



REPUBLIC OF KENYA

MINISTRY OF HEALTH

PHARMACY AND POISONS BOARD

**GUIDELINES ON CONTINUING PROFESSIONAL
DEVELOPMENT FOR PHARMACY**

OCTOBER 2023

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For clarifications, comments, or suggestions, please contact:

The Chief Executive Officer
Pharmacy and Poisons Board
P.O. Box 27663 – 00506, Nairobi
Telephone: 0709770100
Email: info@pharmacyboardkenya.org
Website: www.pharmacyboardkenya.org

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Prepared by Head of Division, CPD

Name... DR. LILY KIPKENO

Sign... [Signature]

Date... 27/10/2023

Reviewed by Director, Pharmacy Practice

Name... DR. WILFRED OCHIAJE

Sign... [Signature]

Date... 31/10/2023

Checked by Head Quality Management

Name... GEORGE MUTHURI

Sign... [Signature]

Date... 03/11/2023

Authorized by the Chief Executive Officer

Name... FRED MOIN SIYOT

Sign... [Signature]

Date... 03/11/2023

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Abbreviations

CME	Continuing Medical Education
CPE	Continuing Pharmacy Education
CPD	Continuing Professional Development
TC	Technical Committee
EDC	Enquiries and Disciplinary Committee
HOPAK	Hospital Pharmacists Association of Kenya
ICT	Information Communication Technology
KNPP	Kenya National Pharmaceutical Policy
KPA	Kenya Pharmaceutical Association
KPDA	Kenya Pharmaceutical Distributors Association
NGO	Non-Governmental Organization
PPB	Pharmacy and Poisons Board
PSK	Pharmaceutical Society of Kenya

Glossary of Terms

Board: Refers to the Pharmacy and Poisons Board.

Conference: Refers to a formal meeting of people with a shared interest, typically taking place over several days.

Congress: Refers to a formal meeting for discussion, arrangement, or promotion of some matter of common interest; the act of coming together or meeting.

Continuing Professional Development (CPD): Refers to ongoing development undertaken to maintain professional skills and capacities at a level suited to the practitioners' job responsibilities throughout their career. It is a process of reflection, action, and evaluation that may be cyclical and includes everything a practitioner learns that enables the person to perform his or her job better.

CPD Administrator/coordinator: Refers to the contact person from the accredited CPD providing institution charged with coordinating the CPD provision activities. The CPD coordinator/administrator must be a pharmacy professional.

CPD Calendar Year: Refers to the specified period in which CPD activities are implemented. The period, in this case, runs from the 1st of January to the 31st of December every year.

CPD Events: Refer to the learning activities professionals engage in to develop and enhance their abilities.

CPD Point: Refers to a professional reward given upon attending/participating in a CPD learning activity.

CPD Program: A set of related measures or activities aimed at tracking and documenting the skills, knowledge, and experience that pharmacy professionals gain both formally and informally as they work beyond the initial training.

CPD Provider: An institution, organization, or entity approved by the Board, which possesses the expertise and assumes responsibility to deliver CPD activities.

CPD Token: A visible or tangible representation of participation in a CPD activity.

Continuing Pharmacy Education (CPE): A structured educational activity designed or intended to support pharmacy professionals' continuing development to maintain and enhance their competencies. CPE should promote problem-solving and critical thinking and apply them to the practice of pharmacy.

Deferment: A postponement or delay in undertaking CPD programs.

Healthcare Professional: A healthcare service provider in a cadre that is licensed registered, or certified under the laws of the Government of Kenya.

Pharmacy Professional: A pharmacist registered by the PPB or a pharmaceutical technologist enrolled by the PPB or any other pharmaceutical specialists recognized/registered by PPB.

Presentations to the lay public: Activities that include but are not restricted to lectures presented, modules, reports, videos, training manuals, and other educational materials intended for use amongst the lay public.

Seminar: An academic instruction, either at an academic institution or offered by a commercial or professional organization. It has the function of bringing together small groups for recurring meetings, focusing each time on some particular subject in which everyone presents to take part actively.

Symposium: A meeting or conference for discussing a particular subject or theme, at which several speakers talk on or discuss a topic before an audience.

Workshop: A meeting at which a group of people engages in intensive discussion and activity on a particular subject or project.

Self-directed learning: Individual training through a structured learning plan from a source accepted by the Board as CPD.

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1.0 Introduction

1.1 Background

The Pharmacy and Poisons Board (PPB) was established as a regulatory authority under the Pharmacy and Poisons Act, Cap 244, and began operations on the 1st of May 1957. It was established as a body corporate under section 3(6) of the Pharmacy and Poisons Act (Legal Notice No. 11 of 1993) with the responsibility of regulating the practice of pharmacy by pharmacists, the manufacture, trade in drugs and poisons. In 2002, under Legal Notice No. 61, it widened its scope to include pharmaceutical technologists' regulation and accreditation of professional pharmacy degree and diploma programs.

The Pharmacy and Poisons Act empowers the Board to regulate pharmacy education/training and practice in Kenya. Within the Board, pharmacy professionals' regulation is managed by the Pharmacy Professional Development (PPD) Division, under the Directorate of Pharmacy Practice and Regulation of Training. The vision statement of the Board is to be a global leader in promoting and protecting public health. To this end, the Board commits to promoting pharmacy practice that will provide the highest attainable standards of healthcare. The Board enhances this by assuring and advancing quality in pharmacy education, practice, and CPD throughout pharmacists' and pharmaceutical technologists' active careers.

1.2 Vision

To be a leader in promoting and protecting public health.

1.3 Mission

To protect and promote the health of the public by regulating the profession of pharmacy and ensuring access to quality, safe, efficacious, and affordable health products and technologies.

