



Nursing Council of Kenya

Continuing Professional Development Framework (CPD) for Nurses in Kenya



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December 2012

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P.O Box 20056 – 00200 Nairobi
Kabarnet Lane, Off Ngong Road, Nairobi
Tel: 0721920567/0733924669
Email: info@nckkenya.org
www.nckkenya.com

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Foreword

Health remains a fundamental right for all Kenyans as assured in the national Constitution and universally so recognised. It is therefore an imperative that non-governmental organizations; Faith-Based Organizations (FBOs); Development Partners, nurses themselves as well as all other health professionals make an effort to ensure that this right is available and extended to all Kenyans.

It is recognised that the landscape for service delivery by health professionals in Kenya has many challenges. Moreover, there has been an increase in the disease burden as a result of both emerging and re-emerging conditions. As a result of non communicable diseases, technological advances, an increase in life expectancy, legal litigation- particularly in the light of The Constitution of Kenya 2010, along with increased demand and expectation by society for better health outcomes necessitates that all health professionals must maintain updated and develop their skills, knowledge and attitudes to adequately deliver safe, quality and evidence-based health services. It is with this in mind that all health professionals need to keep abreast of new developments in health care through continuing professional development activities.

This framework is developed in recognition of the fact that the Kenyan Nurse is an important and critical frontline health worker providing services at all levels of the health care system. The Nursing Council of Kenya was the first board within the Health Sector to introduce CPD as a prerequisite to licensure. However, the Council lacked a framework to regulate and guide the implementation of CPD activities. This CPD framework therefore provides guidelines that create an environment for the nurse to keep abreast with, and improve competencies in service delivery in an effort to satisfy the needs and expectations of patients and clients. Indeed, the guidelines and standards for CPD in Kenya have been developed through a stakeholder engagement and involvement.

The Council has taken into account the fact that CPD for all nurses is conducted by various groups and individuals in the health sector. It is equally critical that every licensed nurse at national and county levels engages in quality, relevant and affordable continuing professional development in order to meet current and future health needs and priorities in Kenya.

Elizabeth Oywer, OGW
Registrar, Nursing Council of Kenya

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Finally, our sincere appreciation is to all those individuals who contributed one way or the other but who may not have been directly mentioned herein.

Acronyms and Abbreviations

ACN	Assistant Chief Nurse
ARC	African Regulatory Collaborative
CHAK	Christian Health Association of Kenya
CPD	Continuing Professional Development
DOMC	Division of Malaria Control
DRH	Division of Reproductive Health
ECASA	East Central and South Africa
FBO	Faith Based Organization
HQ	Headquarter
ICN	International Council of Kenya
ICT	Information Communication Technology
KEC	Kenya Episcopal Conference
M&E	Monitoring and Evaluation
MoH	Ministry of Health
NASCOP	National AIDS and STD Control Programme
NCK	Nursing Council of Kenya
NMCK	Nurses, Midwives, and Health Visitor's Council
NNAK	National Nurses Association of Kenya
SUPKEM	Supreme Council of Kenya Muslims
TWG	Technical Working Group

Glossary of Terms

Accredited CPD program/Activity: Refers to a Nursing Council of Kenya-approved or authorized educational programme/activity, which earns CPD points for the participant. It may be formal or informal, mandatory or a voluntary activity.

Accreditation Certificate: Documentation attesting that the CPD provider is authorized by the NCK or other competent authorizing body recognized by the NCK to offer the planned CPD activity/programme. The Provider takes full responsibility for the scope and quality of content, including scientific integrity of the activity/programme.

Continuing Professional Development (CPD): For purposes of the Nursing Council of Kenya CPD is defined and understood in the following terms:

- Educational activities which serve to maintain, develop, update and increase knowledge, skills, attitudes and competencies that a licensed health professional uses to provide services in the best interest of the patient/client, public or the profession;
- A continuous process that professionals engage in to keep a breast with new developments in health care;
- A process of imparting a professional with knowledge and skills to help them develop attitudes to deliver quality care that meets clients' expectations.

Continuing Professional Development (CPD) Content: This refers to that body of knowledge, skills and attitudes generally recognized and accepted by the profession as within the basic medical and nursing sciences, among other sciences and falling within the provision of health care to the public;

Continuing Professional Development(CPD) County Coordinator: Refers to a professional (preferably a certified registered/enrolled nurse) stationed in one of the Counties within the Republic of Kenya; possessing of relevant clinical or technical and educational expertise and appointed by the NCK with responsibility to identify training needs, initiate, plan, develop and coordinate CPD activities within the County;

CPD Provider: Refers to an individual, institution or organization approved by the NCK, possesses expertise and assumes responsibility for CPD at a national, county and sub-county levels and includes nurse/medical practitioners; training institutions, nursing homes, specialty divisions of MOH (NAS COP, DRH, DOMC etc), health professional associations-among others;

CPD Accreditation Standards or Guidelines: Refers to statements or directives describing the qualities, responsibilities and expected levels of performance of an accredited CPD activity;

CPD Points: These are total credits gained by a participant equivalent to number of contact hours in an active participation in CPD activity/programme;

CPD Hours: The period in hours taken by the participant/learner in active participation in category I or II CPD activity;

Content of CPD Activity/program: Body of knowledge, skills, and ethical attitudes generally recognized and accepted by the nursing profession as within the basic medical sciences, the discipline of clinical medicine and nursing and the provision of health care to the public.

Category 1 CPD Activities/programmes: These are highly structured formal educational activities ranging from post-basic or post-graduate education at a school of nursing, college or university (either face to face, distance or online) leading to the award of a certificate, diploma, higher diploma, post graduate certificate, post graduate diploma, masters or PhD.

Category II CPD Activities/programmes: These are informal educational activities ranging from short courses either face to face or distance or online; seminars, workshops, conducting research and on the job training, self-directed learning undertaken independently by the individual.

Continuing Professional Development (CPD) Point: Credits that a participant undertaking category I or II of CPD activity is awarded upon completion of the activity.

Distance and Distributed Learning: A learning process that allows a learner to study relevant material at a location far removed from the trainer/facilitator with short intervals of face-to-face contact between learner and facilitator for overview, guidance and reference.

E-learning or Web-based Learning: A learning process through which a learner and the facilitator work together through the medium of Information Communication Technology (ICT).

Enduring Materials: Printed, recorded or electronic materials designed to be used for CPD that also need to be presented for accreditation. The CPD provider will be expected to designate CPD credit to each one of them.

Facility-based Learning: Learning based on activities of the learner at his/her own work location, health unit or practice.

Self-learning Activities: Arrangements made by an individual health professional to update professional competencies. Examples include conducting research, participating in distance-learning activities or reading.

Training Needs Assessment: A process by which the CPD training needs of the target professional population are identified. Examples include expert opinions, surveys and reviews of health data.

