

Human Resource Development Procedure Guidelines



Human Resource Development Procedure Guidelines

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FOREWORD

The Kenya Government recognizes the importance of developing public servants for the attainment of national goals. It is the policy of the government to continually upgrade competencies of public servants with the aim of addressing identified performance gaps. The government has therefore, availed resources to ensure that every employee in the public service receives relevant training that will contribute to the enhancement of the quality of service delivery.

The Ministry of Health recognises that Human Resources for Health is a critical component in the delivery of services and ultimate realisation of national health outcomes. The Human Resource Development Section (HRDS) within the Ministry is charged with the responsibility of building this resource with the aim of improving the quality of health services across the country.

The aim of these Human Resource Development Procedure Guidelines is to standardize procedures for managing and coordinating Human Resource Development activities within the Ministry of Health at the national and county government levels. We believe that this manual will support more effective and efficient administration of this function and avoid misconceptions and misinterpretation of different procedures during implementation.

These guidelines provide the standard operating procedures for (a) management and coordination of training, (b) planning and approval of training plans (c) bonding and scholarships and (d) monitoring and evaluation.

The manual targets the Ministry of Health led by the Human Resource Development Section, County Departments of Health (CDOH), Development Partners, Training Institutions, Regulatory Bodies, State Corporations within the Ministry of Health, staff or any other organisation wishing to engage in training in the Ministry.

These procedures will be reviewed from time to time in tandem with guidance provided by the Public Service Commission and any other relevant policies.

Dr. Nicholas Muraguri,

PRINCIPAL SECRETARY

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We appreciate the continuous support from the Council of Governors, the County Executive Committee Members of Health and all the county personnel who participated in the development of these procedure guidelines.

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David K. Njoroge

DIRECTOR, HUMAN RESOURCE MANAGEMENT AND DEVELOPMENT

LIST OF ABBREVIATIONS AND ACRONYMS

CDOH County Departments of Health

CHRMAC County Human Resources Management Advisory Committee

CPD Continuous Professional Development

CTC County Training Committee

CUE Commission for University Education

DPs Development PartnersGOK Government of Kenya

HRD Human Resources Development

HRH Human Resources for Health

HRM Human Resource Management

HRM/D Human Resource Management and Development

IPs Implementing Partners

KMTC Kenya Medical Training College

M&E Monitoring and Evaluation

MOH Ministry of Health

MHRMAC Ministerial Human Resources Management Advisory Committee

NGO Non Governmental Organization

NHHRDWG National Health Human Resource Development-Working Group

PAS Performance Appraisal System

PEPFAR President's Emergency Plan for AIDS Relief

PNA Performance Needs Assessment

PSC Public Service Commission

SDGs Sustainable Development Goals

TNA Training Needs Assessment

TVET Technical Vocational and Entrepreneurship Training

TWG Technical Working Group

USAID United States Agency for International Development

WHO World Health Organization

OPERATIONAL DEFINITIONS

Attachment: Is the temporary placement of a trainee/learner/attachee to a section/unit to learn practical aspects of a job.

Bonding: This is a formal agreement between the employer and employees who attend courses of training binding them to serve in the public service for a specified period of time following completion of the training.

Cadre: This is the grouping of public service employees according to their professional orientation.

Capacity building: Provision of adequate intellectual capability, physical facilities and supportive work environment for enhanced service delivery.

Course approval: Authorization given to an employee to proceed for a training course.

Critical skills: These are those skills essential for the attainment of the Ministry of Health's core mandate.

Development partners: These include NGOs, Multilateral and Bilateral organizations supporting training in the health sector.

Evaluation: Is a periodic assessment of the relevance, efficiency, effectiveness and impact of training, against set objectives. It looks at what was set out to be done, what has been accomplished, how it was accomplished and changes that are significant to the relevance of the programme's effectiveness, impact and sustainability.

Health workforce: This includes all employees working in the Ministry of Health at national and county level.

Human Resource Development: A process by which continuous efforts are made to develop the employees for their present and future roles and to identify and utilize their inherent optimal potentialities. It includes opportunities such as employee training, employee career development, performance management, coaching, mentoring, succession management, key employee identification, tuition assistance and organisational development.

Human Resources for Health: Is defined as "all people engaged in actions whose primary intent is to enhance health", according to the World Health Organization's World Health Report 2006. Human resources for health are identified as one of the core building blocks of a health system. They include physicians, nurses, advanced practice registered nurses,

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midwives, dentists, allied health professions, community health workers, social health workers and other health care providers, as well as health management and support personnel – those who may not deliver services directly but are essential to effective health system functioning, including health services managers, medical records and health information technicians, health economists, health supply chain managers, medical secretaries, and others.

Internship: This refers to the placement of a student or a recent graduate under supervised practical training.

Monitoring: Involves continuous or ongoing correction and analysis of information inorder to measure the performance of the training interventions, progress and effect on the learner. It compares actual progress with what was planned so that adjustments can be made in the implementation and is an internal activity that is the responsibility of those who manage training thus representing a good management practice. It aims at improving the efficiency and effectiveness of training.

Part time training: This refers to a mode of study in which employees engage partly in performance of work and partly in their studies.

Public service: Any sector of the economy which receives funding from the exchequer.

Relevant course: A course as per the requirements of an officer's scheme of service and regulatory bodies.

Seconded officers: These are officers who were employed by the Ministry of Health but were devolved to the counties for the three year transition.

Skill gaps: This refers to under performance observed in an employee due to inadequate skills.

Training bio data: Is an instrument for capturing the essential details of an employee requesting for a course approval.

Training institutions: Are all the institutions that offer health related courses at all levels of training.

Training Needs Assessment: It refers to the exercise of collecting, collating and analysing data from employees to establish gaps in knowledge, skills and attitudes necessary for effective performance of their duties.

Training: Planned process to modify attitude, knowledge, skill or behaviour through learning experience to achieve effective performance in an activity or range of activities.

Chapter

Introduction

1.1 Context and Background

The Ministry of Health recognizes that the Human Resources for Health (HRH) are a critical ingredient in health sector planning, service delivery and ultimately, national health outcomes. Similarly, the Kenya Vision 2030 aims at having a well-trained and developed workforce which will provide quality services and also be globally competitive. The health sector is labour-intensive and dependent on its workforce for the precise application of knowledge and technical skills in the provision of health care services. One of the major contributors to the slow pace of attainment of the national health goals is the HRH challenge of low productivity and inadequate skills. There is therefore, a greater need to develop this resource with relevant competencies (technical, leadership, management and supervisory skills) to deliver quality health services.

The government policy on human resource development is commitment to continually upgrade the competencies of public servants. The objectives of the Recruitment and Human Resource Development Policy (2005) include:

- a) Provide for succession planning.
- b) Strengthen the process of identifying staff for human resource development.
- c) Enhance gender equity.
- d) Ensure that funds for human resource development are focused on priority areas.
- e) Ensure that employees in the public service have the necessary competence and capabilities.
- f) Strengthen the research and development capabilities of the public service.
- g) Ensure that human resource development and capacity building activities undertaken within the public service lead to advancement of national goals and priorities.

