



Rwanda Medical Council (RMC)

**POLICY ON CONTINUING PROFESSIONAL
DEVELOPMENT**

Kigali, July 2010

FOREWORD

The Rwanda Medical Council is the regulatory body for the practice of medicine in Rwanda.

In pursuance of its statutory obligations and functions, the Council has approved a Continuing Professional Development (CPD) Program to improve, renew, and update the skills and ability of all doctors and to ensure that appropriate, high-quality health services are being provided to patients.

The ultimate goal of the CPD Program is to improve health care delivery to Rwandans in order to achieve the Millennium Development Goals (MDGs) as adopted by the Government of Rwanda. It is also designed to empower Rwandan physicians and dentists and the health sector team to deliver quality service to the populace. The world is now a global village, but Rwandans, as well as citizens of the world who live in Rwanda, must be able to access quality health care without traveling abroad.

Accordingly, the Rwanda Medical Council reminds all medical practitioners of the importance of participating in suitable continuing professional development programs so they will update their knowledge and skills, and enhance their ability to render appropriate services to patients. The Council has directed that participation in the continuing professional development programs is a mandatory requirement for license renewal by all doctors.

Dr. Richard Sezibera
Hon. Minister of Health

ACKNOWLEDGMENT

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We thank the following CPD Working Group members for their time and determination in reviewing and further developing the various drafts of this policy into a final document.

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ACRONYMS

CHUB	Centre Hospitalier Universitaire de Butare
CHUK	Centre Hospitalier Universitaire de Kigali
CME	Continuing Medical Education
CPD	Continuing Professional Development
GOR	Government of Rwanda
HSSP-II	Health Sector Strategic Plan
ICT	information, communication, and technology
KFH	King Faisal Hospital
MDG	Millennium Development Goal
MOH	Ministry of Health
PBL	performance-based learning
RMC	Rwanda Medical Council

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BACKGROUND

In recent years, Rwanda has taken significant steps toward not only providing comprehensive medical care for every citizen but also improving the quality of medical care provided. Examples of the latter include a revision of the medical school curriculum, initiation of post-graduate specialty training in the major medical specialties, and providing the legal mandate for physician licensing and specialty certification to the Rwanda Medical Council. Since 1995, some continuing medical education has been available through the annual conferences of the Faculty of Medicine of the National University of Rwanda and the Rwanda Medical Association, together with occasional conferences sponsored by professional medical associations. However, many physicians have not been able to participate in these conferences, and there have not been any structured and ongoing educational activities based on identified needs of Rwandan physicians. Given the rapid pace of new research and developments in all areas of medical care, physicians must continue to update their knowledge and skills on a regular basis to keep up with the benefits of medical innovations and research findings.

The Rwanda Medical Council accepted the challenge of developing a national Continuing Professional Development (CPD) Program for all of its members at the completion of a workshop in February 2009 that was attended by the Minister of Health and more than 100 participants from all health sectors in Rwanda. The workshop described the purpose and role of CPD and developed an initial strategy for the introduction of CPD activities for all medical practitioners.

This workshop resulted in a consensus among the attendees that CPD should be made available as soon as possible for all members of the Rwanda Medical Council, and that it should be a required element of their membership. It was also established that CPD should be tailored to both medical specialties and location, with a special focus on making it available to those working in the rural district hospitals and clinics. A Working Group of the Rwanda Medical Council was established to develop the structure and format of a national CPD Program. Following the development of a working paper on the desired framework of CPD, two separate retreats for the Working Group were held in early 2010, which resulted in a three-year strategic plan for the CPD Program.

THE VALUE OF CPD FOR PHYSICIANS AND DENTISTS

For the individual Rwandan physician, there are a multitude of benefits stemming from participation in continuing professional development. These benefits include a broadening of the base of medical knowledge, the acquisition of new skills, the ability to deliver new services, development of the habit of reflection on one's own practice of medicine, and increased professional satisfaction. On a personal level, participation in CPD can be attractive because it provides an opportunity to enhance one's *curriculum vitae* and professional reputation. Finally, regular updating of one's knowledge and skills serves as a model for younger physicians and demonstrates the value of a habit of lifelong learning.