Mandate and Role of Nursing Council of Kenya

1.0 Introduction and Background

The Nursing Council of Kenya (NCK) was established in 1948 as authorized by the Colony and Protectorate of Kenya ordinance No. 16 of 4th June 1946. It was then called the Nurses, Midwives and Health Visitors' Council of Kenya (NMCK). Presently, the Nursing Council of Kenya is established under the Nurses Act CAP 257 of 1983 as amended in 2011. The mandate of the Council is to make provision for training, registration, enrolment and licensing of nurses, to regulate their conduct and to ensure their maximum participation in the health care of the community and for connected purposes (NCK, 2009).

In 2000, the NCK introduced the nurse's retention system as a mechanism with which to establish and/or maintain a data bank on registration/ enrolment of nurses in the country. The aim of the retention system was to give effect to the provisions of section 11(4) as relates to the retention fee. The system aims at ensuring that nurses keep abreast of the new developments in health care through organized Continuing Professional Development (CPD) programmes. In order to retain nurses, the Council requirement was placed at 20 CPD hours per annum, and the renewal of practice license being based on the accumulation of 60 CPD hours in three years. In 2008, the Council developed a CPD policy as a requirement for retention and also enforced the directive of the Director of Medical Services to all regulatory boards and Councils under the Ministry of Medical Services to implement retention and strengthen CPD.

The Council also aligns itself to other Nursing Boards worldwide, which are no longer accepting life-long registration without periodic

renewal. The Council in this respect enforced the Nurses Act because the retention system is provided for in the Nurses Act Cap 257 Section 11(4) of the Laws of Kenya. The Council further approved mandatory retention in 2010 and in effect issued two circulars in 2011 to all nurses. To strengthen its mandate with regard to CPD, the Council is participating in the African Regulatory Collaborative (ARC) forum, being funded by the Centre for Disease Control (CDC) through the Commonwealth Secretariat. The ARC initiative aims to strengthen regulations within East, Central and South African (ECSA) countries. Through this work, a CPD framework toolkit was developed for member countries to adapt as they develop their specific CPD frameworks.

Additionally, the Council ensures that its policy direction speaks to the national guidelines. For example, a recent circular from the Ministry of State for Public Service (formerly DPM) issued a circular on CPD requirements stating that all civil servants should ensure they acquire 40 CPD hours per annum. With this new requirement in mind, the NCK had to make some adjustments in the way it regulates the provision of CPD in the country. This was in an effort to enforce the directive on all nurses while also establishing and standardizing mechanisms that will ensure nurses are updated on new developments in medical and nursing sciences and that institutions/individuals approved and licensed by NCK provide CPD programmes/activities so that participants/users of CPD attain the minimum hours as stipulated by DPM. The Council expects to address the challenge of not having a well established CPD provision system in the country because nurses have been getting their CPD hours from various providers who are not licensed or regulated in any way. In some instances it has been difficult to prove that nurses have actually undergone the required CPD hours.

It is with this background that the Council has developed this CPD framework to strengthen CPD by setting up clear guidelines for regulating CPD including accreditation of CPD providers. This document sets out the framework relating to the minimum requirements and conditions that must be enforced by the Nursing Council with respect to various forms of CPD.

The Council envisages that in 2012-2016, it will be ICT compliant in regulation of CPD and production of license for retention will be a one stop process because having retention license distinguishes nurses from quacks or "nurse Aids". In the meantime the Council is verifying the applications from nurses that came as a result of the two circulars. The retention form has been updated to capture CPD and so far, the total number of validly practicing nurses in Kenya is approximately 30,

000 and almost all private, National and FBO hospitals have complied with the circulars. The Council recognizes that CPD improvement in Kenya is work in progress and looks forward to all stakeholders complying with these directives for improved services.

1.1 Vision and Mission Statements

Vision:

To be a world class regulatory body for maintaining standards of nursing education and practice

Mission:

To ensure the provision of quality nurses training and maintenance of professional nursing practice through research and appropriate regulations.

1.2 Core Values

The NCK embraces the following Core Values and expects them to pervade through the process of CPD provision in the Country:

- *Excellent Customer Service*: Implies, responding to each stakeholder to their full satisfaction
- *Transparency and Accountability*: Duly open and proactively answerable to all who merit it
- *Efficiency in Performance*: Playing the rightful role in ensuring leading-edge nursing education and practice in Kenya
- *Integrity, Public Policy and Ethics*: Implies being above any reproach, either technically or in values, both in word and in practice
- *Belief in the Equality of Human Beings*: Perceiving every person to be of similar value
- *Professional Excellence*: *On all technical decisions undertaken and as guided by objective evidence and proven merit*

1.3 Rationale

The Nursing Council of Kenya regulatory role requires that standards are adhered to in all aspects of nursing and that the retention of nurses is based on Continuing Professional Development. The Council has therefore stipulated the number of hours of CPD that nurses must accumulate to allow for re-licensure. The Council is responsible to the

public for safe practice and in that regard, ensures that nurses are prepared to be ready for practice. Nursing graduates are licensed and re-certified (based on CPD and satisfactory report) to practice either as certificate nurses, diploma or degree nurses. The Directorate of Personnel Management policy on CPD requires all professionals to have a minimum of 5 days training per year (OP circular of 15/2/2006). This translates to forty (40) hours per year.

The retention of nurses also facilitates the updating of nurses' records in the Council, keeping abreast with new developments in health care, providing data on nurses for purposes of manpower planning and development and keeping up with international professional standards.

1.4 The mandate of the Division of Nursing (MoH), NNAK and NCK

The Division of Nursing in the Ministries of Health recognizes the dynamic nature of practice the nurse finds himself or herself today. This dynamism is influenced by technological advances, increased expectations for quality health care, an increasing life expectancy of Kenyans, legal litigations due to improved constitutional dispensation, ethical and economic factors and a move towards evidence-based health care. Additionally, there is a general perception of health care as a commodity in a market-oriented world. The Division plays an important role in ensuring that the nurse practitioner in the Public Sector gets opportunities for continuing professional development in order to remain current and also gain requisite competencies that meet the needs of health sector, patients/client, employers and self.

The National Nurse Association of Kenya not only looks after the welfare of its members but also ensures that its members continuously maintain and update their competencies by providing accredited CPD programmes that meet required standards and guidelines.

The Nursing Council of Kenya on the other hand, aims to standardize and regulate continuing professional development for nurse practitioner in public and private sector by ensuring that CPD providers, users and programmes meet minimum standards and are well coordinated to ensure safety of patients through improved and quality nursing services. It exists to undertake the following functions.