Human resource development should aim at addressing identified performance gaps. The Human Resource Development (HRD) section in the Ministry of Health is charged with the responsibility of managing and coordinating this function for the health sector. However, information on human resource development procedures is currently scattered in different documents that includes policy booklets and circulars. This creates challenges in accessing information by officers and submission of complete application documents.

1.2 Rationale for the Procedure Guidelines and Manual

The HRD section identified the need to develop human resource development procedure guidelines for the Ministry of Health to:

- a) Augment other general guidelines available to the civil service.
- b) Provide standard information to officers on human resource development.
- c) Coordinate trainings at the two levels of government.

1.3 Purpose and Objectives of the Procedure Guidelines

1.3.1 Purpose

- a) To provide a one-stop source of information on human resource development for the Ministry of Health staff.
- b) To enhance transparency and ensure equal opportunity in accessing human resource development opportunities and resources.

1.3.2 Specific Objectives

- a) Enhance coordination of human resource development in the health sector within the devolution framework.
- b) Consolidate all information on human resource development procedures into one document.
- c) Provide guidance to MOH staff in application of human resource development procedures.
- d) Provide equal opportunity to applicants in the allocation of resources.

1.4 Process of Development

The development of this procedures manual has involved many stakeholders led by the Ministry of Health. It included County Governments, Human Resource Development Sections (HRDS), Ministry of Health Departments, Public Service Commission, Regulatory Bodies, Development and Implementing Partners.

The initial thrust to develop a procedures manual came from the Human Resource Development Section's desire to provide MOH staff with a clear direction on how to access human resource development opportunities. A human resource development procedure guidelines manual was deemed as the best avenue for achieving this goal. It was envisaged that such a document would provide a one stop-shop for all the information on human

resource development procedures.

A technical working group led by the Ministry was constituted bringing together different stakeholders to develop the procedure manual. Several workshops were held and a first draft developed. Input from the heads of department and counties was incorporated in the first draft in a two day retreat. The draft was finalized in a five (5) day retreat where all the views obtained were collated and compiled to form this policy document.

1.5 Scope and Limitation of the Guidelines

The manual will be used by different stakeholders including:

- a) Ministry of Health
- b) Human Resource Development Section
- c) County Departments of Health (CDOH)
- d) Development Partners
- e) Training Institutions
- f) Regulatory Bodies
- g) State Corporations within the Ministry of Health
- h) MOH staff who wish to apply for training

Chapter

2

MANAGEMENT AND COORDINATION OF TRAINING IN THE MINISTRY OF HEALTH

Capacity building at the national and county level is the responsibility of the Public Service Commission. The authorized officer in the Ministry of Health is mandated to coordinate all human resource for health development activities in the health sector. This manual presents the various offices and bodies in the national and county governments involved in the operations and coordination of human resource for health development, their composition, functions and mandate.

2.1 National Level – Ministerial Level

2.1.1 The Authorized Officer (AO)

The responsibility of the Authorized Officer shall be to:

- a) Provide strategic and policy direction on HRD in the ministry responsible for health and county governments.
- b) Delegate human resource development functions appropriately.
- c) Approve all human resource development activities in the ministry.
- d) Liaise with ministry responsible for planning on all human resource development issues.
- e) Consult and cooperate with county governments on all issues of HRD.

2.1.2 Department of Human Resource Management and Development (HRMD) Shall be Responsible for:

- Coordination of all human resource development activities in the ministry of health, state corporations and county governments.
- b) Provision of professional guidance to the ministry and county governments on human resource development matters.
- c) Carrying out human resource development needs assessments with user departments.
- d) Coordinating and developing annual training projections and human resource development plans for the ministry in consultation with the county governments.

- e) Providing technical support on HRH and HRD issues to state corporations.
- f) Setting objectives for HRD planning in conjunction with Ministerial Human Resource Management and Advisory Committee (MHRMAC) in consultation with the county governments, human resource development.
- g) Preparation of the human resource development budget and utilization of human resource development funds in liaison with user departments in the ministry and county governments.
- h) Administration of the Human Resources for Health resource development programmes.
- i) Monitoring and evaluation of human resource development programmes.
- j) Carrying out HRD audit.
- k) Developing, updating, analysing and maintaining skills inventory.
- I) Liaising with relevant boards and councils, human resource development institutions, the ministry and county governments in placement of trainees
- m) Bonding of serving officers undertaking training that attract bonds.
- n) Issuance of course approvals to officers proceeding on authorized training.
- o) Coordinating collection and remittance of training levy to the responsible ministry for public service.

2.1.3 Ministerial Human Resource Management and Advisory Committee (MHRMAC)

In line with the guidelines on delegation of Human Resource Management function to the Cabinet Secretary/Authorised Officer by the Public Service Commission, the Ministerial Human Resource Management and Advisory Committee shall be responsible for Human Resource Development matters.

Composition of MHRMAC

- a) Chairman Principal Secretary.
- b) Secretary Director of Human Resource and Development.
- c) Seven other members above job group 'Q' representing technical departments.
- d) The committee may co-opt such members in writing as necessary for this from time to time with the approval of the CS.

Functions of the Committee

Among other human resource management functions, the committee shall be responsible for:

- a) Training and development in the ministry of health
- b) Training impact assessment
- c) Management of skills inventory

2.2 County Level

2.2.1 County Government

In the county governments the county public service boards shall establish appropriate committees for the management of human resource development in their respective counties. These committees are charged with the responsibility of making decisions on human resource for health development within their areas of jurisdiction.

2.2.2 County Health Training Committees

Composition of County Health Training Committees:

- a) Chairman Chief officer responsible for health
- b) Secretary Officer responsible for human resource for health development
- c) Members Heads of Departments Health

Functions of County Committees Responsible for Human Resource Development

The County Committees have the responsibility of facilitating human resource for health development recommendations at the county, sub-county or hospital level. Their main functions and responsibilities include:

- a) Recommending for approval of all long and short courses undertaken by health workers within their areas of jurisdiction.
- b) Submitting human resource development recommendations to the authorized officer ministry of health for further processing and approval.
- c) Budgeting for courses to be undertaken by their staff.
- d) Approving all the human resource for health development budgets and utilization of the resources allocated to the county.
- e) Approving county human resource for health development needs assessment reports and human resource development projections, irrespective of whether the courses are self-sponsored or are funded by national government or through bilateral arrangements.
- f) Mobilizing resources for human resource for health development.

2.3 Standard of Operating Procedures (SOPs) for the Training Management and Coordination

Planning for training in the ministry of health and county governments shall be guided by the Training Needs Assessment (TNA). Training programmes will be designed in line with identified performance gaps linking training to closing of such gaps. Training will be planned to upgrade core competencies, knowledge, skills and attitudes of health workers with the aim of improving service delivery.

