RIYAADA INSTITUTE FOR LEADERSHIP & GOVERNANCE

Educating Leaders. Producing Knowledge. Transforming Institutions.

RIYAADA ACADEMY

Course Syllabi and Assessment Handbook

Ten Executive Courses and Two Long Courses

Complete Syllabi | Version 0.2 | 5 November 2026

Submitted for Academic Board scrutiny (Stage 3, Chapter 9.4)

Prepared against	RIYAADA Unified Curriculum and Syllabus 2026 (RIYAADA-UCS-2026-001), Version 1.0, unchanged
Version and date	Version 0.2	5 November 2026 (supersedes Draft v0.1 of 9 October 2026 and incorporates the Completion Supplement)
Standard	Fourteen-field syllabus standard (Chapter 9.1)
Status	Complete fourteen-field syllabi (Stage 2 Design complete). Submitted for Academic Board scrutiny (Stage 3, Chapter 9.4). Prepared with AI assistance; subject-specialist review is assigned under Board decision 11.

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Approval and Public Release

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Signature



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Drafting Note and Review Guide

This handbook presents twelve course syllabi in a unified professional format. It sets out course identities, participant requirements, learning outcomes, delivery plans, assessment arrangements, learning resources and quality-assurance requirements.

Preparation for publication does not constitute academic approval, accreditation, regulatory recognition or authorisation to deliver a course. Formal approval and public release take effect only when the authorised decision, effective date and release record have been completed.

Status: complete, awaiting Academic Board approval

All fourteen fields of each syllabus are complete, including the session objectives, facilitator guidance and teaching materials set out in the Completion Supplement of 5 November 2026. The syllabi have not yet been through Academic Board scrutiny, piloting or approval (Chapter 9.4), and subject-specialist review is pending under decision 11. They were prepared with AI assistance (Claude) from the sources of the book and from published sources checked on 9 October 2026.

The book is unchanged. In the book each course remains a course card until its syllabus is approved as version 1.0 and lodged in the curriculum register (Chapter 9). In the website catalogue and launch register the twelve courses move from Coming soon to Intake to be confirmed, the same status as the Documented entries.

The syllabus text is for internal review. Before Stage 5 the website shows only the course code, title and status; the syllabus extract is published after approval.

At a glance

Source edition	RIYAADA Unified Curriculum and Syllabus 2026 (RIYAADA-UCS-2026-001), Version 1.0, October 2026. Unchanged.
Drafts	12 Word files of 8 to 10 pages: 10 Executive Courses (RA-UHC-203, RA-QPS-204, RA-HRH-205, RA-DHG-206, RA-PFM-304, RA-PMG-305, RA-RES-401, RA-MEL-402, RA-DAT-404, RA-GWR-405) and 2 Long Courses (RA-PHSC-621, RA-RSCH-622).
Standard	The fourteen-field syllabus standard of Chapter 9.1. Each draft ends with a table that shows the status of every field.
Kept from the book	Code, title, family and level, credit and hours (Decisions D4 and D10), award title and, for the Executive Courses, the tier, the Catalogue aim and the Catalogue applied outputs. These are not changed.
Proposed in the drafts	Participant profile, prerequisites, rationale, learning outcomes, module structure, session plans, methodology, assessment scheme with rubrics, gates and safeguards, materials, readings, framework map and, for the Long Courses, the aim, tier and signature outputs. Every proposed item is marked as proposed on the page.
Readings	79 distinct readings, 94 placements across the twelve drafts, each checked against the issuing body's own page, or a bibliographic record of the journal, on 9 October 2026. The log is in Part 5.
Decisions needed	Eleven decisions for the Academic Board (Part 3) and a list of local facts that must be verified by each course owner (Part 4).

1 The twelve drafts

Code	Course	Credit and time	Outcomes	Weights (%)	Core + supp. readings	Open items
RA-UHC-203	Universal Health Coverage & Strategic Purchasing	7 RCP · 35 contact hours · 7 days	5	50 · 30 · 20	3 + 4	12
RA-QPS-204	Quality Improvement & Patient Safety	6 RCP · 30 contact hours · 6 days	6	50 · 30 · 20	5 + 5	13
RA-HRH-205	Health Workforce Planning & Management	6 RCP · 30 contact hours · 6 days	6	50 · 30 · 20	3 + 4	11
RA-DHG-206	Digital Health & Health Information Governance	6 RCP · 30 contact hours · 6 days	6	50 · 30 · 20	4 + 3	13
RA-PFM-304	Public Financial Management & Institutional Budgeting	6 RCP · 30 contact hours · 6 days	6	55 · 25 · 20	4 + 4	13
RA-PMG-305	Project & Programme Management for Institutions	6 RCP · 30 contact hours · 6 days	6	55 · 25 · 20	3 + 1	12
RA-RES-401	Applied Research Design & Methods	6 RCP · 30 contact hours · 7 days	6	55 · 25 · 20	4 + 5	13
RA-MEL-402	Monitoring, Evaluation, Accountability & Learning	5 RCP · 25 contact hours · 6 days	6	55 · 25 · 20	4 + 4	12
RA-DAT-404	Data Literacy & Evidence for Decision-Makers	4 RCP · 20 contact hours · 5 days	6	50 · 30 · 20	3 + 3	11
RA-GWR-405	Grant Writing & Resource Mobilisation	4 RCP · 20 contact hours · 5 days	6	55 · 25 · 20	2 + 3	12
RA-PHSC-621	Pharmaceutical Regulation & Supply Chain	7 RCP · 24 contact hours · 12 weeks	6	30 · 40 · 20 · 10	5 + 3	13
RA-RSCH-622	Research Methods, Academic Writing & Ethics	10 RCP · 36 contact hours · 12 weeks	6	30 · 40 · 20 · 10	6 + 9	13

Weights are the shares of the final mark of each instrument, in the order shown in the draft. Executive Courses: principal output, analytical portfolio, simulation and participation. Long Courses: assignment, capstone, presentation and defence, participation. Open items include the eight that every draft carries.

2 How the drafts were built

1. **Catalogue first.** The identity, credit, hours, award title, tier, aim and applied outputs of each Executive Course are read from the unit page of the book and printed unchanged. Contact hours are derived at five per RCP for Executive Courses (Decision D4). A Long Course keeps the 12-week model: 2 credits are 24 contact, 72 notional hours and 7 RCP; 3 credits are 36 contact, 108 notional hours and 10 RCP (Decision D10).
2. **Outcomes.** Each course has five or six outcomes. Each opens with one verb from the controlled list (Table 33), the levels agree with the dominant outcome level stated in the Catalogue, and each outcome is traced to the instrument that tests it (alignment matrix, Chapter 9.3). Weights total 100 for the course and for the instruments, and no outcome is left untested.
3. **Assessment.** Executive Courses use three instruments inside the ranges of Table 24: a principal written output with its panel defence (50 to 55%), an analytical portfolio (25 to 30%) and an observed simulation with participation and reflection (20%). The pattern follows the 50, 30 and 20% scheme of the documented course RA-HFN-202. Long Courses use four instruments of 30, 40, 20 and 10%. Rubrics A, C, D, S and R are those of Annex H.2; the gates are those of Table 25; each course adds proposed competence safeguards.
4. **Session plans.** The plans give the sequence, minutes, method and required output of each day or week, and the minutes add up to the contact hours. Session objectives, facilitator notes and per-session materials are left as open items for the course owner.

5. **Frameworks and competencies.** Elements are mapped to the controlled names of Chapter 3.5 (LEADER, MANAGER, DIRECTOR, LEADERSHIP), and each course shows its emphasis on the seven Catalogue competencies.
6. **Readings.** A reading is listed only after the issuing body's own page (or a bibliographic record) was opened and the title, issuer, year and series were matched. Each reading has a stated learning use. No third-party text is reproduced. Licensed standards are cited for the structure the course teaches, and participants consult them through their institution.
7. **Local facts.** Laws, institutions, data and tools of Somalia are not asserted unless a source was found. Where the sources are thin the draft says so and leaves a dated action to the course owner (Part 4).

3 Decisions for the Academic Board

Each decision is also an open item in the drafts it affects. The drafts take the default shown until the Board decides.

No.	Decision	Applies to	Reference
1	Executive Course assessment pattern: principal output with defence 50 to 55%, analytical portfolio 25 to 30%, simulation and participation 20%.	The ten Executive Courses	Table 24; Chapter 7.2
2	Use of Rubric A (applied assignment) for Executive and Long Courses. Annex H.2 describes it as specific to the Executive Programmes, and the Program Book has no equivalent.	All twelve	Annex H.2; D19
3	Treatment of the principal written output and its panel defence as the "written capstone" and "defence" that carry the 60/100 gates.	The ten Executive Courses	Table 25; D19
4	Course-specific competence safeguards (listed below). They apply only if approved.	All twelve	Table 25
5	Long Course assessment scheme: the Programme Philosophy pattern of 30, 40, 20 and 10% as drafted, or the Program Book scheme.	RA-PHSC-621, RA-RSCH-622	Table 24; D18
6	Name a course owner and set the review date for each course. No owner is named in any draft.	All twelve	Chapter 9.7; Annex E
7	Day pattern where the Catalogue days and RCP do not divide evenly: RA-RES-401 (7 days, 6 RCP, 30 hours; drafted as six days of 4.5 hours and one of 3) and RA-MEL-402 (6 days, 5 RCP, 25 hours; drafted as five days of 4 hours and one of 5). The Board may prefer a different pattern within the same hours.	RA-RES-401, RA-MEL-402	D4
8	RA-QPS-204 needs time between baseline and re-measurement. Options: two modules about six weeks apart (drafted); a single block with the award held until re-audit data arrive; or a principal artefact redefined as an audit cycle with a sampled re-audit protocol.	RA-QPS-204	D4; Chapter 9.4
9	Boundaries and overlaps: UHC-203 with HFN-202 (Day 4); QPS-204 with HSLD-608 and PSCG-617; DHG-206 with DAT-404, EXD-703 and SDAT-619; PFM-304 with PFMX-502; PMG-305 with EXP-704 and GWR-405; RES-401 with SWP-403 and RSCH-622; MEL-402 with RES-401 and AC-ARE; PHSC-621 with HSSB-613. Sequence, consolidate or distinguish.	Eleven of the twelve	Chapter 9.4, Stage 3
10	Defence panels: about ten minutes for each participant, with parallel panels above about ten participants.	The ten Executive Courses	Chapter 7.5
11	Assign a subject specialist to each draft before Stage 3. Three need a specialist reviewer of a particular kind: a lawyer for the UHC-203 contract specimen, a compliance specialist for the sanctions clauses of GWR-405, and a safeguarding specialist for MEL-402.	All twelve	Chapter 9.4

Competence safeguards proposed (for decision 4)

Course	Safeguards (named in full in Part D of the draft)
RA-UHC-203	Verification specified
RA-QPS-204	Systems approach; Complete cycle
RA-HRH-205	Workload basis; Fair appraisal
RA-DHG-206	Data protection
RA-PFM-304	Reconciliation integrity
RA-PMG-305	Internal consistency
RA-RES-401	Research ethics
RA-MEL-402	Indicator completeness and link
RA-DAT-404	Uncertainty and limits
RA-GWR-405	Compliance and consistency
RA-PHSC-621	Product quality assurance
RA-RSCH-622	Research integrity

4 Facts that are not verified

These are the points where a source was thin, secondary or absent. Each course owner closes them before delivery. The drafts state none of them as settled.

Subject	Courses	Position	Action
Public Financial Management Act 2019 and Regulation 2020	RA-PFM-304	Cited from secondary records. The law number rests on one source.	Obtain the official text and any later amendment.
Somalia medicines law, regulatory authority and policy	RA-PHSC-621	WHO's programme page reports support but does not show whether any instrument is in force.	Obtain each official text and record its status.
National data-protection law and research-ethics review bodies	RA-DHG-206, RA-RES-401, RA-RSCH-622	Not stated in the drafts.	Record the instruments and bodies that apply before delivery.
Employment law and civil-service rules on appraisal, discipline and appeal	RA-HRH-205	Not stated in the draft.	Record the current national instruments.
National incident-reporting and clinical-governance requirements	RA-QPS-204	Not stated in the draft.	Record the current national instruments.
National health monitoring and evaluation plan and platform	RA-MEL-402	Not stated in the draft.	Record the current national instruments.
Health Sector Strategic Plan and Essential Package of Health Services	RA-UHC-203	The plan record was confirmed through a third-party plan register, not the ministry's website.	Obtain the ministry's copies and confirm their status.
Somalia Humanitarian Fund manual and allocation strategy	RA-GWR-405	Not obtained.	Obtain from the fund's manager before the fund is used as an example.
Demonstration platform (DHIS2 or another national system)	RA-DHG-206	Version and access arrangements not confirmed.	Confirm before delivery.
Legal framework for public contracting	RA-UHC-203	The draft does not state it.	Lawyer reviews the contract specimen.
MSH, Managing Access to Medicines and Health Technologies	RA-PHSC-621	The publisher's site announced its retirement after 30 June 2024.	Confirm an accessible copy.
Licensed standards (ISO 27001, ISO 31000, ISO 21502, COSO, PMBOK Guide)	RA-DHG-206, RA-PFM-304, RA-PMG-305	Licensed publications. The drafts cite them for structure, and no text is reproduced.	Participants consult them through their institution or library.

Subject	Courses	Position	Action
Readings confirmed through catalogue records or secondary descriptions, not the publisher's own page	See the log in Part 5	Marked "Confirmed through…" in the log.	The course owner checks the publisher's page when the edition is confirmed.

5 Reading-verification log

Checked on 9 October 2026. "Page checked" is the issuing body's page, or the bibliographic record of the journal. "Confirmed" is what was matched. Editions, access and licences are confirmed again by each course owner before each cohort. Listing a source implies no endorsement or partnership.

Reference	Page checked	Confirmed	Used in
ALLEA (2023). *The European Code of Conduct for Research Integrity: revised edition 2023*. Berlin: ALLEA – All European Academies.	allea.org/allea-publishes-2023-revised-edition-of-the-european-code-of-conduct-for-research-integrity/	Title and publication date (23 June 2023) confirmed on the ALLEA page.	RES-401, RSCH-622
Benjamin A (2008). Audit: how to do it in practice. *BMJ* 336(7655): 1241–1245.	pslhub.org record (BMJ, 29 May 2008); bmj.com/content/336/7655/1241	Title, author, journal, date, volume, issue and first page confirmed through the Patient Safety Learning record and the BMJ link it cites.	QPS-204
BetterEvaluation (current). *The Rainbow Framework*. betterevaluation.org.	betterevaluation.org/tools-resources/using-betterevaluation-rainbow-framework	The framework and its guidance were confirmed on the BetterEvaluation site.	MEL-402
Booth WC, Colomb GG, Williams JM, Bizup J, FitzGerald WT (2024). *The craft of research*, 5th edition. Chicago: University of Chicago Press.	chicagoreference.com (University of Chicago Press listing)	Title, edition, authors, publisher and year (2024) confirmed on the publisher's listing.	RES-401, RSCH-622
Busan Partnership for Effective Development Co-operation (2011). *Outcome document of the Fourth High Level Forum on Aid Effectiveness*, Busan, 29 November – 1 December 2011.	capacity4dev.europa.eu/library/outcome-document-busan-partnership-effective-development-co-operation_en	Title and agreement date (1 December 2011) confirmed on the capacity4dev library.	GWR-405
Cashin C, Bloom D, Sparkes S, Barroy H, Kutzin J, O'Dougherty S (2017). *Aligning public financial management and health financing: sustaining progress toward universal health coverage*. Health Financing Working Paper 17.4. Geneva: WHO.	r4d.org/wp-content/uploads/Aligning-PFM-and-HF.pdf	Title, authors, publisher, year and document number WHO/HIS/HGF/HFWorkingPaper/17.4 confirmed on the paper. Note: The title page of the paper prints a different working-paper number from its suggested citation; the document number 17.4 is used.	UHC-203, PFM-304
Cashin C, Gatome-Munyua A (2022). The Strategic Health Purchasing Progress Tracking Framework: a practical approach to describing, assessing, and improving strategic purchasing for universal health coverage. *Health Systems & Reform* 8(2): e2051794. doi:10.1080/23288604.2022.2051794.	r4d.org (article PDF); doaj.org record, Health Systems & Reform, March 2022	Title, authors, volume and issue, article number e2051794 and DOI confirmed on the article PDF; journal and month confirmed on the DOAJ record. Note: Corrected during verification: the working list carried a different article number; the number printed here is the one on the article.	UHC-203
Committee of Sponsoring Organizations of the Treadway Commission (2013). *Internal Control: Integrated Framework*. Durham, NC: COSO.	theiia.org (COSO Internal Control Integrated Framework 2013 listing)	Title, issuer and year confirmed on the Institute of Internal Auditors bookstore listing. Note: A licensed publication; the course uses its structure of components and principles.	PFM-304
Committee on Publication Ethics (2023). *Authorship and AI tools: COPE position statement*. 13 February 2023. publicationethics.org.	publicationethics.org/node/56046	Statement and first-publication date (13 February 2023) confirmed on the COPE site.	RSCH-622
Committee on Publication Ethics (current). *COPE Core Practices* (the ten core practices). publicationethics.org.	publicationethics.org/node/35396	The ten Core Practices were confirmed on the COPE site; the page does not give a version year. Note: Cited without a year; the course owner records the version used.	RSCH-622
Council for International Organizations of Medical Sciences (2016). *International ethical guidelines for health-related research involving humans*. Geneva: CIOMS.	cioms.ch/ethical-guidelines-2016/	Title, issuer and year confirmed on the CIOMS page and the PAHO document record.	RES-401, RSCH-622

Reference	Page checked	Confirmed	Used in
Creswell JW, Creswell JD (2022). *Research design: qualitative, quantitative, and mixed methods approaches*, 6th edition. Thousand Oaks, CA: SAGE.	sagepub.com/shop/buy-a-book/research-design-6-270550	Title, edition, authors, publisher and year (October 2022) confirmed on the SAGE page.	RES-401, RSCH-622
DHIS2 project (current). *DHIS2 documentation: data quality tools and data validation*. Oslo: DHIS2 (docs.dhis2.org).	docs.dhis2.org/en/use/user-guides/dhis-core-version-243/collecting-data/data-quality.html	The data-quality section of the user guide was found on docs.dhis2.org. Note: Documentation is versioned; the course owner records the version used.	DHG-206
Dieleman M, Gerretsen B, van der Wilt GJ (2009). Human resource management interventions to improve health workers' performance in low and middle income countries: a realist review. *Health Research Policy and Systems* 7: 7. doi:10.1186/1478-4505-7-7.	link.springer.com/article/10.1186/1478-4505-7-7	Title, authors, journal, volume, article number, year (2009) and DOI confirmed on the publisher page. Note: Corrected during verification: the working list gave the year 2012; the year printed here is the one on the article.	HRH-205
Directory of Open Access Journals (current). *DOAJ*. doaj.org.	doaj.org	The directory is the source of the journal records opened during verification.	RSCH-622
EQUATOR Network (current). *Library of reporting guidelines for health research*, including STROBE, CONSORT, PRISMA, STARD and SQUIRE. Oxford: EQUATOR Network (equator-network.org).	equator-network.org	The network and its guideline library, including CONSORT, STROBE, PRISMA and STARD, were confirmed on its site. Note: Guidelines are versioned; the course owner records the version used.	RES-401, RSCH-622
European Commission, EuropeAid Co-operation Office (2004). *Aid delivery methods, volume 1: project cycle management guidelines*. Brussels: European Commission.	capacity4dev.europa.eu/library/aid-delivery-methods-project-cycle-management-guidelines-europeaid-2004_en	Title, issuer and year confirmed on the European Commission capacity4dev library. Note: Older than the other readings; used for the logical-framework method, which the course owner may replace with a funder's current guidance.	GWR-405
Federal Republic of Somalia (2019). *Public Financial Management Act, 2019* (cited as Law No. 17 by the Office of the Auditor General), and Ministry of Finance, *Public Financial Management Regulation, 2020* (19 March 2020).	oag.gov.so/?p=7444; archive.mof.gov.so (Public Financial Management Regulation)	The Office of the Auditor General states that the Public Financial Management Law of 25 December 2019 (Law No. 17) repealed earlier laws; the Ministry of Finance regulation of 19 March 2020 states that it is made under Article 62 of the Public Finance Management Act, 2019. Note: The law number rests on one source. The course owner must obtain the official text and check any later amendment.	PFM-304
Few S (2013). *Information dashboard design: displaying data for at-a-glance monitoring*, 2nd edition. Burlingame, CA: Analytics Press.	analyticspress.com/idd.php	Title, author, edition and imprint confirmed on the publisher's page and catalogue records.	DAT-404
Flyvbjerg B (2014). What you should know about megaprojects and why: an overview. *Project Management Journal* 45(2): 6–19.	pmi.org/learning/library/what-you-should-know-megaprojects-11656	Title, author, journal, year, volume and issue confirmed on the PMI library page.	PMG-305
Greenhalgh T (2019). *How to read a paper: the basics of evidence-based medicine and healthcare*, 6th edition. Chichester: Wiley.	library catalogue and bookseller records (ISBN 9781119484721)	Title, edition and ISBN found in several library and bookseller records; no publisher page was read. Note: Confirmed through catalogue records, not the publisher's own page.	RES-401, RSCH-622
Health Metrics Network (2008). *Framework and standards for country health information systems*, 2nd edition. Geneva: WHO.	who.int/publications/i/item/9789241595940	Title, edition and issuer confirmed on the WHO publication page.	DHG-206
Healthcare Quality Improvement Partnership (2021). *Clinical audit: a guide for NHS Boards and partners*. London: HQIP.	hqip.org.uk/guidance/clinical-audit-a-guide-for-nhs-boards-and-partners	Title and date (published 15 March 2021; first published 2015) confirmed on the HQIP page. Note: A governance guide for boards; it complements and does not replace a practical audit method.	QPS-204
Huff D (1954). *How to lie with statistics*. New York: W. W. Norton.	library catalogue records	Title, author, publisher and year confirmed in library catalogue records. Note: Confirmed through catalogue records, not the publisher's own page.	DAT-404
Inter-Agency Standing Committee (2019). *Six core principles relating to sexual exploitation and abuse*. Geneva: IASC.	interagencystandingcommittee.org/node/39533	Title, issuer and year confirmed on the IASC site.	MEL-402, GWR-405
International Committee of Medical Journal Editors (updated January 2026). *Recommendations for the conduct, reporting, editing, and publication of scholarly work in medical journals*. icmje.org.	icmje.org/news-and-editorials/updated_recommendations_jan2026.html	Title and the January 2026 update (new Section V on artificial intelligence; new Section III.L.2 on access to data) read on the ICMJE site.	RSCH-622

