

### **STANDARDS**

### **FOR**

## CONTINUOUS PROFESSIONAL DEVELOPMENT (CPD)

2024

KHESAR GYALPO UNIVERSITY OF MEDICAL SCIENCES OF BHUTAN

#### **ACKNOWLEDGEMENT**

We would like to express our sincere gratitude to everyone who has worked to develop this framework for standards and practices in the curriculum at the Khesar Gyalpo University of Medical Sciences of Bhutan (KGUMSB). This collaborative effort has been made possible through the dedication and insights of our faculty, administrative staff, and external experts who have generously shared their expertise and perspectives.

We also express our appreciation and gratitude to all the members of the review team from faculties and departments from KGUMSB and other affiliated institutes including Jigme Singye Wangchuck School of Law (JSW Law), Bhutan Qualifications and Professionals Certification Authority (BQPCA) and Jigme Dorji Wangchuck National Referral Hospital (JDWNRH) for their valuable inputs and support.

### **Core Working Members**

- 1. Dr. Nidup Dorji, Deputy Dean of Public Health & Allied Health Sciences, FNPH
- 2. Dr. Kipchu Tshering, Assistant Professor, FoPGM, KGUMSB
- 3. Mr. Tashi Norbu, Chief Program Officer, MECRIT, KGUMSB
- 4. Ms. Tshering Cheki, Officiating CPO, QAS, NMS
- 5. Ms. Leesa Leebang Subba, Asst. Program Officer, MHPC, BQPCA
- 6. Ms. Pema Wangmo, Dy. Chief Adm HR, FNPH, KGUMSB
- 7. Mr. Ugyen Norbu, Chief Curriculum Officer, OOP

### **Review Team**

- 1. Dr. Kuenzang Chhezom, Registrar, KGUMSB.
- 2. Drungtsho Sangay Wangdi, Dean, FoTM
- 3. Mr. Nima Sangay, Dean, FNPH
- 4. Mr. Rixin Jamtsho, Director, MECRIT
- 5. Ms. Diki Wangmo, Dean, ABIN
- 6. Mr. Shiva Raj Bhattarai, Dean, RTC
- 7. Mr. Ram Prasad Bhattarai, Dean, AAHS
- 8. Mr. N.B. Raika, Specialist, BQPCA
- 9. Dr. Karma Sherub, Deputy Dean of Academic affair, FoPGM
- 10. Drungtsho Sherab Dorji, Deputy Dean of Academic Affair, FoTM
- 11. Drungtsho Jamyang Yeshi Dorji, Lecturer, FoTM
- 12. Ms. Tshering Yangzom, Deputy Dean, Nursing & Midwifery, FNPH
- 13. Dr. Yoriko Nishizawa, Associate Professor, FoPGM
- 14. Drungtsho Dago Tshering, Deputy Chief Program Officer, MECRIT
- 15. Mr. Sonam Norbu, Assistant Program Officer, OOP

### **ACRONYMS**

BQPCA	Bhutan Qualification and Professionals Certification Authority
CBF	Competency-Based Framework
CoS	Condition of Service
CPD	Continuous Professional Development
CQI	Continuous Quality Improvement
KGUMSB	Khesar Gyalpo University of Medical Sciences of Bhutan
MECRIT	Medical Education Centre for Research, Innovation and Training
МНРС	Medical and Health Professionals Council
МоН	Ministry of Health
NMS	National Medical Services
ООР	Office of the President
QA	Quality Assurance
SOP	Standard Operating Procedures

# Table of Contents

SECTION 1: INTRODUCTION	1
SECTION 2: STANDARDS	4
SECTION 3: VALIDATION PROCESS	8
SECTION 4: AWARD	10
BIBLIOGRAPHY	11
ANNEXURES	12
Annexure 1: Checklists For Standards	
Annexure 2: CPD Rating Matrix	17
Annexure 3: Terms of References for CPD Validation Committee	22
Annexure 4: Confidentiality Agreement Form	25
Annexure 5: Conflict of Interest Form	26
Annexure 6: The Standard Framework for CPD	27
Annexure 6: Standard Procedures to be followed for proposing CPD activities	28

#### **SECTION 1: INTRODUCTION**

### 1.1. Background

Since the establishment of Khesar Gyalpo University of Medical Sciences of Bhutan (KGUMSB) in 2013, KGUMSB continuously strives to ensure the implementation of the medical act to maintain high standards of continuous Professional Development (CPD). To fulfill this mandate, the Medical Education Centre for Research, Innovation and Training (MECRIT) was instituted by the third Governing Council (GC) to conduct and coordinate CPD through training, workshops, seminars, and research activities among others.

The foundation of any organization's development depends on human resources and their capacity. In order to maintain, upgrade, and retain these resources, continuous education and professional development have increasingly become critical. It is also one of the key areas identified and invested heavily by the Royal Civil Service Commission, Ministry of Health, Medical and Health Professionals Council (MHPC), National Medical Services (NMS), and KGUMSB.

