….. (please check or comment on all that apply)**

<table>
<thead>
<tr>
<th>Was relevant to my practice</th>
<th>was not relevant to my practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Met the stated objectives</td>
<td>Satisfied my expectations</td>
</tr>
<tr>
<td>Will not alter my practice</td>
<td>Will alter my practice performance. Please specify in what way(s):</td>
</tr>
</tbody>
</table>

**What modifications would you suggest?**

<table>
<thead>
<tr>
<th>Was sufficient time allowed for audience participation?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Did you find the course to be free of commercial bias?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

**Speaker Evaluation**

<table>
<thead>
<tr>
<th>Speaker/Topic</th>
<th>Please rate by circling the appropriate number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1=Poor 2=Fair 3=Good 4=Very Good 5=Excellent</td>
</tr>
<tr>
<td>Content</td>
<td>Delivery</td>
</tr>
<tr>
<td>1.</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
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<tr>
<td>3.</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td></td>
</tr>
</tbody>
</table>

**The two most important things I learned from this meeting were:**

1.
2.

**Please comment on topics you would like to see addressed at future CME meetings**

*Thank you for your feedback and ideas – please return this form to the registration table.*
Annex D: Sample of CPD Accredited Certificate for Activities

CPD PROVIDER ACCREDITATION CERTIFICATE
This is to certify that:
(Name of CPD Provider/ Institution)

Has met the set standards of accreditation and it is therefore authorized to provide CPD accredited courses in..........................................................This accreditation is valid for a period (e.g. 3 years) beginning.........and ending.............................The institution is therefore free to train and award credits as per approved accredited hours for each activity.
Signed

Name of CPD Accreditation Coordinator  Name of Executive Director CPD Accreditation Agency

THANK YOU VERY MUCH FOR YOUR PARTICIPATION
Annex E: CPD Certificate of Attendance

CPD
CONTINUING PROFESSIONAL DEVELOPMENT
Certificate of Attendance
(Name of CPD Provider)
Wishes to acknowledge and certify that
(Name of participant)
Has registered and attended
(Name of CPD Activity)
On (Dates)
At (Venue)
The event was accredited by the Uganda Health CPD Accreditation Agency
Accreditation Number
Maximum Credit Units ------ (No Credit Units) Credit Units earned -----------------

Signed

(Name of CPD Organizer)
Annex F: Sample of Training Capacity Survey Tool

1. What is your CPD mission statement?

                                                                                   
                                                                                   
                                                                                   
                                                                                   

2. The following table is used to collect data on training capacity

Name of Training Institution

<table>
<thead>
<tr>
<th>OCCUPATION TRAINED</th>
<th>ENTRY REQUIREMENTS</th>
<th>DURATION</th>
<th>CREDENTIALS CONFERRED</th>
<th>NUMBER OF FULL-TIME TEACHING STAFF</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

3. Training staff survey

<table>
<thead>
<tr>
<th>NAME</th>
<th>SEX</th>
<th>AGE</th>
<th>NATIONALITY</th>
<th>TEACHING CREDENTIALS</th>
<th>YEARS OF EXPERIENCE</th>
<th>COURSE TAUGHT ON</th>
<th>SUBJECT TAUGHT</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>
Annex G: Bloom’s Taxonomy of Learning Needs

**Objective and Descriptive Verbs**

It is important to use precise verbs to describe the behavior you want the learner to achieve. Verbs such as “know” and “understand” can be open to different interpretations and it can be difficult to evaluate whether a learner “understands” a concept. However, a learning objective that states that a physician “will be able to cite the risk factors for breast cancer” can be evaluated by both the CPD committee and the participants as to whether it has been achieved.

Note the differences between the following vague and precise verbs.