1.4 Core values

Commitment to Public health, Professionalism, Accountability, Transparency, Integrity, Respect, Quality, Diversity, and inclusion.

1.5 Core Functions of the Directorate of Pharmacy Practice

- a) Regulate the training, CPD, and practice of pharmacy;
- b) Regulate, monitor, and inspect personnel and premises that are involved in training, CPD, and pharmacy practice;
- c) Maintain a register of pharmacy practitioners for which licensure or authorization has been granted;
- d) Disseminate information on pharmacy practice to health professionals and the public in order to promote Good Pharmacy Practice; and,
- e) Collaborate with other national, regional, and international institutions in the regulation of the pharmacy profession.

1.6 Revision of the CPD Guidelines of 2013

The following reasons prompted the revision of the CPD guidelines of 2013 by the Board:

- 1. Legislative changes: Amendment of the Pharmacy and Poisons Act in May 2019, making provisions that every registered pharmacist and enrolled pharmaceutical technologist shall undertake appropriate CPD as prescribed by the Board for maintaining a level of competence in his or her ongoing practice.
- 2. Institutional reorganization and technological advancement.
- 3. Lessons learned from the implementation of CPD activities organized by CPD providers using the guidelines of 2013.
- 4. Challenges in implementation of the guidelines of 2013.
- 5. To keep abreast with global best practices and respond to changing environments.

1.7 Legal Framework

Article 43 (1)(a) of The Constitution of Kenya, 2010 indicates that "Every person has the right to the highest attainable standard of health which includes the right to health care services, including reproductive health care." In view of this, the Pharmacy and Poisons Board aspires to promote a pharmacy practice that provides the highest attainable standards of healthcare.

The Ministry of Health, in response to the ever-changing environment and constitutional reforms in the country, adopted Sessional Paper No. 4 of 2012 on the National Pharmaceutical Policy in order to craft the policy direction to inform reform in the pharmaceutical sector to ensure fair access to quality essential health products and technologies for all Kenyans.

The Pharmacy and Poisons Act, Cap 244 Laws of Kenya (the Act) gives the Board mandate in Section 3(3)(k) to establish, approve and accredit continuing professional educational programs for pharmacists and pharmaceutical technologists. Further provisions in Section 9F require every registered pharmacist and enrolled pharmaceutical technologist to undertake appropriate Continuous Professional Development as prescribed by the Board for maintaining a level of competence in his or her ongoing practice. It is also a requirement for annual license renewal under Section 9C.

The Board has therefore prepared these guidelines in order to establish guidance and criteria on which CPD shall be provided and points awarded to pharmacists and pharmaceutical technologists taking part.

1.8 Scope and Applicability

These guidelines shall apply, though not limited, to:

- a) All registered pharmacists including specialists.
- b) All enrolled pharmaceutical technologists.

- c) Health training institutions and other providers of CPD - NGOs, development partners, health facilities, faith-based organizations, and research institutions.
- d) Professional Associations.
- e) The Ministry of Health, related special programs/divisions, and other related ministries.

1.9 Objectives of CPD

1. General Objective:

To maintain and enhance the competency of pharmacy professionals.

2. Specific Objectives:

- a) To maintain or improve the level of an individual practitioner's professional competence.
- b) To extend the range of relevant professional skills and develop new areas of expertise.
- c) To promote networking with fellow healthcare professionals.
- d) To increase career options for the professionals.
- e) To comply with regulatory requirements.

2.0 PART I: GENERAL GUIDELINES FOR CPD

2.1 Roles and Responsibilities of Stakeholders

2.1.1 Pharmacy and Poisons Board

1. To establish, maintain, standardize, coordinate and regulate CPD for pharmacy professionals.
2. Accredite CPD Providers.
3. Approve CPD programs/events.
4. Ensure implementation of CPD programs and manage the allocation of CPD points.
5. Monitor and Evaluate the CPD programs and activities to ensure the minimum standards are met.

2.1.2 Pharmacy Professional Associations

To ensure that their members continuously maintain and update their competencies by providing approved CPD programs that meet the required standards and guidelines.

2.1.3 CPD Providers

1. Participate in training needs assessments.
2. Develop CPD programs for accreditation and publish a CPD training calendar.
3. Advertise, administer, assess and maintain records of approved CPD events.
4. Issue evidence of attendance to the participants (tokens, certificates, logbooks, etc.).
5. Collaborate with relevant authorities at the national and county levels.
6. Continuously undertake quality improvement measures for CPD and adhere to stipulated CPD guidelines.
7. Develop and implement an evaluation process for the participants.

8. Updates content delivered in line with current practices because of the dynamic nature of the profession.
9. Advocate lifelong learning of pharmacy practitioners.
10. Educate pharmacy professionals on activities in their specific areas of practice.
11. Identify and meet the educational needs of pharmacy professionals.
12. Focus on pharmacy professionals' training and educational needs rather than on the number of participants or activities conducted.
13. Ensure that course tutors or facilitators actively deliver content so that pharmacy professionals are engaged in their learning.
14. Include interactive learning strategies to enhance knowledge, retention, and application in practice.

2.1.4 **Pharmacy Professionals**

1. CPD is mandatory as per Cap 244 Section 3 Subsection 3 (K), Section 9 (C), and Section 9 (F). Pharmacy professionals are therefore responsible for Identifying their individual training needs.
2. Pursue training activities that will improve the practice of pharmacy
3. Integrate knowledge, skills, and attitudes learned to practice.
4. pursue self-directed learning throughout the progression of their careers.
5. Keep records of evidence of attendance and/or claim the CPD points as stipulated.
6. Attain the minimum CPD requirements per calendar year.
7. give feedback on CPD events to CPD providers and PPB.