CPD consists of educational activities and inspires professionals to constantly upgrade their knowledge and skills, develop positive attitudes, inculcate a culture of lifelong learning, to embrace evidence-based practices while delivering quality healthcare services.

While the importance of CPD is widely acknowledged, monitoring and evaluation of quality CPD activities and their impact should be given equal importance. The importance of quality education and quality assurance (QA) mechanisms is clearly reflected in the University of Medical Sciences Act of Bhutan, 2012, Article 6, which states that "the university shall ensure quality control and quality assurance of various educational programmes through internal and external quality control and assurance mechanisms".

Furthermore, the Memorandum of Understanding signed between the Ministry of Health, KGUMSB, and Medical and Health Professionals Council (MHPC), Bhutan Qualifications and Professionals Certification Authority (BQPCA), section 2.f states that "KGUMSB shall put in place an internal monitoring and evaluation system to ensure training quality". This is also supported by other documents of the University including University Quality Management Standards, 2022, Condition of Service (CoS), 2018 and Academic Regulations, 2021.

Finally, the enhancement of the QA system will enable the fulfillment of the vision and mission of KGUMSB. Hence, it is crucial to continuously assess the quality of CPD activities and their impact through a system of objective assessment in view of the challenges and opportunities of the 21<sup>st</sup> century. Furthermore, the registration and licensing of the professionals need to continue updating their knowledge, skills and competencies in order to continue their practice.

### 1.2. Scope of the CPD Standards

The scope of these CPD standards applies to KGUMSB, relevant agencies, and allied sectors. The CPD proposals shall be validated using the standards listed in this document.

The basis of CPD proposals should be based on the emerging and re-emerging health needs of the country, professional settings, and the prevailing practices of the changing times. The current trend of international practices indicates that the scope of CPD be broadened to a wide range of continuing professional development that includes behavioral change, social and managerial skills, and the multidisciplinary context in the delivery of healthcare services

All the short-term training, CMEs and workshops more than one day should have course content / module which must be validated by CPD validation committee

### 1.3. Objectives of the CPD standards

CPD empowers professionals to be up-to-date in clinical, research, education and management fields relevant to their professional practices to improve the safety, quality, and effectiveness of clinical services and patient care. CPD develops human resources for sustained high-quality patient-centered care informed by evidence-based practices and humanistic approach.

The CPD standards should:

- I. Guide the CPD team (developers/proponents).
- II. Guide the CPD validating committee.
- III. Strengthen the CPD validation process.
- IV. Ensure quality CPD activities are undertaken to enhance professional and career opportunities.
- V. Bring about positive behavioral change among the CPD participants.

### 1.4. Terms and Definitions

For the purposes of this CPD standard, the following terms and definitions shall apply:

- **Attitude:** An individual's mental and emotional stance influenced by the CPD towards the development of positive changes.
- Competency: the ability to apply knowledge and skills to achieve intended results. The
  ability to apply knowledge and skills means that the learner demonstrates appropriate
  attitudes and behavior in different contexts or situations with responsibility and
  accountability.

- Continuous Professional Development: CPD refers to the ongoing process of maintaining and enhancing one's professional knowledge, skills, and attitude.
- Educational resources: all human, material, non-material, institute environment and community resources.
- Educational services: the process that supports the acquisition and development of learners' competence through teaching, learning assessment or research.
- Learner means participants acquiring and developing competence using this CPD service.
- Lifelong learning: provision or use of learning opportunities throughout people's lives in order to foster their continuous development.
- Management system: set of interrelated or interacting elements of an organization to establish policies, objectives and processes to achieve those objectives.
- Monitoring: determining the status of a system, a process or an activity.
- Performance: measurable result and can relate either to qualitative and quantitative approaches to learning activities.
- Process: set of interrelated or interacting activities which transforms inputs into outputs.
- Quality Assurance (QA): all those planned and systematic actions needed to provide adequate confidence that a product, service, or result will satisfy given requirements for quality and be fit for use.
- Requirement: need or expectation that is stated, generally implied, or obligatory.
- Short-term training: Refers to training focused on educational programs that are designed to provide specific skills and knowledge within a relatively brief period of time (i.e. less than 6 months).
- Skills based training: Refers to training focused on educational programs that are designed to provide specific skills and knowledge within a relatively brief period of time (i.e. minimum of 7 days less than 6 months).
- Stakeholders: a person or organization that can affect, be affected by, or perceive itself to be affected by a decision or activity.
- University: Refers to Khesar Gyalpo University of Medical Sciences of Bhutan.
- Validation: confirmation, through the provision of objective evidence, that the requirements for a specific intended use or application have been fulfilled.

• Verification: confirmation, through the provision of objective evidence, that specified requirements have been fulfilled.

#### **SECTION 2: STANDARDS**

#### 2.1. Standard I: Framework

This standard aims to ensure that the CPD proposals are designed in line with the CPD framework as is in the standard framework for curriculum development of KGUMSB.