<table>
<thead>
<tr>
<th>Vague</th>
<th>Precise</th>
<th>Vague</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learn</td>
<td>List</td>
<td>Enjoy</td>
</tr>
<tr>
<td>Conclude</td>
<td>Describe</td>
<td>Believe</td>
</tr>
<tr>
<td>Conclude</td>
<td>Identity</td>
<td>Understand</td>
</tr>
<tr>
<td>Appreciate</td>
<td>Distinguish between</td>
<td>Grasp the meaning of</td>
</tr>
</tbody>
</table>

Examples of precise verbs than can be used in formulation of learning objectives at each level of Bloom's Taxonomy of learning

**Level 1 - To Communicate Knowledge**

- Cite
- Define
- Describe

**Level 2 - To Communicate Comprehension**

- Associate
- Classify
- Compare
- Contrast

**Level 3 - To Communicate Application**

- Apply
- Assess
- Choose
- Classify

**Level 4 - To Communicate Analysis**

- Analyze
- Appraise
- Compare

**Level 5 - To Communicate Synthesis**

- Argue
- Combine
- Compose
- Conclude
### Level 6 - To Communicate Evaluation

<table>
<thead>
<tr>
<th>Appraise</th>
<th>choose</th>
<th>estimate</th>
<th>measure</th>
<th>recommend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assess</td>
<td>critique</td>
<td>evaluate</td>
<td>rank</td>
<td>select</td>
</tr>
<tr>
<td>Attack</td>
<td>defend</td>
<td>identify</td>
<td>rate</td>
<td>support</td>
</tr>
<tr>
<td>Avoid</td>
<td>determine</td>
<td>judge</td>
<td>recognize</td>
<td>value</td>
</tr>
</tbody>
</table>

### Level 7 - To Impact Skills

<table>
<thead>
<tr>
<th>Build</th>
<th>handle</th>
<th>integrate</th>
<th>operate</th>
<th>pass</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnose</td>
<td>hold</td>
<td>measure</td>
<td>palpate</td>
<td>perform</td>
</tr>
</tbody>
</table>

### Level 8 - To Convey Attitudes

<table>
<thead>
<tr>
<th>Accept</th>
<th>consider</th>
<th>judge</th>
<th>question</th>
<th>reject</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acquire</td>
<td>dispute</td>
<td>like</td>
<td>receive</td>
<td>select</td>
</tr>
<tr>
<td>Challenge</td>
<td>exemplify</td>
<td>listen</td>
<td>reflect</td>
<td>value</td>
</tr>
</tbody>
</table>
# Annex H: Sample of Timeline

<table>
<thead>
<tr>
<th>Task</th>
<th>Time required</th>
<th>Start date</th>
<th>End date</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assess needs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Develop learning objectives</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Design preliminary program</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Select and contact facilitators</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seek funding</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Apply for CPD accreditation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reserve venue, audio-visual equipment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Design final program</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advertise and distribute program</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Develop handouts</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Start registration/recruitment of participants</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hold event</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gather and analyze evaluations form</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Write thank you letters to facilitators and sponsors</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Annex I: Sample of Type B Timeline

| ACTIONS                                      | 8 mths | 6 mths | 5 mths | 4 mths | 3 mths | 11 wks | 10 wks | 9 wks | 8 wks | 6 wks | 5 wks | 4 wks | 3 wks | 2 wks | 1 wk | Post prog |
|----------------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|------|-----------|
| 1. Needs assessment                         |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| 2. Finalize date for training                |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| 3. Program design/development                |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Meetings of planning                         |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Develop learning objectives                  |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Booking venue, etc                           |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Contact CPD facilitators                     |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Contact funding sources                      |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Prepare initial mail notice                  |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Finalize contracts                           |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Seek CPD accreditation                       |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Design CPD activity program                  |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Print Program                                |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Advertise, mail brochure and registration form |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Make travel bookings and purchase stationery, etc |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Cancellation decisions                       |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Implementation of CPD activity               |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Evaluation summaries                         |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Thank you letters to facilitators and sponsors|        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Finalize financial statement                 |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |
| Planning committee review                    |        |        |        |        |        |        |        |        |        |        |        |        |       |      |           |

*Continuing Professional Development Accreditation System for Uganda*
The Capacity Project is an innovative global initiative funded by the United States Agency for International Development (USAID). The Capacity Project applies proven and promising approaches to improve the quality and use of priority health care services in developing countries by:

- Improving workforce planning and leadership
- Developing better education and training programs for the workforce
- Strengthening systems to support workforce performance.

The Capacity Project Partnership

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