2.3.1 Planning for Training

- of the year based on their reviews of the achievements made by the training in the previous year, Training Needs Assessment (TNA) of newly recruited staff, and their long term HRD plans or strategies. County TNA shall be conducted every 2 years. The TNA informs training needs projections based on long term plans.
- b) Training Institutions submit their annual training schedule to MOH-HRD. Development Partners and Implementing Partners (DPs/IPs) may support the training institutions for development of new training course/program.
- c) CDOHs prepare their County Annual Training Plan based on the identified training needs of the year and the annual training schedule of the MOH indicated by MOH-HRD. CDOHs may also get support from DPs/IPs for the preparation of their County Annual Training Plans.
- d) MOH-HRD prepares a draft MOH Annual Training Plan based on its Annual Training Schedule and the County Annual Training Plans submitted by the counties.
- e) MOH-HRD finalizes the MOH Annual Training Plan with a budget plan.
- f) MOH-MHRMAC recommends MOH Annual Training Plan for approval by the cabinet secretary.
- g) CDOHs may need to adjust their County Annual Training Plan according to the approved MOH Annual Training Plan.

The planning for training procedures are illustrated in Figure 1.

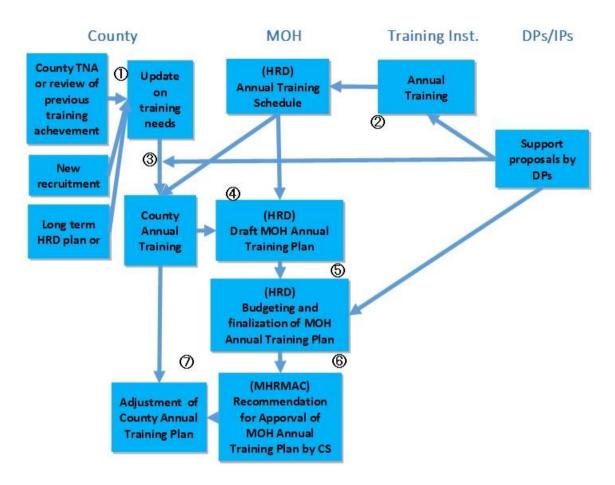


Figure 1: Planning for training

2.3.2 Selection of Applicants, Approval and Implementation of Training Programme

- a) According to announcement of training course/programme by MOH-HRD, County Training Committees (CTC) of CDOHs begins identification of candidate trainees.
- b) Individual staff may request approval for attending a training course/ programme of his/her interest. Facilities/units to which the person belongs shall submit recommendations to CTC for approval of the request from the person.
- c) CTC prepares applications and submits them to MOH-MHRMAC. An application has to be submitted with following documents.
 - i. Admission letter to an accredited training institution.

- ii. Application letter for course approval duly forwarded.
- iii. Training bio data form duly completed.
- iv. Minutes recommending officer for training.
- v. Commitment letter to retain officer in the county payroll (for employees of the county government)
- d) MOH-MHRMAC recommends selection of trainees for training courses/programmes for CS approval.
- e) MOH-HRD notifies counties on the approvals made by MOH-MHRMAC.
- f) In case bonding is required, either MOH or county makes necessary arrangement for the bonding.
- g) After the completion of necessary arrangement for the bonding, CDOH releases trainees prior to commencement of training course/programme.
- h) Training institution which is in charge of the training course/programme implements the training course/programme. MOH-HRD supervises progress of the training course/programme. DPs/IPs may assist the implementation of the training course/programme in technical and/or financial ways.
- i) At the beginning of the training course/programme, MOH-HRD makes necessary payments for the expenses of the training courses/programme.

Figure 2 illustrates the process of selection of applicants, approval and implementation of training.

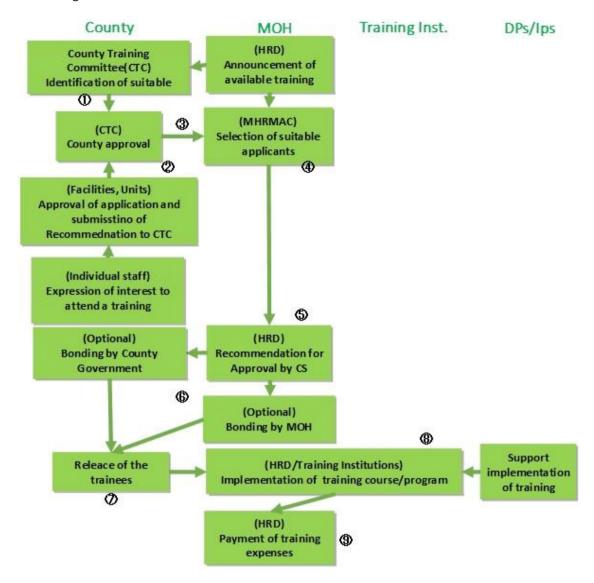


Figure 2: Selection of applicants, approval and implementation of training

Chapter

3

Procedure for Planning and Approval

The management and co-ordination of human resource development in the public service is the responsibility of the Public Service Commission. The cabinet secretary responsible for the ministry of health is in turn mandated to coordinate all human resource development activities including human resource development as the Authorized Officer (AO). This section describes the national training plan, notification to the counties, training approval and terms and conditions while on training. It also describes the various offices and bodies involved in the management of human resource development, their composition, functions and mandate.

3.1 National Training Plan

The human resource development section for the ministry responsible for health will address identified performance gaps and human resource development activities based on the need to raise effectiveness and quality of service. The section is charged with the strategic responsibility of developing the human resource for health for the attainment of universal health as envisioned by Constitution of Kenya, 2010.

The section will develop and maintain an updated annual training plan for the ministry of health which is informed by the training needs assessment, performance appraisal, emerging health needs and projections.

The training plan shall contain the following elements:

- a) Type of training required
- b) Duration of training
- c) Trainers/facilitators
- d) Training institutions
- e) Venue and location
- f) Cost of the training
- g) Target group
- h) Sponsor

3.1.1 Procedure for Training Needs Assessment (TNA)

Planning for training in the ministry of health and county governments shall be guided

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by the Training Needs Assessment and be designed in line with identified performance gaps linking training to closing of such gaps. Training will be planned to upgrade core competencies, knowledge, skills and attitudes of health workers with the aim of improving service delivery.

The department responsible for Human Resource Development will coordinate all the TNA activities both at ministerial, departmental and county levels. The HRD unit will:

- a) Prepare a proposal for TNA
- b) Submit for approval to the relevant authority
- c) Compose the TNA team
- d) Develop tools
- e) Collect the data
- f) Analyse the data
- g) Write a report
- h) Submit the report to the relevant authority
- i) Disseminate the report
- j) Implement the recommendations in collaboration with county governments and development partners.

3.1.2 Procedure for Developing Training Plan/Projections

The HRD unit will:

- a) Notify and request each department and each county to submit their staff training requirements based on training needs and performance gaps identified at the beginning of the 2nd quarter.
- b) Compile the training request into the national training plan.
- c) Develop a budget for the training plan against the training requests.
- d) Prioritize the training based on:
 - i. National health priorities
 - ii. County and departmental needs
 - iii. Available resources
 - iv. Individual career development needs
- e) Submit the plan for recommendation and approval by the relevant committee by the 3rd quarter.