#### **Objectives:**

The CPD program is systematically planned in line with the standard CPD framework.

#### **Quality Indicators:**

- There is a specific and defined CPD title in place.
- The proposed CPD has defined objectives and learning outcomes.
- The proposed CPD has relevant and appropriate assessment tools to assess both theory and practicum.
- The proposed CPD has allocated credit values.
- The proposed CPD has the required subject matters as defined in the content standard.
- The proposed CPD has a list of resource persons with relevant credentials.
- The proposed CPD has the tools to assess the competency of the resource persons (e.g. use of facilitators evaluation checklist).
- The proposed CPD has a list of appropriate resource materials.
- The proposed CPD is for relevant participants.
- The proposed CPD should ensure an adequate resource-participant ratio.

Note: *The CPD Framework Form is appended as Annexure.* 

### 2.2. Standard II: Objectives and Expected Outcome

This standard defines the requirement of objectives and expected outcomes for the CPD. The objectives must be guided by SMART (Specific, measurable, achievable, realistic, and time bound) goal setting.

### **Objectives:**

To ensure all objectives and outcomes of CPD activities are aligned with the identified needs to enhance knowledge and skills.

#### **Quality Indicators:**

- The expected outcomes of the CPD are clearly defined (Specific, measurable, achievable, realistic, and time-bound);
- The objectives of the CPD are in congruence with the competencies as defined in the Competency-Based Framework (CBF) and the Service Standards if relevant/required.
- The CPD objective(s) is/are need-based for the delivery of healthcare services; and
- The CPD objective(s) is/are aligned with the expected outcome, competencies, and skills.

#### 2.3. Standard III: Content

This standard considers the design and review of the content of the CPD activity. The CPD content must be aligned to help in addressing the needs and improve the desired outcomes. The content must also be aimed at enhancing the knowledge, skills and attitude.

#### **Objectives:**

- To ensure the contents of the CPD are relevant to the needs of the professionals and society address the knowledge and skills gaps.
- To ensure that the contents of the CPD are validated and in line with the national and international best practices and latest available scientific evidences.

### **Quality Indicators:**

- The contents are designed through an intensive and systematic need analysis.
- The contents are based on scientific evidence and best practices;
- The contents address the identified gaps and needs, and match with the intended learners' current or potential scope of practice;
- The contents are delivered as per the objectives and expected outcomes.

### 2.4. Standard IV: Teaching, Learning, and Assessment

The standard of teaching, learning, and assessment is to ensure that interactive learning methods are adopted in the CPD program and take advantage of a wide variety of teaching-learning (T-L) modalities including the improvement of accessibility to educational support and services to the learners with special needs and the use of technology. The assessment must include opportunities for learners to apply their knowledge and skills in a real-world context.

### CPD delivery must consider the inclusion of:

- a. Knowledge domain (Transmission) where the role of teaching-learning is viewed as the transmission of facts, skills, and values, with the ultimate goal is to master knowledge;
- b. Skill domain (Transaction) where the teaching-learning approach believes that the learners are capable of constructing/learning and reconstructing/upgrading knowledge, or intelligent problem solving/critical thinking through collaborative and dialogical processes; and
- c. Attitude domain (Transformation): The process in which the teaching-learning approaches are focused on the importance of interdependence engagement to bring out positive personal and social change at different levels (cognitive, emotional, social, intuitive, creative, spiritual, and others).

### **Objectives:**

Ensure teaching-learning and assessment methods are appropriately tailored to the needs of the participants to optimize learning outcomes.

### **Quality Indicators:**

- Diverse, relevant, and innovative teaching-learning method(s) of the CPD is appropriately selected to suit the various categories of professionals and are tailored to their needs; The T-L methods can include but not limited to:
  - ✓ Lectures, seminars, conferences, self-learning, self-assessment, research publications, study visits/tour, clinical training attachment, clinical experiences, simulation, lived experience, blended learning, peer learning.
- The teaching-learning method(s) encompass integrated practical and theoretical components, which are learners based to enhance competencies;
- The teaching-learning method(s) are firmly evidence-based;
- Appropriate assessment tools are used depending on the CPD such as pre-testing precedes teaching-learning to evaluate the existing knowledge of the participants and post-test to

determine the effectiveness of the CPD, and [Assessment tools must be informed by the objectives and expected learning outcomes

• The outcome of the assessment is used to merit the award of CPD recognition.

#### 2.5. Standard V: Resources

This standard defines the resource requirements for the CPD. There should be adequate and appropriate resources and materials for the CPD.

### **Objectives**:

- To ensure that the minimum requirement in terms of resources and infrastructure are met.
- To ensure resource persons are relevant and competent to deliver CPD.