In addition to the benefits to the physician, there are a host of benefits which CPD offers for the Rwandan public and the nation as a whole. These include the assurance of the most up-to-date

application of scientific knowledge to the specific problems of each patient, provision of a broader range of services, improved levels of patient confidence and trust, increased competitiveness of Rwandan medical care on a regional and international level, and improved health statistics at a national level because of progressive improvement in medical care. In combination, these benefits provide a solid justification for a robust program of Continuing Medical Education (CME) and CPD for every registered health practitioner in Rwanda.

PROGRAM VISION

The CPD Program will ensure the highest quality of medical care to the population of Rwanda through a variety of structured educational opportunities that incorporate the most current medical knowledge, skills, and ethical attitudes in all disciplines of medicine and dentistry with the support of the Rwanda Medical Council and other stakeholders.

PROGRAM VALUES

The CPD Program is built upon long-accepted and honored values of the medical profession, including:

- Professionalism
- Integrity and trust
- Collaboration and teamwork
- Commitment to quality service

OBJECTIVES OF THE CPD PROGRAM

There are several broad objectives for the proposed national CPD Program that will help guide the development and implementation of the program. These objectives include the following:

1. The Rwanda Medical Council is responsible for the development and the administration of the CPD Program.
2. All registered practitioners in Rwanda will be required to participate in a National CPD Program, which is linked to re-licensure and/or recertification of specialty status on a periodic basis.
3. The development and implementation of accreditation standards for both CPD activities and materials and for CPD providers will ensure the high quality of CPD activities and appropriate delivery by CPD providers.
4. The knowledge, skills, and competencies of all physicians and dentists in Rwanda will be upgraded and developed so they will attain and maintain internationally recognized standards of clinical and community care.

DEFINITIONS

Continuing Professional Development (CPD). This activity consists of “educational activities which serve to maintain, develop, or increase the knowledge, skills, and professional performance and relationships that a health professional uses to provide services for patients, the public, or the profession. The content of CPD is that body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and the provision of health care to the public.”¹

Continuing Medical Education (CME). CME refers primarily to the process of gaining the new knowledge and skills through various educational modalities. An issue that deserves clarification is the distinction between continuing professional development and continuing medical education. Although the two terms are often used interchangeably, they describe different concepts. Continuing professional development for physicians refers primarily to an ongoing and lifelong process of progressively updating and improving of the physician’s knowledge, skills, and competencies used in his or her medical practice by keeping pace with the development of new scientific knowledge and concepts, and innovations in medical care. In contrast, CME is the primary *means* by which the goals of CPD can be attained, rather than the ultimate outcome. The desired result of CME is a progressive change in practice behavior and attitudes, and the development of new skills and competencies which reflect new medical knowledge—in other words, continuing professional development. The real objective of CME is a progressive behavioral change in individual medical practice, and this objective should guide the development of CME standards, evaluation, and monitoring.

CPD Activities. This includes all activities that enhance professional competence and lead to better delivery of health care, and usually includes a focus on one or more critical skills or values, such as the implementation of best practice recommendations for clinical care or community practice, quality improvement, new and improved procedural skills, improved communication skills, bioethics, leadership and management, patient safety issues, and medical computer applications. These activities can be varied, and they are generally divided between group and individual activities. The group activities include not only the well-known group lecture or conference/seminar, but also skills workshops, formal journal club discussions, morbidity and mortality conferences, patient chart reviews, etc. The individual activities accepted by many national and international organizations commonly include journal reading (especially if accompanied by a self-assessment at the end); medical teaching activities; preparation and presentation of a lecture, paper, poster or other scholarly work; or clinical research activities. The CPD activities for individuals are, by nature, more difficult to quantify and validate, but they are recognized to be of value in professional development, and are therefore included as recognized CPD, although often with some limitations.