- Establish and maintain standards of nursing profession and safeguard the interests of nurses and healthcare within the community

- Make provision for training and instruction of persons seeking registration as nurses under CAP 257
- Regulate syllabi
- Prescribe and conduct examinations
- Have regard to the conduct of persons under the Act and take disciplinary measures
- Have regard to standards of nursing care, qualified staff, facilities, conditions and environment
- Compile records and keep registers
- Advise the Minister on matters concerning all aspects of nursing

Regulation: According to ICN, regulation is a means by which order, consistency and control are brought by a profession and its practice for the purpose of ensuring quality care. The purpose of NCK regulation is to protect the public by promoting standards of clinical care through training, licensure and enforcement of codes of regulation to be observed by all Nurse fraternity.

1.5 Purpose of CPD Framework

The purpose of this CPD Framework is enshrined in the fundamental principle of lifelong learning that requires health professionals to engage in continuous learning, both formal and informal in order to maintain clinical competence and acquire new knowledge and skills for expanded professional roles. The Council therefore requires the nurse cadre to undertake the stipulated minimum amount of CPD hours order to maintain their practicing license.

The Nursing Council of Kenya seeks to improve nursing education and practice standards in Kenya. The development of a CPD framework provides an environment for the Council not only to regulate CPD activities but also monitor and evaluate the impact of these activities towards improvement of service delivery. This CPD framework for nurses has therefore been developed using various toolkits of like-minded Councils in the region based on available literature and also through adoption of best practices as agreed in the ARC forum of 2011. The Framework was also developed through invaluable contributions and involvement of key stakeholders within the nursing sector in the country. The Framework stipulates minimum guidelines for all players that are involved in CPD. The NCK will use the framework to standardize, regulate, strengthen and harmonize CPD programmes/

activities, strengthen processes and linkages, ensure equal access to CPD programmes to nurse professionals, and identify key areas that nurse professionals need for CPD trainings. The Council will use the Framework to benchmark with international best practices, accredit CPD providers and advocate for support in capacity building/training of nurse professionals for provision of safe, ethical, competent and quality care to the population.

1.6 Communication Strategy for CPD Activities/Feedback

The effective communication of CPD activities is essential in ensuring that nurses are aware of opportunities for accessing training. It is equally important that all stakeholders provide feedback on how well CPD is impacting on service delivery. It is thus expected that the communication of this CPD framework will be undertaken through, but not limited to conferences, Annual General Meetings, NCK circulars, professional associations (NNAK and other associations recognized by NCK); accredited training institutions and hospitals/health facilities (private and public) as well as through the Ministries of Health, NCK Website; appointed CPD county coordinators; CPD providers, FBOs and even through Non-Governmental Organizations (NGOs).

Standards and Guidelines For Accrediting The CPD Programme

2.0 CPD Content

The content of CPD will be informed by the NCK core competencies for nurses (section 2.2) and will be determined to ensure quality and safe nursing practice. In addition it will be determined by national and county health priorities as well as focus on identified individuals training needs.

CPD participants/users will undertake CPD activities relevant to current and future practice in form of formal educational programmes which will lead to qualifications for basic, undergraduate, graduate or post graduate levels. They will also participate in seminars, conferences, workshops, research activities including making presentations in seminars or conferences. CPD activities will also include short courses ranging between three days and six months.

2.1 Core Competencies for Nurses

The following are the competences (comprising knowledge, skills and attitudes) required of a nurse that will inform CPD content development and delivery:

Core competencies

- Functions in accordance with legislation and common law affecting nursing practice.
- Conducts nursing practice in a way that can be justified.
- Manages the care of individuals and groups.

- Protects rights of individuals and groups in relation to health care.
- Engages in collaborative practice to achieve client outcomes.
- Accepts accountability and responsibility for own actions within nursing practice
- Provides a supportive environment for colleagues.
- Acts to enhance the professional development of self and others.
- Manages the use of staff and physical resources.
- Values research in contributing to developments in nursing and improved standards of care.
- Engages in ethically justifiable nursing practice
- Carries out a comprehensive and accurate nursing assessment of individuals and groups in a variety of settings.
- Protects the rights of individuals and/or groups.
- Formulates a plan of care in collaboration with individuals and groups.
- Engages in activities to improve nursing practice.
- Implements planned nursing care to achieve identified outcomes within scope of practice.
- Develops therapeutic and caring relationships.
- Evaluates progress towards expected outcomes and reviews and revises plans in accordance with evaluation data.
- Fulfils the conduct and ethical requirements of the profession.
- Contributes to the maintenance of an environment which promotes safety, security and personal integrity of individuals and groups.
- Acts to enhance the professional development of self.
- Communicates effectively with individuals and groups.
- Collaborates with other members of the health care team

2.2 Standards and Guidelines for Accrediting CPD Activities and programmes

The CPD activities/programmes must comply with the following minimum standards and must be aimed at improving performance. The criteria for approval are:

- Evidence based/need based
- Have clear learning outcomes
- Have specified target audience and criteria for selection,
- Specified content and learning activities
- Specified reference /teaching materials
- Have specified title, contact hours and CPD points, contact details of participants, and feedback /evaluation mechanism for outcomes achievement
- Have valid and reliable monitoring and evaluation tools
- Be relevant to the individual, profession and to institution(s) served by the nurse practitioner as well as to current and future work
- Focus on improving the quality of nursing services
- Be accessible, available and affordable to the participant/user and of good quality with a timeframe for completion
- Be ethically and legally sound
- Be socially acceptable/sensitive to the participants/users
- Be conducted using adult learning principles
- Planned and structured to meet individual's, profession's and institutional goals
- Specified type/form of certificate to be awarded.

2.3 The CPD Programme and Activity Accreditation Process

In order to be eligible for CPD hours, programmes/activities may be delivered in a variety of flexible formats that provide an opportunity for real time interaction with colleagues and/or instructors. Eligible learning formats include live lecture, discussion, demonstration or small group workshop, audio, and interactive video conference or webcast. Archived audio, video or webcast must be viewed simultaneously by two or more colleagues in order to be eligible for CPD Hours. CPD main speakers may include nurses, doctors, and officials and members of professional nursing associations, partners and non C medical/nursing professionals provided that the content they present addresses topics relevant to health/nursing context and enhances nurses' competence and performance.

2.4 Requirements for Evidence of CPD Educational Planning

- 2.4.1: *Evidence of having undertaken a CPD needs assessment and that the data so obtained have been used in planning the CPD activity.* Data about needs can be obtained by conducting a survey of the target group of professionals; asking the opinion of past CPD participants; conducting key informant interviews with experts, such as employers and Ministry of Health (MOH) officials; and assessing available health statistics such as mortality and morbidity data.
- 2.4.2: Verification that CPD learning objectives, content, methodology, learning materials and evaluation to be used are selected by CPD committee based on data from needs assessment.
- 2.4.3: Desired learning outcomes, in terms of knowledge, skills and/or attitudes and plans to communicate them to the target audience before the activity is conducted.
- 2.4.4: Confirmation that CPD educational formats are selected based on the most effective and efficient methods of meeting the stated learning objectives.
- 2.4.5: Confirmation that course facilitators are selected by a relevant professional planning group based on expertise in the field and the resources available. Curricula vitae of the selected facilitators should be appended for committee review.
- 2.4.6: Proof that time allocated for the activity is adequate and allows for adequate rest periods between sessions. Time must also be allowed at the end of the sessions for participants and course facilitators to interact.
- 2.4.7: Clear indication of CPD points allocation to the activity and its basis if not aligned to this framework.
- 2.4.8: A selection of promotional brochures and fliers for the CPD activity to be disseminated widely among the target group of professionals to allow as many as would like to apply and participate in the CPD programme/activity.
- 2.4.9: Assurance that enduring materials, handouts, videotapes, DVDs and web-based materials used for self study are of the highest quality possible.