Reference	Page checked	Confirmed	Used in
International Labour Organization (2019). *Violence and Harassment Convention No 190 and Recommendation No 206*. (Annex H.5, R9.)	Annex H.5 of the book	Listed in Annex H.5, checked by the Handbook authors on 9 September 2026; not re-checked in this draft.	HRH-205
International Monetary Fund (2019). *Fiscal Transparency Code*. Washington, DC: IMF. (Annex H.5, R4.)	blog-pfm.imf.org/en/pfmblog/2019/02/updated-fiscal-transparency-code-integrating-resource-revenue-issues	The 2019 update of the Code was confirmed on the IMF public-financial-management blog; the item is also listed as R4 in Annex H.5 of the book.	PFM-304
International Organization of Supreme Audit Institutions. *INTOSAI GOV 9100: guidelines for internal control standards for the public sector*. Vienna: INTOSAI.	issai.org/category_pronouncements/intosai-gov/	The pronouncement is listed on the ISSAI site as endorsed INTOSAI GOV 9100 (posting dated 13 August 2019). Note: Cited without a year of issue; the course owner records the version used.	PFM-304
ISO 21502:2020. *Project, programme and portfolio management: guidance on project management*. Geneva: International Organization for Standardization.	scc-ccn.ca/standardsdb/standards/8176145	Standard number, year and title confirmed on the Standards Council of Canada record and national standards bodies' listings. Note: A licensed standard.	PMG-305
ISO 31000:2018. *Risk management: guidelines*. Geneva: International Organization for Standardization.	committee.iso.org/sites/tc262/home/projects/published/iso-31000-2018-risk-management.html	Standard number, year and title confirmed on the ISO technical-committee page. Note: A licensed standard.	PMG-305
ISO/IEC 27001:2022. *Information security, cybersecurity and privacy protection: information security management systems, requirements*. Geneva: International Organization for Standardization.	webstore.iec.ch/publication/79694; scc-ccn.ca standards record	Standard number, year and title confirmed on the IEC webstore and the Standards Council of Canada record. Note: A licensed standard; the course uses its structure and not its text.	DHG-206
Jama MA, Majdzadeh R, Reynolds T, et al. (2023). Revising the essential package of health services through stakeholder alignment, Somalia. *Bulletin of the World Health Organization* 101(11): 738–742. doi:10.2471/BLT.23.289733.	pmc.ncbi.nlm.nih.gov/articles/PMC10630727; repository.essex.ac.uk/36877	Title, authors, journal, volume, pages and DOI confirmed on the PMC record; the revision (launched 2020, finalised June 2021) is described there.	UHC-203
Kruk ME, Gage AD, Arsenault C, et al. (2018). High-quality health systems in the Sustainable Development Goals era: time for a revolution. *The Lancet Global Health* 6(11): e1196–e1252.	researchonline.lshtm.ac.uk/4649302	Title, lead authors, journal, volume, issue, page range and DOI (10.1016/S2214-109X(18)30386-3) confirmed on the LSHTM record.	QPS-204
Kusek JZ, Rist RC (2004). *Ten steps to a results-based monitoring and evaluation system: a handbook for development practitioners*. Washington, DC: World Bank.	documents1.worldbank.org (curated PDF)	Title, authors, issuer and year confirmed on the World Bank documents site.	MEL-402
Kutzin J (2013). Health financing for universal coverage and health system performance: concepts and implications for policy. *Bulletin of the World Health Organization* 91(8): 602–611.	scielosp.org/pdf/bwho/2013.v91n8/602-611/en; doaj.org record, August 2013	Title, journal, issue (August 2013) and page range confirmed on the SciELO and DOAJ records.	UHC-203
Management Sciences for Health (2012). *Managing access to medicines and health technologies* (MDS-3), 3rd edition. Arlington, VA: MSH.	msh.org/resources/mds-3-managing-access-to-medicines-and-health-technologies/	Title, publisher and edition confirmed on the MSH page; chapter files on that page are dated March 2012. Note: The MSH page announces that its website would be retired after 30 June 2024; the course owner confirms an accessible copy.	PHSC-621
Ministry of Health and Human Services, Somalia (2021). *Somalia Health Sector Strategic Plan 2022–2026 (HSSP III)*. Mogadishu, December 2021.	andp.unescwa.org/plans/1509	Title, issuing ministry, period (2022–2026) and date (December 2021) confirmed on the UN ESCWA plan record; the six strategic priorities were read there. The ministry's own copy must be obtained by the course owner. Note: Confirmed through a third-party plan register, not the ministry's website.	UHC-203
National Patient Safety Foundation (2015). *RCA2: improving root cause analyses and actions to prevent harm*. Boston, MA: NPSF.	ihi.org/resources/tools/rca2-improving-root-cause-analyses-and-actions-prevent-harm	Title, issuer and year confirmed on the resource page hosted by the Institute for Healthcare Improvement.	QPS-204
OECD (2015). *Recommendation of the Council on Budgetary Governance*. Paris: OECD.	legalinstruments.oecd.org/public/doc/319/319.en.pdf	Title, issuer and year confirmed on the OECD legal-instruments site.	PFM-304
OECD (2020). *OECD Public Integrity Handbook*. (Annex H.5, R2.)	Annex H.5 of the book	Listed in Annex H.5, checked by the Handbook authors on 9 September 2026; not re-checked in this draft.	PFM-304
OECD DAC Network on Development Evaluation (2019). *Better criteria for better evaluation: revised evaluation criteria definitions and principles for use*. Paris: OECD.	oecd.org/en/publications/better-criteria-for-better-evaluation_15a9c26b-en	Title, issuer and year confirmed on the OECD publication page.	MEL-402, GWR-405

Reference	Page checked	Confirmed	Used in
Ogrinc G, Davies L, Goodman D, Batalden P, Davidoff F, Stevens D (2016). SQUIRE 2.0 (Standards for QUality Improvement Reporting Excellence): revised publication guidelines from a detailed consensus process. *BMJ Quality & Safety* 25(12): 986–992.	qualitysafety.bmj.com/content/25/12/986	Title, journal, volume, issue and first page confirmed on the journal page.	QPS-204
Page MJ, McKenzie JE, Bossuyt PM, et al. (2021). The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *BMJ* 372: n71.	pubmed.ncbi.nlm.nih.gov (PRISMA 2020 records); eprints.whiterose.ac.uk/173303	Title and journal confirmed on the repository and PubMed records.	RES-401, RSCH-622
PEFA Secretariat (2016). *PEFA 2016 Framework for assessing public financial management*. Washington, DC: PEFA Secretariat. (Annex H.5, R3.)	pefa.org/node/119	Title and issuer confirmed on the PEFA site; the item is also listed as R3 in Annex H.5 of the book.	PFM-304
Project Management Institute (2021). *A Guide to the Project Management Body of Knowledge (PMBOK Guide) and The Standard for Project Management*, 7th edition. Newtown Square, PA: PMI.	pmi.org (PMBOK Guide seventh edition listing)	Title, edition and issuer confirmed through the publisher's product listings. Note: A licensed publication.	PMG-305
Reason J (2000). Human error: models and management. *BMJ* 320(7237): 768–770.	bmj.com/node/533522	Title, author, journal, year, volume and first page confirmed on the BMJ page; the DOI gives issue 7237.	QPS-204
Rogers P (2014). *Theory of change*. Methodological Briefs: Impact Evaluation No. 2. Florence: UNICEF Office of Research.	ideas.repec.org/s/ucf/metbri.html	Title, author, series and issuer confirmed on the RePEc series record.	MEL-402
Second World Conference on Research Integrity (2010). *Singapore Statement on Research Integrity*. Singapore, 21–24 July 2010.	wcrif.org/singapore-statement	Title, conference and dates confirmed on the World Conferences on Research Integrity site.	RSCH-622
Spiegelhalter D (2019). *The art of statistics: learning from data*. London: Pelican.	penguin.co.uk (Pelican Books listing)	Title, author, imprint and year confirmed on the publisher's listing.	DAT-404
Think. Check. Submit. (current). *Choose the right journal for your research: checklist*. thinkchecksubmit.org.	thinkchecksubmit.org (and library guides that describe it)	The checklist and its purpose were confirmed through several library guides; the initiative's own site was not read. Note: Confirmed through secondary descriptions.	RSCH-622
United Nations Evaluation Group (2016). *Norms and standards for evaluation*. New York: UNEG.	unevaluation.org/document/detail/1914	Title, issuer and year confirmed on the UNEG document page.	MEL-402
United Nations General Assembly (2014). *Fundamental Principles of Official Statistics*. Resolution 68/261.	unstats.un.org/unsd/dnss/gp/fundprinciples.aspx	Title and resolution number confirmed on the United Nations Statistics Division site.	DAT-404
United Nations Office for the Coordination of Humanitarian Affairs. *Somalia Humanitarian Fund: operational manual and current allocation strategy*. OCHA Somalia.	reliefweb.int (Somalia Humanitarian Fund allocation dashboards); mptf.undp.org (operational manual)	The existence of the Fund, its allocation dashboards (2023–2024) and an operational manual were confirmed. Used only as an example of a funder's call document. Note: The current manual and allocation strategy must be obtained from OCHA before each delivery.	GWR-405
Willis-Shattuck M, Bidwell P, Thomas S, et al. (2008). Motivation and retention of health workers in developing countries: a systematic review. *BMC Health Services Research* 8: 247.	ncbi.nlm.nih.gov/pmc/articles/PMC2612662; doaj.org record, December 2008	Title, journal, volume and article number 247 confirmed on the PubMed Central and DOAJ records (December 2008).	HRH-205
World Health Organization (2011). *Monitoring, evaluation and review of national health strategies: a country-led platform for information and accountability*. Geneva: WHO (IHP+ framework).	uhc2030.org (M&E framework 2011); who.int/publications/i/item/9789241502276	Title confirmed on the WHO publication page; the framework file is dated 2011 on the UHC2030 site. Note: The WHO page shows a later posting date; the framework is cited by its 2011 issue.	MEL-402
World Health Organization (2011). *Standards and operational guidance for ethics review of health-related research with human participants*. Geneva: WHO.	who.int/publications/i/item/9789241502948	Title, issuer and year confirmed on the WHO publication page.	RES-401, RSCH-622
World Health Organization (2014). WHO model quality assurance system for procurement agencies. *WHO Technical Report Series No. 986, Annex 3*. Geneva: WHO.	who.int/publications/m/item/trs-986-annex-3	Title, annex and report series number confirmed on the WHO page.	PHSC-621
World Health Organization (2016). *Global strategy on human resources for health: Workforce 2030*. Geneva: WHO.	who.int/publications/i/item/9789241511131	Title, publisher and ISBN confirmed on the WHO publication page; the page describes consideration by the Sixty-ninth World Health Assembly (2016). Note: The WHO page shows a later web date (7 July 2020); the strategy is cited by its 2016 adoption.	HRH-205

Reference	Page checked	Confirmed	Used in
World Health Organization (2017). *Strategic purchasing for universal health coverage: key policy issues and questions. A summary from expert and practitioners' discussions*. Health Financing Working Paper 17.8. Geneva: WHO.	who.int/publications/i/item/strategic-purchasing-for-universal-health-coverage-key-policy-issues-and-questions	Title, subtitle, series number 17.8 and date (20 November 2017) confirmed on the WHO publication page.	UHC-203
World Health Organization (2017). *WHO Global Surveillance and Monitoring System for substandard and falsified medical products*. Geneva: WHO. With: *Activity report, August 2017 – December 2021* (Geneva: WHO, 2024).	who.int/publications-detail-redirect/9789241513425; who.int/publications/i/item/9789240097513	Both titles and issuer confirmed on the WHO pages; the activity report is dated 3 December 2024.	PHSC-621
World Health Organization (2018). *2018 global reference list of 100 core health indicators (plus health-related SDGs)*. WHO/HIS/IER/GPM/2018.1. Geneva: WHO.	who.int/publications/i/item/2018-global-reference-list-of-100-core-health-indicators-(-plus-health-related-sdgs)	Title, document number and date (30 January 2018) confirmed on the WHO publication page.	DHG-206, MEL-402, DAT-404
World Health Organization (2018). *Handbook for national quality policy and strategy: a practical approach for developing policy and strategy to improve quality of care*. Geneva: WHO.	who.int/publications-detail-redirect/9789241565561	Title, publisher and date (April 2018) confirmed through the WHO publication record and the Patient Safety Learning record.	QPS-204
World Health Organization (2019). *Purchasing health services for universal health coverage: how to make it more strategic?* Policy brief WHO/UCH/HGF/PolicyBrief/19.6. Geneva: WHO.	who.int/publications-detail-redirect/WHO-UCH-HGF-PolicyBrief-19.6	Title, document number and date (22 March 2019) confirmed on the WHO publication page.	UHC-203
World Health Organization (2020). *Digital Implementation Investment Guide (DIIG): integrating digital interventions into health programmes*. Geneva: WHO.	who.int/publications/i/item/9789240010567	Title and publisher confirmed on the WHO publication page.	DHG-206
World Health Organization (2020). Good storage and distribution practices for medical products. *WHO Technical Report Series No. 1025, Annex 7*. Geneva: WHO.	who.int/publications/m/item/trs-1025-annex-7	Title, report series number and date (17 June 2020) confirmed on the WHO page.	PHSC-621
World Health Organization (2020). *Patient safety incident reporting and learning systems: technical report and guidance*. Geneva: WHO.	who.int/publications/i/item/9789240010338	Title, publisher and date (16 September 2020) confirmed on the WHO publication page.	QPS-204
World Health Organization (2021). *Global Patient Safety Action Plan 2021–2030: towards eliminating avoidable harm in health care*. Geneva: WHO.	who.int/publications-detail-redirect/9789240032705	Title, publisher, date (3 August 2021) and ISBN confirmed on the WHO publication page.	QPS-204
World Health Organization (2021). *Global strategy on digital health 2020–2025*. Geneva: WHO. Extended to 2027 by the Seventy-eighth World Health Assembly (May 2025).	who.int/publications/i/item/9789240020924; who.int/news/item/23-05-2025-world-health-assembly-endorses-extension-of-the-global-digital-health-strategy-to-2027	Title and publisher confirmed on the WHO publication page; the extension to 2027 was read in the WHO news item of 23 May 2025.	DHG-206
World Health Organization (2021). Good reliance practices in the regulation of medical products: high level principles and considerations. *WHO Technical Report Series No. 1033, Annex 10*. Geneva: WHO.	who.int/publications/m/item/annex-10-trs-1033; who.int/news/item/29-04-2021-who-publishes-new-guidance-to-promote-strong-efficient-and-sustainable-regulatory-systems	Annex, series number and 2021 publication confirmed on the WHO pages.	PHSC-621
World Health Organization (2021). *WHO Global Benchmarking Tool (GBT) for evaluation of national regulatory system of medical products, Revision VI*. Geneva: WHO.	who.int/publications/i/item/9789240020245	Title, revision and date (10 May 2021) confirmed on the WHO publication page, which mentions no later revision.	PHSC-621
World Health Organization (2021). *WHO guideline on health workforce development, attraction, recruitment and retention in rural and remote areas*. Geneva: WHO.	who.int/publications/i/item/9789240024229	Title, publisher and date (6 May 2021) confirmed on the WHO publication page.	HRH-205
World Health Organization (2023). *National health workforce accounts: a handbook, second edition*. Geneva: WHO.	who.int/publications/i/item/9789240081291	Title, edition, publisher and date (22 November 2023) confirmed on the WHO publication page.	HRH-205
World Health Organization (2023). *Workload Indicators of Staffing Need (WISN): user manual, 2nd edition*. Geneva: WHO.	who.int/publications/i/item/9789240070066	Title, edition, publisher and date (23 November 2023) confirmed on the WHO publication page.	HRH-205
World Health Organization (2025). *WHO Model List of Essential Medicines, 24th list*, published in *The selection and use of essential medicines 2025* (WHO Technical Report Series No. 1064, 2026). Geneva: WHO.	who.int/publications/i/item/9789240119741	The 24th list and the Expert Committee report (TRS 1064, published 12 February 2026) confirmed on the WHO publication page.	PHSC-621
World Health Organization, OECD and World Bank (2018). *Delivering quality health services: a global imperative for universal health coverage*. Geneva: WHO.	worldbank.org (publication page, 5 July 2018); who.int/publications/i/item/9789241513906	Title, the three producing organisations and the July 2018 launch were confirmed on the World Bank page and the WHO publication page. Note: The WHO page shows a later posting date; the report is cited by its 2018 launch.	QPS-204

Reference	Page checked	Confirmed	Used in
World Health Organization, Somalia country programme (current). *Essential medicines and pharmaceutical policies*. emro.who.int/somalia.	emro.who.int/somalia/priority-areas/essential-medicines-and-pharmaceutical-policies.html	The page reports: the Somalia National Medicines Policy (2014); the establishment of a Medicines Regulatory Authority (2016) followed by a rapid benchmarking assessment and an Institutional Development Plan (2017); a pharmacovigilance unit and adverse-drug-reaction reporting (2019); technical support to the Somali Medicines Law and Drug Act (2019, finalisation listed as an upcoming activity); and an updated Somali Essential Medicines List (2019). Note: A programme page reporting WHO support. It does not show whether any instrument is in force; the course owner obtains each official text and its current status.	PHSC-621
World Health Organization. *Data quality assurance (DQA) toolkit: module 1 framework and metrics; module 2 desk review of data quality; module 3 data verification and system assessment*. Geneva: WHO (web resource).	who.int/data/data-collection-tools/health-service-data/data-quality-assurance-dqa	The module titles were read on the WHO page. The toolkit is also catalogued as the Data Quality Review (DQR) toolkit, produced with Gavi, the Global Fund, USAID and MEASURE Evaluation. Note: Cited without a year because the page does not date the modules; the course owner records the version used.	DHG-206, DAT-404
World Medical Association. *WMA Declaration of Helsinki: ethical principles for medical research involving human participants*. First adopted June 1964; most recently amended October 2024 by the 75th WMA General Assembly, Helsinki.	wma.net/policies-post/wma-declaration-of-helsinki/	Title, first adoption (June 1964) and latest amendment (October 2024, 75th General Assembly) read on the WMA page.	RES-401, RSCH-622

6 Route to approval and use of the drafts

Stage	What happens	Owner	Evidence retained
2 Design	v0.x. The twelve syllabi have completed this stage (version 0.2). A subject specialist reviews each one and the owner completes the open items.	Course owner	Draft syllabus, version 0.x
3 Academic scrutiny	The Board takes the decisions of Part 3, tests alignment, assessment, resources and local facts, and sets conditions.	Academic Board	Board minute and conditions
4 Pilot	First delivery with the instruments piloted and moderated; learning gain and feedback recorded.	Course owner	Pilot report; moderation record
5 Approval	The syllabus becomes version 1.0 and is lodged in the curriculum register. The book is then amended through its approval record.	Academic Board	Approved syllabus, version 1.0

- **Posting on the website.** Not before Stage 5. After approval, publish an extract only: title, aim, outcomes, credit and schedule. The internal parts (open items, safeguards under review, drafting method, reading log) stay internal. Until then the twelve courses can be shown as in development, with the book's statements of what RIYAADA does not claim: no accreditation, no credit transfer and no degree equivalence.
- **Changes.** A change to outcomes, credit, assessment instruments or weightings, level or title is a material change that needs Academic Board approval and a new version number (Chapter 9.4).
- **Next language versions.** Somali and Arabic versions follow approval of the English text, so that the three versions do not diverge.