3.1.3 Recommendations for Training by the Ministerial Human Resource Management Advisory Committee

Upon receipt of the national training plan the committee shall:

- a) Review the national training plan.
- b) Recommend for approval by the Authorized Officer (AO) responsible for the Ministry of Health.
- c) Provide feedback to the county and the departments within two months after the deadline request.

3.1.4 Modes of Training

The Ministry of Health recognizes the following modes of training for its health workers:

- **a) Full time** this is where the trainee is released from the work station to attend training on a full time basis during working hours.
- **b) Part time** this is where trainees attend training as indicated below and other relevant options acceptable to the ministry.
 - i. Evening and weekend classes the trainee is not released to attend training on a full time basis. The officer attends classes in the evening or over weekends.
 - ii. School based a trainee attends his/her training programme in blocks, for example, during the months of April, August and December.
 - iii. e-Learning/online studies these are courses taken via the internet.
 - iv. Open and/or Distance Learning this mode of learning is carried out remotely using the postal and electronic communication systems to accomplish its goals. This type of learning is often heavily dependent on e-Learning.
 - v. Sandwich a training course with alternate periods of formal instruction and practical experience
- c) Experiential learning/exchange programme these are training programmes where trainees learn by experience. Trainees are placed in institutions to learn how those institutions carry out work.
- **d) Internship** is regarded as an important part of training for health workers and shall be regulated by the relevant regulatory bodies.
- **e) Attachment** is regarded as an important component of training and shall be regulated as provided for in the guidelines on industrial/field attachment in the public service.

f) Mandatory training

- i. All public servants shall be eligible for at least 5 days training in a year. The training should address emerging issues.
- ii. All health workers in the managerial cadre shall undertake training in management, policy formulation, project implementation, Leadership amongst others.
- iii. Induction courses induction and orientation is mandatory for employees to familiarize themselves with the work environment and requirements. This training will be given within three (3) months of the officer's joining the service, on transfer, re-designation or on promotion. A list of newly recruited and transferred officers should be submitted to facilitate this induction.

3.1.5 Terms and Conditions While on Training

Health workers on an approved training will be deemed to be on duty, entitled to the requisite benefits subject to service regulations. The terms and conditions such as salary, promotion, leave, and allowances for officers attending external and local training are as below.

3.1.5.1 Health Workers Attending Courses Locally

a) Salary and benefits

- A health worker will continue to draw his/her substantive salary for the duration of the course. Any deductions due will continue to be made in the normal way.
- ii. Provided that his/her work and conduct are satisfactory, a health worker will be eligible to receive annual increments in accordance with the normal procedure.
- iii. During the training a health worker remains eligible to be considered for promotion.

b) Allowances

A health worker travelling for an approved training, sponsored by the government will be deemed to be travelling on duty and will be granted appropriate allowances and travelling privileges in accordance with the prevailing regulations.

c) Leave entitlement

- i. A health worker attending a short course locally which has no provision for vacations is deemed to be on duty and must report back to work immediately the course is completed.
- ii. A health worker on a long term full-time course of study in a local institution will normally be granted the student's vacation, but may be required to resume duty during vacations at his ministry/department/county provided that he/she enjoys a minimum of one month's vacation in a year. Such a health worker will not be eligible for any additional leave in respect of the period of the course.
- iii. Unpaid study leave or leave of absence will not be granted for purposes of training.

d) Expenditure to be met by the health worker

A health worker will be responsible for meeting the following expenditure in connection with a course:

- i. A health worker proceeding for training course lasting 30 days and above, shall make a contribution to the cost of his/her training at the rate of 10% (for local training) or 20% (for foreign training) of his basic salary which must be remitted by his ministry or county to the ministry responsible for public service.
- ii. All personal commitments including subscriptions (voluntary or compulsory), laundry, recreation, entertainment, will be the responsibility of the trainees.

e) Expenditure to be met by the government

In addition to the payment of salary and allowances, the following items of expenditure shall be met by the government subject to the availability of funds:

- i. Tuition fees
- ii. Book allowance
- iii. Research allowance
- iv. Library allowance
- v. Computer expenses allowance
- vi. Registration fee
- vii. Visa fee for foreign courses
- viii. Allowance for warm clothing
- ix. Vaccinations fee

- x. Travel and accommodation allowance
- xi. Living allowance for foreign training/and for officers training from outside their stations

3.1.5.2 Courses Financed Under Technical Assistance Arrangement

Technical assistance courses are scholarships through bilateral and multilateral agreements with development partners and are announced through the ministry responsible for public service. The MOH-HRD section announces the courses to respective departments and counties. Nominees for these courses are channelled to the development partners through the Ministry for Public Service. The lists of successful candidates are forwarded to the authorized officers through the ministry responsible for public service and the HRD section

All the conditions which are articulated in 3.1.5.1 (a) to (e) above will apply to a serving health worker undertaking courses under technical assistance arrangements. The terms and conditions are as below:

a) Expenditure to be met by the government

In addition to the payment of salary and allowances, the government will meet the expenditure in respect to any items listed in 3.1.5.1 (e) above if these are not covered by the scholarship award. Course fees and the cost of transport and travelling in the country in which the course is held shall, however, be met from the award.

b) Medical insurance cover

The terms of a scholarship award may or may not provide medical insurance. Where such insurance is not provided under a technical cooperation training award, the government shall make appropriate arrangements through the appropriate mission abroad to provide sufficient medical insurance for the study fellow.

c) Allowances

Maintenance allowance from Kenya Government funds will not be paid since health worker subsistence is generally provided for by the scholarship award. However, in a case where a health worker is travelling outside the country on a short course of up to four (4) weeks and is partially funded under bilateral agreement, a health worker shall be entitled to 25% of the subsistence allowance applicable to the designated country.

3.1.5.3 Other Policies and Rules

a) Short courses, seminars and conferences

Health workers attending short courses, seminars, conferences of up to four (4) weeks' duration locally or abroad will be regarded to be travelling on duty and will receive allowances applicable as communicated by the government from time to time.

b) Self-sponsored courses

- i. Health workers undertaking part-time or full-time self-sponsored courses will be exempted from paying training levy. Such health workers will be granted study leave and will be eligible for full salary and benefits as long as the course is approved, relevant and is undertaken in a recognized institution.
- ii. In a case where health workers has proceeded on an approved self-sponsored course and in the course of training secures government funding, the remittance of the appropriate training levy by the health workers to the government will apply only for that duration of the sponsorship. However, sponsorship will not cover any outstanding fees prior to the scholarship.

c) Conduct during training

A health worker on approved training is deemed to be on duty and thus subject to service regulations and benefits.

d) Repeating classes/course

If for any reason a trainee is required to repeat a class or a course, the trainee will have to bear any additional costs.

e) Completion of training

A health worker on approved training is expected to complete the training within the stipulated time and resume duty immediately. A health worker should also submit a copy of the certificate attained and a report on the training programme. No health worker is allowed to enrol for another long course before the expiry of 2 years after completing one.

f) Refund of prescribed examination fees

All candidates who sit for the civil service examinations are required to pay a prescribed examination fee. The rates of fees and mode of payment for the examinations will be notified when the dates for each examination is announced. Those candidates who pass examinations will be refunded the prescribed fee by their respective accounting officer.

g) Examination grants and bonuses

An officer who, on his own initiative and at his own time, undertakes and passes a professional course which is administered by a recognized institution will be eligible for refund of tuition expenses and examination fees of 50% provided that the course is:

- Relevant to their scheme of service
- Approved by the authorizing officer
- The officer has not been sponsored for the same course .