- 2.4.10: An evaluation of all CPD activities, plans and tools to measure effectiveness in meeting the identified needs, such as measured satisfaction of knowledge, skills and/or attitudes acquired by the participants.
- 2.4.11: Plans to evaluate the impact of the activity on the practice and health status of the community(ies) served.
- 2.4.12: Plans for overall evaluation based on CPD mission and previous year's experiences.
- 2.4.13: Plans for annual CPD needs assessment survey of the target group of health professionals.
- 2.4.14: Evidence of improvements made in the CPD programme based on such feedback.

2.5 Guidelines for Allocation of CPD Points

The NCK is mandated to ensure that all nurses requiring licensure and retention in the CPD register/roll acquire minimum of 40 CPD hours per year in line with DPM's circular. All CPD activities under category I and II must be approved by the NCK. The NCK provides the following guidelines for the accumulation of CPD points.

Category I (formal educational activities leading to qualification)	A minimum of one semester of 6 months with minimum of 15 contact hrs of active face to face learning per week=5 CPD hrs	CPD points 1 CPD hr= 3 CPD points
Certificate Course (6 months of a five (5) hours of face to face teaching)	5 CPD hrs	15 points
Higher Diploma (12 months-18 months)	10-15 CPD hrs	30-45 points
Post Graduate Diploma (12 months)	10 CPD hrs	30 points
Masters(1-2 yrs)	10-20 CPD hrs	30-60 points
PhD (3 years)	30 CPD hrs	90 points
Upgrading courses ECN-KRCHN (2 ½ yrs)	25 CPD hours	75 points
KRCHN-BSN (2 ½ yrs)	25 CPD hours	75 points

Category II (informal educational activities including self-directed and experiential learning)	CPD points
Attending (Seminar, workshops, conferences)	1 point
Presenting/facilitating (seminars, workshops, conferences)	2 points
Participating in research as member of team	2 points
Participating in development of materials (policies, protocols, guidelines)	3 points
Undertake self-directed learning (online/distance learning etc)	1 point
Attend short courses of minimum three weeks to five months active learning	2 points
Other voluntary activities (listed in section 2.6)	1 point

2.6 Scope of CPD Activities and Programmes

The scope of CPD activities shall be categorized into mandatory and voluntary. Voluntary will be further categorized as formal and informal including self directed and experiential learning. The scope provides a variety of educational activities and services appropriate to the needs of nurses and which earn CPD points.

2.6.1 Mandatory CPD Activities and Programmes

The following are deemed to be the mandatory CPD activities and programmes:

- Nursing discipline related seminars/workshops
- Scientific conferences relevant to the nursing profession.
- Courses as deemed necessary by the institution (may be to maintain specialty certifications)

2.6.2 Voluntary CPD Activities and Programmes

The following are voluntary CPD activities/programmes

- Formal upgrading courses, short courses
- Publishing (papers/reports etc)
- Participating in research activities, conferences, annual general meetings of professional associations, seminars, workshops
- Chairing task forces/technical working groups

- Receipt of recognitions (national, county, industrial or professional association) and awards approved by the NCK
- Undertaking courses that lead to development of new skills
- Introducing positive change
- Active membership in professional groups and committees
- Developing protocols, policies or guidelines or materials relevant to the profession
- Lecturing or teaching if it is not own job description
- Been an examiner/mentor/preceptor
- Voluntary work if it is related to the scope of practice. E.g. Church, chiefs' *barazas*
- Facilitation of training if it is not own job description
- Moderation of external exams.
- Self-directed and experiential learning (on the job opportunities).

2.7 Activities and programmes NOT considered as CPD

The following are activities and programme not considered as constituting CPD:

- Deployment to another department
- Seconded to an organization/unit on the same capacity
- Routine activities such as treatment, ordering of drugs, handing over report, etc.

Standards and Guidelines for CPD Participant/User

3.0 Requirements for CPD Participant/User

Participants wishing to undertake CPD must adhere to the following:

1. Ensure renewal of practice license is done as required by the regulator
2. Avail certificate of attendance/completion of CPD
3. Be certified registered/enrolled nurse
4. Meet/comply with the minimum requirement points/hours set by NCK
5. Evaluate CPD sessions/programme/activity
6. Collaborate with national/county CPD coordinators when necessary
7. Familiarize with the NCK CPD framework.

3.1 Compliance Threshold Criteria for CPD Participant/User

Non-compliance is the failure of a participant/user to annually obtain 40 hours of CPD per year for re-licensure in three (3) years in order to earn a total of 120 CPD hours as determined by the Nursing Council of Kenya. For the CPD provider, the non compliance will be if they provide CPD without a valid license from the Nursing Council of Kenya.

3.2 Documentation of Evidence for Completion of CPD Activity/Programme

Nurses engaged in category I or II, mandatory or voluntary CPD activities/programmes may claim CPD points in each period they undertake the CPD activity/programme. However, all participants or users of CPD activity/programme must comply with the following guidelines:

- a) Documentary evidence should be provided in the form of a transcript of subjects/courses/activity undertaken and successfully completed or any other relevant documentation which verifies the number of hours of active learning, including clinical learning and self directed learning conducted online.
- b) The documentary evidence must outline the following:
 1. Description of activity/programme, category (I or II) and period of participation
 2. Learning objectives,
 3. Course content(for category I CPD activities)
 4. Relevance to current or future work,
 5. Hours of active learning (contact hours) and points gained
6. Brief description of what has been learned.