7 Files in this folder

File	Holds
00_Drafting_Note_and_Review_Guide.docx	This note.
RA-UHC-203_Universal_Health_Coverage_and_Strategic_Purchasing_Syllabus_v0.2.docx	Universal Health Coverage & Strategic Purchasing
RA-QPS-204_Quality_Improvement_and_Patient_Safety_Syllabus_v0.2.docx	Quality Improvement & Patient Safety
RA-HRH-205_Health_Workforce_Planning_and_Management_Syllabus_v0.2.docx	Health Workforce Planning & Management
RA-DHG-206_Digital_Health_and_Health_Information_Governance_Syllabus_v0.2.docx	Digital Health & Health Information Governance
RA-PFM-304_Public_Financial_Management_and_Institutional_Budgeting_Syllabus_v0.2.docx	Public Financial Management & Institutional Budgeting
RA-PMG-305_Project_and_Programme_Management_for_Institutions_Syllabus_v0.2.docx	Project & Programme Management for Institutions
RA-RES-401_Applied_Research_Design_and_Methods_Syllabus_v0.2.docx	Applied Research Design & Methods
RA-MEL-402_Monitoring_Evaluation_Accountability_and_Learning_Syllabus_v0.2.docx	Monitoring, Evaluation, Accountability & Learning
RA-DAT-404_Data_Literacy_and_Evidence_for_Decision_Makers_Syllabus_v0.2.docx	Data Literacy & Evidence for Decision-Makers
RA-GWR-405_Grant_Writing_and_Resource_Mobilisation_Syllabus_v0.2.docx	Grant Writing & Resource Mobilisation
RA-PHSC-621_Pharmaceutical_Regulation_and_Supply_Chain_Syllabus_v0.2.docx	Pharmaceutical Regulation & Supply Chain
RA-RSCH-622_Research_Methods_Academic_Writing_and_Ethics_Syllabus_v0.2.docx	Research Methods, Academic Writing & Ethics

Prepared on 9 October 2026 with AI assistance (Claude). The drafts and this note are proposals for review and carry no approval.

Syllabi: ten Executive Courses

Ten Executive Courses of five to seven days. Each draft starts on a new page and follows the fourteen-field standard of Chapter 9.1. The Catalogue statements are unchanged; everything else is proposed.

RA-UHC-203 · Universal Health Coverage & Strategic Purchasing

Complete syllabus, version 0.2 (Stage 2 Design complete). Awaiting Academic Board approval. References are to RIYAADA-UCS-2026-001, Version 1.0.

Status of this draft

Complete syllabus, version 0.2 (Stage 2 Design complete). It has not yet been through Academic Board scrutiny, piloting or approval, and it does not replace the course card in the book until it is approved (Chapter 9.4).

The Catalogue statements of identity, credit, tier, aim and applied outputs are retained unchanged. Everything else is proposed content written on 9 October 2026 with AI assistance. A subject specialist has not reviewed it.

Items that need a decision are listed in Part G.

A Course identity and participant profile (fields 1, 2 and 14)

Code	RA-UHC-203
Full title	Universal Health Coverage & Strategic Purchasing
Family and level	Executive Course · RL2 Professional Certificate
School	S2 · School of Health Systems, Policy & Financing
Credit and hours	7 RCP · 70 notional hours · 35 contact hours (derived) · 7 days
Award	RIYAADA Professional Certificate in Universal Health Coverage & Strategic Purchasing
Participant profile (proposed)	Directors, senior managers and technical leads who design, negotiate or oversee the purchasing of health services: ministry of health and finance officials, staff of insurance and purchasing authorities, hospital and network executives, contracting and claims managers, and development-partner advisers. Primarily Tier 01 and Tier 02 (Catalogue).
Management tier	Tier 01 and Tier 02
Prerequisite knowledge (proposed)	Admission evidence as in Chapter 8. Working knowledge of the three health-financing functions (revenue raising, pooling and purchasing) at the level of RA-HFN-202, Day 1, or equivalent work experience (proposed prerequisite; the Academic Board confirms).
Delivery (proposed)	Seven days of five contact hours each, as a continuous block or in two modules of 3 + 4 days, in person at the Mogadishu campus or client premises; in-house cohort option (proposed).
Contact hours by day (derived)	Day 1: 5 h, Day 2: 5 h, Day 3: 5 h, Day 4: 5 h, Day 5: 5 h, Day 6: 5 h, Day 7: 5 h (35 hours in all).
Language of delivery	English; Somali or bilingual delivery; Arabic where required (Chapter 6).
Syllabus status	Complete syllabus, version 0.2, Stage 2 Design complete. In the book the course remains a course card until approval.
Source references	Catalogue RA-UHC-203; this draft (v0.1)
Award pathways	AC-HFU, PW-DIP (execution option)
Course owner and review date	To be named (open item, Annex E). First review: the Stage 6 annual review after the first delivery (Chapter 9.4).

B Rationale, aim and learning outcomes (fields 3 to 5)

Field 3 · Rationale

Universal health coverage is achieved only when an entitlement becomes a service that people can use. The step between the two is purchasing: deciding which providers are paid, for which services, at what price, on what conditions and with what checks. Where purchasing is passive, funds follow historical budgets or claims, and coverage commitments are not matched by delivery. Strategic purchasing uses the same funds to buy more of the services people need, at acceptable quality (WHO 2017; WHO 2019).

Sector strategies such as the Somalia Health Sector Strategic Plan 2022–2026 and the revised Essential Package of Health Services state what the system intends to deliver. This course addresses the step that follows in a purchasing institution: judging whether providers are ready to be contracted, choosing and combining payment methods, linking part of payment to quality, and writing the contract that makes these choices enforceable. It builds on the financing analysis of RA-HFN-202 and is designed for settings where information systems, provider capacity and fiscal space are limited, so each design choice is tested against what the purchaser can actually verify.

Field 4 · Course aim

Catalogue aim (unchanged). Translate UHC commitments into purchasing arrangements, empanelment standards, contracting and quality-linked payment.

Field 5 · Learning outcomes

On successful completion, participants will be able to:

LO1 Diagnose the purchasing arrangements of a named purchaser against the dimensions of the Strategic Health Purchasing Progress Tracking Framework and identify priority gaps.

LO2 Appraise a provider's readiness for empanelment against stated standards and evidence, and recommend empanelment, conditional empanelment or deferral.

LO3 Compare provider-payment methods and quality-linked payment designs for a defined service package, stating incentives, risks and data requirements.

LO4 Draft a contract specimen that turns purchasing decisions into obligations, performance and verification terms, payment terms and remedies.

LO5 Design an empanelment and purchasing framework that links a defined benefit package to provider standards, payment methods, quality incentives and monitoring.

Each outcome opens with one assessable verb from the controlled list (Table 33) and is traced to an instrument in Part D. Level profile of this draft: Creating 2, Evaluating 1, Analysing 2. Catalogue dominant outcome level: Creating. Catalogue principal assessed artefact: Empanelment and purchasing framework.

C Content and method (fields 6 to 8)

Field 6 · Module structure

Day	Hours	Theme	Core content
Day 1	5	The purchaser's task and a diagnostic	From entitlement to service: the purchaser–provider relationship and the purchasing cycle. Passive and strategic purchasing. Using the Strategic Health Purchasing Progress Tracking Framework to describe a purchaser's arrangements. Mandate, legal basis and autonomy of the purchasing institution. Mapping money flows and decision points in the named case.
Day 2	5	Benefit entitlements and the provider network	Turning a service package (for example the Essential Package of Health Services) into purchasable service units. Population, needs and catchment. Provider mapping across public, private, faith-based and non-governmental providers; capacity and access gaps. Cost and price inputs for service units.

Day	Hours	Theme	Core content
Day 3	5	Empanelment standards and readiness	Purpose of empanelment. Standards in seven domains: legal status, infrastructure and equipment, workforce, clinical quality and safety, information and reporting, financial management, governance and integrity. Assessment methods: document review, self-assessment, site visit. Scoring, tiering, conditional empanelment, improvement plans, re-assessment and exit. Fairness and conflict of interest in selecting providers.
Day 4	5	Provider payment and incentives	Capitation, case-based payment, fee-for-service, per diem, global budget and blended models. The incentives each creates, the risks (under-provision, risk selection, over-servicing, upcoding) and the data and system capacity each needs. Choosing a payment method by service line. Starting simple in low-capacity settings: payment on verified outputs and staged introduction. Tariff setting and cost data.
Day 5	5	Quality-linked payment, verification and fraud control	Selecting quality and performance indicators that can be measured and attributed. Designs: part of payment withheld, bonus, tiered rates. Verification by claims review, facility visit, patient feedback and counter-verification. Common fraud and abuse patterns and their controls. Cost of verification against the value it protects. Data flow from provider to purchaser.
Day 6	5	Contracting and negotiation	Contract architecture: a framework agreement with schedules for services, performance, payment, data and remedies. Core clauses and their purpose. Dispute resolution, suspension and termination. Negotiating under information asymmetry. The contract-management cycle. Observed purchaser–provider negotiation. The specimen is a teaching document; legal review is required before any use.
Day 7	5	Governance, sequencing and defence	Governance of the purchasing institution: board oversight, separation of purchasing and provision, complaints, transparency and audit. Alignment with public financial management rules and cash flow. Sequencing and piloting the framework; risks and mitigations. Assembly of the framework, panel defence and individual action plan.

Field 7 · Session plans

Day-level plans: the sequence, duration and method of each session and the required output of the day. Session objectives, facilitator notes and per-session materials are an open item (Part G).

Day	Session sequence	Required output of the day
Day 1	• Input and case introduction (60 min) • Diagnostic laboratory on the named purchaser (120 min) • Money-flow mapping workshop (75 min) • Coaching and day review (45 min)	Purchasing diagnostic (first draft) and money-flow map
Day 2	• Input: from entitlement to purchasable units (60 min) • Provider-network mapping laboratory (120 min) • Service-unit costing clinic (75 min) • Coaching and day review (45 min)	Service-unit list and provider-network map
Day 3	• Standards clinic (60 min) • Readiness-scoring laboratory on a case provider (135 min) • Evidence and verification workshop (60 min) • Coaching and day review (45 min)	Empanelment readiness assessment (draft)
Day 4	• Input: payment methods and incentives (75 min) • Payment-mechanism laboratory (120 min) • Incentive-risk clinic (60 min) • Coaching and day review (45 min)	Provider-payment appraisal (draft)
Day 5	• Input: quality-linked payment and verification (60 min) • Quality-linked payment design laboratory (120 min) • Verification and fraud-control workshop (75 min) • Coaching and day review (45 min)	Quality-linked payment design sheet

Day	Session sequence	Required output of the day
Day 6	• Contract architecture and clause briefing (60 min) • Contract-drafting workshop (90 min) • Observed negotiation simulation (105 min) • Debrief and coaching (45 min)	Contract specimen (draft); observed simulation record
Day 7	• Governance and sequencing input (45 min) • Framework assembly clinic (90 min) • Panel defence (individual) (120 min) • Action planning and close (45 min)	Framework defended (written framework submitted before the panel); individual action plan

Notional workload

Component	Hours
Contact sessions	35
Directed reading and case preparation	10
Between-session exercises	10
Preparation of assessed outputs	15
Total notional hours	**70**

Field 8 · Methodology

The course is built around one running case: a named purchaser, a defined service package and a provider network, supplied in a case pack with illustrative data. Each day pairs a short input with a laboratory in which participants build one component of their own framework, so that the framework is assembled from daily outputs rather than written at the end.

Two methods carry the judgement. In a scoring laboratory, participants assess a case provider against empanelment standards and defend each score from the evidence. In an observed negotiation, purchaser and provider teams hold different information and must reach terms within a time limit. Daily coaching converts group learning into the participant's own institutional framework. Participants may use their own institution as the case, with permission and without confidential data (Chapter 6.6); otherwise the case pack is used.

D Assessment (field 9)

Field 9 · Assessment scheme

Instrument weights follow Table 24: the principal applied output 50 to 60%, the analytical or simulation component 20 to 30%, and participation 10 to 25%.

Instrument and component	Weight	Rubric and gate	Outcomes
1 Empanelment and purchasing framework (principal assessed output)	**50%**		
• Written framework	35%	Rubric C (written capstone) · at least 60/100	LO1, LO2, LO3, LO5
• Panel defence	15%	Rubric D (defence) · at least 60/100	LO3, LO5
2 Analytical portfolio	**30%**		
• Empanelment readiness assessment	12%	Rubric A (applied assignment) · at least 50/100	LO2
• Provider-payment appraisal	6%	Rubric A (applied assignment) · at least 50/100	LO3
• Contract specimen	12%	Rubric A (applied assignment) · at least 50/100	LO4
3 Negotiation simulation and participation	**20%**		
• Negotiation simulation	10%	Rubric S (observed simulation) · at least 60/100	LO3, LO4
• Participation and reflection	10%	Rubric R (participation and reflection) · at least 50% (normalised)	LO1, LO2, LO5
Total	**100%**		

Evidence at threshold competence (proposed)

Component	What a threshold submission or performance shows
Written framework	States the mandate and the benefit package purchased; the diagnostic findings that justify the design; empanelment standards by domain with the method of verification; a payment method for each service line with its incentive rationale and data needs; a quality-linked component with defined indicators; the contracting model; governance, sequencing and the main risks with mitigations. Assumptions and unverified data are marked.
Panel defence	Explains the design choices and their trade-offs, answers questions on incentive risks and verification, and states what evidence would change the design.
Empanelment readiness assessment	Applies the standards to a case provider with scored evidence for each domain, identifies deficiencies, recommends a status (empanel, conditional, defer) and sets an improvement plan and a re-assessment date.
Provider-payment appraisal	Compares at least three payment methods for a named service line against incentives, risks, data requirements and administrative cost, and recommends one with reasons.
Contract specimen	Contains scope and population, standards, payment terms and schedule, a performance and quality schedule, reporting and data obligations, verification and audit rights, remedies, dispute resolution and termination. Marked as a teaching specimen requiring legal review.
Negotiation simulation	Observed in a purchaser or provider role: uses case evidence, handles information appropriately, trades terms against stated interests and leaves an accurate record of the terms agreed.
Participation and reflection	Rubric R criteria: preparedness, constructive contribution, peer-feedback quality and reflection depth.

Competency threshold	Overall at least 60/100. At least 50/100 in each applied assignment (Rubric A) and in the normalised participation and reflection mark (Rubric R). At least 60/100 in the observed simulation (Rubric S), the written capstone, here the principal written output (Rubric C) and the defence (Rubric D). Attendance of at least 80% of scheduled contact time. Every course competence safeguard is met. All required outputs and identity checks are complete. Chapter 7.3, Table 25 (Decision D19).

Competence safeguards (proposed)	Verification specified. The framework and the contract specimen each state what will be verified, by whom, how often and with what consequence for payment. A submission in which either omits verification does not meet the safeguard, whatever the average mark. A high average cannot compensate for a failed safeguard (Table 25). The safeguards take effect only if the Academic Board approves them.
Marking and moderation	Marking is criterion-referenced against the rubrics of Annex H.2, with common performance bands of 80–100 Strong, 70–79 Secure, 60–69 Threshold, 50–59 Developing and 0–49 Insufficient. A second marker reviews every fail, every safeguard failure and every result within two points of a classification boundary. Online defences use two assessors. Independent internal moderation covers a sample of the cohort; marking and moderation are kept separate (Chapters 7.3 and 7.5).
Feedback, late work, reassessment	Formative comments within seven calendar days of a submission and provisional summative feedback within ten working days. Unapproved work up to seven calendar days late loses five percentage points. One reassessment within 30 calendar days of feedback, capped at 60/100. Appeals within 15 working days (Chapter 7.4).
Learning-gain indicator	An unweighted pre-test and post-test. A gain of 20 percentage points is a cohort quality indicator and not an individual pass rule (Chapter 7.1).
Integrity and data	No patient data is required. Participants obtain permission before using workplace documents, upload no confidential data to external tools and acknowledge any use of AI (Chapter 6.6).

Alignment matrix (Chapter 9.3)

No outcome is omitted and every assessed component has a stated learning purpose. The weight is the share of the final mark that tests the outcome.

Learning outcome	Method that builds it	Instrument that tests it (weight)	Weight
LO1 · Diagnose	Day 1 diagnostic laboratory on the named purchaser; money-flow mapping; coaching	• Written framework (10) • Participation and reflection (3)	13%
LO2 · Appraise	Day 3 standards clinic and scoring laboratory on a case provider; evidence and verification workshop	• Written framework (5) • Empanelment readiness assessment (12) • Participation and reflection (3)	20%
LO3 · Compare	Days 4 and 5 payment-mechanism and quality-linked payment laboratories; incentive-risk clinic	• Written framework (6) • Panel defence (4) • Provider-payment appraisal (6) • Negotiation simulation (3)	19%
LO4 · Draft	Day 6 contract-drafting workshop; observed negotiation simulation; peer review of clauses	• Contract specimen (12) • Negotiation simulation (7)	19%
LO5 · Design	Running case across Days 1 to 7; Day 7 assembly clinic and panel defence	• Written framework (14) • Panel defence (11) • Participation and reflection (4)	29%
Total			**100%**

E Resources, framework integration and applied outputs (fields 10 to 13)

Field 10 · Materials and tools

Item	Proposed content	Status
Workbook	Daily laboratories, templates and the framework outline.	To be produced
Slide deck	Short inputs for Days 1 to 7.	To be produced
Case pack	A named purchaser, service package and provider network with illustrative data, labelled as illustrative.	To be produced

Item	Proposed content	Status
Templates	Diagnostic sheet; empanelment standards and scoring sheet; payment-appraisal matrix; contract schedule skeleton; framework outline.	To be produced
Instruments	Rubric sheets A, C, D, S and R; negotiation role briefs; unweighted pre-course and post-course test.	To be produced
Datasets	Illustrative provider and claims extracts for the verification workshop (no real personal data).	To be produced

Each item marked "To be produced" is to be produced, version-controlled and approved before the first delivery (Annex E).

Field 11 · Readings

Each item was checked against the issuing body's own page, or a bibliographic record of the journal, on 9 October 2026. The course owner confirms editions, access and licences before each cohort. Listing a source implies no endorsement or partnership, and no third-party text is reproduced (Chapter 3.5).