In addition, the officer may be eligible for payment of an examination bonus in accordance with the existing regulations. However, officers undertaking a first degree will not benefit from this provision

i) Accredited training Institutions

Officers will only be allowed to attend courses at accredited institutions. It is the responsibility of the HRD to verify accreditation status before submitting nominations to MHRMAC for approval.

j) Transfer of knowledge and skills

An officer is expected to share the new skills/knowledge acquired with the rest of the staff in the department on completion of the course.

Training Administration

3.1.6 Course Nomination Process

The course nomination process shall be guided by Chapter six, Chapter two article 10 and Chapter 13, article 232 of the Constitution of Kenya, 2010. This section outlines the basis for nominating officers to go for training, the process followed and documents that are essential for support of the application.

3.2.2 Guiding Principles in Course Nominations

For all nominations the following should be observed:

- a) Gender equity, transparency, meritocracy, principles provided for in the Constitution of Kenya, 2010 and other government policies.
- b) Course relevance in addressing performance gaps.
- c) Cost effectiveness and availability of funds.
- d) Consistency with TNA findings and the annual training projections; and
- e) The approved training plan.

3.1.7 Steps in the Nomination Process

The following are the key steps required for the nomination of health workers for training:

- a) Training needs identified by the ministry responsible for health and the county department of health.
- b) Approved training projections by the ministry responsible for health and the county department of health.
- c) Submission of training requests/application of health workers to be trained in a particular year to the Head of HRD unit at ministry responsible for health.
- d) Review of the training requesting/applications against the Training Projections and eligibility by the HRD Secretariat.
- e) Forwarding the requests to MHRMAC for recommendation to the authorized officer for approval.
- f) Communication of decision of the authorized officer to the applicant through the relevant departmental head or county chief officer for health.

3.1.8 Course Approvals

Health workers proceeding on authorized training shall obtain a course approval letter which must be strictly adhered to. Any supervisor who releases a health worker without a course approval may be subjected to a disciplinary process. Course approvals are issued for foreign and for local training.

3.1.8.1 Requirements for Course Approval

To be eligible for a course approval a health worker must observe the following:

a) Minimum period of service for long courses - must have completed two (2) years of service from the date of completion of internship. Must have completed two

- (2) years after the completion of previous long course. HRD unit can otherwise recommend exceptions.
- b) Foreign courses health workers applying for foreign training on self-sponsorship basis must provide proof of financial capability and will be required to attach original bank statement. Under circumstances where the health worker is sponsored by a third party, the applicant shall provide a letter of commitment, a sworn affidavit and attach original bank statement from the sponsor.
- c) Group Training any planned group training programme shall be accompanied with a detailed training proposal complete with budget as shown in Appendix 2.
- d) Supporting documents to be attached to application All course approval applications must be accompanied by the following documentation:
 - i. A letter of admission to a recognized training institution complete with fees structure.
 - ii. Application letter for the course duly completed, approved and forwarded by the relevant officer.
 - iii. Minutes of the County Health Training Committees (CHTC) meetings recommending the officer for training. For officers in the county.
 - iv. For courses required for career progression: Applications for courses which are a requirement for career progression should be supported with copies of relevant sections of the scheme of service or career progression guidelines.
 - v. A Training bio data form as per appendix 3, duly completed and forwarded by the Chief Officer of Health (for officers in the county) or the Head of Department for those at the national level.

3.1.8.2 Course Approval Process

- a) All applications for course approval must be addressed to the Cabinet Secretary. Appendix 4 shows a sample application letter.
- b) Applications emanating from the county must be duly processed through the County Health Training Committee and forwarded by the county chief officer of health.

c) Applications from divisions and units should be channelled through the relevant Departmental Heads.

3.1.8.3 Other Factors in Course Approval

- Travel clearance Travel clearance for officers travelling out of the country
 to attend a training programme will only be given by the authorized officer
 after a course approval has been issued by the ministry responsible for public
 service management. The officer should apply for travel clearance from the
 authorized officer at the National or County level at least one week before the
 date of travel.
- Release of officers for training Only after course approval has been issued shall a supervisor release the officer from his/her work station take up the course.
- **Change of courses or institutions** Failure to take up an approved course or change of an institution or course itself will require that the applicant seek a new course approval.
- **Deferred courses** All applications for courses for government funding are valid during the specific year only, unless deferred by the MHRMAC for whatever reason. HRD Units shall ensure that all deferred cases are resubmitted at subsequent MHRMAC's by respective Heads of Departments (HODs).
- Course extension requests Course extensions will not be allowed, unless based on a written request from a training institution, in which case the request may be considered subject to the rules governing the training. The request for course extension should be made at least 3-6 months before the expected completion date.
- Once an officer has been approved for training that officer should not be stopped from proceeding unless there is a valid reason.

3.2 Procedure of Planning, Selection and Application by the County Department of Health (CDOH)

3.2.1 County Training Plan

The county department of health will address identified performance gaps and human resource development activities based on the need to raise effectiveness and quality of service. The department is charged with the strategic responsibility of developing the

Ministry of Health

human resource for health for the attainment of universal health as envisioned in the Kenya constitution, 2010.

The department will develop and maintain an updated annual training plan for the county department of Health which is informed by the training needs assessment, performance appraisal, emerging health needs and projections.

The training plan will contain the following elements:

- Type of training required
- Duration of training
- Training institution
- Trainers/facilitators
- Venue and location
- Cost of the training
- Target group
- Sponsor

3.2.2 Procedure for Training Needs Assessment (TNA) at County Level

Planning for training in the County Department of Health shall be guided by the raining Needs Assessment and be designed in line with identified performance gaps linking training to closing of such gaps. Training will be planned to upgrade core competencies, knowledge, skills and attitudes of health workers with the aim of improving service delivery.

The county department of health will coordinate all the TNA activities with technical assistance from the Ministry responsible for health at the national level which will include the following:

- a) The department will prepare a proposal for TNA
- b) Submit for approval from the relevant authority
- c) Compose the TNA team
- d) Develop tools
- e) Collect the data
- f) Analyse the data
- g) Write a report
- h) Submit the report to the relevant authority
- i) Disseminate the report
- j) Implement the recommendation of the report with support from the ministry responsible for health at national level.

3.2.3 Procedure for Developing Training Plan/Projections

- a) The county department of health will notify and request each department and each sub-county to submit their staff training requirements based on training needs and performance gaps identified at the beginning of the 2nd quarter.
- b) Compile the training request into the county training plan.
- c) Develop a budget for the training plan against the training requests.
- d) Prioritize the training based on:
 - i. National health priorities
 - ii. County and sub-county needs
 - iii. County departmental needs
 - iv. Available resources
- e. Individual career development needs.
- e) County department of health submits the plan for recommendation and approval by the relevant county committee by the 3rd quarter.
- f) County department of health submits the plan to MOH-HRD unit for recommendation and approval by the 4th quarter.