NB: *These may be filled in the logbook or submitted online to the CPD county coordinator or NCK website.*

3.3 Penalty for CPD Participant and User Non-compliance

All individual nurses have responsibility and should demonstrate accountability in order to ensure that services provided are safe and that they protect the public. Individuals have an ethical responsibility to their patients and clients, their professions, and themselves to practice competently and safely. The CPD should be an integral part of their professional life whether voluntary or mandatory. The NCK will impose penalty for noncompliance if the participant/user shows the following:

1. Less than 50% non-compliance, for which the NCK shall issue a warning letter to the nurse, indicating the period required for remedying/correcting the gaps to ensure compliance;
2. 100% non-compliance, for which the nurse will be required to explain in writing reasons for non compliance, and complying within 2 weeks of receiving the warning letter. Thus:

- If the explanation given is acceptable, the nurse will be given six months to comply with the CPD requirements. Evidence of such compliance must be received by the CPD national/ county coordinator within two weeks of the end of the six month period;
- Should the nurse not comply with the requirements, his/ her name will be forwarded immediately to the Registration and Licensing Committee of the Nursing Council of Kenya. Depending on the evidence provided, the Committee may decide to grant a final additional six months to the nurse to comply with the CPD requirements;
- Should the nurse still not comply with the CPD requirements within the second six months period, one of the following actions may be taken:
 - i. A remedial programme of Continuing Professional Development and training as specified by the CPD national or county coordinator, or;
 - ii. Suspension from the register or roll.

3.4 Appeal Process

A participant/user may appeal against the penalty on the following grounds:

- If there is an error in CPD points allocation
- If the regulatory authority misplaced/lost or did not process duly-filled application forms
- If the user had earlier informed the regulatory authority the reason for inability to adhere to the requirements
- For any other reason not outlined in these guidelines that the NCK may be requested to deliberate on, provided the individual avails adequate proof.

3.5 Exemption Process

The exemption process for the user shall be guided by the following criteria:

- Proof of illness for over 6 months
- Appropriate reason, such as, special duty given by a higher authority
- Disciplinary issues taking a period of more than 6 months.

Standards and Guidelines for Accrediting CPD Providers

4.0 Scope of CPD providers

The NCK recognizes that the CPD environment is dynamic and actors are many and varied. The scopes of CPD providers thus include, and are not limited to the following:

- Health facilities at national and county levels (public and private)
- Training institutions (middle and tertiary institutions-public and private)
- Private practitioners (Nursing homes, clinics, etc)
- Faith based organizations (under KEC, CHAK, SUPKEM or other)
- Non Governmental Organizations (for profit, not-for profit, development and implementing partners)
- Donor agencies
- Professional associations
- Pharmaceutical/medical technology consumer organizations
- Research institutions
- Ministries of Health and related special programmes divisions (NAS COP, DRH, DOMC, etc)
- Development/implementing partner hubs

4.1 Accreditation Standards and Guidelines for CPD Providers

In order to regulate training and practice, the NCK requires that CPD providers must meet the following standards/guidelines.

4.1.1 Criteria for Selecting CPD Providers

An individual/organization/facility wishing to apply for consideration as a CPD Provider must be:

- Approved/accredited by NCK or certified/licensed to practice by relevant professional regulatory body
- A Member of a professional body
- Have qualified and competent facilitators, trainers, teachers, instructors with higher specialty qualifications than the CPD content expected to be provide
- Provide capability statement and evidence as a CPD provider and have appropriate teaching and learning infrastructure for the provision of CPDs
- Meet the NCK requirements (see section 2.4) for CPD programmes/ activities
- Show evidence of physical location at national, county and sub county levels
- Market and advertise the CPD programmes to ensure access of information to all
- Receive an accreditation certificate before commencement of training
- Comply with inspections of premises, programmes, facilitators and related resources as and when the NCK deems necessary
- Display visibly the accreditation certificate to ensure CPD participants/users can see it
- Ensure CPD is provided by adequate, skilled/qualified teachers, trainers, facilitators who use effective teaching and learning approaches matched to content and the level and type of learners.
- Use appropriate and relevant infrastructure, equipment and learning materials

- Use valid and reliable assessment methods that provide feedback on whether the learning objectives have been met
- Document and retain information about programme design and content; number of contact hours/points; names and contact details of participants; and evaluation outcomes
- Minimise any conflicts of interest related to commercial supporters and willingly disclose any conflicts of interest to participants at the beginning of the CPD activity/programme.

Note: *The employer must provide: Five days (40 hours) per year projected CPD time as the minimum time granted to support nurses' CPD activities/ programmes, beside the existing statutory and mandatory training and formal study leave arrangements. **This is a realistic amount of time, and is in keeping with existing regulatory and professional body requirements.***

4.1.2 Accreditation Process for a CPD Provider:

- Must apply for authorization/accreditation to NCK provide CPD activities/programmes if targeting nurse audience (if not institution/individual/organization/facility already approved by other NCK recognized authorizing agent, e.g. Council/ Board, MoH etc)
- Must fill a NCK comprehensive application form to enable NCK conduct an initial appraisal of the CPD provider
- Must pay the prescribed accreditation fee
- Must provide all necessary documentation required by the NCK
- Must show evidence of need to conduct the CPD activity
- Must undertake face to face interviews with NCK appointed authority
- Must comply with NCK/MoH Policies and procedures pertaining to training institutions/trainers
- Must be familiar with and adhere to the NCK CPD framework.

4.2 Functions of an Accredited CPD Provider

An accredited CPD Provider will be expected to undertake the following functions.

- Participate in training needs assessment
- Develop, deliver and assess training content
- Engage in monitoring evaluation and continuous improvement of the CPD
- Collaborate with relevant authorities at national and county level.
- Develop and publish a CPD training calendar
- Adhere to stipulated guidelines on CPD cost charges/fees.
- Develop or procure relevant training resources (e.g. materials, references, infrastructure such as library, websites with web based learning links and materials, etc)
- Submit quarterly training reports to the regulating body.
- Develop an evaluation process by the consumers that should form part of the quarterly report.
- Continuously undertake quality improvement measures for CPDs to address gaps determined by evaluation findings and changing patterns of health care delivery.
- Award certificates to CPD participants
- Ensure that CPD accreditation is renewed as required by the NCK
- Market CPD activities
- Renew own accreditation status as required by NCK.
- Participate in the CPD provider forums.
- Collaborate with CPD coordinators in all matters of CPD provision

4.3 Requirements for Documentation of CPD Activities

CPD providers are required to keep written confirmation of registration of participants at CPD programmes as proof of attendance. The materials such as agendas (programmes), papers, attendee lists and discussion notes should be retained on file until the end of the year following the year in which the CPD event or activity was completed. In addition, a written report of the activities undertaken and attendants list should be forwarded to the Nursing Council of Kenya. The CPD provider has the responsibility for safe storage of documents for further and random checks by the NCK.

4.4 Penalty for Non compliance with Accreditation Requirements

All employers, professional associations, training institutions, health facilities/clinics, FBOs, NGOs, and individuals that have been accredited as CPD providers have responsibility and should demonstrate accountability to ensure safe and quality health services are provided to the population of Kenya. Providers should therefore aim at 100% compliance with the above requirements. Penalties for non-compliance will be imposed if the CPD Provider shows the following:

4.4.1 Less than 20% non-compliance:

- a) NCK shall issue a warning letter to the provider indicating the period required for remedying/correcting the gaps to ensure compliance and therefore provision of CPD activity/me;
- b) If at the end of the specified period the Provider has not addressed the gaps, the Council shall not issue a certificate of compliance and the Provider shall start the process of accreditation again.