Type	Full attribution	Learning use and notes
Core 1	World Health Organization (2017). *Strategic purchasing for universal health coverage: key policy issues and questions. A summary from expert and practitioners' discussions*. Health Financing Working Paper 17.8. Geneva: WHO. Page checked: who.int/publications/i/item/strategic-purchasing-for-universal-health-coverage-key-policy-issues-and-questions	Sets out the questions a purchaser must answer; used for Day 1 and for the framework structure.
Core 2	World Health Organization (2019). *Purchasing health services for universal health coverage: how to make it more strategic?* Policy brief WHO/UCH/HGF/PolicyBrief/19.6. Geneva: WHO. Page checked: who.int/publications-detail-redirect/WHO-UCH-HGF-PolicyBrief-19.6	Short statement of what makes purchasing strategic; pre-course reading.
Core 3	Cashin C, Gatome-Munyua A (2022). The Strategic Health Purchasing Progress Tracking Framework: a practical approach to describing, assessing, and improving strategic purchasing for universal health coverage. *Health Systems & Reform* 8(2): e2051794. doi:10.1080/23288604.2022.2051794. Page checked: r4d.org (article PDF); doaj.org record, Health Systems & Reform, March 2022	The diagnostic framework used in the Day 1 laboratory and in the written framework.
Supplementary 1	Kutzin J (2013). Health financing for universal coverage and health system performance: concepts and implications for policy. *Bulletin of the World Health Organization* 91(8): 602–611. Page checked: scielosp.org/pdf/bwho/2013.v91n8/602-611/en; doaj.org record, August 2013	Concepts of financing functions and policy objectives; background for Day 1.
Supplementary 2	Cashin C, Bloom D, Sparkes S, Barroy H, Kutzin J, O'Dougherty S (2017). *Aligning public financial management and health financing: sustaining progress toward universal health coverage*. Health Financing Working Paper 17.4. Geneva: WHO. Page checked: r4d.org/wp-content/uploads/Aligning-PFM-and-HF.pdf	Links purchasing to public financial management rules; used on Day 7 for cash flow and budget alignment. Note: The title page of the paper prints a different working-paper number from its suggested citation; the document number 17.4 is used.
Supplementary 3	Ministry of Health and Human Services, Somalia (2021). *Somalia Health Sector Strategic Plan 2022–2026 (HSSP III)*. Mogadishu, December 2021. Page checked: andp.unescwa.org/plans/1509	National sector strategy for the case context; the ministry's own copy is obtained before delivery. Note: Confirmed through a third-party plan register, not the ministry's website.
Supplementary 4	Jama MA, Majdzadeh R, Reynolds T, et al. (2023). Revising the essential package of health services through stakeholder alignment, Somalia. *Bulletin of the World Health Organization* 101(11): 738–742. doi:10.2471/BLT.23.289733. Page checked: pmc.ncbi.nlm.nih.gov/articles/PMC10630727; repository.essex.ac.uk/36877	Account of the revision of the essential package of health services; used on Day 2 for the service package.

Field 12 · Framework integration map

Element names are the controlled names of Chapter 3.5 (Table 9). The mapping is proposed; the course owner re-checks it at Stage 3 (Annex F).

Framework	Controlled element	Developed in
DIRECTOR	Define	LO1, LO5: mandate and package
	Risk-manage	LO3: incentive and fraud risks
	Control	LO4: contract and verification
	Oversee	LO5: purchaser governance
MANAGER	Measure	LO2, LO3: readiness and quality indicators
	Allocate	LO3, LO5: payment to providers
	Govern	LO4: contract terms
LEADER	Decide	LO2, LO5
	Engage	LO4: negotiation simulation

#	Controlled competency (Catalogue)	Emphasis	Where developed and assessed
1	Ethical and accountable leadership	Supporting	Integrity in empanelment and conflict of interest (Days 3, 5, 7)
2	Strategic thinking, direction-setting and public-value orientation	Primary	Translating a coverage commitment into a purchasing design (Days 1, 7; LO1, LO5)
3	Governance, fiduciary oversight, risk management and institutional stewardship	Primary	Contract, verification, fraud control and purchaser governance (Days 5 to 7; LO3 to LO5)
4	Evidence-informed decision-making, policy analysis and data literacy	Supporting	Diagnostic and payment data (Days 1, 2, 4)
5	People, team, stakeholder and partnership leadership	Supporting	Negotiation with providers (Day 6; simulation)
6	Execution, change management, service improvement and performance discipline	Supporting	Sequencing and piloting (Day 7)
7	Communication, influence, reflection and adaptive learning	Supporting	Panel defence and reflection (Day 7; Rubrics D and R)

Field 13 · Applied outputs

The output names are those of the Catalogue and are unchanged. The descriptions and standards are proposed.

Applied output	Description and standard	Assessed in
Empanelment readiness assessment	Scored assessment of a case provider against the empanelment standards, with a recommended status and improvement plan.	Portfolio
Purchasing framework	The participant's framework linking package, provider standards, payment methods, quality incentives and monitoring (with the empanelment standards, the principal assessed artefact).	Written framework; panel defence
Contract specimen	A teaching contract with service, performance, payment, data, verification and remedy schedules.	Portfolio

F Compliance with the fourteen-field standard (Chapter 9.1)

Field	Content	Where	Status in this draft
1	Course identity	Part A	Complete (Catalogue data)
2	Participant profile	Part A	Proposed; tier from the Catalogue
3	Rationale	Part B	Proposed
4	Course aim	Part B	Complete (Catalogue text)
5	Learning outcomes	Part B	Proposed; each traced to an instrument
6	Module structure	Part C	Proposed
7	Session plans	Part C	Partly drafted (day level); open item
8	Methodology	Part C	Proposed
9	Assessment scheme	Part D	Proposed; weights total 100%; safeguards need Board approval
10	Materials and tools	Part E	Listed; none produced yet; open item
11	Readings and frameworks	Part E	Proposed; checked 9 October 2026
12	Framework integration map	Part E	Proposed
13	Applied outputs	Part E	Complete (Catalogue names)
14	Course owner and review date	Part A	Open item

G Open items, source note and approval record

Open items for the course owner and the Academic Board

1. Boundary with RA-HFN-202, Day 4 (strategic purchasing and provider payment): the Academic Board confirms RA-HFN-202 Day 1, or equivalent, as the prerequisite and that this course goes deeper rather than repeating Day 4.
2. The case pack with illustrative purchaser, provider and claims data has to be produced. If a real institution is used, permission is obtained and confidential data excluded (Chapter 6.6).
3. The contract specimen requires review by a lawyer familiar with contracting by public bodies in the jurisdiction; this draft does not state the legal framework.
4. The ministry's copies of the Health Sector Strategic Plan and the Essential Package of Health Services are to be obtained and their status confirmed before delivery.
5. Course owner (field 14). No owner is named. The owner is named, and the review date set, at approval (Chapter 9.7; Annex E).
6. Session plans (field 7) are drafted at the level of the day: the sequence, duration and method of each session and its required output. Session objectives, facilitator notes and per-session materials are to be completed by the course owner before Stage 3.
7. Materials (field 10) do not yet exist. Each item is to be produced, version-controlled and approved before the first delivery (Annex E).
8. Readings were checked against the issuing bodies on 9 October 2026. The course owner confirms editions, access and licences before each cohort and records the version of any web resource.
9. Rubrics and gates. Rubric A is described in Annex H.2 as specific to the Executive Programmes; this draft uses it for the applied assignments of an Executive Course. The principal written output and its defence are treated as the written capstone and defence of the gates (at least 60/100 each). The Academic Board confirms both uses (Decision D19).
10. Competence safeguards in Part D are proposals. They apply only if the Academic Board approves them (Table 25).
11. Pilot and moderation. The instruments are piloted and moderated in the first delivery cycle (Chapters 7.5 and 9.4). The Board confirms the panel size for defences (about ten minutes for each participant, with parallel panels above about ten participants).
12. Drafting method. This draft was prepared with AI assistance (Claude) from the sources of the book. A subject specialist has not reviewed it. Local facts (laws, institutions, data, tools) must be verified by the course owner before Stage 3.

Source and harmonisation note

Catalogue: 7 days, 7 RCP, retained unchanged (Decision D4). Contact hours are derived at five per RCP: 35 contact hours over seven days of five hours.

Approval record (Chapter 9.4)

Stage	Owner	Evidence retained	Decision reference and date	Status
2 Design	Course owner	Draft syllabus, version 0.x	v0.1 prepared 9 October 2026 (AI-assisted); v0.2 completed 5 November 2026	Complete; owner not yet named
3 Academic scrutiny	Academic Board	Board minute and conditions		Not started
4 Pilot	Course owner	Pilot report; moderation record		Not started
5 Approval	Academic Board	Approved syllabus, version 1.0		Not started

A course cannot be scheduled until its syllabus is complete, approved by the Academic Board and lodged in the curriculum register (Chapter 9).

RA-QPS-204 · Quality Improvement & Patient Safety

Complete syllabus, version 0.2 (Stage 2 Design complete). Awaiting Academic Board approval. References are to RIYAADA-UCS-2026-001, Version 1.0.

Status of this draft

Complete syllabus, version 0.2 (Stage 2 Design complete). It has not yet been through Academic Board scrutiny, piloting or approval, and it does not replace the course card in the book until it is approved (Chapter 9.4).

The Catalogue statements of identity, credit, tier, aim and applied outputs are retained unchanged. Everything else is proposed content written on 9 October 2026 with AI assistance. A subject specialist has not reviewed it.

Items that need a decision are listed in Part G.

A Course identity and participant profile (fields 1, 2 and 14)

Code	RA-QPS-204
Full title	Quality Improvement & Patient Safety
Family and level	Executive Course · RL2 Professional Certificate
School	S2 · School of Health Systems, Policy & Financing
Credit and hours	6 RCP · 60 notional hours · 30 contact hours (derived) · 6 days
Award	RIYAADA Professional Certificate in Quality Improvement & Patient Safety
Participant profile (proposed)	Hospital and health-centre managers, quality and patient-safety officers, matrons and nursing leaders, department heads, infection-prevention focal persons and clinical supervisors who are responsible for improving routine service delivery. Primarily Tier 02 and Tier 03 (Catalogue).
Management tier	Tier 02 and Tier 03
Prerequisite knowledge (proposed)	Admission evidence as in Chapter 8. Access to a service area in which a process-of-care audit can be carried out with the permission of the facility head (Chapter 6.6). No clinical qualification is required, but participants need working knowledge of the service they will audit.
Delivery (proposed)	Six days of five contact hours each, delivered as Module A (Days 1 to 3) and Module B (Days 4 to 6) with a workplace interval of about six weeks in which participants collect baseline data, apply an improvement and re-measure. In person at the Mogadishu campus or client premises; in-house cohort option (proposed; the interval is an open item).
Contact hours by day (derived)	Day 1: 5 h, Day 2: 5 h, Day 3: 5 h, Day 4: 5 h, Day 5: 5 h, Day 6: 5 h (30 hours in all).
Language of delivery	English; Somali or bilingual delivery; Arabic where required (Chapter 6).
Syllabus status	Complete syllabus, version 0.2, Stage 2 Design complete. In the book the course remains a course card until approval.
Source references	Catalogue RA-QPS-204; this draft (v0.1)
Award pathways	AC-HSL, PW-DIP (execution option)
Course owner and review date	To be named (open item, Annex E). First review: the Stage 6 annual review after the first delivery (Chapter 9.4).

B Rationale, aim and learning outcomes (fields 3 to 5)

Field 3 · Rationale

Avoidable harm in health care is common and costly, and most of it arises from the way care is organised rather than from individual failure. The WHO Global Patient Safety Action Plan 2021–2030 calls on health systems to eliminate avoidable harm, and the 2018 report of WHO, the OECD and the World Bank treats quality as a condition of universal health coverage: services that are effective, safe, people-centred, timely, equitable, integrated and efficient. In low-resource and post-conflict settings, improvement depends on supervisors and

managers who can measure practice against a standard, report and learn from incidents without blame, and sustain change.

This course builds those routines. Participants complete one clinical audit cycle on a standard they can measure without patient identifiers, analyse an incident by a systems method, and prepare a quality improvement charter that their facility can run. The emphasis is on small, measurable cycles that a facility can repeat.

Field 4 · Course aim

Catalogue aim (unchanged). Embed continuous improvement, clinical audit, incident reporting and just-culture safety practice in routine service delivery.

Field 5 · Learning outcomes

On successful completion, participants will be able to:

LO1 Apply the stages of the clinical audit cycle to select a topic, set measurable criteria and standards, and design a sample and a data-collection method.

LO2 Analyse baseline and re-measurement audit data against the standard to identify gaps and their causes.

LO3 Investigate a patient-safety incident by root cause analysis and recommend actions ranked by strength.

LO4 Apply the principles of a just culture to the handling of an incident report, from triage to feedback to the reporter.

LO5 Evaluate a completed audit cycle and its improvement actions against the standard and recommend whether to sustain, adjust or stop the change.

LO6 Develop a quality improvement charter that states the problem, aim, measures, change ideas, team and review cycle for a named service.

Each outcome opens with one assessable verb from the controlled list (Table 33) and is traced to an instrument in Part D. Level profile of this draft: Creating 1, Evaluating 1, Analysing 2, Applying 2. Catalogue dominant outcome level: Applying and evaluating. Catalogue principal assessed artefact: Completed clinical audit cycle.

C Content and method (fields 6 to 8)

Field 6 · Module structure

Day	Hours	Theme	Core content
Day 1	5	Quality, safety and the case for improvement	Dimensions of quality: effective, safe, people-centred, timely, equitable, integrated, efficient. Avoidable harm and its drivers in low-resource settings. Person and system approaches to error. Quality governance in a facility: roles, committees and data. Choosing an improvement topic by priority, measurability and local control. The improvement toolkit: process map, Pareto chart, run chart.
Day 2	5	Designing a clinical audit	The audit cycle and its stages. Criteria and standards drawn from guidelines and local protocols. Audit types that need no patient identifiers: observation, checklist and facility review. Sampling for small services, data-collection form, pilot, permissions and data protection (Chapter 6.6). Audit and research distinguished. Clinic: each participant's topic, criteria and tool.
Day 3	5	Incident reporting and learning systems	Purpose of reporting: learning, not blame. Incident types, near misses and levels of harm; what is reported and by whom. Classification, triage and feedback; protecting reporters; just culture and the person and system approaches. Designing a simple reporting routine for a facility. Introduction to root cause analysis and the RCA2 approach. Close of Module A: brief for the workplace interval.
Day 4	5	Results and analysis (Module B opens)	Review of interval results in peer clinics. Analysing audit data: compliance against the standard, run charts, variation and small numbers. Identifying gaps; cause analysis with fishbone and five whys. Interpreting re-measurement and balancing measures. What counts as improvement.

Day	Hours	Theme	Core content
Day 5	5	Root cause analysis and action	Conducting an RCA: team, timeline, flow diagram and cause-effect diagram; contributing factors; causal statements. The action hierarchy of stronger, intermediate and weaker actions. Action plans with owners, dates and measures. Just-culture simulation: handling a serious incident report, disclosure and support for staff.
Day 6	5	Charter, sustainability and review	The quality improvement charter: problem, aim, outcome, process and balancing measures, change ideas, team, sponsor, timeline and risks. PDSA cycles and sustaining change. Reporting improvement work with SQUIRE 2.0. Reporting to the board or quality committee. Panel review of the audit cycle; action planning.

Field 7 · Session plans

Day-level plans: the sequence, duration and method of each session and the required output of the day. Session objectives, facilitator notes and per-session materials are an open item (Part G).

Day	Session sequence	Required output of the day
Day 1	• Input: quality and safety (60 min) • Process-mapping and Pareto laboratory (90 min) • Topic-selection clinic (90 min) • Coaching and day review (60 min)	Selected audit topic and process map
Day 2	• Input: the audit cycle (60 min) • Criteria and standards laboratory (90 min) • Sampling and data-collection tool workshop (90 min) • Coaching and day review (60 min)	Audit protocol and data-collection tool (first draft)
Day 3	• Input: reporting and learning systems (60 min) • Reporting-routine design laboratory (90 min) • RCA introduction and case timeline (90 min) • Interval brief and coaching (60 min)	Incident-reporting routine (draft) and interval plan
Day 4	• Review of interval results (peer clinics) (75 min) • Data-analysis laboratory (105 min) • Cause-analysis workshop (60 min) • Coaching and day review (60 min)	Audit analysis: baseline, re-measurement and causes
Day 5	• Input: RCA2 and the action hierarchy (60 min) • RCA workshop on a case incident (120 min) • Just-culture simulation (observed) (75 min) • Debrief and coaching (45 min)	RCA report (draft); observed simulation record
Day 6	• Input: charters, PDSA and sustainability (45 min) • Charter workshop (90 min) • Panel review of the audit cycle (120 min) • Action planning and close (45 min)	Audit cycle defended; QI charter submitted

Notional workload

Component	Hours
Contact sessions	30
Workplace audit and improvement work in the interval	10
Directed reading and exercises	8
Preparation of assessed outputs	12
Total notional hours	**60**

Field 8 · Methodology

Participants work on their own service from the first day: each chooses a measurable standard, builds the audit tool, collects baseline data in the interval, applies a small improvement and re-measures. Teaching is short input followed by laboratories and clinics in which peers critique one another's criteria, tools and charts. A case incident, supplied as a written account and not drawn from a real patient, is analysed in a facilitated RCA workshop.

An observed just-culture simulation tests how a participant handles an incident report, a disclosure conversation and a staff-support decision. No patient-identifiable data are collected, stored or submitted. Audit topics are process measures such as hand-hygiene observation, medicine-storage checks, use of a safety checklist or completeness of handover records (Chapter 6.6).

D Assessment (field 9)

Field 9 · Assessment scheme

Instrument weights follow Table 24: the principal applied output 50 to 60%, the analytical or simulation component 20 to 30%, and participation 10 to 25%.

Instrument and component	Weight	Rubric and gate	Outcomes
1 Completed clinical audit cycle (principal assessed output)	**50%**		
• Audit cycle report	40%	Rubric C (written capstone) · at least 60/100	LO1, LO2, LO5
• Panel review	10%	Rubric D (defence) · at least 60/100	LO2, LO5
2 Analytical portfolio	**30%**		
• RCA report	15%	Rubric A (applied assignment) · at least 50/100	LO3
• Quality improvement charter	15%	Rubric A (applied assignment) · at least 50/100	LO6
3 Safety simulation and participation	**20%**		
• Just-culture simulation	10%	Rubric S (observed simulation) · at least 60/100	LO4
• Participation and reflection	10%	Rubric R (participation and reflection) · at least 50% (normalised)	LO1, LO3, LO4, LO6
Total	**100%**		

Evidence at threshold competence (proposed)

Component	What a threshold submission or performance shows
Audit cycle report	States the topic and why it matters; criteria and standard with their source; sample and method; baseline results; analysis of gaps and causes; the improvement actions taken; re-measurement results compared with baseline; limitations; and a recommendation to sustain, adjust or stop. No patient identifiers.
Panel review	Explains the choice of standard and method, interprets the results without overstating small numbers, and answers questions on causes and sustainability.
RCA report	Timeline of events, contributing factors at system level, causal statements, and actions ranked by the action hierarchy with owners, dates and measures of success; does not rest on one person's carelessness.
Quality improvement charter	Problem statement, SMART aim, outcome, process and balancing measures, change ideas, team and sponsor, timeline, risks and review route; feasible within the facility's authority and resources.
Just-culture simulation	Observed handling an incident report: confidentiality, classification, immediate safety actions, disclosure and support, a decision on the level of investigation, and feedback to the reporter, consistent with just-culture principles.

Component	What a threshold submission or performance shows
Participation and reflection	Rubric R criteria: preparedness, constructive contribution, peer-feedback quality and reflection depth.

Competency threshold	Overall at least 60/100. At least 50/100 in each applied assignment (Rubric A) and in the normalised participation and reflection mark (Rubric R). At least 60/100 in the observed simulation (Rubric S), the written capstone, here the principal written output (Rubric C) and the defence (Rubric D). Attendance of at least 80% of scheduled contact time. Every course competence safeguard is met. All required outputs and identity checks are complete. Chapter 7.3, Table 25 (Decision D19).
Competence safeguards (proposed)	1 Systems approach. The RCA report attributes the incident to system and process factors and does not rest on blame or retraining alone as its principal action. 2 Complete cycle. The audit report includes re-measurement or, where the Academic Board allows (open item), a sampled re-audit protocol. A high average cannot compensate for a failed safeguard (Table 25). The safeguards take effect only if the Academic Board approves them.
Marking and moderation	Marking is criterion-referenced against the rubrics of Annex H.2, with common performance bands of 80–100 Strong, 70–79 Secure, 60–69 Threshold, 50–59 Developing and 0–49 Insufficient. A second marker reviews every fail, every safeguard failure and every result within two points of a classification boundary. Online defences use two assessors. Independent internal moderation covers a sample of the cohort; marking and moderation are kept separate (Chapters 7.3 and 7.5).
Feedback, late work, reassessment	Formative comments within seven calendar days of a submission and provisional summative feedback within ten working days. Unapproved work up to seven calendar days late loses five percentage points. One reassessment within 30 calendar days of feedback, capped at 60/100. Appeals within 15 working days (Chapter 7.4).
Learning-gain indicator	An unweighted pre-test and post-test. A gain of 20 percentage points is a cohort quality indicator and not an individual pass rule (Chapter 7.1).
Integrity and data	No patient data is required. Participants obtain permission before using workplace documents, upload no confidential data to external tools and acknowledge any use of AI (Chapter 6.6).