3.2.4 Approval by the County Health Management Team

Upon receipt of the county training plan the committee will:

- a) Review the county training plan,
- b) Recommend for approval by the Authorized Officer (AO) responsible for the County Department of Health.
- c) Feed back to the county and the departments within two months after the deadline request.

Chapter

4

Procedure For Bonding and Scholarships

4.1 Bonding

The purpose of bonding is to ensure that the ministry responsible for health benefits from the skills, knowledge, competencies and attitudes acquired during the training. This means that the health workers commit to serve in the ministry for a given duration of time.

- i. Bonding process begins once the approval of a course has been granted by the Authorized Officer (see appendix 5)
- ii. Health worker is issued with course approval after returning the bonding forms
- iii. The health worker fills the forms in triplicate indicating the following details:
 - a) Attachment of a coloured passport size photograph of the bondee
 - b) Provision of bondee's personal particulars including ID number, personal number, PIN number, passport number, email address, and telephone number.
 - c) Names of two (2) guarantors/sureties who shall append their signatures in the presence of either Commissioner of Oaths, magistrate or organization's legal officer.
 - d) The form must be signed in the presence of the Human Resource Development Officer or Training Manager of respective organization who must then sign as a witness and append the official stamp.
 - e) Health worker returns the duly filled forms to Human Resource Development Unit within two (2) weeks of issuance.

4.1.1 Length and Amount of Bond

The bond period shall be determined by either the duration of the course or the value/cost of the course plus the gross salary of the officer.

4.1.1.1 Bond Period Determined by Course Duration

- i. Training lasting six (6) months to one (1) year will be bonded for one (1) year.
- ii. Courses lasting more than one year up to two (2) years will be bonded for two (2) years.
- iii. More than two (2) years up to three (3) years will be bonded for three (3) years

iv. More than three (3) years will be bonded for up to the length of course but not more than five (5) years.

4.1.1.2 Bond Period Determined by Cost of Training

This type of bonding may be applied for short courses whose duration is below six (6) months and the value/cost of such courses is high and constraining the ministry's training budget. In such a case, the health worker shall be bonded for a minimum period of one (1) year but not exceeding five (5) years.

4.1.2 Calculation of the Bond Amount

The total cost of training shall constitute the bond amount.

4.1.2.1 Components of Bond Amount

The components of the bond amount may include the following (as applicable):

- Living/subsistence allowance
- Tuition
- Dissertation/research/thesis/project allowances
- Insurance fee
- Library/computer/examination fees
- Travel/transport expenses
- Gross salary for the period of the course in months less 10% (for local) or 20% (for foreign) training levy
- Book allowance

The amount of bond may be determined as follows according to mode of study:

Table 1: Duration of Bonding for Different Sponsorships

Mode of Study	Calculation of Bond Amount	
Full-time GOK sponsored	Total cost of training plus the gross salary for the duration of training	
Full-time self-sponsored	Gross salary for the duration of training	
Part-time GOK sponsored	Total cost of training plus gross salary for the period of training during duration of the training	
Part-time self-sponsored	Gross salary for the duration of training	

4.1.3 Liquidated Damages

This refers to redeeming of bond for termination of service before expiry of bond period. A health worker who terminates his/her services before the expiry of the bond period shall be liable to pay the whole amount of the bond in lump sum.

4.1.4 Bond Exemption

- a) Only health workers on permanent and pensionable terms of employment are to be bonded except where the worker will retire from the service before executing the bond.
- b) Health workers on probation, contract and temporary terms of service, casuals and interns, will only attend short term training that do not attract bonding.

4.1.5 Bond Merger

Where a bondee has been awarded a second scholarship by a development partner in recognition of exemplary performance and the same is approved by the MHRMAC, the bondee shall enter into a second bond period. The two bonds shall be combined and the bond period shall not exceed five years.

4.1.6 Concurrent Bonds

Bonds may be served concurrently where an officer is bonded for a long programme and before completion of the bond period s/he is awarded a short course in specialized/critical areas that attract a bond.

4.1.7 Forfeiture of Bond Agreement

If a bondee fails to complete a course of training for reasons which cannot be justified, s/he and/or her/his sureties shall be liable to repay all sums advanced.

4.1.8 Transfer of Bond Obligations

Should a bondee wish to change jobs or work stations during the period of the bond, the following shall be undertaken:

- a) Within the civil service: The remaining bond will be transferred to the new work station.
- b) To state corporation: The remaining bond will be transferred to the new work station.

- c) From civil service to partially government owned agency on own initiative: The bond must be redeemed in full.
- d) From public service to private sector: The bond must be redeemed in full.

4.1.9 Sureties

The surety(ies) will indemnify the government against all legal and administrative costs that will be incurred by reason of any default on the part of the bondee.

4.1.10 Number of Sureties

Every bondee shall secure two (2) eligible persons to sign as sureties on the bond form.

4.1.11 Qualification of a Surety

A person will qualify to be a surety if s/he satisfies the following conditions:

- a) Is a public servant
- b) Is at a grade comparable, same or higher than the bondee
- c) Is at least 21 years of age and of a maximum age that enables him/her to serve for the duration of the bond
- d) Does not stand surety for more than 5 bondees at any given time
- e) An officer serving a bond may stand as a surety for a maximum of three bondees
- f) Has not been declared bankrupt.

4.1.12 Death of Surety

In the event that a surety dies before the bond agreement has been fully discharged, the bondee has an obligation to inform the relevant authorized officer and the remaining surety shall guarantee the bond.

4.1.13 Surety(ies) Commitment

Should a bondee forfeit the agreement and fail to redeem the bond amount, the surety(ies) shall be required to pay all monies outstanding after reasonable attempts have been made by the government and the surety(ies) to locate the bondee.

4.1.14 Release of Surety(ies)

The surety(ies) will be released from his/her obligations under this agreement when the

bondee serves the bond period, redeems the full bond, or if s/he dies.

4.2 Scholarships

The scholarships available for health workers at the ministry responsible for health are:

- a) Ministerial/county government scholarships
- b) Scholarships from the ministry responsible for public service
- c) Technical assistance scholarship awards
- d) Private sector scholarships FBO, CBOS, Foundations and NGOS

An officer should disclose any other source of funds

4.2.1 Ministerial/County Scholarships Award

These are ministry/county internal scholarships for post graduate and post basic studies and are awarded on the following criteria:

- a) Length of service the health worker must have completed two (2) years including the one (1) year of internship of service from the date of the first appointment for technical staff.
- b) Skill relevance the skills being sought must be relevant to the duties of the health worker.
- c) Critical skill gaps priority will be given to applications in fields where critical skill gaps exist.
- d) Compliance with the following articles 10, 27, 232 and Chapter 6 of the Constitution of Kenya, 2010.

4.2.2 Ministry Responsible for Public Service Scholarships

These are scholarships that are funded by the exchequer for in-service courses. Allocations for these courses are given to the ministry responsible for public service each financial year and the information communicated to the various ministries. There is also a funding that is done through training revolving fund administered by the Higher Education Loans Board (HELB).