### **Quality Indicators:**

- There is an adequate, conducive, and appropriate setting in place equipped with the resources including physical space, information communication technology, simulation laboratories, skill laboratories or clinical sites, field training facilities, etc.;
- There is a system to allow the CPDs to virtually or through online platforms;
- The CPD provider is able to describe the educational basis of the CPD activity including accessibility to experts and expatriates;
- The resource person has knowledge//skills/experience and qualification relevant to the CPD activity;
- The CPD provider facilitates the use of appropriate tools;
- The CPD proponent, provider, and resource person should declare a conflict of interest, if any;
- There is appropriate financial procedure and adequate budgeting mechanism in place to implement the CPD.

### 2.6. Standard VI: Monitoring and Evaluations

This standard defines the requirements of the system for the evaluation and monitoring of the CPD activities for continuous quality improvement. The CPD should be continuously monitored and evaluated through the process of information gathering, forming a judgment, and acting based on the results. This standard also recognizes that CPD activities should remain dynamic and must continuously improve to address healthcare needs.

### **Objectives:**

- To ensure the CPD activities have a meaningful impact on the knowledge and competence of professionals and the quality of the health system through a robust monitoring and evaluation system.
- To continuously review and evaluate the quality of CPD, and implement the results for continuous quality improvement.

### **Quality Indicators:**

- There is a mechanism to cross-verify that the CPD standards are met.
- The CPD program has check and balances mechanisms such as rigorous group activities presentations, and attendance sheets.
- The CPD program measures its outcome through pre-post evaluation.
- Follow up with the CPD Cohorts to assess the impact of the CPD program.
- There is an effective feedback mechanism.
- The CPD program has provision to undergo periodic reviews and revisions to adapt to the changing needs of the healthcare system;
- There is a system in place to incorporate the results from the Monitoring and Evaluation processes and other feedback mechanisms.

### **SECTION 3: VALIDATION PROCESS**

Validation is defined as the confirmation, through the provision of objective evidence, that the requirements for a specific intended use or application have been fulfilled.

#### **Process**

- 1. The proponent proposes CPD activity addressed to the Registrar, KGUMSB.
- 2. Registrar directs the Quality Assurance Unit to call upon the CPD validation committee meeting

- 3. The CPD validation committee will review and validate the proposed CPD using this standard.
- 4. MECRIT will implement the approved CPD activity or delegate to the relevant Units and constituent Faculties.
- 5. There shall be proceeding of proposed CPD validation as follows:
  - a. Close Panel Discussion that shall be deliberated amongst the panel members;
  - b. Open Panel Discussion that shall be discussed with the proponent; and
  - c. Closed Panel Discussion shall take place amongst panel members for the final decision.
- 6. The decisions of the Validation Committee shall be one of the following:
  - "Approved" that shall be as proposed without amendment;
  - "Approved with Conditions" that shall be addressed to the satisfaction of the Validation Committee; and
  - "Not Approved" if more than 20% of the CPD content is not aligned to the intended outcome and or 20% of the CPD requirement is not fulfilled.
- 7. The report by the validation committee shall be circulated after the second closed panel discussion.
- 8. If, "Approved with Conditions", the proponent shall submit the response to the recommendation of the validation committee within 15 working days. Failure to adhere to the deadline will result in the rejection of the proposal.
- 9. Upon rejection of the CPD proposal, the CPD proponents could re-submit after 3 months, if wished.
- 10. The formal response from the proponent shall include:
  - Revised proposal
  - A brief report on the implementation of the recommendations
  - Any other appropriate supporting documents.

### **Member Composition of the Validation Committee**

- 11. The CPD Validation Committee shall comprise of the following members:
  - The Registrar as Chairperson;
  - Minimum Three subject experts;
  - One member of the University's faculty, where possible from a cognate discipline;
  - One representative from the Medical and Health Professionals Council as a member; and
  - One official from the Quality Assurance Unit of the University as Member Secretary.
- 12. The Office of the Registrar shall identify and appoint the committee members

### **SECTION 4: AWARD**

The provision of the certificate of completion acknowledges the participation or involvement in the CPD.

### **Certificate of Completion:**

- A Certificate of Completion is typically awarded to the participants who have successfully fulfilled the requirements of a validated CPD program.
- It indicates a higher level of engagement and accomplishment compared to a Certificate of Attendance.
- A Certificate of Completion is often used to acknowledge the recipient's successful attainment of the intended learning outcomes or objectives of the CPD program.
- It may be required as evidence of completing a formal educational program or training course.

#### **Conclusion**

The Continuous Professional Development standards is to guide the CPD validation team, process, and strengthen the validation activities to ensure that quality CPD activities are undertaken to enhance professional and career opportunities.