4.4.2 Less than 25% non-compliance:

- a) The Council will issue a letter with a specified penalty fee for the provider to pay and a period specified for compliance with requirements;
- b) If the Provider does not comply with all the provisions in section 4.5.1 and 4.5.2, the Council shall issue a letter revoking prior authorization and will deregister and remove the CPD provider from the CPD provider list. The Provider shall NOT be authorized/re-accredited in the next accreditation period until a 2-3 year cycle elapses.

4.5 Appeal Process

A CPD provider may appeal if:

- i. Prior information had been given to the regulatory authority indicating the reason as to why the provider was unable to comply with the requirements;
- ii. The provider is not satisfied with the penalties imposed.

4.6 Exemption Process

The exemption process for the CPD Provider shall be guided by the following criteria:

- i. Proof of illness for over 6 months
- ii. Appropriate reason e.g. special duty given by higher authority
- iii. Disciplinary issues for more than 6 months

General Guidelines for CPD Coordinators

5.0 Introduction

For the purpose of effective implementation of CPD activities there shall be coordinators at National, county and sub county tiers.

5.1 General Criteria for Selection of CPD Coordinators

Coordinators must:

- a) Be individuals approved/accredited by NCK or Certified/Licensed to practice by relevant professional regulatory body recognized by NCK
- b) Should submit a curriculum vitae
- c) Active member of nursing or any other health profession
- d) Active member nursing or a health professionals association
- e) Have valid practice license
- f) Undergo CPD coordination orientation.

5.1.1 Specific Guidelines for Selection of National Tier CPD Coordinators

The coordinator must:

- a) Be appointed by the NCK
- b) Be working in the national level of health service delivery/ administration

- c) Have a valid practice license with NCK
- d) Have undergone CPD coordination orientation
- e) Meet the minimum selection criteria
- f) Must be a member of a professional body
- g) Have a certificate of good conduct
- h) Be ICT compliant
- i) Demonstrate skills of a team player
- j) Have minimum qualification of a Bachelor's Degree in a health related discipline.

5.1.2 Specific Guidelines for Selection of County Tier CPD Coordinators

The coordinator must:

- a) Be working in the county
- b) Have a valid practice license with NCK
- c) Have undergone CPD coordination orientation
- d) Meet the minimum selection criteria
- e) Be member of a professional body
- f) Be of good professional standing
- g) Be ICT compliant
- h) Demonstrate skills of a team player
- i) Have a minimum qualification of Diploma in Health related discipline.

5.2 Roles and Functions of National CPD Coordinators

The national tier coordinators will have the following roles:

- a) Conduct national training needs assessment
- b) Determine capacity of CPD providers
- c) Engage in NCK policy development, implementation and dissemination

- d) Participate in monitoring and evaluation of CPD activities
- e) Coordinate the selection process of CPD providers at national and county tiers
- f) Document all CPD activities and share with NCK
- g) Monitor CPD activities implementation
- h) Be the Liaison person between CPD user/participant/provider and the NCK with regard to recording of CPD programmes/points/hours
- i) Report on any malpractices/inadequacies in CPD provision
- j) Be a member of the NCK CPD user/participant, provider appeal process board/committee
- k) Compile all county quarterly reports and submit to the Council
- l) Advice and recommend potential CPD providers for accreditation.

5.3 Roles and Functions of County CPD Coordinators

The county tier coordinators will have the following roles in the county:

- a) Participate in county/sub county training needs
- b) Disseminate and implement NCK CPD framework
- c) Submit quarterly reports to the national coordinator
- d) Conduct CPD provider appraisals and submit quarterly reports.
- e) Be the liaison person between the CPD providers/users and NCK Headquarters
- f) Participate in monitoring and evaluation of CPD activities at the County level
- g) Identify specific CPD needs.
- h) Coordinate CPD Providers to ensure implementation of the NCK CPD framework
- i) Advice and recommend potential CPD providers
- j) Ensure CPD users have access to information pertaining to CPD activities/programmes/requirements.

5.4 Roles and Functions of Sub County CPD Coordinators

The sub county tier coordinators will have the following roles in the sub-County:

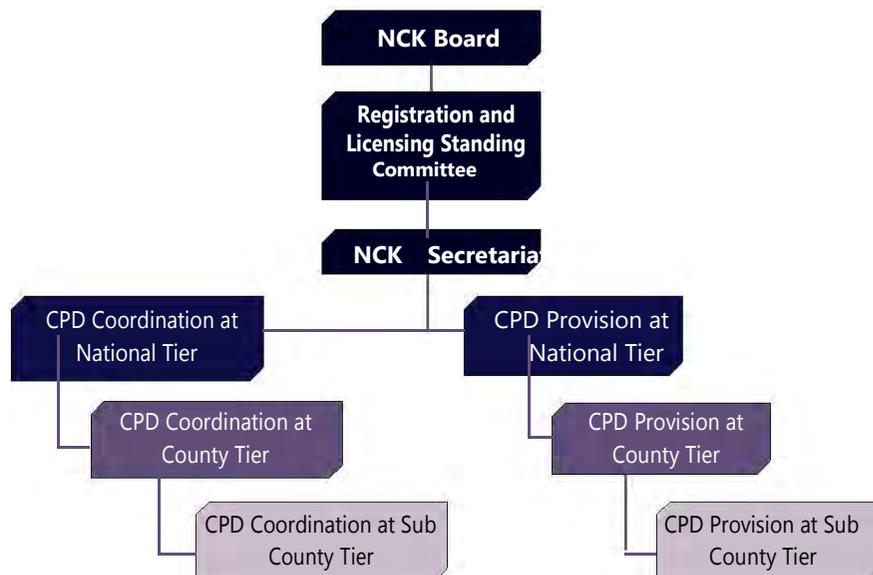
- a) Write quarterly reports and submit to county coordinators.
- b) Liaison with County Coordinators
- c) Monitor and evaluate CPD activities
- d) Identify specific sub county CPD needs.
- e) Coordinate CPD activities
- f) Advice and recommend potential CPD providers
- g) Ensure CPD users have access to information pertaining to CPD activities/programmes/requirements.

The CPD Framework Implementation Structure

6.0 Introduction

The CPD framework will be implemented in the three tiers in line with the Ministry of Health devolution structure in order to ensure that CPD provision and regulation meets the wider national health priorities of improving service delivery through improved health worker competences and performance. An indicative county map of Kenya is carried as annex 3 to this CPD framework in order to show the importance of County Coordinators in the implementation of the framework.