4.2.3 Technical Assistance Scholarship Awards

These scholarships are through bilateral and multilateral agreements with development partners and are announced through the ministry responsible for public service. The HRD Unit consequently announces the courses to respective departments and counties. Nominees for these courses are channelled to the development partners through the

Ministry responsible for public service. The lists of successful candidates are communicated to the authorized officer through the ministry responsible for public service. The HRD Unit will then inform the successful health workers accordingly.

4.2.4 Private Sector Scholarship Awards

These will be administered as per the existing service guidelines.

4.3 Deployment

After training the health worker will be re-deployed to a section or unit where his/her acquired skills, knowledge and competencies can be applied.

Chapter

5

Procedure for Monitoring and Evaluation

5.1 Monitoring and Evaluation

The annual training plan is the basis of monitoring. Monitoring should be conducted periodically, at least quarterly, to assess the progress of the training implementation according to the annual plan.

MOH-HRD section, MOH departments and counties have their own annual training plan and each entity is responsible for monitoring and evaluating its progress according to set goals and targets. Any deviation from the annual plan should be captured by the responsible entity, and changes shall be shared with MOH-HRD in a timely manner.

5.1.1 Training Database

Training record should be registered to the shared training database at the completion of training. The training database shall be accessed by HRD-MOH, CDOH, and training institutions. This database provides necessary information for the training implementation monitoring.

5.1.2 Procedures for Reporting, Evaluation and Revision of Training Programmes

The following are the proposed procedures for reporting, course/program evaluation and revision of training course/programme

- a) CDOHs enter data on the trainees sent from their counties, and training institutions enter data on the trainees attended to their training courses/ programmes.
- b) MOH-HRD monitors proper updates of the data entry by CDOHs and training institutions.
- c) MOH-HRD conducts periodical evaluation of training courses/programmes. Results of the monitoring are used as inputs for the evaluation. DPs may support the conduct of the evaluation.
- d) MOH-MHRMAC recommends evaluation report for CS approval.
- e) The evaluation results, inform recommendations for the review of the training curriculum by MOH-HRD and training institutions development partners may support the revision.

- f) The findings from the evaluation, shall inform MOH-HRD reviews of redeployment practices.
- g) CDOHs consider the revised re-deployment practice.
- h) MOH-HRD reviews the training strategy based on the revision of the training curriculum.
- i) Training institutions review their training plan based on the revision of the training curriculum.
- k) CDOHs review their training strategy based on the reviewed MOH's training strategy and training plans.

Reporting, Course/Program Evaluation and Revision of Training Course/Program County MOH Training Inst. DPs/IPs ന 2 (1) (MHRMAC) Entry of data on Entry of data on trainees to Monitoring of data training recourd to HRD data base **HRD** data base entry (3) (HRD) Support Conduct of evalution the evaluation 4 (MHRMAC) Recommendation for Approves the results of the evaluation by CS 6 (5) Support (HRD) the revision of (HRD, Training Institutions) Consider the reviesed Retraining Reveiw the Review of training curriculum, Deployment practice for staff recurriculum, contents and material re-deproyment in deployment contents, counties practice material (8) (HRD) Review of Training 9 (0) Strategy Reveiw of Training Review of County Training Plan

Figure 2: Reporting, course/program evaluation and revision of training/course program

Chapter

6

Appendices

APPENDIX 1: LIST OF CONTRIBUTORS

No.	Name of participant	Designation	Organization	District
1	Mr. David Njoroge	Director Human Resource Management and Development	МоН	Nairobi
2	Murianki Anne Cirindi	SAD/HRM&D	МоН	Nairobi
3	Dr. Caroline Karutu	Chief of Party, FUNZOKenya Project	IntraHealth International, USAID FUNZOKenya Project	Nairobi
4	Peter Milo	Ag, Deputy Chief of party	USAIDFUNZOKenya Project	Nairobi
5	Anne Marimbet	Senior Ortho. Tech.	МоН	Nairobi
6	Mercy Kasina	SACNO	МоН	Nairobi
7	Manasseh Bocha	DCCO	МоН	Nairobi
8	Samuel Kioko	SCO. HRD	МоН	Nairobi
9	James Gikaru Ibinda	HR Officer	МоН	Nairobi
10	Jane Mutua	HR Officer	МоН	Nairobi
11	Rahab Maina	Ag. DCCO	МоН	Nairobi
12	Lucy Muraya	HRMO/Admin.	МоН	Nairobi
13	Ethel L. Bulili	Senior HRMO	PSC	Nairobi
14	Rachel Ruwa	HRMO	МоН	Nairobi
15	Benjamin Murkomen	СРНО	МоН	Nairobi
16	Dorothy Njeru	SHRMO	МоН	Nairobi

17	Isaac Munene	Senior Manager H.S.S.	IntraHealth International, USAID FUNZOKenya Project	Nairobi
18	Peter Shikuku	Curriculum & Instructional Design Manager	IntraHealth International USAID FUNZOKenya Project	Nairobi
19	Linah Vihenda	Program Officer	IntraHealth International USAID FUNZOKenya Project	Nairobi
20	Stephen Mbaabu	Asst. Director M& E	IntraHealth International USAID FUNZOKenya Project	Nairobi
21	Dr. Hazel Mumbo	Human Resource for Health Development Expert	JICA	Nairobi
22	Tsuyoshi Ito	Chief Advisor, MOH, OCCADEP	JICA	Nairobi

APPENDIX 2: MONTHLY/QUARTERLY HUMAN RESOURCE DEVELOPMENT REPORT FORMAT

Quarterly training returns for the period ending.....

S/No	Cadre	Approved Long Courses	Approved Short Courses	Total Approved Training Requests	Ongoing Courses	Completed Courses
1.	Medical Officers					
2.	Clinical Officers					
3.	Nursing Officers					
4.	Radiographers					
5.	Health resource & Information Officers					
6.	Drivers					
7.	Medical Engineering Technologists					
8.	Clerical Officers					
	Sub-Total					
	GROSS TOTAL					

Summary of training returns for the period ending

S/NO	CADRE	ONGOING COURSES	COMPLETED COURSES	APPROVED TRAINING REQUEST
1.	Medical Officers			
2.	Clinical Officers			
3.	Nursing Officers			
4.	Radiographers			

5.	Health resource & Information Officers		
6.	Drivers		
7.	Medical Engineering Technologists		
8	Clerical Officers		
	TOTAL		

9 APPENDIX 3: GROUP HUMAN RESOURCE DEVELOPMENT PROPOSAL FORMAT

Group human resource development proposal format

Š.	SNO. Human	Specific	Target	Prog.	Venue	Course	Method	Facilitation Budget	Budget	Schedule
	Resource	es		Duration		Content	Content of Course			of
	Development Objective(s)						Admin.			Activities
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										

APPENDIX 4: HUMAN RESOURCE DEVELOPMENT BIO DATA FORM



MINISTRY OF HEALTH

TRAINING BIO DATA FORM (REVISED FEBRUARY 2015) PART 1 (PERSONAL & COURSE DETAILS) 3. Address...... e-mail..... e-mail.... 4. Date of Birth 5. Ethnicity..... 6. Gender..... 7. Disability (if any)..... 8. Date of First Appointment 9. Title of Last Course attended 11. Bond Period.......Bond Amount Ksh......Date Bond Expired...... 12. Title of Course Requested 13. Duration: From......To......To....... 14. Mode of study 15. Venue..... 16. Sponsor 17. Total Training Cost Kshs 18. Applicant's Signature..... **For Official Purposes Only** 19. Course justification by immediate supervisor:.....