CPD Provider. This is an institution, organization, or group that is accredited by the Rwanda Medical Council to develop and provide CPD activities as well as to issue certificates of CPD completion under the authority of the accrediting body, i.e., the Medical Council. These providers—such as faculties of health sciences, specialty divisions of the Ministry of Health (MOH), or associations for health professionals—have the expertise to produce and assume

¹ Definition of the Accreditation Council for Continuing Medical Education – Chicago, USA

responsibility for CPD activities at a local or national level. These providers often delegate the actual implementation of CME to recognized CPD organizers that work under the direction of the CPD provider.

CPD Accreditation. This is the status conferred by the Rwanda Medical Council to a CPD Program and/or activity based on compliance with established standards of planning, content, and delivery. It is a process used to ensure that CPD activities meet acceptable educational standards and have scientific merit.

CPD Accreditation Standards. These written directives describe the required quality, elements, responsibilities, and expected levels of performance of a specific CPD activity.

Provider Accreditation Standards. These are the written directives that describe the academic quality, organizational skills, and ethical levels of performance required of a CPD provider to be authorized to provide CPD on behalf of and with the authority of the Rwanda Medical Council.

CPD Provider Accreditation. This is the status conferred by the Rwanda Medical Council to CPD Providers (as described above), based on written standards of academic and organizational excellence, that authorizes them to identify training needs; organize, implement, and administer CPD to selected groups of physicians; and issue Certificates of Completion with the authorization and approval of the Rwanda Medical Council. This accreditation is generally reviewed and renewed on a periodic basis to ensure continuing excellence in CPD development and implementation.

Category I CPD Activities. Formal, highly structured learning opportunities (usually the responsibility of specialists). Examples include lectures, performance-based learning (PBL) tutorials, workshops, practical or clinical training, etc.

Category II Activities. Essentially self-learning undertakings that are usually conducted locally for individuals or groups. These include journal clubs, teaching health professionals, using computer and Web-based instructional materials, conducting research, etc.

Self-Learning Activities. Arrangements made by an individual health professional to update his or her professional competence, for example by conducting research, participating in distance learning activities, reading medical publications, etc.

CPD Credit Unit. Someone participating in a Category I CPD activity for one contact hour will earn 1.0 CPD credit. Participation in a Category II activity for one contact hour merits 0.5 of a CPD credit.

Contact Hour. The period, measured in hours, during which the participant actively participates in a formal or self-learning CPD activity.

POLICY ISSUES

Compliance

- Meeting the requirements of a CPD Program is mandatory for all members of the Rwanda Medical Council who are in practice.
- Exemptions may be considered if a member has retired (is nonpracticing) or is absent from practice due to medical or personal reasons for more than one year.
- Credits earned in another country may be approved on a case-by-case basis.

Participation Standards

- Participation in CPD programs is mandatory for all Council members who are in practice.
- Members must meet the requirements of their chosen program and show evidence of compliance if selected for a random review.
- Council members are required to earn 50 credits per year, of which a minimum of 25 credits may be earned from Category I activities. Regarding Category II credits, a maximum of 15 credits may be online credits.
- CPD programs run from 1st July to 30th June.
- Returns should be submitted online on the CPD website before 30th September.
- Participation standards and reporting forms for all CPD activities will be available online.

Table 1. Credits Awarded for Specific CPD Activities

Category I <i>Formal, highly structured learning opportunities</i>	Credits
Workshops	1.0/hour
Symposia/seminars	1.0/hour
Practical training sessions	0.5/hour
Clinical training sessions	0.5/hour
Reading scientific papers in journal and presenting to other staff	1.0/article
Reading scientific papers/review articles in peer-reviewed journals	10.0/1 st (or single) author 5.0/2 nd author (and beyond)
Scientific paper in local medical journal	8.0/1 st (or single) author 3.0/2 nd author (and beyond)
Chapter in a book in area of specialization	10.0/1 st (or single) author 5.0/2 nd author (and beyond)
Writing a book/monograph in area of specialization	15.0
Presenting at a conference, lecture, posters	5.0
Teaching/conducting workshops	2.0/hour
Specialty board recertification	25.0
Obtaining advanced medical degrees	25.0