On the other hand the organogram below is illustrative of the structure:



6.1 CPD National Tier Structure Functions

The key roles and functions under the national tier will be the following:

- a) Policy formulation
- b) Approval/accreditations of CPD programmes and providers
- c) National coordination of CPD activities.
- d) Selection of coordinators to serve at county and sub county tiers
- e) Formulation and development of CPD regulatory tools
- f) Monitoring and evaluation of CPD programmes and Providers
- g) Selection and accreditation of CPD providers
- h) Training needs assessments
- i) Appraising CPD providers
- j) Provision of CPD activities
- k) Advice education and registration committee of NCK board on matters of CPD

6.2 CPD County Tier Structure Functions

The key roles and function under the County tier will include the following:

- a) Policy implementation
- b) Coordination of CPD at county level
- c) Quarterly reporting
- d) Liaison with NCK HQ
- e) Monitoring and evaluation at county level
- f) Identify specific county CPD needs.
- i) Provision of CPD activities

6.3 CPD Sub County Tier Structure Functions

The key roles and function under the Sub-County tier will include:

- a) Quarterly reporting
- b) Liaison with County Coordinator
- c) Monitoring and evaluation at sub county level
- d) Identifying specific sub county CPD needs.
- e) Coordination CPD Providers
- f) Provision of CPD activities

Monitoring and Evaluation of CPD Activities and Programmes

7.0 Introduction

The monitoring and evaluation of the CPD activities and programmes will be carried out at all levels of the implementation structure. The framework and verifiable indicators to assess the impact of CPD provision in Kenya will be reviewed every **three years** through stakeholder engagement and participation.

7.1 Verifiable Indicators

The Verifiable indicators for the M&E framework will include but are not limited to the following:

- a) Numbers of participants and providers meeting minimum CPD requirements (disaggregated in numbers, gender, county and programmes)
- b) Numbers of coordinators trained (disaggregated in numbers, gender, county, age and programmes)
- c) Numbers of applicants interested in CPD provision (disaggregated in numbers, gender, county and programmes)
- d) Numbers of CPD coordinators orientation packages conducted (disaggregated by age, gender, county)
- e) Numbers of CPD Providers accredited (disaggregated in type, numbers, gender, county)
- f) Numbers of Nurses licensed/renewing their practice licenses (disaggregated in numbers, age, gender county)

- g) Numbers and quality of supportive supervision visits done (disaggregated in numbers, sex, county and programmes)
- h) Numbers and quality of CPD programmes accredited and provided (disaggregated in types, numbers)
- i) Numbers and quality of reports submitted by providers (quality of reports)
- j) Numbers and quality of reports submitted by coordinators (quality of reports).

Select Bibliography

- 1) NCK (2009): Manual of Clinical Procedures, 3rd ed. Nairobi
- 2) NCK (2012): Standards of Nursing Education and Practice. 2nd ed. Nairobi
- 3) African Health Professional Regulatory Collaborative for Nurses and Midwives (2011): A toolkit for Developing a National CPD Framework: Continuing Professional Development for Nurses and Midwives, (CDC, ECSA, Commonwealth Secretariat the Commonwealth Nurses Federation).
- 4) Continuing Professional Development Framework for Swaziland (unpublished material).
- 5) The Uganda Health Professional Council Guidelines and standards for Accreditation of Continuing Professional Development for Health Workers (2008)
- 6) Continuing Professional Development Framework for Lesotho (unpublished material)

ANNEX 1: List of NCK CPD Stakeholders Workshop held on 11th April 2012 at PCEA Guest House

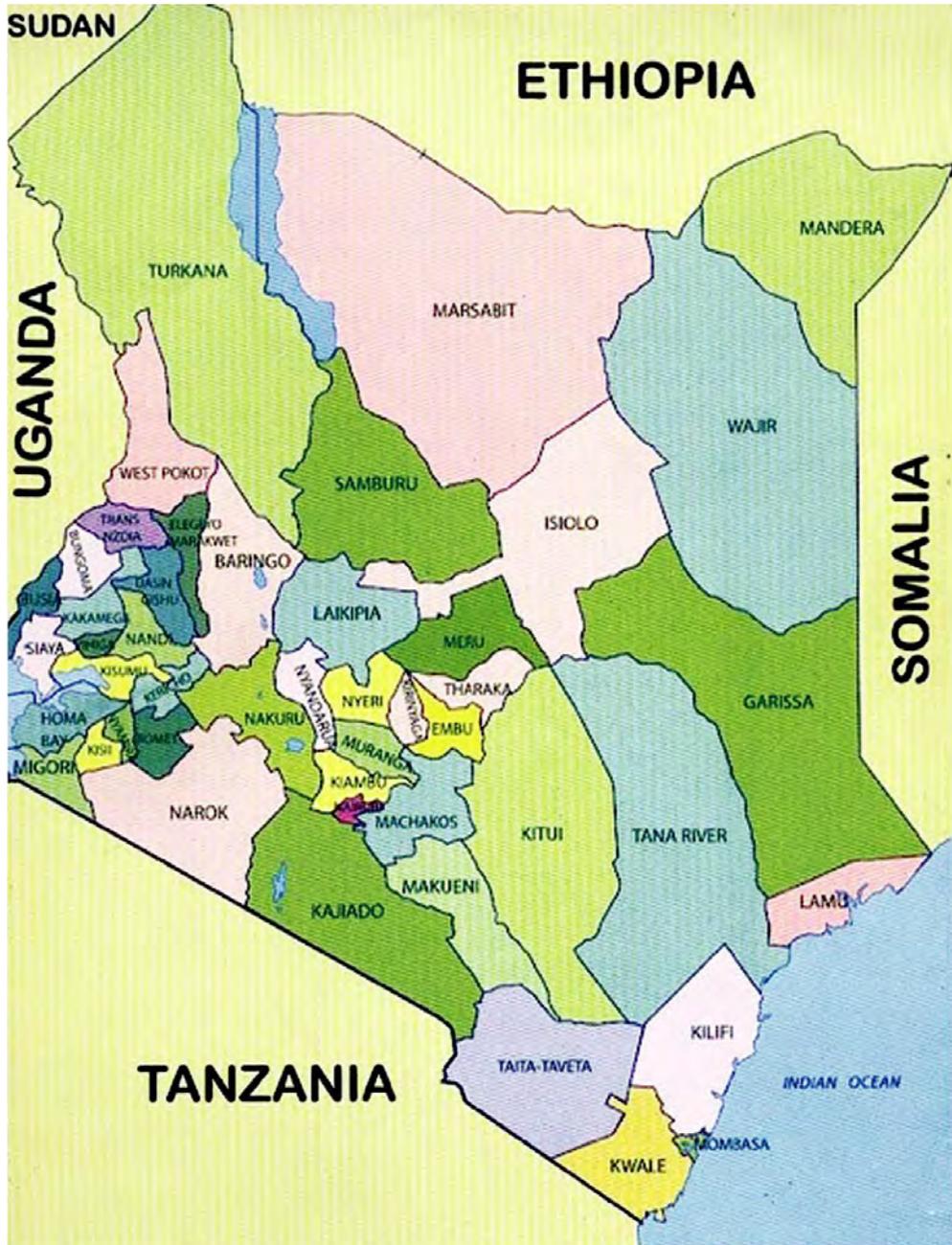
No	Name of Participant	Organization	Title	Email	Contact
1	Dennis N. Mose	Malindi District Hospital	Nursing Officer	nyandwaromuse@yahoo.com	0720-489130
2	Caroline Cherotich	Moi Teaching & Referral Hospital	Nursing Officer	carol8utto@gmail.com	0720-275411
3	Fredrick Ochieno	Nursing Council of Kenya	Nursing Council of Kenya Officer	fredochieno@gmail.com	0722-427797
4	Grace Omulogoli	Kenyatta Hospital	ACN	graceomulogoli@yahoo.com	0722-634251
5	June Mwendu	Capacity Kenya	Training Systems Manager	jmwendu@intrahealth.org	0721-763633
6	Dr. Anastasiah Kimeu	Capacity Kenya	Training Programme Manager	akimeu@intrahealth.org	0720-318001
7	Evangeline K. N Mugoh	Nursing Council of Kenya	Registration Officer	evagelinemugoh@yahoo.com	0723-903137
8	Judith C. Kudoyi	Nursing Council of Kenya	Registration Officer	judithkudoyi@yahoo.com	0722-245063
9	Thaddeus Mayaka	Kisii Level 5 hospital	Chairman KPNA	mayakathaddeus@yahoo.com	0725-886225
10	Ben Kamanga	DFMH	Chief Nursing Officer	kamanga2004@yahoo.com	0717-825048
11	Yasmin Armasi	Aga Khan Hospital	Dean	yasmin.amarsi@aku.edu	0736-997297
12	Margaret Sirima	Nairobi hospital	Deputy principal	margretsirima@nbihosp.org	0722-584928
13	Ruth Muthuku	Machakos Level 5 Hospital	Nursing officer	ruthmuthuku@yahoo.com	0725-3342289
14	Florence Mugi	Nursing Council of Kenya	Programme Assistant	florencemugi@yahoo.com	0722-480579
15	Priscilla Najoli	Nursing Council of Kenya	Standards and Ethics Officer	pnajoli@yahoo.com	0723-841996
16	Grace Ngaruiyu	Kenyatta University	Lecturer	gracestevevanjiku@yahoo.com	0725-982497
17	Elizabeth Oywer	Nursing Council of Kenya	Registrar	eoywer@nckkenya.org	0733-844793