Alignment matrix (Chapter 9.3)

No outcome is omitted and every assessed component has a stated learning purpose. The weight is the share of the final mark that tests the outcome.

Learning outcome	Method that builds it	Instrument that tests it (weight)	Weight
LO1 · Apply	Days 1 and 2 audit-design laboratories; topic-selection and criteria clinics	• Audit cycle report (10) • Participation and reflection (2)	12%
LO2 · Analyse	Day 4 data-analysis laboratory; run charts; cause-analysis workshop	• Audit cycle report (15) • Panel review (3)	18%
LO3 · Investigate	Days 3 and 5 RCA introduction and workshop on a written case incident	• RCA report (15) • Participation and reflection (2)	17%
LO4 · Apply	Day 3 reporting-routine design; Day 5 observed just-culture simulation	• Just-culture simulation (10) • Participation and reflection (3)	13%
LO5 · Evaluate	Days 4 to 6 peer clinics; Day 6 panel review of the audit cycle	• Audit cycle report (15) • Panel review (7)	22%
LO6 · Develop	Days 5 and 6 charter workshop; PDSA and sustainability input	• Quality improvement charter (15) • Participation and reflection (3)	18%
Total			**100%**

E Resources, framework integration and applied outputs (fields 10 to 13)

Field 10 · Materials and tools

Item	Proposed content	Status
Workbook	Audit and RCA templates, run-chart guide and charter outline.	To be produced
Slide deck	Short inputs for Days 1 to 6.	To be produced
Case pack	A written case incident (no real patient data), a model audit with worked data, and a worked charter.	To be produced
Templates	Audit protocol and data-collection form; incident report form; RCA timeline and cause-effect sheets; action-plan sheet; QI charter.	To be produced
Instruments	Rubric sheets A, C, D, S and R; just-culture simulation scenario and observation sheet; unweighted pre-course and post-course test.	To be produced
Datasets	Worked audit data sets for the analysis laboratory (illustrative).	To be produced

Each item marked "To be produced" is to be produced, version-controlled and approved before the first delivery (Annex E).

Field 11 · Readings

Each item was checked against the issuing body's own page, or a bibliographic record of the journal, on 9 October 2026. The course owner confirms editions, access and licences before each cohort. Listing a source implies no endorsement or partnership, and no third-party text is reproduced (Chapter 3.5).

Type	Full attribution	Learning use and notes
Core 1	World Health Organization (2021). *Global Patient Safety Action Plan 2021–2030: towards eliminating avoidable harm in health care*. Geneva: WHO. Page checked: who.int/publications-detail-redirect/9789240032705	Global frame for patient safety; pre-reading for Day 1.
Core 2	World Health Organization, OECD and World Bank (2018). *Delivering quality health services: a global imperative for universal health coverage*. Geneva: WHO. Page checked: worldbank.org (publication page, 5 July 2018); who.int/publications/i/item/9789241513906	Definition of quality and its dimensions; used on Day 1.
Core 3	World Health Organization (2020). *Patient safety incident reporting and learning systems: technical report and guidance*. Geneva: WHO. Page checked: who.int/publications/i/item/9789240010338	Design of reporting and learning systems; used on Day 3.
Core 4	National Patient Safety Foundation (2015). *RCA2: improving root cause analyses and actions to prevent harm*. Boston, MA: NPSF. Page checked: ihi.org/resources/tools/rca2-improving-root-cause-analyses-and-actions-prevent-harm	Method and action hierarchy for root cause analysis; used on Days 3 and 5.
Core 5	Benjamin A (2008). Audit: how to do it in practice. *BMJ* 336(7655): 1241–1245. Page checked: pslhub.org record (BMJ, 29 May 2008); bmj.com/content/336/7655/1241	Practical steps of a clinical audit; used on Days 2 and 4.
Supplementary 1	Reason J (2000). Human error: models and management. *BMJ* 320(7237): 768–770. Page checked: bmj.com/node/533522	The person and system approaches to error; background to just culture.
Supplementary 2	Ogrinc G, Davies L, Goodman D, Batalden P, Davidoff F, Stevens D (2016). SQUIRE 2.0 (Standards for QUality Improvement Reporting Excellence): revised publication guidelines from a detailed consensus process. *BMJ Quality & Safety* 25(12): 986–992. Page checked: qualitysafety.bmj.com/content/25/12/986	Guideline for reporting improvement work; used on Day 6.
Supplementary 3	Kruk ME, Gage AD, Arsenault C, et al. (2018). High-quality health systems in the Sustainable Development Goals era: time for a revolution. *The Lancet Global Health* 6(11): e1196–e1252. Page checked: researchonline.lshtm.ac.uk/4649302	Evidence on quality and mortality in low- and middle-income countries; background.

Type	Full attribution	Learning use and notes
Supplementary 4	World Health Organization (2018). *Handbook for national quality policy and strategy: a practical approach for developing policy and strategy to improve quality of care*. Geneva: WHO. Page checked: who.int/publications-detail-redirect/9789241565561	National quality policy and strategy; for participants in policy roles.
Supplementary 5	Healthcare Quality Improvement Partnership (2021). *Clinical audit: a guide for NHS Boards and partners*. London: HQIP. Page checked: hqip.org.uk/guidance/clinical-audit-a-guide-for-nhs-boards-and-partners	How boards oversee clinical audit; used on Day 6 for reporting to a board. Note: A governance guide for boards; it complements and does not replace a practical audit method.

Field 12 · Framework integration map

Element names are the controlled names of Chapter 3.5 (Table 9). The mapping is proposed; the course owner re-checks it at Stage 3 (Annex F).

Framework	Controlled element	Developed in
MANAGER	Measure	LO1, LO2: audit measurement
	Execute	LO6: charter and PDSA
	Review	LO2, LO5: re-measurement and review
	Govern	LO4: reporting routine
LEADER	Listen	LO4: reporter and staff
	Reflect	LO5
	Engage	LO6: team and sponsor
DIRECTOR	Risk-manage	LO3: RCA actions
	Ensure ethics	LO4: just culture
	Track	LO2, LO5

#	Controlled competency (Catalogue)	Emphasis	Where developed and assessed
1	Ethical and accountable leadership	Primary	Just culture, candour and protection of reporters (Days 3, 5; LO4)
2	Strategic thinking, direction-setting and public-value orientation	Not addressed	–
3	Governance, fiduciary oversight, risk management and institutional stewardship	Supporting	Reporting to the board; risk-based actions (Days 5, 6)
4	Evidence-informed decision-making, policy analysis and data literacy	Primary	Audit data, run charts and interpretation (Days 2 to 4; LO1, LO2)
5	People, team, stakeholder and partnership leadership	Supporting	Teams, reporters and staff support (Days 3, 5)
6	Execution, change management, service improvement and performance discipline	Primary	Service improvement and performance discipline (Days 4 to 6; LO5, LO6)
7	Communication, influence, reflection and adaptive learning	Supporting	Feedback, disclosure conversations and reflection (Day 5; Rubric R)

Field 13 · Applied outputs

The output names are those of the Catalogue and are unchanged. The descriptions and standards are proposed.

Applied output	Description and standard	Assessed in
Completed clinical audit cycle	Audit from topic and standard to baseline, action and re-measurement, reported and defended (the principal assessed artefact).	Audit cycle report; panel review
RCA report	Root cause analysis of a case incident with ranked actions.	Portfolio
Quality improvement charter	A charter the participant's facility can run.	Portfolio

F Compliance with the fourteen-field standard (Chapter 9.1)

Field	Content	Where	Status in this draft
1	Course identity	Part A	Complete (Catalogue data)
2	Participant profile	Part A	Proposed; tier from the Catalogue
3	Rationale	Part B	Proposed
4	Course aim	Part B	Complete (Catalogue text)
5	Learning outcomes	Part B	Proposed; each traced to an instrument
6	Module structure	Part C	Proposed
7	Session plans	Part C	Partly drafted (day level); open item
8	Methodology	Part C	Proposed
9	Assessment scheme	Part D	Proposed; weights total 100%; safeguards need Board approval
10	Materials and tools	Part E	Listed; none produced yet; open item
11	Readings and frameworks	Part E	Proposed; checked 9 October 2026
12	Framework integration map	Part E	Proposed
13	Applied outputs	Part E	Complete (Catalogue names)
14	Course owner and review date	Part A	Open item

G Open items, source note and approval record

Open items for the course owner and the Academic Board

1. Interval and modular delivery. The six-day delivery is retained (Decision D4). A completed cycle needs time between baseline and re-measurement; this draft proposes Modules A and B about six weeks apart. If the course is delivered as a single block, either the award is held until re-audit data are submitted within a window the Academic Board sets, or the principal artefact is redefined as an audit cycle to action plan with a sampled re-audit protocol.
2. Audit topics and permissions. Topics are limited to process measures that need no patient identifiers; each participant needs the facility head's permission (Chapter 6.6).
3. The written case incident has to be produced and checked to contain no real patient or staff identifiers.
4. Overlap in quality and patient-safety content with RA-HSLD-608 and RA-PSCG-617 (Long Courses) to be reviewed at Academic Board scrutiny.
5. National incident-reporting and clinical-governance requirements are not stated here; the course owner records the current national instruments before delivery.
6. Course owner (field 14). No owner is named. The owner is named, and the review date set, at approval (Chapter 9.7; Annex E).
7. Session plans (field 7) are drafted at the level of the day: the sequence, duration and method of each session and its required output. Session objectives, facilitator notes and per-session materials are to be completed by the course owner before Stage 3.

8. Materials (field 10) do not yet exist. Each item is to be produced, version-controlled and approved before the first delivery (Annex E).
9. Readings were checked against the issuing bodies on 9 October 2026. The course owner confirms editions, access and licences before each cohort and records the version of any web resource.
10. Rubrics and gates. Rubric A is described in Annex H.2 as specific to the Executive Programmes; this draft uses it for the applied assignments of an Executive Course. The principal written output and its defence are treated as the written capstone and defence of the gates (at least 60/100 each). The Academic Board confirms both uses (Decision D19).
11. Competence safeguards in Part D are proposals. They apply only if the Academic Board approves them (Table 25).
12. Pilot and moderation. The instruments are piloted and moderated in the first delivery cycle (Chapters 7.5 and 9.4). The Board confirms the panel size for defences (about ten minutes for each participant, with parallel panels above about ten participants).
13. Drafting method. This draft was prepared with AI assistance (Claude) from the sources of the book. A subject specialist has not reviewed it. Local facts (laws, institutions, data, tools) must be verified by the course owner before Stage 3.

Source and harmonisation note

Catalogue: 6 days, 6 RCP, retained unchanged (Decision D4). Contact hours are derived at five per RCP: 30 contact hours over six days of five hours.

Approval record (Chapter 9.4)

Stage	Owner	Evidence retained	Decision reference and date	Status
2 Design	Course owner	Draft syllabus, version 0.x	v0.1 prepared 9 October 2026 (AI-assisted); v0.2 completed 5 November 2026	Complete; owner not yet named
3 Academic scrutiny	Academic Board	Board minute and conditions		Not started
4 Pilot	Course owner	Pilot report; moderation record		Not started
5 Approval	Academic Board	Approved syllabus, version 1.0		Not started

A course cannot be scheduled until its syllabus is complete, approved by the Academic Board and lodged in the curriculum register (Chapter 9).

RA-HRH-205 · Health Workforce Planning & Management

Complete syllabus, version 0.2 (Stage 2 Design complete). Awaiting Academic Board approval. References are to RIYAADA-UCS-2026-001, Version 1.0.

Status of this draft

Complete syllabus, version 0.2 (Stage 2 Design complete). It has not yet been through Academic Board scrutiny, piloting or approval, and it does not replace the course card in the book until it is approved (Chapter 9.4).

The Catalogue statements of identity, credit, tier, aim and applied outputs are retained unchanged. Everything else is proposed content written on 9 October 2026 with AI assistance. A subject specialist has not reviewed it.

Items that need a decision are listed in Part G.

A Course identity and participant profile (fields 1, 2 and 14)

Code	RA-HRH-205
Full title	Health Workforce Planning & Management
Family and level	Executive Course · RL2 Professional Certificate
School	S2 · School of Health Systems, Policy & Financing
Credit and hours	6 RCP · 60 notional hours · 30 contact hours (derived) · 6 days
Award	RIYAADA Professional Certificate in Health Workforce Planning & Management
Participant profile (proposed)	Heads of department, facility and district managers, human-resource officers, nursing and midwifery leaders and programme managers who plan staffing and manage performance. Primarily Tier 02 and Tier 03 (Catalogue).
Management tier	Tier 02 and Tier 03
Prerequisite knowledge (proposed)	Admission evidence as in Chapter 8. Responsibility for, or close involvement in, staffing decisions for a defined unit. Basic spreadsheet skills, because the workload exercises use a spreadsheet.
Delivery (proposed)	Six days of five contact hours each, as a continuous block or in two modules of 3 + 3 days, in person at the Mogadishu campus or client premises; in-house cohort option (proposed).
Contact hours by day (derived)	Day 1: 5 h, Day 2: 5 h, Day 3: 5 h, Day 4: 5 h, Day 5: 5 h, Day 6: 5 h (30 hours in all).
Language of delivery	English; Somali or bilingual delivery; Arabic where required (Chapter 6).
Syllabus status	Complete syllabus, version 0.2, Stage 2 Design complete. In the book the course remains a course card until approval.
Source references	Catalogue RA-HRH-205; this draft (v0.1)
Award pathways	AC-HSL, PW-DIP (execution option)
Course owner and review date	To be named (open item, Annex E). First review: the Stage 6 annual review after the first delivery (Chapter 9.4).

B Rationale, aim and learning outcomes (fields 3 to 5)

Field 3 · Rationale

Health services depend on the people who deliver them. The Global Strategy on Human Resources for Health: Workforce 2030 asks countries to plan, educate, deploy and retain a workforce that matches population needs, and WHO's national health workforce accounts give a common way to record it. Departmental managers meet this in practice as a series of decisions: how many staff of which type a service needs, how to cover a roster, how to judge and develop performance fairly, and how to keep people in difficult posts.

In fragile and resource-limited settings the number of staff is often set by budget or partner support, payroll and deployment records are incomplete, and motivation is shaped by delayed pay, safety and working conditions.

This course gives departmental managers methods that work within those limits: a workload-based staffing calculation, a fair and documented appraisal cycle, and a retention plan that uses non-financial as well as financial measures. It covers the manager's own unit and does not attempt national workforce planning.

Field 4 · Course aim

Catalogue aim (unchanged). Plan staffing against workload and service norms and operate a fair performance-management cycle within real resource constraints.

Field 5 · Learning outcomes

On successful completion, participants will be able to:

LO1 Calculate the staffing requirement of a department from its workload, working time and activity standards, and interpret the gap between required and available staff.

LO2 Analyse workforce data for a department, including stock, skill mix, absence, turnover and distribution, to identify risks to service delivery.

LO3 Develop a departmental staffing plan that states required numbers by cadre, the sources of any gap, the options to close it and their costs.

LO4 Design a performance appraisal instrument and cycle with job-related criteria, evidence rules, feedback and a route of appeal.

LO5 Apply a structured conversation to give performance feedback and address under-performance fairly.

LO6 Formulate a retention and motivation plan that matches measures to the causes of attrition and dissatisfaction in a named unit.

Each outcome opens with one assessable verb from the controlled list (Table 33) and is traced to an instrument in Part D. Level profile of this draft: Creating 3, Analysing 1, Applying 2. Catalogue dominant outcome level: Creating. Catalogue principal assessed artefact: Departmental staffing and appraisal plan.

C Content and method (fields 6 to 8)

Field 6 · Module structure

Day	Hours	Theme	Core content
Day 1	5	The workforce and the manager's decisions	Workforce 2030 and the national health workforce accounts as the frame. The labour-market view: supply, demand and distribution. Types of staff and skill mix; task sharing. Data a department manager should hold: staff list, qualifications, posts, attendance, leave and turnover. A clean staff register; payroll and post-control basics; funding sources of posts (government, partner-supported, incentive-paid).
Day 2	5	Workload-based staffing: the WISN method	Steps of the Workload Indicators of Staffing Need method: select the cadre and unit; available working time; workload components; activity standards; standard workloads; allowance factors; staff requirement; the WISN ratio and the gap. Data sources and shortcuts. Laboratory: staffing calculation for a case unit.
Day 3	5	Staffing plan, roster and deployment	From the gap to the plan: options (recruitment, redeployment, skill mix and task sharing, overtime, volunteer and incentive-paid staff) with cost, risk and quality effects. Costing staff and the budget link. Rosters, cover and fairness of workload. Deployment to remote posts. Writing the staffing plan.
Day 4	5	Performance management: planning and appraisal	The performance-management cycle: expectations, supervision, appraisal, development, recognition and consequences. Job descriptions and performance criteria; evidence and records; avoiding bias (halo, leniency, similarity); calibration; documentation and confidentiality. The employment-law framework of the jurisdiction (to be verified by the course owner). Designing the appraisal instrument.
Day 5	5	Feedback, under-performance and conduct	The feedback conversation; coaching and development plans. Handling under-performance step by step; misconduct and due process; grievance and appeal. Protecting staff from violence and harassment at work. Observed performance-conversation simulation.

Day	Hours	Theme	Core content
Day 6	5	Retention, motivation and assembly	Why health workers leave or disengage: pay, working conditions, career, safety and management. The four categories of the WHO retention guideline: education, regulation, financial incentives, personal and professional support. Matching measures to causes; costing and feasibility. Assembling the departmental staffing and appraisal plan; panel defence; action plan.

Field 7 · Session plans

Day-level plans: the sequence, duration and method of each session and the required output of the day. Session objectives, facilitator notes and per-session materials are an open item (Part G).

Day	Session sequence	Required output of the day
Day 1	• Input: workforce frame and data (60 min) • Staff-register and skill-mix laboratory (120 min) • Funding-source and post-control workshop (75 min) • Coaching and day review (45 min)	Staff register and skill-mix profile of the participant's unit (or the case unit)
Day 2	• Input: the WISN steps (60 min) • WISN calculation laboratory (spreadsheet) (150 min) • Interpretation clinic (45 min) • Coaching and day review (45 min)	Workload and staffing calculation (draft)
Day 3	• Input: closing a staffing gap (60 min) • Options and costing laboratory (105 min) • Roster and fairness workshop (90 min) • Coaching and day review (45 min)	Staffing plan (draft)
Day 4	• Input: the performance-management cycle (60 min) • Appraisal-instrument design laboratory (120 min) • Bias and calibration workshop (75 min) • Coaching and day review (45 min)	Appraisal instrument (draft)
Day 5	• Input: feedback, under-performance and due process (60 min) • Case analysis: a disputed appraisal (60 min) • Observed performance-conversation simulation (120 min) • Debrief and coaching (60 min)	Fair-appraisal case analysis; observed simulation record
Day 6	• Input: retention and motivation (60 min) • Retention-plan laboratory (90 min) • Panel defence (individual) (105 min) • Action planning and close (45 min)	Departmental plan defended; retention plan submitted

Notional workload

Component	Hours
Contact sessions	30
Directed reading and case preparation	8
Between-session exercises	7
Preparation of assessed outputs	15
Total notional hours	**60**

Field 8 · Methodology

Participants work on a real or case unit throughout. Inputs are short; most time is spent in laboratories where participants build the calculation, the plan and the instrument and test them on one another's data. The staffing calculation is done in a spreadsheet template so that participants can reuse it. A disputed-appraisal case teaches how an unfair instrument fails in practice before participants design their own.

An observed performance-conversation simulation tests the ability to give evidence-based feedback, listen, agree development actions and document fairly. Personal data of real staff are not brought to class; participants use their own unit's aggregate data or the case pack (Chapter 6.6).

D Assessment (field 9)

Field 9 · Assessment scheme

Instrument weights follow Table 24: the principal applied output 50 to 60%, the analytical or simulation component 20 to 30%, and participation 10 to 25%.