### **BIBLIOGRAPHY**

- a. Khesar Gyalpo University of Medical Sciences of Bhutan. (2018). Condition of Services of KGUMSB 2018. Available at: <a href="https://www.kgumsb.edu.bt/">https://www.kgumsb.edu.bt/</a>
- b. Khesar Gyalpo University of Medical Sciences of Bhutan. (2021). Academic Regulations of KGUMSB 2021. Available at: <a href="https://www.kgumsb.edu.bt/">https://www.kgumsb.edu.bt/</a>
- c. Khesar Gyalpo University of Medical Sciences of Bhutan. (2022). Quality Management Standards 2022.
- d. Royal Government of Bhutan. (2002). Medical and Health Council Act of the Kingdom of Bhutan 2002. Available at:
   <a href="https://www.nab.gov.bt/assets/uploads/docs/acts/2014/Medical\_And\_Health\_Council\_Act\_2\_002Eng.pdf">https://www.nab.gov.bt/assets/uploads/docs/acts/2014/Medical\_And\_Health\_Council\_Act\_2\_002Eng.pdf</a>
- e. Royal Government of Bhutan. (2012). University of Medical Sciences Act 2012. Available at: <a href="https://www.kgumsb.edu.bt/wp-content/uploads/2021/04/University-of-Medical-Sciences-Act-of-Bhutan-2012Final1.pdf">https://www.kgumsb.edu.bt/wp-content/uploads/2021/04/University-of-Medical-Sciences-Act-of-Bhutan-2012Final1.pdf</a>
- f. World Federation for Medical Education. (2020). Basic Medical Education WFME Global Standards for Quality Improvement. Available at: <a href="https://wfme.org/wp-content/uploads/2020/12/WFME-BME-Standards-2020.pdf">https://wfme.org/wp-content/uploads/2020/12/WFME-BME-Standards-2020.pdf</a>

## **ANNEXURES**

## Annexure 1: Checklists For Standards

### **CHECKLISTS FOR STANDARDS**

**STANDARD I: Framework** 

Sl. No	Items	Yes	No	Remarks
1.	Is there a specific and defined CPD title in place?			
2.	Does the proposed CPD have defined objectives?			
3.	Does the proposed CPD have learning outcomes?			
4.	Are the relevant and appropriate assessment tools used for both theory and practicum?			
5.	Does the proposed CPD have allocated credit values?			
6.	Does the proposed CPD have the required subject matters as defined in the content standard.			
7.	Does the resource person fulfill the requirements for the proposed CPD?			
8.	Does the proposed CPD have a list of appropriate resource materials?			
9.	Does the proposed CPD have relevant participants?			
10.	Does the proposed CPD ensure an adequate resource-to-participant ratio?			

## STANDARD II: Objectives and Expected Outcome

Direction: Tick ( $\sqrt{\ }$ ) in the appropriate column

Sl. No	Items	Yes	No	Remarks
1.	Are the objectives and expected outcomes based on the SMART setting?			
2.	Are the objective of the CPD in congruence with the competencies defined in the Competency- Based Framework (CBF) and the service standards?			
3.	Are the CPD objective(s) need-based for the delivery of healthcare services?			
4.	Is the CPD aligned with the expected outcome, competencies, and skills?			

### **STANDARD III: Content**

Sl. No	Items	Yes	No	Remarks
1.	Are the contents designed through an intensive and systematic need analysis?			
2.	Are the contents based on scientific evidence and best practices?			
3.	Does the CPD activity address the identified gaps and needs and match with the intended learners' current or potential scope of practice?			
4.	Are the contents delivered as per the objectives and expected outcomes?			

## STANDARD IV: Teaching, Learning and Assessment

Sl. No	Items	Yes	No	Remarks
1.	Are the teaching-learning method(s) of the CPD appropriately selected to suit the various categories of professionals and tailored to their needs?			
2.	Do the teaching-learning method(s) encompass integrated practical and theoretical components in order to enhance competencies?			
3.	Are the teaching-learning method(s) firmly evidence-based?			
4.	Do the teaching-learning methods include but are not limited to lectures, seminars, conferences, self-learning, self-assessment, research publications, study visits/tour, clinical training attachment, and clinical experiences?			
5.	Do teaching-learning methods integrate both simulations and lived experiences via blended learning approaches to enhance learning?			
6.	Does the pre-test precede teaching-learning to evaluate the existing knowledge of the participants and the post-test to determine the effectiveness of the CPD?			
7.	Are the assessment tools aligned with the objectives and expected learning outcomes?			
8.	Is the outcome of the assessment used to merit the award of CPD recognition?			

### **STANDARD V: Resources**

Sl. No	Items	Yes	No	Remarks
1.	The following question is about the availability of in place equipped with resources.	adequate	e and appr	opriate settings
1.	Is there an adequate and appropriate physical space provision for CPD?			
2.	Is there an adequate and appropriate ICT-enabled setting?			
3.	Are there adequate and appropriate simulation laboratories and skill laboratories?			
4.	Are there adequate and appropriate clinical sites?			
5.	Are there adequate and appropriate field training facilities?			
2.	Is there a system to allow the CPDs to be virtually conducted or through online platforms?			
3.	Is the CPD provider able to describe the educational basis of the CPD activity including accessibility to experts and expatriates?			
4.	Does the resource person have knowledge / skills / experience and qualifications relevant to the CPD activity?			
5.	Does the CPD provider facilitate the use of appropriate tools?			
6.	Does the CPD proponent, provider, and resource person should declare a conflict of interest, if any?			