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20. Forwarded by Head Depar	rtment (For those at N	ational) or Chief Officer of Health (for
those in County).		
Name		
Design	Sign	. Date

APPENDIX 5: HUMAN RESOURCE DEVELOPMENT APPLICATION FORMAT

Daktari Bora, Kericho Hospital, P.O. BOX 22, **KERICHO.**

15th April, 2016

The Cabinet Secretary, Ministry of Health, P.O. BOX 30016-00100.

NAIROBI

Thro'
County Chief Officer of Health,
Kericho County,
P.O. BOX 112,
KERICHO.

Thro'
The Medical Superintendent
Kericho County Hospital
BOX 11,

KERICHO.

RE: APPLICATION FOR COURSE APPROVAL

I am a Senior Medical Officer currently stationed at Kericho District Hospital. I have been admitted for Masters in Child Health and Paediatrics tenable at Moi University from 1st September, 2016 to 30th August, 2019 on full time mode of study.

The purpose of this letter is to request for course approval to enable me attend the course as scheduled.

Attached are admission letter, an extract of Hospital, County Training Committee minutes and duly completed Biodata form for your necessary action.

Dr. Daktari Bora PF/No 2010009687

APPENDIX 6: HUMAN RESOURCE DEVELOPMENT BOND FORM



AT FIX RECENT COLOURED

PASSPORT PHOTO

REPUBLIC OF KENYA

TRAINING BOND FORM FOR PUBLIC SERVANTS

Please use block letters to complete this form:

In triplicate

Attach a recent coloured passport size photograph

Copies to be distributed to:- Ministry training file, Bondees personal file; and a copy retained by the Bondee.

Know all men by these presents that	
1	Designation
(Bondee Full names)	-
Employment No:	ID No
Pin No	Passport No:
Mobile No	E-mail:
Ministry/Department/Agency:	Address:
Postal Code:	Telephone No
Other relevant information	
Commit myself to service in the Ministr	y/department/Agency of
	years upon completion of the
(C	ourse Title)
Held at	
	nstitution)
•	To

and	Designation
(First–surety full	name)
Employment No:	ID/Passport No:
Mobile No	Email
Ministry/Department/Agen	cy Address
Postal Code:	Telephone No:
Other relevant Information	
And	Designation
(Second suret	y full name)
Employment No	ID/Passport No:
Mobile No:	E-mail
Ministry/ Department Agen	cy Address:
Postal Code:	Telephone No:
Other relevant information	
We (Bondee, 1st Surety and	d 2nd Surety) jointly and severally bind ourselves, our heirs,
executors and administrato	rs to pay the government of Kenya (here in after called "the
Government" on demand	the sum of Kenya shillings (in words)(In
figures)	on account of the Bondee defaulting to serve the bonded
period of	years. Sealed with our seals this
Day ofin the	year two thousand and

Whereas for the better protection of the Government interests, the above Bondee has agreed to execute the bond and comply with the conditions set out hereunder:

NOW THE CONDITIONS OF THE ABOVE WRITTEN OBLIGATIONS ARE THAT.

- 1. Every serving officer granted a course approval to pursue of study tenable in or outside Kenya is required to comply with the following rules:
 - a) To proceed to the recognized institution and begin the course of the study for which the approval was granted and to continue with such studies for as long as prescribed unless he/she is prevented from so doing by sickness proved by a certificate from a recognized-medical practitioner or by circumstances beyond his/her control recognized as such as the Authorized Officer or any other person in that behalf.
 - b) To devote his/her whole time to following the course of instruction for which the approval is granted unless permission to undertake other work or studies or to modify his/her course in content or duration is granted.

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- c) Not to engage in any occupation or activity which is considered detrimental to his/her progress in the course of studies prescribed for his/her and or detrimental to his/her health.
- d) To satisfy the government as attendance, conduct and progress by a report from the head of the institution or such other approved person at the institution in which he/her is studying.
- e) To comply with the scholarship conditions.
- f) To sit for and pass any prescribed examinations or approved group of examinations within the time fixed by the authorities of the institution at which he/she is attending, unless he/she is prevented from so doing by sickness proved by a certificate from a recognized as such by the authorized officers or any other person in that behalf.
- g) To complete the course within the stipulated period and resume duty.
- h) On resumption of duty to continue in the service for a period as per the aforementioned bond agreement.
- i) The commencement date of the bond will be either the earliest date the employee reports to work station after completion of training; or the date the employee goes on annual leave immediately after completion of training.
- j) All Bondees will be required to sign the following declaration in the presence of either a magistrate, commissioner of oaths, or organization's Legal Officer.
- k) An officer under bond obligation who privately secures employment in any partially owed public institution or private sector will be required to redeem the bond in full.
- 2. The obligations contained in this agreement shall also be governed by the terms and conditions of employment in the public service and will bind and the paramount to any subsequent terms of appointment unless his/her bond is first terminated by the Government of Kenya.
- 3. This Training Bond Form together with the Guideline on Bonding Public Service trainees shall constitute a formal agreement between the Bondee and the Government of Kenya.
- 4. In the event the Bondee shall breach any or all of the above conditions, the above written bond shall remain in full force and effect and the agreed bond amount shall be forthwith payable to the respective authorized officer on behalf of the Government of Kenya, by way of liquidated damages, and not as a penalty and in case of his/her failing to do so, by the Surety(ies) jointly or severally.

THE ABOVE WRITTEN OBLIGATIONS are conditioned to be void in case:

- i. The Bondee completes the period of obligatory service;
- ii. The Bondee or surety(ies) fully redeems the bond;
- iii. The service of the Bondee is terminated by the employer;
- iv. The Bondee is declared permanently incapacitated by a certificate from a recognized medical practitioner, and
- v. The Bondee dies.

It should be noted that upon the lapse of the bond period, the Bondee and the Surety(ies) should be notified in writing 21 days.

Signed, sealed and delivered by:		
Bondee: Name	Signature	Date
(Bondee) First Surety: Name	Sianature	Date
(First surety)		
Second Surety: Name(Second Surety)	Signature	Date
In the presence of Commissioner	of oaths/Magistrate/Organis	ations Legal Officer
Name:	Signature	Date
	(seal)	
<u>DECLARATION</u>		
Ι		
	(Name of Bondee)	
Hereby declare that I have read by them.	d the foregoing rules and cor	nditions and agree to abide
Signature	Date	
I certify that the declaration was		
on the	•	
Name:	Signature	<u> </u>
(witness)		(stamp)
(Human resource development o	fficer or Training Manager of	respective organization)



Republic of Kenya

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