2.2 CPD Administration and Governance

2.2.1 Administration of CPD

The Board shall oversee the administration of CPD programs by accredited CPD providers. The Board shall keep a record of programs and events for all the CPD activities of the accredited CPD providers.

2.2.2 CPD Governance Structure

The Board, through the pharmacy practice directorate, shall govern the administration of CPD. The Board shall provide an appropriate system.

2.2.3 The Technical Committee (TC)

1. Membership of the TC

The Board shall appoint the TC responsible for CPD. This committee shall be responsible for CPD implementations for pharmacy professionals, according to the terms of reference prescribed by the Board from time to time.

The committee shall be stationed at the Board's Headquarters in Nairobi.

2. Terms of Reference for TC

- a) Identifying competence areas for pharmacy professionals for CPD.
- b) Promoting awareness of the need for CPD in collaboration with relevant stakeholders, including but not limited to relevant professional associations, government, and private institutions.
- c) Making recommendations to the Board on the criteria for accreditation and standards of CPD providers, programs, and activities.

- d) Making recommendations to the Board regarding the revision of guidelines on evaluation, point allocations, and weighting.
- e) Evaluating point allocation for activities not listed in the Guidelines for Implementation of CPD.
- f) Evaluating requests for deferment, exemptions, waivers, appeals, and suspension and making necessary recommendations to the Board.
- g) Evaluating and making recommendations on applications for accreditation of CPD providers and approval of programs and activities.
- h) Making recommendations to the Board for suspension and/or removal of a provider from the list of accredited CPD providers.
- i) Any other function that may be assigned by the Board from time to time.

2.2.4 Financing of CPD

1. Financing of CPD Administration

The Board shall provide adequate and sustainable long-term financial support to the CPD (Pharmacy Professional Division).

2. Financing of CPD programs

The Board shall analyze the sources and adequacy of funding for CPD, develop a sustainable business model free from conflicts of interest and promote the use of CPD to improve the quality of pharmacy practice, patient safety, and public health.

3. Conflict of interest

The Board, in collaboration with the stakeholders, shall put systems in place to eliminate or avoid conflict of interest in financing and CPD implementation.

2.2.5 CPD Delivery Innovation

The Board, in collaboration with stakeholders, shall promote and support CPD programs and come up with innovative, effective and current approaches to advance pharmacy practice.

Alternative methods for providing CPD must prove their effectiveness through rigorous testing using research and development structures.

2.3 CPD Programs and Activities/Events

All CPD Programs and Events shall be applied through the PPB online portal.

2.3.1 CPD Activities Cycle

CPD programs shall have the following four cyclical activities:

2.3.1.1 Identification of training needs

This involves conducting situational analysis, including surveys, identifying knowledge and performance gaps, and determining training objectives in order to:

- Address gaps in practice
- Create awareness of new or emerging technologies
- Address challenges in practice

2.3.1.2 Planning

Careful planning is essential to ensure that CPD activities are effective in improving the knowledge

and skills of pharmacy personnel in Kenya. The following are key steps to be considered when planning for CPD programs and activities.

- Identifying the target audience and Eligibility;
- Prioritizing the topics to be covered;
- Designing the training program, which should include objectives, expected learning outcomes, Mode of Delivery, Duration and Assessment methods;
- Determining the schedule and venue;
- Identifying the facilitators based on expertise, competence and experience;
- Budgeting;
- Planning for evaluation of the effectiveness of training.

2.3.1.3 Undertaking training activities

Continuing professional development activities can be conducted through the following steps:

- Provide training materials
- Engage participants and maintain a record of:
 - Registration
 - Participation - Attendance,
 - Recording of the proceedings,
 - Sharing of the materials
- Conduct assessments and maintain a record of performance
- Award certificates and Manage allocation of CPD points

2.3.1.4 **Monitoring & Evaluation**

Evaluation of the effectiveness of the training should be performed to assess its impact. This can be done by

- Feedback Reports
- Surveys or assessments

In addition, the CPD provider should conduct follow-up support to ensure that the personnel have implemented the training in their daily practice. This can be done through mentoring, coaching, or refresher courses.

2.3.2 **Categories of CPD Activities**

The categories are classified as:

2.3.2.1 **Activities with non-measurable outcomes**

These are activities that do not have a clearly measurable outcome and are presented on a one-off basis. They include activities such as:

a) Small group activities [presentations, meetings and case discussions].

b) Large group activities [attendance or participation at conferences, seminars, symposia, congress, and workshops where relevant topics and themes are discussed].

2.3.2.2 **Activities with measurable outcomes**

These are activities that have a demonstrable/measurable outcome but do not make up for formal training. They include self-directed learning, research and publications in scientific journals, conference papers, reviews of

other professional papers, and professional development materials for other professionals.

a) Self-directed learning: This includes studying relevant publications, appropriate scientific journals, textbooks, e-learning, and others. Adequate proof must be provided before CPD points can be awarded.

b) Providing education, training, or professional development materials or other related materials for professionals: These activities include but are not restricted to developing and providing modules, reports, videos, training manuals, and other educational materials.

Note: *Teaching and examining undergraduate and post-graduate students shall not be accredited if these activities fall within a professional's job description.*

2.3.2.3 **Activities with structured programs**

These activities comprise structured learning programs, such as formal programs planned, offered, and evaluated by an accredited training institution/provider or a development partner with a measurable outcome. These include activities such as but not limited to:

a) Formal Education: This includes post-graduate degrees relevant to the pharmacy profession, diploma or certificate courses recognized as additional qualifications by the Board taking six months or more. It could be full-time or part-time.

b) Short courses/refresher courses: These are courses relevant to the pharmacy profession,

taking less than six months with additional professional hands-on training or a formal assessment of the outcome. include courses run by accredited institutions, training institutions, research institutions, hospitals, pharma industries, government bodies, professional associations, non-government organizations, development partners, and accredited CPD providers.

c) On-the-Job Training: Involves hands-on training at work by an experienced professional who serves as an instructor/tutor. These include formal, structured, and employer-sponsored experience on the job, in-house training schemes, and personal activities to develop and enhance professional skills.