7.	Is there an appropriate financial procedure and		
	adequate budgeting mechanism in place to		
	implement the CPD?		

## STANDARD VI: Monitoring and Evaluation

Sl. No	Items	Yes	No	Remarks
1.	Is there a mechanism to cross-verify that the CPD standards are met?			
2.	Does the CPD program have check and balances mechanism?			
3.	Does the CPD program measure its outcome such as through the pre-post evaluation?			
4.	Is there a follow-up mechanism with the CPD Cohorts to assess the impact of the CPD program?			
5.	Is there an effective feedback mechanism such as 360-degree feedback from the proponent, provider, participants, and the clients?			
6.	Does the CPD program have a provision to undergo periodic reviews and revisions to adapt to the changing needs of the healthcare system?			
7.	Is there a system in place to incorporate the results from the Monitoring and Evaluation processes and other feedback mechanisms?			

### Annexure 2: CPD Rating Matrix

### **CPD Rating Matrix**

#### **Instructions:**

- 1. If "Yes", Tick ( $\sqrt{\ }$ ). If "No" Cross ( $\times$ ).
- 2. If "Yes", award the allocated marks.
- 3. If "No", do not award the allocated marks.
- 4. If NA, full marks will be applied.
- The CPD proposal has to obtain a minimum of 50% of the allocated total marks under each
   standard for the implementation of the CPD.
- 6. "Not Approved" if more than 20% of the overall CPD requirement is not fulfilled.

#### RATING FOR STANDARD I: Framework [10 marks]

S/N	Items	Yes/No	NA	Allocated Marks	Obtained Marks	Remarks
1	Is there a specific and defined CPD title in place?			1		
2	Does the proposed CPD have defined objectives?			1		
3	Does the proposed CPD have learning outcomes?			1		
4	Are the relevant and appropriate assessment tools used for both theory and practicum?			1		
5	Does the proposed CPD have allocated credit values?			1		
6	Does the resource person have the required subject matters as defined in the proposed CPD?			1		
7	Does the proposed CPD fulfill the requirements for the resource person?			1		
8	Does the proposed CPD has the list of appropriate resource materials?			1		

9	Does the proposed CPD has relevant participants?		1	
10	Does the proposed CPD ensure adequate resource to participant ratio?		1	
	TOTAL		10	

## RATING FOR STANDARD II: Objectives and Expected Outcome [10 marks]

S/N	Items	Yes/No	NA	Allocated Marks	Obtained Marks	Remarks
1	Are the objectives and expected outcomes SMART based?			2		
2	Is the objective of the CPD in congruence with the competencies defined in the Competency Based Framework (CBF) and the service standards?			3		
3	Are the CPD objective(s) need-based for the delivery of healthcare services?			3		
4	Is the CPD aligned with the expected outcome, competencies, and skills?			2		
	TOTAL			10		

### RATING FOR STANDARD III: Content [20 marks]

S/N	Items	Yes/No	NA	Allocated Marks	Obtained Marks	Remarks
1	Are the contents designed through an intensive and systematic need analysis?			4		
2	Are the contents based on scientific evidence and best practices?			6		
3	Does the CPD activity address the identified gaps and match with the intended learners' current or potential scope of practice?			4		
4	Are the contents delivered as per the objectives and expected outcomes?			6		
	TOTAL			20		

### RATING FOR STANDARD IV: Teaching, Learning and Assessment [20 marks]

S/N	Items	Yes/No	NA	Allocated Marks	Obtained Marks	Remarks
1	Are the teaching-learning method(s) of the CPD appropriately selected to suit the various categories of professionals and tailored to their needs?			2		
2	Do the teaching-learning method(s) encompass integrated practical and theoretical component, which are learners based to enhance competencies?			3		
3	Are the teaching-learning method(s) firmly evidence-based?			2		
4	Do the teaching-learning method(s) include but are not limited to lecturers, seminars, conferences, self-learning, self-assessment, research publications, study visits, clinical training attachment, peer learning and clinical experiences?			2		
5	Do teaching-learning method(s) integrate both simulation and lived experiences via blended learning approaches as appropriate to enhance learning?			3		
6	Does for instance pre-test precede teaching- learning to evaluate the existing knowledge of the participants and post-test to determine the effectiveness of the CPD?			3		
7	Are the assessment tools aligned with the objectives and expected learning outcomes?			3		
8	Is the outcome of the assessment used to merit the award of CPD recognition?			2		
	TOTAL			20		