Instrument and component	Weight	Rubric and gate	Outcomes
1 Departmental staffing and appraisal plan (principal assessed output)	**50%**		
• Written plan	40%	Rubric C (written capstone) · at least 60/100	LO2, LO3, LO4
• Panel defence	10%	Rubric D (defence) · at least 60/100	LO3, LO4
2 Analytical portfolio	**30%**		
• Workload and staffing calculation	12%	Rubric A (applied assignment) · at least 50/100	LO1
• Fair-appraisal case analysis	6%	Rubric A (applied assignment) · at least 50/100	LO4, LO5
• Retention and motivation plan	12%	Rubric A (applied assignment) · at least 50/100	LO6
3 Performance simulation and participation	**20%**		
• Performance-conversation simulation	10%	Rubric S (observed simulation) · at least 60/100	LO5
• Participation and reflection	10%	Rubric R (participation and reflection) · at least 50% (normalised)	LO1, LO2, LO5, LO6
Total	**100%**		

Evidence at threshold competence (proposed)

Component	What a threshold submission or performance shows
Written plan	Unit profile and workload basis; required staff by cadre from the workload calculation with assumptions stated; the gap and options with cost and risk; the chosen plan with timeline and owner; the appraisal instrument with job-related criteria, rating scale, evidence rules, feedback step and appeal route; an implementation calendar.
Panel defence	Explains the staffing logic and the fairness features of the instrument, and answers questions on cost, risk and enforcement.
Workload and staffing calculation	Available working time derived from stated leave, holidays and absence; activity standards sourced or estimated and marked; correct standard workloads; required staff and WISN ratio; interpretation that does not treat the result as a norm to apply mechanically.
Fair-appraisal case analysis	Identifies the unfair features of the case instrument (criteria not related to the job, no evidence rule, no appeal) and proposes corrections.
Retention and motivation plan	Diagnoses the causes of attrition or low motivation in the named unit from evidence; matches at least three measures, financial and non-financial, to those causes; gives costs, owners and follow-up indicators.
Performance-conversation simulation	Observed giving feedback on a case: prepares, uses evidence, listens, agrees development actions, documents fairly and respects confidentiality and due process.

Component	What a threshold submission or performance shows
Participation and reflection	Rubric R criteria: preparedness, constructive contribution, peer-feedback quality and reflection depth.

Competency threshold	Overall at least 60/100. At least 50/100 in each applied assignment (Rubric A) and in the normalised participation and reflection mark (Rubric R). At least 60/100 in the observed simulation (Rubric S), the written capstone, here the principal written output (Rubric C) and the defence (Rubric D). Attendance of at least 80% of scheduled contact time. Every course competence safeguard is met. All required outputs and identity checks are complete. Chapter 7.3, Table 25 (Decision D19).
Competence safeguards (proposed)	1 Workload basis. The staffing plan derives required numbers from workload and working time, with assumptions stated. 2 Fair appraisal. The instrument has job-related criteria, evidence rules, a feedback step and a route of appeal; criteria that could disadvantage staff on grounds unrelated to the job do not meet the safeguard. A high average cannot compensate for a failed safeguard (Table 25). The safeguards take effect only if the Academic Board approves them.
Marking and moderation	Marking is criterion-referenced against the rubrics of Annex H.2, with common performance bands of 80–100 Strong, 70–79 Secure, 60–69 Threshold, 50–59 Developing and 0–49 Insufficient. A second marker reviews every fail, every safeguard failure and every result within two points of a classification boundary. Online defences use two assessors. Independent internal moderation covers a sample of the cohort; marking and moderation are kept separate (Chapters 7.3 and 7.5).
Feedback, late work, reassessment	Formative comments within seven calendar days of a submission and provisional summative feedback within ten working days. Unapproved work up to seven calendar days late loses five percentage points. One reassessment within 30 calendar days of feedback, capped at 60/100. Appeals within 15 working days (Chapter 7.4).
Learning-gain indicator	An unweighted pre-test and post-test. A gain of 20 percentage points is a cohort quality indicator and not an individual pass rule (Chapter 7.1).
Integrity and data	No patient data is required. Participants obtain permission before using workplace documents, upload no confidential data to external tools and acknowledge any use of AI (Chapter 6.6).

Alignment matrix (Chapter 9.3)

No outcome is omitted and every assessed component has a stated learning purpose. The weight is the share of the final mark that tests the outcome.

Learning outcome	Method that builds it	Instrument that tests it (weight)	Weight
LO1 · Calculate	Day 2 WISN calculation laboratory (spreadsheet); interpretation clinic	• Workload and staffing calculation (12) • Participation and reflection (2)	14%
LO2 · Analyse	Day 1 staff-register and skill-mix laboratory; Day 3 options workshop	• Written plan (8) • Participation and reflection (2)	10%
LO3 · Develop	Day 3 options-and-costing laboratory; roster and fairness workshop	• Written plan (16) • Panel defence (4)	20%
LO4 · Design	Day 4 instrument-design laboratory; bias and calibration workshop	• Written plan (16) • Panel defence (6) • Fair-appraisal case analysis (3)	25%
LO5 · Apply	Day 5 case analysis and observed performance-conversation simulation	• Fair-appraisal case analysis (3) • Performance-conversation simulation (10) • Participation and reflection (2)	15%
LO6 · Formulate	Day 6 retention-plan laboratory	• Retention and motivation plan (12) • Participation and reflection (4)	16%
Total			**100%**

E Resources, framework integration and applied outputs (fields 10 to 13)

Field 10 · Materials and tools

Item	Proposed content	Status
Workbook	WISN steps, appraisal design guide and retention-plan outline.	To be produced
Slide deck	Short inputs for Days 1 to 6.	To be produced
Case pack	A case department with workload statistics, staff list and a disputed-appraisal case (illustrative).	To be produced
Templates	Staff-register sheet; WISN spreadsheet; staffing-plan outline; appraisal-instrument template; retention-plan outline.	To be produced
Instruments	Rubric sheets A, C, D, S and R; simulation scenario and observation sheet; unweighted pre-course and post-course test.	To be produced
Datasets	Illustrative workload and attendance data for the calculation laboratory.	To be produced

Each item marked “To be produced” is to be produced, version-controlled and approved before the first delivery (Annex E).

Field 11 · Readings

Each item was checked against the issuing body’s own page, or a bibliographic record of the journal, on 9 October 2026. The course owner confirms editions, access and licences before each cohort. Listing a source implies no endorsement or partnership, and no third-party text is reproduced (Chapter 3.5).

Type	Full attribution	Learning use and notes
Core 1	World Health Organization (2023). *Workload Indicators of Staffing Need (WISN): user manual, 2nd edition*. Geneva: WHO. Page checked: who.int/publications/i/item/9789240070066	The method taught on Day 2, with its manual and worked steps.
Core 2	World Health Organization (2016). *Global strategy on human resources for health: Workforce 2030*. Geneva: WHO. Page checked: who.int/publications/i/item/9789241511131	Global strategic frame for workforce planning; used on Day 1.
Core 3	World Health Organization (2023). *National health workforce accounts: a handbook, second edition*. Geneva: WHO. Page checked: who.int/publications/i/item/9789240081291	Accounts and indicators for recording the workforce; used on Day 1.
Supplementary 1	World Health Organization (2021). *WHO guideline on health workforce development, attraction, recruitment and retention in rural and remote areas*. Geneva: WHO. Page checked: who.int/publications/i/item/9789240024229	Evidence-based recommendations on retention; used on Day 6.
Supplementary 2	Willis-Shattuck M, Bidwell P, Thomas S, et al. (2008). Motivation and retention of health workers in developing countries: a systematic review. *BMC Health Services Research* 8: 247. Page checked: ncbi.nlm.nih.gov/pmc/articles/PMC2612662; doaj.org record, December 2008	Evidence on what motivates and retains health workers in low- and middle-income countries; used on Day 6.
Supplementary 3	Dieleman M, Gerretsen B, van der Wilt GJ (2009). Human resource management interventions to improve health workers’ performance in low and middle income countries: a realist review. *Health Research Policy and Systems* 7: 7. doi:10.1186/1478-4505-7-7. Page checked: link.springer.com/article/10.1186/1478-4505-7-7	Evidence on management interventions that improve performance; used on Days 4 and 5.
Supplementary 4	International Labour Organization (2019). *Violence and Harassment Convention No 190 and Recommendation No 206*. (Annex H.5, R9.) Page checked: Annex H.5 of the book	International standard on violence and harassment at work; used on Day 5 (Annex H.5, R9).

Field 12 · Framework integration map

Element names are the controlled names of Chapter 3.5 (Table 9). The mapping is proposed; the course owner re-checks it at Stage 3 (Annex F).

Framework	Controlled element	Developed in
MANAGER	Measure	LO1, LO2: workload and workforce data
	Allocate	LO3: staff to services
	Execute	LO3, LO4
	Review	LO4, LO5: appraisal cycle
LEADER	Listen	LO5
	Engage	LO5, LO6
	Reflect	LO5
DIRECTOR	Ensure ethics	LO4, LO5: fairness and due process
	Control	LO3: post control

#	Controlled competency (Catalogue)	Emphasis	Where developed and assessed
1	Ethical and accountable leadership	Primary	Fairness, due process and non-discrimination in appraisal (Days 4, 5; LO4, LO5)
2	Strategic thinking, direction-setting and public-value orientation	Not addressed	–
3	Governance, fiduciary oversight, risk management and institutional stewardship	Supporting	Post control and funding sources (Day 1)
4	Evidence-informed decision-making, policy analysis and data literacy	Primary	Workload data and workforce analysis (Days 1 to 3; LO1 to LO3)
5	People, team, stakeholder and partnership leadership	Primary	Team leadership, feedback and retention (Days 4 to 6; LO5, LO6)
6	Execution, change management, service improvement and performance discipline	Supporting	Implementing the plan and the appraisal cycle (Days 3, 4)
7	Communication, influence, reflection and adaptive learning	Supporting	Feedback conversation and reflection (Day 5; Rubric R)

Field 13 · Applied outputs

The output names are those of the Catalogue and are unchanged. The descriptions and standards are proposed.

Applied output	Description and standard	Assessed in
Departmental staffing plan	Workload-based staffing requirement, gap, options, costs and the chosen plan.	Written plan; portfolio
Appraisal instrument	An instrument and cycle with job-related criteria, evidence rules, feedback and appeal (with the staffing plan, the principal assessed artefact).	Written plan; portfolio
Retention and motivation plan	Measures matched to the causes of attrition and dissatisfaction in a named unit.	Portfolio

F Compliance with the fourteen-field standard (Chapter 9.1)

Field	Content	Where	Status in this draft
1	Course identity	Part A	Complete (Catalogue data)
2	Participant profile	Part A	Proposed; tier from the Catalogue
3	Rationale	Part B	Proposed
4	Course aim	Part B	Complete (Catalogue text)
5	Learning outcomes	Part B	Proposed; each traced to an instrument
6	Module structure	Part C	Proposed
7	Session plans	Part C	Partly drafted (day level); open item
8	Methodology	Part C	Proposed
9	Assessment scheme	Part D	Proposed; weights total 100%; safeguards need Board approval
10	Materials and tools	Part E	Listed; none produced yet; open item
11	Readings and frameworks	Part E	Proposed; checked 9 October 2026
12	Framework integration map	Part E	Proposed
13	Applied outputs	Part E	Complete (Catalogue names)
14	Course owner and review date	Part A	Open item

G Open items, source note and approval record

Open items for the course owner and the Academic Board

1. Employment law and civil-service rules. The legal framework for appraisal, discipline and appeal is not stated in this draft; the course owner records the current national instruments before delivery.
2. WISN activity standards for the local context are estimated and marked as such until national or facility time studies exist.
3. The case pack, including the disputed-appraisal case, has to be produced with no real staff identifiers.
4. Course owner (field 14). No owner is named. The owner is named, and the review date set, at approval (Chapter 9.7; Annex E).
5. Session plans (field 7) are drafted at the level of the day: the sequence, duration and method of each session and its required output. Session objectives, facilitator notes and per-session materials are to be completed by the course owner before Stage 3.
6. Materials (field 10) do not yet exist. Each item is to be produced, version-controlled and approved before the first delivery (Annex E).
7. Readings were checked against the issuing bodies on 9 October 2026. The course owner confirms editions, access and licences before each cohort and records the version of any web resource.
8. Rubrics and gates. Rubric A is described in Annex H.2 as specific to the Executive Programmes; this draft uses it for the applied assignments of an Executive Course. The principal written output and its defence are treated as the written capstone and defence of the gates (at least 60/100 each). The Academic Board confirms both uses (Decision D19).
9. Competence safeguards in Part D are proposals. They apply only if the Academic Board approves them (Table 25).
10. Pilot and moderation. The instruments are piloted and moderated in the first delivery cycle (Chapters 7.5 and 9.4). The Board confirms the panel size for defences (about ten minutes for each participant, with parallel panels above about ten participants).
11. Drafting method. This draft was prepared with AI assistance (Claude) from the sources of the book. A subject specialist has not reviewed it. Local facts (laws, institutions, data, tools) must be verified by the course owner before Stage 3.

Source and harmonisation note

Catalogue: 6 days, 6 RCP, retained unchanged (Decision D4). Contact hours are derived at five per RCP: 30 contact hours over six days of five hours.

Approval record (Chapter 9.4)

Stage	Owner	Evidence retained	Decision reference and date	Status
2 Design	Course owner	Draft syllabus, version 0.x	v0.1 prepared 9 October 2026 (AI-assisted); v0.2 completed 5 November 2026	Complete; owner not yet named
3 Academic scrutiny	Academic Board	Board minute and conditions		Not started
4 Pilot	Course owner	Pilot report; moderation record		Not started
5 Approval	Academic Board	Approved syllabus, version 1.0		Not started

A course cannot be scheduled until its syllabus is complete, approved by the Academic Board and lodged in the curriculum register (Chapter 9).

RA-DHG-206 · Digital Health & Health Information Governance

Complete syllabus, version 0.2 (Stage 2 Design complete). Awaiting Academic Board approval. References are to RIYAADA-UCS-2026-001, Version 1.0.

Status of this draft

Complete syllabus, version 0.2 (Stage 2 Design complete). It has not yet been through Academic Board scrutiny, piloting or approval, and it does not replace the course card in the book until it is approved (Chapter 9.4).

The Catalogue statements of identity, credit, tier, aim and applied outputs are retained unchanged. Everything else is proposed content written on 9 October 2026 with AI assistance. A subject specialist has not reviewed it.

Items that need a decision are listed in Part G.

A Course identity and participant profile (fields 1, 2 and 14)

Code	RA-DHG-206
Full title	Digital Health & Health Information Governance
Family and level	Executive Course · RL2 Professional Certificate
School	S2 · School of Health Systems, Policy & Financing
Credit and hours	6 RCP · 60 notional hours · 30 contact hours (derived) · 6 days
Award	RIYAADA Professional Certificate in Digital Health & Health Information Governance
Participant profile (proposed)	Directors and senior managers responsible for health information and digital systems: ministry and state planning and information officers, hospital and programme managers, monitoring and evaluation and data managers, ICT leads and development-partner advisers. Primarily Tier 01 and Tier 02 (Catalogue).
Management tier	Tier 01 and Tier 02
Prerequisite knowledge (proposed)	Admission evidence as in Chapter 8. Responsibility for, or oversight of, reporting or information systems in an institution. No programming skills are required; basic spreadsheet use is assumed.
Delivery (proposed)	Six days of five contact hours each, as a continuous block or in two modules of 3 + 3 days, in person at the Mogadishu campus or client premises; in-house cohort option (proposed).
Contact hours by day (derived)	Day 1: 5 h, Day 2: 5 h, Day 3: 5 h, Day 4: 5 h, Day 5: 5 h, Day 6: 5 h (30 hours in all).
Language of delivery	English; Somali or bilingual delivery; Arabic where required (Chapter 6).
Syllabus status	Complete syllabus, version 0.2, Stage 2 Design complete. In the book the course remains a course card until approval.
Source references	Catalogue RA-DHG-206; this draft (v0.1)
Award pathways	PW-DIP (execution option)
Course owner and review date	To be named (open item, Annex E). First review: the Stage 6 annual review after the first delivery (Chapter 9.4).

B Rationale, aim and learning outcomes (fields 3 to 5)

Field 3 · Rationale

Decisions on budgets, staffing, procurement and service redesign are only as good as the data behind them. In many health systems routine data are incomplete, late or inconsistent, several parallel systems collect overlapping data, and the rules on who may see and share data are unclear. The WHO Global Strategy on Digital Health asks countries to strengthen governance and to build digital health on sound national strategies, and the Health Metrics Network framework describes the components of a country health information system: resources, indicators, data sources, data management, information products, and their dissemination and use.

This course equips senior managers to judge and improve the information their institution relies on. Participants audit the quality of a routine dataset, write an information governance policy that protects privacy and makes sharing safe, and assess whether the institution is ready for a proposed digital investment. It works at the level of management decisions and governance and does not teach system programming.

Field 4 · Course aim

Catalogue aim (unchanged). Strengthen routine information systems, data quality and information governance so that data can be trusted for management decisions.

Field 5 · Learning outcomes

On successful completion, participants will be able to:

LO1 Map the data flow, data sources and responsibilities of a named institution's routine information system and identify its weak points.

LO2 Audit the quality of a routine dataset for completeness, timeliness, consistency and accuracy, using a desk review and a verification sample.

LO3 Evaluate the readiness of an institution for a proposed digital health investment across governance, skills, infrastructure, standards and sustainability.

LO4 Draft an information governance policy that sets roles, access, confidentiality, sharing, retention, security and breach response.

LO5 Develop a data-quality improvement plan with owners, indicators and a review routine.

LO6 Justify to a board the priority actions for data quality, governance and digital investment.

Each outcome opens with one assessable verb from the controlled list (Table 33) and is traced to an instrument in Part D. Level profile of this draft: Creating 2, Evaluating 2, Analysing 2. Catalogue dominant outcome level: Analysing and creating. Catalogue principal assessed artefact: Data-quality audit and governance policy.

C Content and method (fields 6 to 8)

Field 6 · Module structure

Day	Hours	Theme	Core content
Day 1	5	The institution's information system	Why data matter for management: decisions and the data they need. Components of a health information system (Health Metrics Network). Data sources: facility registers and reports, surveys, administrative and financial data, community data. Data flow from point of service to board. Parallel systems, duplication and reporting burden. Mapping flows and responsibilities for the named case.
Day 2	5	Data quality: concepts and desk review	Dimensions of data quality: completeness, timeliness, internal consistency, external consistency and accuracy. Desk-review metrics and thresholds. Outliers, trends and consistency checks; validation rules in DHIS2 and in spreadsheets. Laboratory on an illustrative facility dataset.
Day 3	5	Data quality: verification and improvement	Facility-level verification: recounting source records and comparing them with reports; sampling; the verification ratio. System assessment: staff, tools and supervision. Causes of poor data and low-cost remedies (feedback, supervision, simplification, fewer indicators). The data-quality improvement plan.
Day 4	5	Information governance	Elements of an information governance policy: purpose and scope, ownership and stewardship, classification, confidentiality, consent and lawful basis, access control, data-sharing agreements, retention and disposal, security, incident and breach response, quality management and audit. The structure of an information security management system (ISO/IEC 27001) as a model. National law and policy as a source (to be verified). Laboratory: draft policy sections.
Day 5	5	Digital health strategy and readiness	The global strategy on digital health and national strategies. The Digital Implementation Investment Guide: from need to investment. Readiness dimensions: governance, policy and legal basis, skills, infrastructure and power, standards and interoperability, data use, funding and sustainability. Procurement and vendor lock-in; offline and paper fallback in fragile settings. Readiness-assessment laboratory.

Day	Hours	Theme	Core content
Day 6	5	Decisions, risk and defence	Data-incident tabletop (breach, data loss, misuse): roles, escalation and decisions. Prioritising actions; presenting to a board. Assembly of the data-quality audit and governance policy; panel defence; action planning.

Field 7 · Session plans

Day-level plans: the sequence, duration and method of each session and the required output of the day. Session objectives, facilitator notes and per-session materials are an open item (Part G).