Completing of residency program	50.0 FOR THE NEXT YEAR
Supervising undergraduates, interns, postgraduates in clinical/technical training in collaboration with an accredited training institution on a regular basis during the academic year (if not in the job description)	2.0 per student (not to exceed 16 credits per calendar year)
External examiner of Master's and Doctoral thesis	5.0/thesis
Workshops, lectures, seminars on ethics	2.0/hour
Single modules of Master's degrees in health sciences with part-time enrolment for study for non-degree purposes	5.0 on completion of module
Guest/occasional lecturer at an accredited institution	3.0/lecture
Category II <i>Self-learning undertakings usually locally conducted individually or in groups</i>	Credits
Patient care review meetings	0.5/hour
Journal clubs	0.5/hour
Feedback presentation after attending international conference/national conference	2.0/presentation
Case presentation and literature review in interdepartmental meetings	0.5/presentation
All learning materials (which could include DVD, CD, Internet, or email activities) with MCQs for evaluation with a pass rate of at least 70%	3.0/questionnaire

Activities that do not qualify for credit

- Time spent planning, organizing, or facilitating any activity
- Published congress proceedings
- Non-referenced letters to the editor of accredited journals
- Daily ward rounds
- Written assignments
- Compilation of student training manuals for internal use
- Staff and/or administrative meetings
- Tours and/or viewing of exhibits and technological demonstrations
- Membership in professional bodies, professional boards, or associations
- Holding a portfolio on the professional body's executive or council structure
- Presentations and publications for the public

Meetings arranged by pharmaceutical companies and manufacturers or importers of products and technical devices (including assistive device technology) or their representatives *purely for*

the purpose of marketing and/or promoting their products are not eligible for accreditation. Activities for the purpose of training in the use of company products or technological devices may be presented by arrangement with an accreditor or accredited service provider.

Noncompliance

- Failure to comply with the mandatory CPD requirements will ultimately lead to suspension by the Council of the medical practitioner's registration.
- Where a member is not complying with the requirements, the following actions will be taken:
 - A notification will be sent in October to the member informing him or her of noncompliance;
 - If the member does not respond within three months, a second letter will be sent before the end of the same calendar year. If there is no response, notification will be sent to the member regarding the breach of CPD policy.
 - Members will be offered help/remediation to comply with CPD requirements.
 - Failure to comply with the remediation measures within six months will lead to notification of disciplinary measures in accordance with applicable law.

The CPD Committee appeal process is available to individuals who are dissatisfied with the outcome of a determination in relation to this policy.

Online CPD credits

Members may take online CPD programs from reputable international and accredited CPD/CME providers. However approval for accreditation for the program should be sought and obtained from the CPD Committee prior to participation in the program.

STANDARDS AND PROCEDURES

Accreditation Standards for CPD Providers

In the application to the CPD Committee, providers must demonstrate compliance with the following standards.

1. The provider has a written mission statement for its CPD activities that includes its purpose, areas of expertise, target audience(s), and expected results.
2. The provider develops CPD activities and materials that are based on known educational needs of the target population(s).
3. The provider selects presenters of CPD materials that are demonstrated to be competent in their fields and skilled in effective teaching in their areas of expertise.
4. CME activities and materials are designed to change competence, performance, and/or patient outcomes, and not just to transfer knowledge.
5. The provider selects educational methodologies that are appropriate to the topic, target audience, and objectives of the CPD activity.

6. The provider consistently evaluates the results of the CPD in terms of changes in participant performance, competence, or patient outcomes.
7. The provider periodically evaluates the overall effectiveness of its CPD activities on the basis of its stated mission.
8. The provider consistently avoids commercial bias or influence in its CPD activities and materials.
9. The CPD accreditation is accorded following a successful application.

Accreditation Standards for CPD Activities and Materials

In the application for new CPD activities and materials, providers must demonstrate compliance with the followings standards.