### RATING FOR STANDARD V: Resources [20 marks]

S/N	Items	Yes/No	NA	Allocated Marks	Obtained Marks	Remarks
1	The following question is about the availability of equipped with resources.	of adequa	ate ar	nd appropri	ate settings	in place
a	Is there adequate and appropriate physical space provision for CPD?			1		
b	Is there an adequate and appropriate ICT enabled setting?			1		
c	Are there adequate and appropriate simulation laboratories and skill laboratories? What about CPD that doesn't require simulation activities?			1		
d	Are there adequate and appropriate clinical sites?			1		
e	Are there adequate and appropriate field training facilities?			1		
2	Is there a system to allow the CPDs virtually or through online platforms?			2		
3	Is the CPD provider able to describe the educational basis of the CPD activity including accessibility to experts and expatriates?			3		
4	Does the resource person have knowledge/skills/experience and qualification relevant to the CPD activity?			4		
5	Does the CPD provider facilitate the use of appropriate tools?			2		
6	Does the CPD proponent, provider, and resource person should declare conflict of interest, if any?			1		
7	Is there an appropriate financial procedure and adequate budgeting mechanism in place to implement the CPD?	nd 3				
	TOTAL			20		

### RATING FOR STANDARD VI: Monitoring and Evaluation [20 marks]

S/N	Items	Yes/No	NA	Allocated Marks	Obtained Marks	Remarks
1	Is there a mechanism to cross-verify that CPD			2		
1	standards are met?			2		
	Does the CPD program have check and					
2	balances mechanisms such as rigorous group			2		
	activities presentations and attendance sheets?					
3	Does the CPD program measure its outcome			3		
3	through the pre-post evaluation?			3		
	Is there a follow-up mechanism with the CPD					
4	Cohorts to assess the impact of the CPD			4		
	program?					
	Is there an effective feedback mechanism such					
5	as 360-degree feedback from the proponent,			3		
	provider, participants, and the clients?					
	Does the CPD program have provision to					
6	undergo periodic reviews and revisions to adapt			3		
	to the changing needs of the healthcare system?					
	Is there a system in place to incorporate the					
7	results from the Monitoring and Evaluation	3			3	
	processes and other feedback mechanisms?					
	TOTAL			20		

### Annexure 3: Terms of References for CPD Validation Committee

### **Terms of References for CPD Validation Committee**

### Introduction

Following the Memorandum of Understanding signed by the Ministry of Health, Medical and Health Professionals Council and Khesar Gyalpo University of Medical Sciences of Bhutan (KGUMSB), KGUMSB is to carry out all the continuous Professional Development (CPD) related activities. Upon the receipt of CPD proposals from potential proponents to the KGUMSB, the Quality Assurance Unit of the University shall facilitate the validation and approval of the CPD proposals by constituting a CPD validation committee.

### **Purpose**

The sole purpose of this Terms of Reference (TOR) is to enable the CPD validation committee to validate the proposals by verifying its compliance with the prescribed standards. This will help to strengthen the CPD validation process and ensure quality CPD activities are undertaken to enhance professional and career opportunities.

### Membership

The committee will consist of a minimum of 6 members including the Chairperson. All the committee members will reflect the standards of the validation process so that the proposed CPD activities are undertaken to achieve greater quality.

The committee shall be comprised of the following members:

- 1. The Registrar as Chairperson
- 2. Minimum three subject experts and will increase based on nature of subject.
- 3. One member of the University's faculty, where possible from a cognate discipline.
- 4. One representative from the Medical and Health Professionals Council.
- 5. One official from the Quality Assurance Unit of the University as Member Secretary.

#### Tenure

This is a temporary Committee depending on the receipt of the CPD proposal(s) and shall be dissolved upon the completion of the validation process.

### **Meetings**

The Committee will meet upon the receipt of the CPD proposal(s) and when necessary.

#### Mandates of the committee

- 1. Sign a confidentiality agreement form upon assuming as a member of the CPD validation committee (*Annexure 1*)
- 2. Declare conflict of interest (COI) prior to the commencement of the validation process and sign the COI (*Annexure 2*)
- 3. All the members of the committee including the Chairperson and Member Secretary are mandated to be present during the validation process
- 4. Review CPD proposals and assess their compliance with prescribed standards including thorough evaluations of Framework, Objectives and Expected Outcome, content, Teaching-Learning and Assessment, Resources, Monitoring and Evaluation.
- 5. Make recommendations for the approval, modification, or rejection of CPD proposal(s) based on the panel's assessment.
- 6. Provide constructive feedback and suggestions to improve the quality and effectiveness of CPD.
- 7. Ensure transparency and fairness in the validation process
- 8. Maintain accurate records of the reviewed CPD program, recommendations, and the decisions of the validation process.

#### Chairperson

Besides the roles and responsibilities of the committee outlined above, the chairperson of the committee shall shoulder the following:

- 1. Provide leadership and guidance to the committee.
- 2. Facilitate panel meetings and discussions.
- 3. Ensure that the committee adheres to the terms of reference and the established processes.
- 4. Coordinate communication among committee members and relevant stakeholders.
- 5. Represent the committee in interactions with external parties.