Examples of such activities include, but are not limited to:

- Training on the development and implementation of standard operating procedures.
- Experiential learning
- Preceptorship/mentorship.

2.3.2.4 **Other Activities and Information**

Any other activity relevant to the pharmacy profession that potentially advances one's CPD and professional competence but does not come under any of the above classifications may be considered for awarding CPD points.

Examples include:

a) Examinations/Evaluations/Assessments:

These activities include but are not restricted to Boards' professional examinations,

b) evaluation undertaken on behalf of the registering authority, and professional examination.

Points shall only be awarded to the examiner upon proof of participation in the evaluation exercise and release of professional results.

2.3.3 Principles of CPD Points Allocation

Allocation of points shall be based on the following principles and shall apply to all categories of pharmacy professionals:

2.3.3.1 A minimum of forty (40) CPD points per year are required for licensure or as predetermined by the Board from time to time.

2.3.3.2 At least 25% of minimum CPD points should be from the relevant Professional Association.

2.3.3.3 Only 80% of the prescribed CPD points may be accumulated from any one activity over the CPD calendar year.

2.3.3.4 All programs are approved for one (1) calendar year.

2.3.3.5 The maximum number of CPD points that can be approved for a day is one (1) CPD point per hour to a maximum of five (5) points.

2.3.3.6 CPD points can be awarded for either presentation or attendance of an activity, never for both.

2.3.3.7 Presenters/facilitators can only claim once for CPD points if they give the same presentation more than once a year.

2.3.3.8 No extra CPD points shall be awarded for the assessment of the participants of any CPD activity.

2.3.3.9 The maximum number of CPD points that one can accrue from a professional association's involvement beyond being a member is five (5) points per year.

2.3.3.10 There shall be no carry-over of excess points from one calendar year (12-month period) to the next.

2.3.3.11 Pharmacy professionals may make up any deficit on CPD points of the previous calendar year in the first month of the new calendar year for the license to be renewed. This will be done by self-directed learning. The professional shall start accruing points thereafter.

2.3.3.12 Tokens issued for approved programs/events should not be self-reported

2.3.3.13 Certificates issued for approved programs/events should not be self-reported.

Table 1: Summary of CPD Activities

S/ No	Activity	CPD Points Attainable	EVIDENCE
1	Presentation/facilitation of a lecture at a scientific meeting workshop, seminar, conference, symposium, and congress, or to the lay public.	5 points	presentation, invitation letter, and program.
2	Attendance or participation at a workshop, seminar, conference, and annual scientific congress or symposium.	5 points per day	certificate, tokens, and an attendance list.
3	Short courses: courses with a curriculum offered by recognized institutions lasting for a minimum of one to two weeks	5 points	certificate, tokens.
4	Short courses: courses with a curriculum offered by recognized institutions lasting for one month	10 points	
5	Online learning: an activity that involves interactive online learning.	2 points per activity	certificate of completion
6	Peer-reviewed publication of paper or article in a scientific journal.	10 points	publications, Letter of acceptance.
7	Author of a chapter of a book relevant to practice.	15 points	scholarly book.
8	Author of a book relevant to practice.	30 points	scholarly book.
9	Author of a learning module relevant to practice.	15 points	learning module, proof of dissemination.
10	Peer reviewing of a scientific paper, a book, research protocols, and publications.	5 points	peer review invitation document/letter.

11	Postgraduate Diploma, Professional Fellowships, Masters and Ph.D. degrees.	30 points	proof of registration in the year, progress report, transcripts/certificates.
12	Online events (Webinars, Zoom, etc.).	1 point to a maximum of 5 points	tokens, certificate, proof of attendance.
13	On-the-Job Training (OJT) with a proven record of professional hands-on training that comprises Assessment of the outcome.	5 points	training content, assessment document.
14	Technical working groups/committees of the Board, Developers of Guidelines.	5 points per year	appointment letter, terms of reference.
15	CPD Administrator/coordinator	5 points per year	CPD programs, events.
16	Preceptorship/Mentorship.	5 points per year	report on interns.
17	Other activities, e.g., patent, discoveries relevant to practice	25 points	certificate, Patent number/publication.

NB:

- a) The validity of a token is subject to a subscription to the CPD event on an individual's professional PPB portal.
- b) All the CPD activities undertaken should apply to the pharmacy profession.

2.3.4 Activities that do not qualify for CPD Points.

The following activities shall not qualify for the allocation of CPD points:

2.3.4.1 Teaching and examining undergraduate and/or post-graduate students.

2.3.4.2 Planning and/or organizing any professional activity.

2.3.4.3 Non-referenced letters to editors of accredited journals.

2.3.4.4 Compilation of course outline.

2.3.4.5 Daily ward rounds.

2.3.4.6 Written term papers.

2.3.4.7 Staff and/or administrative meetings.

2.3.4.8 Professional tours and/or viewing of exhibits and technological demonstrations.

2.3.4.9 Meetings arranged by pharmaceutical companies and manufacturers or importers of products and technical devices or their representatives purely to market and/or promote their products.

2.3.5 **Exemptions/waivers from CPD Activities**

Pharmacy professionals may apply for exemptions/waivers of CPD by self-reporting in the PPB practice online system. The TC shall consider such applications individually based on reasons acceptable to the Board. The committee shall then make recommendations to the Board.