ANNEX 2: List of NCK CPD TWG Stakeholders Workshop Held on 19th and 20th July 2012 at Fairview Hotel

No	Name of Participant	Organization	Title	Email	Contact
1	June Mwende	Capacity Kenya	Training Systems Manager	jmwende@intrahealth.org	0721-763633
2	Dr. Anastasiah Kimeu	Capacity Kenya	Training Programme Manager	akimeu@intrahealth.org	0720-318001
3	Evangeline K. N Mugoh	Nursing Council of Kenya	Registration officer	evagelinemugoh@yahoo.com	0723-903137
4	Priscilla Najoli	Nursing Council of Kenya	Standards and Ethics Officer	pnajoli@yahoo.com	0723-841996
5	Elizabeth Oywer	Nursing Council of Kenya	Registrar	eoywer@nkenya.org	0733-844793
6	Jeremiah Mainah	National Nursing Association of Kenya	Treasurer	lywaleen@yahoo.com	0727-830044
7	Sarah Burje	Nursing Council of Kenya	Council Officer	sarahbrj1@gmail.com	0723-703517
19	Jeremiah Maina	NNAK	Treasurer		0727-830044
20	Lucia Buyanza	National Nurses Association of Kenya	Project Co-ordinator	lucia.buyanza@nnak.or.ke	0723-233280
21	Jane Wahome	Mathari Hospital	Nursing officer	wahomejane@yahoo.com	0722-319608
22	Emily Muchina	Kenya Methodist University	Lecturer	emillienm@yahoo.com	0722-627793
23	Sarah Burje	Nursing Council of Kenya	Council Officer	sarahbrj1@gmail.com	0723-703517
24	Jane Achola	KMTC	Lecturer	janeachola@gmail.com	0722-790599
25	Jane Wanyama	Aga Khan Hospital	Nurse Administrator	jane.wanyama@aku.edu	0737-521659
26	Rose Wakoli	GCH	QA Nurse	wakolir@yahoo.com	0716-073679
27	Sophie Ngugi	Nursing Council of Kenya	Officer	sngugi@nkenya.org	0722-852949

No	Name of Participant	Organization	Title	Email	Contact
28	Fridah Mburu	Mater Hospital	CPE	fmburu@materkenya.com	0712-423638
29	Fatumar Aubos	DRH MOPHS	Officer	felagane2002@yahho.com	0729-475701
30	Francis Gwana	MOMs	Senior Nusring Officer	francis3gwama@yahoo.com	0722-537263
31	Milika Kuloba	MOMs	Education Nursing Officer	kulobamilka@yahoo.fr	0700-044150
32	Kevin Lanyo	CDC Emory	Programme Manager	kevin.lanyo@emorykenya.org	0726-652821
33	Eva Wanjiku	Nursing Council of Kenya	IT Officer	ewanjiku@nckeny.org	0717-649241
34	Esther Kiambati	Pumwani Hospital	Nursing officer	estherkiambati@yahoo.com	0721-263014
35	Florence Chandi	City Council of Nairobi	ACNO	kariniflo@yahoo.com	0724-862232
36	Dr. P Mwaniki	JKUAT	Snr Lecturer	p.mwanikik@yahoo.com	0722-429596
37	Anastacia Kiamwendia	PDMS	DPNO	kamwenelenne@yahoo.com	0722-869977
38	Dr. Esther Ogara	MOMS	Head /ehealth CPD	amma43@hotmail.com	0722-610979
39	Mary Njuguu	AIC Kijabe Hospital	Staff Development co-ordinator	staffdev.knokijabe.net	0733-235431
40	Luke S. Kodambo	National Nurses Association of Kenya	Chair	nnakenya2@gmail.com	0722-401213
41	Mwangi Kabiru	Capacity Kenya	HRIS Officer	mkabiru@intrahealth.org	0733-296184
42	Hilda Githaiga	Capacity Kenya	Programme Assistant	hgithaiga@intrahealth.org	0714-639976

ANNEX 3: County Map of Kenya*



* Each county with a coordinator.



Nursing Council of Kenya

P.O Box 20056 – 00200 Nairobi
Kabarnet Lane, Off Ngong Road, Nairobi
Tel: 0721920567/0733924669
Email: info@nckeny.org
www.nckeny.com

Professional Development Framework (CPD)
Kenya