### **Member Secretary**

- 1. Ensure there is no COI among the committee members
- 2. Provide administrative support to the committee.
- 3. Coordinate meetings, agendas, and logistics.
- 4. Manage communication between committee members.
- 5. Organize documentation and records.

### Reporting

The CPD validation committee (Member Secretary) shall report its findings and recommendations to the Office of the President who will then recommend MECRIT (no other institute?) to facilitate the conduct of the CPD. The report shall include details about the CPD program reviewed, validation outcomes, and any recommendations for improvement.

#### **Amendment**

The University reserves the right to review and amend this ToR from time to time, as deemed necessary.

# Annexure 4: Confidentiality Agreement Form

## **Conflict of Interest Form**

In	racconition	of th	e foot	that	Ţ		
Design	nation	•••••	, C	ID		, herein referr dation Committee.	ed to as the
Where	eas, the fundame	ntal duty of	the member of	of CPD va	ılidation	committee is to:	
•	• Guide and address all human resource actions within the University to promote broader participation, ensure fair and transparent decisions based on merit.						
•		ces Act of E	3hutan Act 2			ution of Bhutan, rnment of Bhutan	· ·
trust a	Whereas, the <i>CPD Validation Committee</i> must meet the highest standards in order to merit the trust and confidence of the staff, officials and the Bhutanese Citizen in making decisions on the human resources.						
	ndersigned, as a tandards of beha				ommitte	e, is expected to n	neet the same
to the inform	Undersigned in	conjunction to the Unders	with the dut	ties as a 1	member	idential or Proprie of the Committee Proprietary, or Priv	. Any written
("info	rmation") in truses, shall not be	st or confid- used for any	ence and agr other purpos	rees that se or discl	it shall losed to a	or Proprietary be used only for any third party. All ole property of the	contemplated Confidential
Confid		etary informa				ize, directly or ir meeting or belong	•
Date:			Sig	gnature:			
Place:			Na	me:			

# Annexure 5: Conflict of Interest Form

## **Conflict of Interest Form**

I,	•••••	, bearing CID No, position title
••••	•••••	of KGUMSB declare that in serving as the member of
CP.	D V	alidation Committee of KGUMSB (Please tick as appropriate):
1.		o not have or anticipate any conflict of Interest. I shall notify the agency concerned mediately in the event such interest arises in the course of or before discharging my ty,
		OR
2.	I do	o have Conflict of Interest in view of the following reason(s):
	A.	Family members:
	B.	Close relative:
	C.	Close friend:
	D.	In-Laws:
	E.	Enemy:
	F.	Others:
		y confirm that the above information is true to the best of my knowledge. In the event the declarations are found to be incorrect, I shall be liable for administrative/legal actions.
Da	te:	Signature:
Pla	ce•	Name

## Annexure 6: The Standard Framework for CPD

## The Standard Framework for continuous Professional Development (CPD)

### CPD Title:

•	Credit Value:	(Theory: 1 cr	edit= hours:	Practical: 1	credit= hours)

- Objectives of the CPD:
- Learning Outcomes:
- Assessment:
- Subject Matter:

No of hours and session	Content	Teaching & Learning Strategies	Mode of Assessment
Theory			
Practical			

- Relevancy of participants:
- Resource-participant ratio:
- Resource person [ Credentials, does the resource persons have knowledge/ experience and qualification relevant to the CPD activity?]:
- Resource materials:
- Monitoring and evaluation mechanism:
- Continuous quality improvement:
- References

### Annexure 6: Standard Procedures to be followed for proposing CPD activities

### Standard Procedures to be followed for proposing CPD activities

- 1. The proponent shall submit a CPD proposal addressed to the Registrar, KGUMSB at least 3 months prior to the implementation timeline to ensure sufficient time for planning and execution of the activities CPD proposal consists the CPD standard Framework for designing CPD course.
- 2. Registrar shall forward it to the Quality Assurance Division, KGUMSB for verification of the documents and to nominate the subject specific validation committee members.
- 3. Quality Assurance Secretariat shall identify subject experts in addition to the existing validation committee members based on the category of proposal within five working days.
- 4. The Quality Assurance Secretariat shall appraise the Chair and the members on the nomination of subject experts.
- 5. The Secretariat shall call the Validation Committee Meeting as per the directives of the Chair upon meeting the quorum of 2/3.
- 6. The validation committee shall review and validate the proposed CPD activity within 20 working days.
- 7. The Secretariat shall notify and share the outcome as "Approved, Approved with Conditions or Not approved" on the proposed activity to the respective proponent or MECRIT (Incase if the activity is outsourced to KGUMSB) within two days after the validation.
- 8. MECRIT will implement the approved CPD activity or delegate to the relevant Units and Constituent Faculties.
- 9. Quality Assurance Secretariat shall maintain the CPD validation Committee meeting report and attendance of the CPD Validation Committee Members.