2.3.5.1 **Pharmacy professionals abroad**

Pharmacy professionals practicing abroad should meet the standards of the country in which one is practicing and have documented proof of compliance, which may include a valid practice license.

2.3.5.2 **Pharmacy professionals in the year of registration or enrollment**

Pharmacy professionals will be exempted from CPD in the year of registration/enrollment. This shall be done by self-reporting in the PPB practice online portal and attaching relevant documents, that is registration or enrollment certificates.

2.3.5.3 **Medical considerations**

The Board shall exempt a pharmacy professional suffering from any medical condition that may prevent him/her from engaging in CPD upon consideration.

2.3.5.4 Engagement in non-pharmacy-related activities

A pharmacy professional who engages in a non-pharmacy-related activity shall apply to the Board for an exemption from CPD requirements. The TC shall review such applications and make recommendations to the Board.

2.3.6 Non-Compliance

If a Pharmacy professional does not comply with the CPD requirements, the Board may impose one or more of the following sanctions:

2.3.6.1 The requirement to follow a remedial CPD program as specified.

2.3.6.2 Recommend the professional for disciplinary action.

2.3.6.3 Denial of annual practice license.

2.3.6.4 The requirement to comply with any other requirement which the Board may determine from time to time.

2.4 CPD Providers

2.4.1 Requirements

The Board requires the CPD providers to comply with the following;

2.4.1.1 Appoint a competent pharmacy professional as CPD administrator.

2.4.1.2 Be registered on the online (practice.pharmacyboardkenya.org) platform.

2.4.1.3 Payment of requisite fees.

2.4.1.4 Communicate desired learning outcomes to the target audience.

2.4.1.5 Ensure CPD activities are informed by needs assessment findings and approved by the Board.

- 2.4.1.6 Ensure that CPD teaching and learning methodologies selected are suited to achieve desired outcomes.
- 2.4.1.7 Ensure that the course facilitators are selected based on their field of expertise.
- 2.4.1.8 Ensure there are adequate teaching and learning resources to support CPD programs and events.
- 2.4.1.9 Ensure that the time allocated for the CPD activities is adequate.
- 2.4.1.10 Appropriately advertise all CPD activities to increase participation.
- 2.4.1.11 Evaluate CPD activities regularly using standard evaluation tools provided by the Board.

2.4.2 Application for Accreditation as a CPD Provider

A prospective CPD provider shall be required to apply for accreditation through the PPB online system.

CPD providers shall include, but not be limited to the following:

- 2.4.2.1 Pharmacy professional associations
- 2.4.2.2 National and County Health facilities both public and private
- 2.4.2.3 Faith-based Health institutions
- 2.4.2.4 Research institutions
- 2.4.2.5 Ministry of Health and related special programs divisions
- 2.4.2.6 Pharmaceutical Manufacturing companies/Distributors
- 2.4.2.7 Health Training institutions
- 2.4.2.8 Recognized regional and International professional bodies
- 2.4.2.9 Others as approved by the Board

The applicant shall be required to specify the expertise in the proposed area(s) and the administration infrastructure, including a CPD *administrator who MUST be a pharmacy professional with relevant content and expertise.*

2.4.3 Renewal of Accreditation

Accreditation of CPD providers and approval of programs shall last for one (1) calendar year and expire on the 31st of December. Thereafter providers shall renew their accreditation.

Renewal applications shall be made through the PPB online portal.

Payment of annual accreditation fee.

2.4.4 Suspension, Cancellation or Withdrawal of Accreditation of CPD Provider

The accreditation of any CPD provider can be suspended, withdrawn, or cancelled by the Board, upon due notice and hearing, in the event of:

1. Non- compliance with any of the requirements under these guidelines.
2. Misrepresentation and or falsification of any information required to be provided under these guidelines.
3. Any other reason deemed appropriate by the Committee

2.4.5 Appeal Process

Any CPD provider not satisfied with the Board's decision relating to their accreditation may appeal in writing. Appeals can be made to the Board for consideration within fourteen (14) days of receipt of the Board's decision.

The aggrieved Provider shall submit an appeal using the prescribed format after payment of the prescribed fees.

The Board shall evaluate such an appeal and respond within fourteen (14) days of receipt of the appeal.

The Board shall review all the appeals.

2.5 Monitoring and Evaluation (M&E) of CPD Provision

2.4.6 M&E Framework

Evaluation could occur at four levels: individual pharmacy professionals, stakeholder organizations, PPB, and the overall CPD system.

For the Board to be held accountable for its activities and stewardship of the CPD system, it shall report to the relevant department of the Ministry of Health.

2.4.7 Verifiable Indicators for CPD Provision

The verifiable indicators for M&E shall include, but not limited to:

2.4.7.1 The number of pharmacy professionals meeting their annual minimum CPD requirements.

2.4.7.2 The number of CPD Providers accredited annually.

2.4.7.3 The number of pharmacy professionals licensed/renewing their practice licenses.

2.4.7.4 The number of CPD Providers renewing their accreditation

3.0 PART II: STANDARDS FOR CPD

3.1 Standards for Accreditation of CPD Providers

3.1.1 Standard 1: Administrative Responsibility

There shall be a visible, continuous, and identifiable authority charged with administering the provider's training programs. The administrative authority shall have the responsibility and be accountable for ensuring compliance with the quality criteria.

NOTE: Provide evidence of an organizational structure defining the Job descriptions of the CPD administrator.

3.1.2 Standard 2: Administrative Qualifications

The person in whom the administrative functions are vested shall be qualified by virtue of background, education, training, and experience.