1. Educational objectives are clearly stated in an outcome format and are specific and measurable (i.e., “By the end of this session, the physician will be able to...”).
2. CME content is appropriate in depth and scope for the designated audience.
3. The educational content addresses one or more demonstrated educational needs of the designated audience.
4. The presentation of the material uses learning methodologies and formats that are appropriate to the activity’s educational objectives.
5. The competence and qualifications of the presenter(s) to present the CME content is documented and appropriate for the content and the designated physician audience.
6. An evaluation process is applied to assess the quality of the presentation, the content, and achievement of stated educational objectives.
7. The CME content and program is described clearly to enable an appropriate assignment of point credit.
8. A verifiable mechanism for monitoring and documenting actual physician participation in the CME program is in place.
9. The CME content, presentation, and speaker(s) are not influenced in any way by, nor do they promote, the financial sponsor of the activity in any fashion.

THE CPD COMMITTEE

The Rwanda Medical Council will appoint a CPD Committee with the following structure and responsibilities:

Membership

- Professionals with an interest in CPD are identified and appointed to serve on the CPD Committee.
- Major specialties and professional organizations are represented.
- One or more representatives of the MOH are on the committee.
- One or more representatives of the faculties of medicine are on the committee.

- There will not be more than 20 members, and composition of the committee will balance gender as well as doctors from rural areas and private practice; the committee may from time to time invite nonmembers in their field of expertise.

Structure

- Chairperson
- Vice-Chair
- Secretary (who will also be the CPD Executive Secretary)
- CPD subcommittees: Compliance, Scientific, Training and Communication, Finance Management, and Monitoring and Evaluation
- Members

Responsibilities of the CPD Committee

1. Formulate policies and procedures pertinent to CPD.
2. Participate in long- and short-term planning.
3. Participate in CPD activity development.
4. Assist in CPD needs assessment and evaluation.
5. Accredite CPD providers and activities according to established standards.

THE CPD OFFICE

The Rwanda Medical Council will establish and maintain a CPD Office with the following structure and responsibilities.

Mandate

To operationalize the CPD Program and policies

Structure of the CPD Office

- **Executive Secretary.** Medical doctor with experience in clinical practice, health care structure, and management
- **Education specialist.** Preferably an educator with a medical background or an educator with a teaching experience with a master degree in education science from a reputable international institution
- **Support staff.** Health worker (Paramedic or nurse with experience in health management); information, communication, and technology (ICT) technician; and administrative staff

Responsibilities

1. Maintenance of the CPD tracking system
2. Keep records on CPD service providers, CPD activities, and individual health practitioners' CPD activities
3. Put the CPD compliance plan in practice
4. Give a progress report at every CPD Committee meeting
5. Organize workshops for CPD providers
6. Receive and conduct initial processing and verification of applications for both provider and individual CPD activities
7. Develop and communicate guidelines to CPD providers
8. Make available an institutional self-study guide for CPD providers
9. Develop a CPD application form and participation certificates
10. Maintain effective communications with all accredited CPD providers
11. Receive inquiries from all stakeholders and communicate to them the above-mentioned information as well as feedback on status of their applications

IMPLEMENTATION PLAN, MONITORING AND EVALUATION, AND FINANCING

Please see the Strategic Plan document for discussion of these topics.

CONCLUSION

Medical and dental professionals need to regularly update, improve, and acquire knowledge and skills in their respective fields. The CPD Program is essential to helping them achieve that goal. This program is mandatory and is directly linked to the re-licensure and recertification system as well as the future career development of medical professionals.

The program is guided by a policy statement that clearly indicates the role of the various stakeholders, including health authorities, professionals, and CME providers. The implementation plan is based on the strengths and limitations of circumstances and resources in Rwanda, and also on international CPD practices. All aspects of implementing, maintaining, and supporting the CPD Program will require strong will and commitment from all the concerned parties; their success will positively impact the quality of health care in Rwanda in the short-, medium-, and long-term futures.

ANNEX

The Members of the CPD Working Group:

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