Day	Session sequence	Required output of the day
Day 1	• Input: information for management (60 min) • System-mapping laboratory on the named case (120 min) • Parallel-systems and reporting-burden workshop (75 min) • Coaching and day review (45 min)	Data-flow map and responsibility matrix
Day 2	• Input: dimensions of data quality (60 min) • Desk-review laboratory on an illustrative dataset (150 min) • Validation-rule clinic (45 min) • Coaching and day review (45 min)	Desk-review results (draft)
Day 3	• Input: verification and system assessment (60 min) • Verification laboratory (recount and compare) (105 min) • Improvement-plan workshop (90 min) • Coaching and day review (45 min)	Data-quality audit report (draft) and improvement plan
Day 4	• Input: elements of an information governance policy (60 min) • Policy-drafting laboratory (135 min) • Sharing-agreement and consent clinic (60 min) • Coaching and day review (45 min)	Information governance policy (draft)
Day 5	• Input: digital strategy and the investment guide (60 min) • Readiness-assessment laboratory (120 min) • Interoperability and vendor workshop (75 min) • Coaching and day review (45 min)	Readiness assessment (draft)
Day 6	• Data-incident tabletop (observed) (90 min) • Package assembly clinic (60 min) • Panel defence (individual) (105 min) • Action planning and close (45 min)	Audit and policy package defended; tabletop observation record

Notional workload

Component	Hours
Contact sessions	30
Directed reading and case preparation	8
Between-session exercises	7
Preparation of assessed outputs	15
Total notional hours	**60**

Field 8 · Methodology

Participants work with one illustrative dataset and one institutional case throughout. The data-quality audit is done by hand and in a spreadsheet so that participants understand the logic before any software is used; DHIS2

data-quality tools are demonstrated and not taught as a system course. Governance is learned by drafting: each participant writes sections of a policy for their own institution and has them challenged by peers acting as a data subject, a regulator and a donor.

A data-incident tabletop tests decisions under pressure. No identifiable personal health data are used or brought to class; illustrative datasets are labelled as such (Chapter 6.6).

D Assessment (field 9)

Field 9 · Assessment scheme

Instrument weights follow Table 24: the principal applied output 50 to 60%, the analytical or simulation component 20 to 30%, and participation 10 to 25%.

Instrument and component	Weight	Rubric and gate	Outcomes
1 Data-quality audit and governance policy (principal assessed output)	**50%**		
• Written package	40%	Rubric C (written capstone) · at least 60/100	LO2, LO4, LO5
• Panel defence	10%	Rubric D (defence) · at least 60/100	LO6
2 Analytical portfolio	**30%**		
• Readiness assessment	15%	Rubric A (applied assignment) · at least 50/100	LO3
• Data-flow and desk-review workbook	15%	Rubric A (applied assignment) · at least 50/100	LO1, LO2
3 Data-incident tabletop and participation	**20%**		
• Data-incident tabletop	10%	Rubric S (observed simulation) · at least 60/100	LO4, LO6
• Participation and reflection	10%	Rubric R (participation and reflection) · at least 50% (normalised)	LO1, LO3, LO5, LO6
Total	**100%**		

Evidence at threshold competence (proposed)

Component	What a threshold submission or performance shows
Written package	Data-quality audit report: scope, dataset and period, method (desk review and verification sample), results by dimension with the metric and threshold, causes, and a prioritised improvement plan with owners and indicators. Information governance policy: purpose and scope, roles, classification, access, confidentiality and consent, sharing, retention, security, breach response, audit and review. All data are illustrative or anonymised.
Panel defence	Explains the findings and the policy choices to a board audience, ranks the priority actions with reasons and answers questions on cost and risk.
Readiness assessment	Scores each readiness dimension with evidence, identifies blocking gaps and recommends proceed, proceed with conditions, or defer, with costed preconditions.
Data-flow and desk-review workbook	Data-flow map with responsibilities and weak points; correctly calculated completeness, timeliness and consistency metrics against stated thresholds; outliers identified and explained.
Data-incident tabletop	Observed in a role during a data incident: contains the incident, applies the policy's escalation and notification rules, protects confidentiality and records decisions.
Participation and reflection	Rubric R criteria: preparedness, constructive contribution, peer-feedback quality and reflection depth.

Competency threshold	Overall at least 60/100. At least 50/100 in each applied assignment (Rubric A) and in the normalised participation and reflection mark (Rubric R). At least 60/100 in the observed simulation (Rubric S), the written capstone, here the principal written output (Rubric C) and the defence (Rubric D). Attendance of at least 80% of scheduled contact time. Every course competence safeguard is met. All required outputs and identity checks are complete. Chapter 7.3, Table 25 (Decision D19).
Competence safeguards (proposed)	Data protection. The policy addresses confidentiality, access control and breach response, and no identifiable personal health data appear in any submission. A high average cannot compensate for a failed safeguard (Table 25). The safeguards take effect only if the Academic Board approves them.
Marking and moderation	Marking is criterion-referenced against the rubrics of Annex H.2, with common performance bands of 80–100 Strong, 70–79 Secure, 60–69 Threshold, 50–59 Developing and 0–49 Insufficient. A second marker reviews every fail, every safeguard failure and every result within two points of a classification boundary. Online defences use two assessors. Independent internal moderation covers a sample of the cohort; marking and moderation are kept separate (Chapters 7.3 and 7.5).
Feedback, late work, reassessment	Formative comments within seven calendar days of a submission and provisional summative feedback within ten working days. Unapproved work up to seven calendar days late loses five percentage points. One reassessment within 30 calendar days of feedback, capped at 60/100. Appeals within 15 working days (Chapter 7.4).
Learning-gain indicator	An unweighted pre-test and post-test. A gain of 20 percentage points is a cohort quality indicator and not an individual pass rule (Chapter 7.1).
Integrity and data	No patient data is required. Participants obtain permission before using workplace documents, upload no confidential data to external tools and acknowledge any use of AI (Chapter 6.6).

Alignment matrix (Chapter 9.3)

No outcome is omitted and every assessed component has a stated learning purpose. The weight is the share of the final mark that tests the outcome.

Learning outcome	Method that builds it	Instrument that tests it (weight)	Weight
LO1 · Map	Day 1 system-mapping laboratory on the named case; parallel-systems workshop	• Data-flow and desk-review workbook (7) • Participation and reflection (2)	9%
LO2 · Audit	Days 2 and 3 desk-review and verification laboratories on an illustrative dataset	• Written package (8) • Data-flow and desk-review workbook (8)	16%
LO3 · Evaluate	Day 5 readiness-assessment laboratory; interoperability and vendor workshop	• Readiness assessment (15) • Participation and reflection (3)	18%
LO4 · Draft	Day 4 policy-drafting laboratory; sharing-agreement and consent clinic; Day 6 tabletop	• Written package (18) • Data-incident tabletop (5)	23%
LO5 · Develop	Day 3 improvement-plan workshop; peer review	• Written package (14) • Participation and reflection (2)	16%
LO6 · Justify	Day 6 data-incident tabletop and panel defence	• Panel defence (10) • Data-incident tabletop (5) • Participation and reflection (3)	18%
Total			**100%**

E Resources, framework integration and applied outputs (fields 10 to 13)

Field 10 · Materials and tools

Item	Proposed content	Status
Workbook	Data-quality metrics guide, policy outline and readiness scoring guide.	To be produced

Item	Proposed content	Status
Slide deck	Short inputs for Days 1 to 6.	To be produced
Case pack	An institution with a described data flow and an illustrative facility dataset containing planted errors.	To be produced
Templates	Data-flow map; metric sheet; verification form; policy outline; readiness scoring sheet; improvement-plan sheet.	To be produced
Instruments	Rubric sheets A, C, D, S and R; tabletop scenario and observation sheet; unweighted pre-course and post-course test.	To be produced
Datasets	Illustrative facility-month data for desk review and recount exercises.	To be produced

Each item marked "To be produced" is to be produced, version-controlled and approved before the first delivery (Annex E).

Field 11 · Readings

Each item was checked against the issuing body's own page, or a bibliographic record of the journal, on 9 October 2026. The course owner confirms editions, access and licences before each cohort. Listing a source implies no endorsement or partnership, and no third-party text is reproduced (Chapter 3.5).

Type	Full attribution	Learning use and notes
Core 1	World Health Organization (2021). *Global strategy on digital health 2020–2025*. Geneva: WHO. Extended to 2027 by the Seventy-eighth World Health Assembly (May 2025). Page checked: who.int/publications/i/item/9789240020924; who.int/news/item/23-05-2025-world-health-assembly-endorses-extension-of-the-global-digital-health-strategy-to-2027	Global frame for digital health and national strategies; used on Day 5.
Core 2	Health Metrics Network (2008). *Framework and standards for country health information systems*, 2nd edition. Geneva: WHO. Page checked: who.int/publications/i/item/9789241595940	Components of a health information system; used on Day 1.
Core 3	World Health Organization. *Data quality assurance (DQA) toolkit: module 1 framework and metrics; module 2 desk review of data quality; module 3 data verification and system assessment*. Geneva: WHO (web resource). Page checked: who.int/data/data-collection-tools/health-service-data/data-quality-assurance-dqa	Metrics and method for desk review and verification; used on Days 2 and 3. Note: Cited without a year because the page does not date the modules; the course owner records the version used.
Core 4	World Health Organization (2020). *Digital Implementation Investment Guide (DIIG): integrating digital interventions into health programmes*. Geneva: WHO. Page checked: who.int/publications/i/item/9789240010567	Steps from need to digital investment; used on Day 5.
Supplementary 1	DHIS2 project (current). *DHIS2 documentation: data quality tools and data validation*. Oslo: DHIS2 (docs.dhis2.org). Page checked: docs.dhis2.org/en/use/user-guides/dhis-core-version-243/collecting-data/data-quality.html	Data-quality tools and validation rules in the platform most commonly used for routine data; demonstration on Day 2. Note: Documentation is versioned; the course owner records the version used.
Supplementary 2	ISO/IEC 27001:2022. *Information security, cybersecurity and privacy protection: information security management systems, requirements*. Geneva: International Organization for Standardization. Page checked: webstore.iec.ch/publication/79694; scc-ccn.ca standards record	Structure of an information security management system; model for the security section of the policy on Day 4. Note: A licensed standard; the course uses its structure and not its text.
Supplementary 3	World Health Organization (2018). *2018 global reference list of 100 core health indicators (plus health-related SDGs)*. WHO/HIS/IER/GPM/2018.1. Geneva: WHO. Page checked: who.int/publications/i/item/2018-global-reference-list-of-100-core-health-indicators-(-plus-health-related-sdgs)	Reference list of core indicators; used when judging which indicators to protect and verify.

Field 12 · Framework integration map

Element names are the controlled names of Chapter 3.5 (Table 9). The mapping is proposed; the course owner re-checks it at Stage 3 (Annex F).

Framework	Controlled element	Developed in
DIRECTOR	Risk-manage	LO4: breach response
	Ensure ethics	LO4: privacy and consent
	Control	LO4: access and security
	Report	LO6
MANAGER	Measure	LO1, LO2: data and quality metrics
	Govern	LO4
	Review	LO5: improvement routine
LEADERSHIP	Evidence	LO2
	Systems	LO1, LO3
	Innovation	LO3

#	Controlled competency (Catalogue)	Emphasis	Where developed and assessed
1	Ethical and accountable leadership	Supporting	Privacy, consent and responsible data use (Day 4; LO4)
2	Strategic thinking, direction-setting and public-value orientation	Supporting	Aligning digital investment with institutional strategy (Day 5; LO3)
3	Governance, fiduciary oversight, risk management and institutional stewardship	Primary	Information governance, security and breach response (Days 4, 6; LO4, LO6)
4	Evidence-informed decision-making, policy analysis and data literacy	Primary	Data quality and use of information (Days 1 to 3; LO1, LO2)
5	People, team, stakeholder and partnership leadership	Supporting	Roles across data producers and users (Days 1, 6)
6	Execution, change management, service improvement and performance discipline	Supporting	Data-quality improvement routine (Day 3; LO5)
7	Communication, influence, reflection and adaptive learning	Supporting	Board presentation and reflection (Day 6; Rubrics D and R)

Field 13 · Applied outputs

The output names are those of the Catalogue and are unchanged. The descriptions and standards are proposed.

Applied output	Description and standard	Assessed in
Data-quality audit	Audit of a routine dataset by desk review and verification, with causes and an improvement plan (part of the principal assessed artefact).	Written package; workbook
Information governance policy	A policy for the participant's institution covering roles, access, confidentiality, sharing, retention, security and breach response (part of the principal assessed artefact).	Written package
Readiness assessment	Scored assessment of readiness for a proposed digital investment with a recommendation.	Portfolio

F Compliance with the fourteen-field standard (Chapter 9.1)

Field	Content	Where	Status in this draft
1	Course identity	Part A	Complete (Catalogue data)
2	Participant profile	Part A	Proposed; tier from the Catalogue
3	Rationale	Part B	Proposed
4	Course aim	Part B	Complete (Catalogue text)
5	Learning outcomes	Part B	Proposed; each traced to an instrument
6	Module structure	Part C	Proposed
7	Session plans	Part C	Partly drafted (day level); open item
8	Methodology	Part C	Proposed
9	Assessment scheme	Part D	Proposed; weights total 100%; safeguards need Board approval
10	Materials and tools	Part E	Listed; none produced yet; open item
11	Readings and frameworks	Part E	Proposed; checked 9 October 2026
12	Framework integration map	Part E	Proposed
13	Applied outputs	Part E	Complete (Catalogue names)
14	Course owner and review date	Part A	Open item

G Open items, source note and approval record

Open items for the course owner and the Academic Board

1. National law and policy on data protection and health information are not stated in this draft; their existence and status are to be verified by the course owner before delivery.
2. The platform used for demonstration (DHIS2 or another national system), its version and access arrangements are to be confirmed.
3. The readiness dimensions are those of the course workbook; the Academic Board may substitute a published readiness tool.
4. The illustrative dataset with planted errors has to be produced.
5. Distinction from RA-DAT-404 (data literacy), RA-EXD-703 (Data for Decision-Making, DHIS2 and Analytics) and RA-SDAT-619 (Long Course) to be confirmed at scrutiny.
6. Course owner (field 14). No owner is named. The owner is named, and the review date set, at approval (Chapter 9.7; Annex E).
7. Session plans (field 7) are drafted at the level of the day: the sequence, duration and method of each session and its required output. Session objectives, facilitator notes and per-session materials are to be completed by the course owner before Stage 3.
8. Materials (field 10) do not yet exist. Each item is to be produced, version-controlled and approved before the first delivery (Annex E).
9. Readings were checked against the issuing bodies on 9 October 2026. The course owner confirms editions, access and licences before each cohort and records the version of any web resource.
10. Rubrics and gates. Rubric A is described in Annex H.2 as specific to the Executive Programmes; this draft uses it for the applied assignments of an Executive Course. The principal written output and its defence are treated as the written capstone and defence of the gates (at least 60/100 each). The Academic Board confirms both uses (Decision D19).
11. Competence safeguards in Part D are proposals. They apply only if the Academic Board approves them (Table 25).
12. Pilot and moderation. The instruments are piloted and moderated in the first delivery cycle (Chapters 7.5 and 9.4). The Board confirms the panel size for defences (about ten minutes for each participant, with parallel panels above about ten participants).
13. Drafting method. This draft was prepared with AI assistance (Claude) from the sources of the book. A subject specialist has not reviewed it. Local facts (laws, institutions, data, tools) must be verified by the course owner before Stage 3.

Source and harmonisation note

Catalogue: 6 days, 6 RCP, retained unchanged (Decision D4). Contact hours are derived at five per RCP: 30 contact hours over six days of five hours.

Approval record (Chapter 9.4)

Stage	Owner	Evidence retained	Decision reference and date	Status
2 Design	Course owner	Draft syllabus, version 0.x	v0.1 prepared 9 October 2026 (AI-assisted); v0.2 completed 5 November 2026	Complete; owner not yet named
3 Academic scrutiny	Academic Board	Board minute and conditions		Not started
4 Pilot	Course owner	Pilot report; moderation record		Not started
5 Approval	Academic Board	Approved syllabus, version 1.0		A

A course cannot be scheduled until its syllabus is complete, approved by the Academic Board and lodged in the curriculum register (Chapter 9).

RA-PFM-304 · Public Financial Management & Institutional Budgeting

Complete syllabus, version 0.2 (Stage 2 Design complete). Awaiting Academic Board approval. References are to RIYAADA-UCS-2026-001, Version 1.0.

Status of this draft

Complete syllabus, version 0.2 (Stage 2 Design complete). It has not yet been through Academic Board scrutiny, piloting or approval, and it does not replace the course card in the book until it is approved (Chapter 9.4).

The Catalogue statements of identity, credit, tier, aim and applied outputs are retained unchanged. Everything else is proposed content written on 9 October 2026 with AI assistance. A subject specialist has not reviewed it.

Items that need a decision are listed in Part G.

A Course identity and participant profile (fields 1, 2 and 14)

Code	RA-PFM-304
Full title	Public Financial Management & Institutional Budgeting
Family and level	Executive Course · RL2 Professional Certificate
School	S3 · School of Strategy, Management & Institutional Transformation
Credit and hours	6 RCP · 60 notional hours · 30 contact hours (derived) · 6 days
Award	RIYAADA Professional Certificate in Public Financial Management & Institutional Budgeting
Participant profile (proposed)	Directors, finance and planning managers, programme and hospital managers, board and audit-committee members and development-partner staff who prepare, approve or oversee the budget of an institution. Primarily Tier 01 and Tier 02 (Catalogue).
Management tier	Tier 01 and Tier 02
Prerequisite knowledge (proposed)	Admission evidence as in Chapter 8. Familiarity with the institution's accounts and reports; basic spreadsheet skills.
Delivery (proposed)	Six days of five contact hours each, as a continuous block or in two modules of 3 + 3 days, in person at the Mogadishu campus or client premises; in-house cohort option (proposed).
Contact hours by day (derived)	Day 1: 5 h, Day 2: 5 h, Day 3: 5 h, Day 4: 5 h, Day 5: 5 h, Day 6: 5 h (30 hours in all).
Language of delivery	English; Somali or bilingual delivery; Arabic where required (Chapter 6).
Syllabus status	Complete syllabus, version 0.2, Stage 2 Design complete. In the book the course remains a course card until approval.
Source references	Catalogue RA-PFM-304; this draft (v0.1)
Award pathways	Stand-alone course (no Advanced Certificate or Diploma role defined in the Catalogue).
Course owner and review date	To be named (open item, Annex E). First review: the Stage 6 annual review after the first delivery (Chapter 9.4).

B Rationale, aim and learning outcomes (fields 3 to 5)

Field 3 · Rationale

A budget is the institution's plan expressed in money and the main instrument through which a board holds management to account. Budgets built on last year's line items, or on ceilings that ignore the activities to be delivered, do not show what a given sum will buy, and budgets that are not executed and controlled do not protect public money. International guidance on budgetary governance stresses that budgets should be aligned with priorities, transparent, controlled in execution and tied to performance information (OECD 2015).

This course teaches the cycle at institutional level: costing the activities that deliver the plan, fitting them to an envelope, executing and controlling the budget, and reporting variances in a form a board can act on. In Somalia the legal frame is the Public Financial Management Act of 2019 and the Regulation of 2020 made under it, whose current text the course owner confirms. The method applies to ministries, agencies, hospitals and non-governmental institutions alike.

Field 4 · Course aim

Catalogue aim (unchanged). Prepare, execute and control an activity-based budget with internal controls and reports a board can act on.

Field 5 · Learning outcomes

On successful completion, participants will be able to:

LO1 Explain how an institutional budget fits the stages of the public financial management cycle and the rules that govern each stage.

LO2 Calculate the cost of institutional activities from inputs, unit costs and assumptions, and assemble them into an activity-based budget linked to outputs.

LO3 Prioritise activities and adjust a budget to a resource envelope using stated criteria and scenarios.

LO4 Apply commitment control, cash-flow forecasting and reallocation rules to execute a budget within authority.

LO5 Apply an internal-control checklist to a case spending process to identify control gaps and fraud risks and recommend corrections.

LO6 Analyse budget-to-actual variances by cause and write commentary that a board can act on.

Each outcome opens with one assessable verb from the controlled list (Table 33) and is traced to an instrument in Part D. Level profile of this draft: Evaluating 1, Analysing 1, Applying 3, Remembering / understanding 1. Catalogue dominant outcome level: Applying. Catalogue principal assessed artefact: Activity-based budget and variance report.