3.1.3 Standard 3: Appropriate subject

Training programs shall address topics and subject areas pertinent to the contemporary practice of pharmacy and have well-balanced presentations.

3.1.4 Standard 4: Training Needs Assessment

Training programs shall satisfy needs that have been determined to be appropriate for the target audience. Providers shall regularly assess training needs and involve the intended pharmacy professionals in identifying their own continuing education needs.

3.1.5 Standard 5: Training Objectives

Training programs shall involve planning, which includes written performance goals and specific performance objectives that are measurable and may serve as a basis for evaluating the program's effectiveness.

3.1.6 Standard 6: Topic Development

The training program shall explore one subject or a group of closely related subjects. If the program involves multiple components, such as in a lecture series, all segments shall be devoted to integrally related subjects.

3.1.7 Standard 7: Instructional Delivery Methods

The method(s) of delivery used in a training program shall be determined by giving appropriate consideration to such factors as the educational content and learning objectives and the size and the composition of the intended audience.

3.1.8 Standard 8: Participant Involvement in Learning

The method of delivery shall allow for and encourage active participation and involvement by pharmacy professionals.

3.1.9 Standard 9: Learning and Assessment

An evaluation mechanism shall be provided at each event for the purpose of allowing all participants to assess their learning in accordance with set objectives.

3.1.10 Standard 10: Program Evaluation

The provider shall develop and implement an evaluation component for each CPD program.

3.1.11 Standard 11: Co-sponsorship with Non-Accredited Providers

If an accredited provider works with others for the development, distribution, and/or presentation of training programs, the responsibility for assuring that all quality criteria are met rests with the accredited provider. Early in the planning, the functions of each party shall be identified and documented.

3.1.12 Standard 12: Co-sponsorship with Other Board-Accredited Providers

If two or more accredited providers work together for the development, distribution, and/or presentation of training programs, they jointly hold the responsibility for assurance of compliance with the quality criteria. Early in the planning, decisions shall be made relative to the specific areas or the division of responsibility of each accredited provider and shall be identified and documented.

3.1.13 Standard 13: CPD Credit

Providers shall adhere to a uniform quantitative system of measurement for CPD credit based on the contact hours (defined as 45-60 minutes of participation or its equivalent). Each contact hour shall accrue 1 point to a maximum of 5 points per day. The number of contact hours to be awarded for participation and successful completion shall be determined by the Board before offering the activity.

3.1.14 Standard 14: Record Keeping

The provider shall maintain and assure the availability of records adequate to serve the participants' needs, the Board, and others requiring such information. Records of

participation and credit awarded should be kept for five years.

3.1.15 Standard 15: Statements of Credit

The provider shall give evidence in a timely fashion to each participant, as a statement, certificate, token, or any other official document such as the participant may reasonably require on successfully completing the CPD program.

3.1.16 Standard 16: Budgeting

The budget and resources for continuing training shall be adequate for the activities undertaken and their continued improvement. Where training is one element of a provider's activities, the budget and resources for training shall be a clearly identifiable component of the provider's budget and resources.

3.1.17 Standard 17: Qualitative Considerations of the Faculty

The faculty for each training program shall be competent in the subject and qualified by experience, training, and/or preparation for the tasks and delivery methods.

3.1.18 Standard 18: Quantitative Considerations of the Faculty

An appropriate number of qualified faculty members shall be used for each CPD program.

3.1.19 Standard 19: Capacity

The provider shall show an adequate capacity to prepare and deliver CPD programs.

3.1.20 **Standard 20: Program Announcement**

Promotion and advertising of each training activity shall be conducted ethically and professionally. Accredited CPD providers are required to submit their proposed programs of activities to the Board using the CPD online system.

3.2 **Standards for Approval of CPD Programs**

3.2.1 **Standard 1: Goal and Mission of the CPD Program**

The provider must develop a CPD goal and mission statement that defines the basis and intended outcomes for the CPD events.

Guidance

The CPD goal is a concise written statement of what the provider intends to achieve for pharmacy learning and education. It should address how a provider shall assist pharmacy professionals to maintain and enhance their competencies to practice in various settings. These may include, but are not limited to;

- a) Ensuring optimal medication therapy outcomes and patient safety.
- b) Managing practice settings, e.g., hospitals, community pharmacy/ chemist, industries, and others.
- c) Satisfying requirements for pharmacy professional's re-licensure.

The CPD mission statement should be consistent with the goals and specifically show the provider's short-term intent in conducting CPD activities, including the intended audience and activities.

The mission and goals should be systematically evaluated and periodically up-dated to assure consistency among the mission, overall goals, and individual events.

3.2.2 **Standard 2: Training Needs Assessment**

The provider must develop CPD activities based on a multifaceted process where training needs are prospectively identified.

Guidance

They should complete a needs assessment before planning specific CPD activities and should guide content development and delivery. A needs assessment should employ multiple strategies to identify the specific gaps in knowledge or skills or areas for enhancement for pharmacy professionals' competence. The provider should identify gaps between what pharmacy professionals do and what is desired in practice. Strategies for needs assessment should incorporate a method(s) in which representatives of the intended audience identify their own continuing education needs.

3.2.3 **Standard 3: CPD Events**

The provider must structure each CPD activity to meet the knowledge-application and/or practice-based pharmacy professionals' training needs.

Guidance

- a) **Knowledge-based CPD activity:** These CPD activities should be designed primarily for pharmacy professionals to gain knowledge. This information must be based on evidence as accepted in the literature by the health care professions.

- b) **Application-based CPD activity:** These CPD activities should be designed primarily for pharmacy professionals to apply the information learned in the time allotted. The information must be based on evidence as accepted in the literature by the health care professions.
- c) **Practice-based CPD activity:** These CPD activities should be designed for pharmacy professionals to gain specific knowledge, skills, attitudes, and performance behaviors that expand or enhance practice competencies. The information within this activity must be based on evidence as accepted in the literature by the health care professions, and its format should include a didactic component and a practice component.

3.2.4 **Standard 4: CPD Event Objectives**

The provider must develop objectives for each CPD activity that define what the pharmacy professionals should do at the completion of each CPD activity.

Guidance

Objectives must be:

- a) SMART (specific, measurable, achievable, realistic, and time-bound).
- b) Developed to address the identified training need (Standard 2).
- c) Addressed by an active learning activity (Standard 7).
- d) Covered by a learning assessment (Standard 9).

3.2.5 **Standard 5: Standards for Commercial Support**

The provider must plan all CPD activities independently of commercial interest. They must present the educational and training content with full disclosure and fair balance.

Topics and learning/training activities must be distinguished from topics and learning/training activities that are promotional.

Guidance

The provider must:

- a) Ensure independence in the planning and delivery of CPD activities.
- b) Implement a mechanism to identify and resolve conflicts of interest during the planning process.
- c) Use commercial support appropriately,
- d) Present content that is without commercial bias,
- e) Disclose required information.

3.2.6 Standard 6: Trainers

The provider must communicate and collaborate with CPD activity trainers regarding the identified educational needs, intended audience, objectives, active participation, and learning assessments for each CPD activity.

Guidance

- a) Faculty should be selected based on their training, qualification, experience, knowledge of the subject, and ability to meet the pharmacy professionals' training needs.
- b) Information, verbal and written, should be provided to the faculty to ensure that CPD activities meet the Board's standards.
- c) The provider must have implemented a mechanism to identify and resolve any conflicts of interest prior to the activity being undertaken (Standard 5).

3.2.7 **Standard 7: Teaching and Learning Methods**

The provider must ensure that all CPD activities include active participation and involvement of the pharmacy professionals.

Guidance

The methodologies employed should be determined by the CPD activity planned (Standard 3), objectives, training/educational content, and the intended audience's size and composition. The provider should design and implement active learning exercises as a component of all delivery methods.

3.2.8 **Standard 8: Educational Materials**

The provider must offer training materials for each CPD activity that enhance participants' understanding of the content and foster applications to pharmacy practice.

Guidance

Training materials should serve as a guide, provide additional sources of information, and include reference tools usable in practice.

3.2.9 **Standard 9: Assessment of Learning**

The provider, in collaboration with faculty, must include learning assessments in each CPD activity to allow pharmacy professionals to assess their achievement of the objectives. They require the completion of a learning assessment for CPD credit.

Guidance

The provider may select formal and informal techniques for assessment of learning. Informal techniques typically involve participant discussions. Formal techniques, such as tests

and quizzes, are typically individualized, written, and graded. The assessment should be consistent with the identified CPD activity objectives (Standard 4) and activity type (Standard 3).

- a) **Knowledge-based CPD activity:** Each CPD activity in this category must include assessment questions structured to determine recall of facts.
- b) **Application-based CPD activity:** Each CPD activity in this category must include case studies structured to address the application of the principles learnt.
- c) **Practice-based CPD activity:** Each CPD activity in this category must include formative and summative assessments that show that the pharmacy professionals achieve the stated objectives.

3.2.10 **Standard 10: Assessment Feedback**

The provider must ensure they provide learned assessment feedback to participants in an appropriate, timely, and constructive manner.

Guidance

The feedback provided should be consistent with the learning assessment (Standard 9), activity objectives (Standard 4), and activity type (Standard 3). They may provide verbal and written feedback:

- a) **Knowledge-based CPD activity:** Feedback may include the correct response to questions. For incorrect responses, the provider is encouraged to communicate that they answered the question incorrectly and provide the rationale for the correct responses.
- b) **Application-based CPD activity:** Feedback may include the correct evaluation of case studies. When responses

are incorrect, we encourage the provider to explain the rationale for the correct responses.

- c) **Practice-based CPD activity:** Feedback should be provided based on the formative and summative assessments used to show that the pharmacy professional achieved the stated objectives.

3.2.11 **Standard 11: Evaluation of CPD events**

Providers must develop and conduct evaluations of each CPD event. The evaluations must allow pharmacy professionals to provide feedback on the following items:

- i. Applicability of the CPD event to meet their educational needs.
- ii. Achievement of each stated aim.
- iii. Quality of faculty.
- iv. The usefulness of training material.
- v. Effectiveness of training material.
- vi. Effectiveness of teaching and learning methods, including active learning.
- vii. Appropriateness of learning assessment activities.
- viii. Perceptions of bias or commercialism.

Guidance

The above items are the minimum requirements for CPD event evaluations. We encourage providers to evaluate additional items and assess whether their stated mission and goals are achieved. The feedback should be summarized for pharmacy professionals separately and used systematically for ongoing improvement of the overall CPD program.

3.2.12 **Standard 12: Achievement and Impact of CPD**

Mission and Goals

Providers must establish and implement evaluation plans that assess the achievement and impact of the stated mission and goals (Standard 1). They must use this information for continuous development and improvement of the CPD programs.

Guidance

An evaluation plan that includes data collection and analysis be developed and periodically updated to document achievement of the provider's CPD mission and goals. The impact of the provider's CPD program should be measured using the following indicators:

- i. **Participation:** Number of participants attending CPD activities.
- ii. **Satisfaction:** Directly measuring satisfaction with learning activities, topic, level of content, and speaker's organization of the material.
- iii. **Learning:** Pre and post-tests, self-assessment tools, multiple-choice, brief answers, essays, presentations.
- iv. **Performance:** Demonstration of skills, application of treatment guidelines.
- v. **Patient Health:** Compliance rates, reduced physician visits.
- vi. **Population Health:** Morbidity/mortality, infection rates, readmission rates.

Depending on the activity type, they may evaluate the six indicators based on:

- a) **Knowledge-based CPD activity:** The indicators that must be evaluated are participation, satisfaction, learning, and performance (demonstration during the activity and intended application in practice).
- b) **Practice-based CPD activity:** The indicators that are evaluated: participation, satisfaction, learning, performance (demonstration during the activity and application in practice post-activity), and, if applicable, patient and/or population satisfaction with the level of services rendered.
- c) **Application-based CPD activity:** The indicators that are evaluated: participation, satisfaction, learning, performance (demonstration during the activity and application in practice post-activity), patient and/or population satisfaction with the level of services rendered.

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5.0 Revision History

Revision No:	Date	Section Revised	Description of change
01	11/9/2023	General	General editing to align with other PPB documents
		1	Change of document numbering format to PRA/TRA/PPD/GUD/063
		1.7	Added: Legal framework. The Pharmacy and Poisons Act, Cap 244 Laws of Kenya (the Act) gives the Board mandate in Section 3(3)(k) to establish, approve and accredit continuing professional educational programs for pharmacists and pharmaceutical technologists.
		2.2.3	Added: The Technical Committee. The Board shall appoint the technical committee responsible for CPD
		2.3.5.2	Added: Pharmacy professional in the year of registration or enrollment
		2.4.1.2	Be registered on the online (practice.pharmacyboardkenya.org) platform
		2.4.2	Added: Application for accreditation as a CPD provider. A prospective CPD provider shall be required to apply for accreditation through the PPB online system
		2.4.3	Added: Renewal of accreditation Renewal applications shall be made through the PPB online portal.
		2.4.4	Added: Suspension, cancellation or withdrawal of accreditation of CPD provider The accreditation of any CPD provider can be suspended, withdrawn, or cancelled by the Board, upon due notice and hearing.
		2.4.5	Added: Appeal process Any CPD provider not satisfied with the Board's decision relating to their accreditation may appeal in writing.

6.0 List of Reviewers

CPD Technical Committee (CPDTC)

No.	Name	Title
1.	Dr. Bindi Tank	Ag. Chairperson
2.	Dr.David Nyamu	Member
3.	Dr. Nelly Kimani	Member
4.	Ms.Agnes Kuvuna	Member
5.	Ms.Molly Cheruto	Member
6.	Mr. John Sabaya Ledidi	Member
7.	Ms Janet Mwamba	Member
8.	Ms Anna Owako	Member

PPB Secretariat

No.	Name	Title
1.	Dr Fred Siyoi	CEO of, the Pharmacy and Poisons Board
2.	Dr. Wilfred O. Oguta	Director, Pharmacy Practice & Training, PPB
3.	Dr. Dominic Mutie	Deputy Director, Licensing and GPP, PPB
4.	Dr Humphrey Mwavali	Head, Registration & Enrolment, PPB
5.	Dr. Abdulkadir Omar	Head, Licensing, PPB
6.	Dr Lily Kipkeno	Head, CPD, PPB
7.	Mr George Muthuri	Head QMS, PPB

7.0 Appendices

A. CPD Provider Registration Form

Provider Details (mandatory)		
CPD Provider Name		
Institution/Organization	---- SELECT COUNTY ----	
Postal Address, Code, Town		
Email Address	Phone Number	
Road	LR Number	
Building	Floor	Room Number
Website		
DECLARATION <input type="checkbox"/> I declare that to the best of my knowledge and belief that the particulars I/ we have given in this form are correct and complete.		

Pertinent Attachments (mandatory)	
Certificate of Incorporation	<input type="button" value="Choose File"/> No file chosen
Memorandum and Articles of Association <small>(Signed Page or CR12)</small>	<input type="button" value="Choose File"/> No file chosen

CPD Administrator			
Designation	Designation		
First Name	First Name	Mobile No	Mobile No
Middle Name	Middle Name	Email	Email
Last Name	Last Name	Address	Postal Address Postal Code
ID Number	ID Number	Town	Town

B. CPD APPEAL FORM



MINISTRY OF HEALTH PHARMACY AND POISONS BOARD

CPD APPEAL FORM

Date-----

Part A: Instructions

The complainant should fill in this form in Block letters

Provide a copy of the accreditation certificate

Relevant data document (CPD attendance, sheet, programs, events)

Attachment of evidence for appeal grounds

Registration/Enrollment certificate

Part B Details of complainant

Name of Complainant-----

Postal Address: ----- Code: ----- Town: -----

I wish to appeal against the decision of the Board on the following subject.

The subject of complaint: -----

Details of Complaint

Expected outcomes

Name-----

Sign-----

Witness

Name-----

Sign-----

Part C: Pharmacy & Poisons Board Review

Findings/Comments

Conclusion

Recommendation

Committee members present

S/No	Name	Designation	Date	Sign
1				

2				
3				

C. CERTIFICATE OF ACCREDITATION AS A CPD PROVIDER



REPUBLIC OF KENYA

MINISTRY OF HEALTH PHARMACY AND POISONS BOARD

ACCREDITATION CERTIFICATE FOR CONTINUING PROFESSIONAL DEVELOPMENT (CPD) PROVIDER

Under section 3B(3)(k) of the Pharmacy and Poisons Act, Cap 244 Laws of Kenya;

.....
(Name and address of CPD provider)

is accredited as a CPD Provider.

Date:

This certificate is valid up to the 31st of December.....

.....
Registrar, Pharmacy and Poisons Board.

QR CODE