C Content and method (fields 6 to 8)

Field 6 · Module structure

Day	Hours	Theme	Core content
Day 1	5	The budget in the public financial management cycle	Stages: strategy and planning, formulation, approval, execution, accounting and reporting, audit and oversight. Budget classifications and charts of accounts. Government allocation, own-source revenue and donor funds in one institution; restricted funds. Budget credibility and the OECD principles of budgetary governance. The legal frame: the Public Financial Management Act 2019 and Regulation 2020 (the course owner confirms the current text). PEFA as a diagnostic lens.
Day 2	5	Activity-based costing	From strategic plan to activities, inputs and outputs. Cost drivers, unit costs and bottom-up costing. Direct and indirect costs and the allocation of shared costs. Recurrent and capital costs. Assumptions, inflation and exchange-rate treatment. Laboratory: costing an activity set in a spreadsheet model.
Day 3	5	Formulating the budget within an envelope	Resource envelope and ceilings; low, base and high scenarios. Prioritisation criteria and trade-offs; protecting essential services; the multi-year view. Budget narrative and submission. Linking to results. Managing several funding sources and counterpart requirements. Laboratory: fit costed activities to an envelope and justify the choices.
Day 4	5	Executing the budget and managing cash	Commitment control, levels of authorisation, the link to procurement and the payment process. Cash-flow forecasting and cash plans; arrears. Virement and reallocation rules; supplementary budgets. Cash and bank management basics. Laboratory: cash-flow forecast and in-year reallocation under a shortfall.

Day	Hours	Theme	Core content
Day 5	5	Internal control and integrity	Purpose of internal control. The components of the COSO framework and the public-sector guidance of INTOSAI GOV 9100: control environment, risk assessment, control activities, information and communication, monitoring. Segregation of duties, authorisation, reconciliation and safeguarding of assets. Fraud risks and red flags; integrity and reporting concerns. The roles of internal and external audit. Laboratory: control review of a case spending process.
Day 6	5	Reporting, variance analysis and the board	In-year and annual reports; budget execution reports. Variance analysis by volume, price, timing and scope; materiality; commentary. Reporting to a board or audit committee. Budget-hearing simulation (observed). Assembly of the budget pack; panel defence; action planning.

Field 7 · Session plans

Day-level plans: the sequence, duration and method of each session and the required output of the day. Session objectives, facilitator notes and per-session materials are an open item (Part G).

Day	Session sequence	Required output of the day
Day 1	• Input: the cycle and the rules (75 min) • Case analysis: reading an institutional budget (105 min) • Funding-sources and classification workshop (75 min) • Coaching and day review (45 min)	Budget map: stages, rules and funding sources of the case institution
Day 2	• Input: activity-based costing (60 min) • Costing laboratory (spreadsheet) (150 min) • Shared-cost and assumptions clinic (45 min) • Coaching and day review (45 min)	Costed activity set (draft)
Day 3	• Input: envelopes, scenarios and priorities (60 min) • Envelope-fitting laboratory (120 min) • Budget-narrative workshop (75 min) • Coaching and day review (45 min)	Activity-based budget with scenarios (draft)
Day 4	• Input: execution, commitments and cash (60 min) • Cash-flow forecast laboratory (120 min) • Reallocation under a shortfall (case) (75 min) • Coaching and day review (45 min)	Cash-flow forecast and reallocation note
Day 5	• Input: internal-control frameworks (60 min) • Control-review laboratory on a case process (120 min) • Fraud red-flag workshop (75 min) • Coaching and day review (45 min)	Internal control checklist and review
Day 6	• Input: variance analysis and reporting (45 min) • Variance-commentary laboratory (60 min) • Budget-hearing simulation (observed) (75 min) • Panel defence (individual) (90 min) • Close and action planning (30 min)	Budget pack and variance commentary submitted; hearing and defence records

Notional workload

Component	Hours
Contact sessions	30
Directed reading and case preparation	8
Between-session exercises	7
Preparation of assessed outputs	15
Total notional hours	**60**

Field 8 · Methodology

Participants work from one institutional case with a full budget file (plan, price list, prior-year execution and funding mix) and, where possible, apply each step to their own institution's budget using aggregate or anonymised figures. The core skills are practised in a spreadsheet model that participants keep.

A budget-hearing simulation places each participant before a finance committee that questions assumptions, priorities and variances. Control reviews are done on process maps of real spending routes, not on accounts of named individuals (Chapter 6.6).

D Assessment (field 9)

Field 9 · Assessment scheme

Instrument weights follow Table 24: the principal applied output 50 to 60%, the analytical or simulation component 20 to 30%, and participation 10 to 25%.

Instrument and component	Weight	Rubric and gate	Outcomes
1 Activity-based budget and variance report (principal assessed output)	**55%**		
• Budget pack	45%	Rubric C (written capstone) · at least 60/100	LO1, LO2, LO3, LO6
• Panel defence	10%	Rubric D (defence) · at least 60/100	LO3, LO6
2 Analytical portfolio	**25%**		
• Costing and cash-flow workings	12%	Rubric A (applied assignment) · at least 50/100	LO2, LO4
• Internal-control review	13%	Rubric A (applied assignment) · at least 50/100	LO5
3 Budget-hearing simulation and participation	**20%**		
• Budget-hearing simulation	10%	Rubric S (observed simulation) · at least 60/100	LO3, LO6
• Participation and reflection	10%	Rubric R (participation and reflection) · at least 50% (normalised)	LO1, LO4, LO5
Total	**100%**		

Evidence at threshold competence (proposed)

Component	What a threshold submission or performance shows
Budget pack	Activity-based budget with each activity costed from stated inputs, unit costs and assumptions and linked to an output; totals that reconcile to the stated envelope and to the funding sources; at least two scenarios with stated prioritisation criteria; a statement of how the budget follows the stages and rules of the cycle; and a variance report on a case execution file with causes and commentary a board can act on.
Panel defence	Explains the priorities, assumptions and variances to a board audience, states what would change the budget and answers questions on risk.

Component	What a threshold submission or performance shows
Costing and cash-flow workings	Correct unit-cost and total calculations; a cash-flow forecast by period that is consistent with the budget; a reallocation under shortfall that respects the authority limits given in the case.
Internal-control review	Maps the process and its control points; identifies gaps in segregation of duties, authorisation and reconciliation; identifies fraud red flags; recommends corrections ranked by risk.
Budget-hearing simulation	Observed answering committee questions on assumptions, priorities and variances with evidence, admitting limits and recording agreed follow-up.
Participation and reflection	Rubric R criteria: preparedness, constructive contribution, peer-feedback quality and reflection depth.

Competency threshold	Overall at least 60/100. At least 50/100 in each applied assignment (Rubric A) and in the normalised participation and reflection mark (Rubric R). At least 60/100 in the observed simulation (Rubric S), the written capstone, here the principal written output (Rubric C) and the defence (Rubric D). Attendance of at least 80% of scheduled contact time. Every course competence safeguard is met. All required outputs and identity checks are complete. Chapter 7.3, Table 25 (Decision D19).
Competence safeguards (proposed)	Reconciliation integrity. Budget totals reconcile to the activity costs, the stated envelope and the funding sources, and variance figures reconcile to the supplied actuals. An unreconciled difference above a tolerance set by the course owner does not meet the safeguard. A high average cannot compensate for a failed safeguard (Table 25). The safeguards take effect only if the Academic Board approves them.
Marking and moderation	Marking is criterion-referenced against the rubrics of Annex H.2, with common performance bands of 80–100 Strong, 70–79 Secure, 60–69 Threshold, 50–59 Developing and 0–49 Insufficient. A second marker reviews every fail, every safeguard failure and every result within two points of a classification boundary. Online defences use two assessors. Independent internal moderation covers a sample of the cohort; marking and moderation are kept separate (Chapters 7.3 and 7.5).
Feedback, late work, reassessment	Formative comments within seven calendar days of a submission and provisional summative feedback within ten working days. Unapproved work up to seven calendar days late loses five percentage points. One reassessment within 30 calendar days of feedback, capped at 60/100. Appeals within 15 working days (Chapter 7.4).
Learning-gain indicator	An unweighted pre-test and post-test. A gain of 20 percentage points is a cohort quality indicator and not an individual pass rule (Chapter 7.1).
Integrity and data	No patient data is required. Participants obtain permission before using workplace documents, upload no confidential data to external tools and acknowledge any use of AI (Chapter 6.6).

Alignment matrix (Chapter 9.3)

No outcome is omitted and every assessed component has a stated learning purpose. The weight is the share of the final mark that tests the outcome.

Learning outcome	Method that builds it	Instrument that tests it (weight)	Weight
LO1 · Explain	Day 1 case analysis of an institutional budget; funding-sources workshop	• Budget pack (4) • Participation and reflection (4)	8%
LO2 · Calculate	Day 2 costing laboratory (spreadsheet); shared-cost clinic	• Budget pack (13) • Costing and cash-flow workings (4)	17%
LO3 · Prioritise	Day 3 envelope-fitting laboratory; budget-narrative workshop	• Budget pack (13) • Panel defence (5) • Budget-hearing simulation (4)	22%
LO4 · Apply	Day 4 cash-flow laboratory; reallocation-under-shortfall case	• Costing and cash-flow workings (8) • Participation and reflection (2)	10%
LO5 · Apply	Day 5 control-review laboratory; fraud red-flag workshop	• Internal-control review (13) • Participation and reflection (4)	17%
LO6 · Analyse	Day 6 variance-commentary laboratory; budget-hearing simulation	• Budget pack (15) • Panel defence (5) • Budget-hearing simulation (6)	26%
Total			**100%**

E Resources, framework integration and applied outputs (fields 10 to 13)

Field 10 · Materials and tools

Item	Proposed content	Status
Workbook	Costing guide, scenario sheet and control-review guide.	To be produced
Slide deck	Short inputs for Days 1 to 6.	To be produced
Case pack	An institutional budget file: plan, price list, prior-year execution and funding mix (illustrative).	To be produced
Templates	Costing workbook; scenario sheet; cash-flow forecast; internal control checklist; variance commentary and board report templates.	To be produced
Instruments	Rubric sheets A, C, D, S and R; hearing scenario and observation sheet; unweighted pre-course and post-course test.	To be produced
Datasets	Illustrative ledger extract for the variance laboratory.	To be produced

Each item marked “To be produced” is to be produced, version-controlled and approved before the first delivery (Annex E).

Field 11 · Readings

Each item was checked against the issuing body’s own page, or a bibliographic record of the journal, on 9 October 2026. The course owner confirms editions, access and licences before each cohort. Listing a source implies no endorsement or partnership, and no third-party text is reproduced (Chapter 3.5).

Type	Full attribution	Learning use and notes
Core 1	OECD (2015). *Recommendation of the Council on Budgetary Governance*. Paris: OECD. Page checked: legalinstruments.oecd.org/public/doc/319/319.en.pdf	International principles of budgetary governance; used on Days 1 and 3.

Type	Full attribution	Learning use and notes
Core 2	PEFA Secretariat (2016). *PEFA 2016 Framework for assessing public financial management*. Washington, DC: PEFA Secretariat. (Annex H.5, R3.) Page checked: pefa.org/node/119	Diagnostic framework for public financial management; used on Day 1 (Annex H.5, R3).
Core 3	Cashin C, Bloom D, Sparkes S, Barroy H, Kutzin J, O'Dougherty S (2017). *Aligning public financial management and health financing: sustaining progress toward universal health coverage*. Health Financing Working Paper 17.4. Geneva: WHO. Page checked: r4d.org/wp-content/uploads/Aligning-PFM-and-HF.pdf	How public financial management rules shape the budget of a health institution; used on Days 3 and 4. Note: The title page of the paper prints a different working-paper number from its suggested citation; the document number 17.4 is used.
Core 4	International Organization of Supreme Audit Institutions. *INTOSAI GOV 9100: guidelines for internal control standards for the public sector*. Vienna: INTOSAI. Page checked: issai.org/category_pronouncements/intosai-gov/	Internal-control guidance for the public sector; used on Day 5. Note: Cited without a year of issue; the course owner records the version used.
Supplementary 1	Committee of Sponsoring Organizations of the Treadway Commission (2013). *Internal Control: Integrated Framework*. Durham, NC: COSO. Page checked: theiia.org (COSO Internal Control Integrated Framework 2013 listing)	The component structure behind public-sector internal-control guidance; background for Day 5. Note: A licensed publication; the course uses its structure of components and principles.
Supplementary 2	International Monetary Fund (2019). *Fiscal Transparency Code*. Washington, DC: IMF. (Annex H.5, R4.) Page checked: blog-pfm.imf.org/en/pfmblog/2019/02/updated-fiscal-transparency-code-integrating-resource-revenue-issues	Transparency in fiscal reporting; used on Day 6 (Annex H.5, R4).
Supplementary 3	Federal Republic of Somalia (2019). *Public Financial Management Act, 2019* (cited as Law No. 17 by the Office of the Auditor General), and Ministry of Finance, *Public Financial Management Regulation, 2020* (19 March 2020). Page checked: oag.gov.so/?p=7444; archive.mof.gov.so (Public Financial Management Regulation)	The national legal frame; the official text is obtained and its current status confirmed before delivery. Note: The law number rests on one source. The course owner must obtain the official text and check any later amendment.
Supplementary 4	OECD (2020). *OECD Public Integrity Handbook*. (Annex H.5, R2.) Page checked: Annex H.5 of the book	Public integrity practice; used on Day 5 (Annex H.5, R2).

Field 12 · Framework integration map

Element names are the controlled names of Chapter 3.5 (Table 9). The mapping is proposed; the course owner re-checks it at Stage 3 (Annex F).

Framework	Controlled element	Developed in
MANAGER	Measure	LO2, LO6
	Allocate	LO3
	Execute	LO4
	Govern	LO1, LO5
	Review	LO6
DIRECTOR	Control	LO4, LO5
	Track	LO6
	Report	LO6
	Risk-manage	LO5
	Ensure ethics	LO5: integrity
LEADERSHIP	Accountability	LO5, LO6
	Evidence	LO2, LO3

#	Controlled competency (Catalogue)	Emphasis	Where developed and assessed
1	Ethical and accountable leadership	Supporting	Integrity and reporting concerns (Day 5; LO5)
2	Strategic thinking, direction-setting and public-value orientation	Supporting	Aligning the budget with institutional priorities (Day 3; LO3)
3	Governance, fiduciary oversight, risk management and institutional stewardship	Primary	Internal control, fiduciary oversight and reporting (Days 4 to 6; LO4 to LO6)
4	Evidence-informed decision-making, policy analysis and data literacy	Supporting	Costing and variance analysis (Days 2, 6)
5	People, team, stakeholder and partnership leadership	Not addressed	–
6	Execution, change management, service improvement and performance discipline	Primary	Budget execution and performance discipline (Days 4, 6; LO4, LO6)
7	Communication, influence, reflection and adaptive learning	Supporting	Board reporting and hearing (Day 6; Rubrics S, D and R)

Field 13 · Applied outputs

The output names are those of the Catalogue and are unchanged. The descriptions and standards are proposed.

Applied output	Description and standard	Assessed in
Activity-based budget	Costed budget linked to outputs, fitted to an envelope with scenarios (part of the principal assessed artefact).	Budget pack
Variance commentary	Budget-to-actual analysis with causes and recommended actions for a board (part of the principal assessed artefact).	Budget pack; hearing
Internal control checklist	Control review of a case spending process with ranked corrections.	Portfolio

F Compliance with the fourteen-field standard (Chapter 9.1)

Field	Content	Where	Status in this draft
1	Course identity	Part A	Complete (Catalogue data)
2	Participant profile	Part A	Proposed; tier from the Catalogue
3	Rationale	Part B	Proposed
4	Course aim	Part B	Complete (Catalogue text)
5	Learning outcomes	Part B	Proposed; each traced to an instrument
6	Module structure	Part C	Proposed
7	Session plans	Part C	Partly drafted (day level); open item
8	Methodology	Part C	Proposed
9	Assessment scheme	Part D	Proposed; weights total 100%; safeguards need Board approval
10	Materials and tools	Part E	Listed; none produced yet; open item
11	Readings and frameworks	Part E	Proposed; checked 9 October 2026
12	Framework integration map	Part E	Proposed
13	Applied outputs	Part E	Complete (Catalogue names)
14	Course owner and review date	Part A	Open item

G Open items, source note and approval record

Open items for the course owner and the Academic Board

1. The Public Financial Management Act of 2019 and the Regulation of 2020 are cited from secondary records; the law number rests on one source. The official text and any later amendment are obtained and checked before delivery.
2. The chart of accounts and budget classification of the participants' institutions differ; the case file uses a simplified chart that the course owner approves.
3. The case budget file has to be produced; the tolerance for the reconciliation safeguard is set by the course owner.
4. Relationship to RA-PFMX-502 (Public Financial Management, Executive Programme subject, 12 RCP) to be confirmed at scrutiny: this course is the short, institution-level entry.
5. Participants from non-governmental institutions may follow different legal and donor rules; the case file notes where the treatment differs.
6. Course owner (field 14). No owner is named. The owner is named, and the review date set, at approval (Chapter 9.7; Annex E).
7. Session plans (field 7) are drafted at the level of the day: the sequence, duration and method of each session and its required output. Session objectives, facilitator notes and per-session materials are to be completed by the course owner before Stage 3.
8. Materials (field 10) do not yet exist. Each item is to be produced, version-controlled and approved before the first delivery (Annex E).
9. Readings were checked against the issuing bodies on 9 October 2026. The course owner confirms editions, access and licences before each cohort and records the version of any web resource.
10. Rubrics and gates. Rubric A is described in Annex H.2 as specific to the Executive Programmes; this draft uses it for the applied assignments of an Executive Course. The principal written output and its defence are treated as the written capstone and defence of the gates (at least 60/100 each). The Academic Board confirms both uses (Decision D19).
11. Competence safeguards in Part D are proposals. They apply only if the Academic Board approves them (Table 25).
12. Pilot and moderation. The instruments are piloted and moderated in the first delivery cycle (Chapters 7.5 and 9.4). The Board confirms the panel size for defences (about ten minutes for each participant, with parallel panels above about ten participants).
13. Drafting method. This draft was prepared with AI assistance (Claude) from the sources of the book. A subject specialist has not reviewed it. Local facts (laws, institutions, data, tools) must be verified by the course owner before Stage 3.

Source and harmonisation note

Catalogue: 6 days, 6 RCP, retained unchanged (Decision D4). Contact hours are derived at five per RCP: 30 contact hours over six days of five hours.

Approval record (Chapter 9.4)

Stage	Owner	Evidence retained	Decision reference and date	Status
2 Design	Course owner	Draft syllabus, version 0.x	v0.1 prepared 9 October 2026 (AI-assisted); v0.2 completed 5 November 2026	Complete; owner not yet named
3 Academic scrutiny	Academic Board	Board minute and conditions		Not started
4 Pilot	Course owner	Pilot report; moderation record		Not started
5 Approval	Academic Board	Approved syllabus, version 1.0		Not started

A course cannot be scheduled until its syllabus is complete, approved by the Academic Board and lodged in the curriculum register (Chapter 9).

RA-PMG-305 · Project & Programme Management for Institutions

Complete syllabus, version 0.2 (Stage 2 Design complete). Awaiting Academic Board approval. References are to RIYAADA-UCS-2026-001, Version 1.0.

Status of this draft

Complete syllabus, version 0.2 (Stage 2 Design complete). It has not yet been through Academic Board scrutiny, piloting or approval, and it does not replace the course card in the book until it is approved (Chapter 9.4).

The Catalogue statements of identity, credit, tier, aim and applied outputs are retained unchanged. Everything else is proposed content written on 9 October 2026 with AI assistance. A subject specialist has not reviewed it.

Items that need a decision are listed in Part G.

A Course identity and participant profile (fields 1, 2 and 14)

Code	RA-PMG-305
Full title	Project & Programme Management for Institutions
Family and level	Executive Course · RL2 Professional Certificate
School	S3 · School of Strategy, Management & Institutional Transformation
Credit and hours	6 RCP · 60 notional hours · 30 contact hours (derived) · 6 days
Award	RIYAADA Professional Certificate in Project & Programme Management for Institutions
Participant profile (proposed)	Programme and project managers, reform coordinators, heads of unit, hospital and ministry staff who lead projects, and project coordinators in non-governmental and partner organisations. Primarily Tier 02 and Tier 03 (Catalogue).
Management tier	Tier 02 and Tier 03
Prerequisite knowledge (proposed)	Admission evidence as in Chapter 8. A project, reform or service change that the participant leads or will lead (real or proposed), used as the working case.
Delivery (proposed)	Six days of five contact hours each, as a continuous block or in two modules of 3 + 3 days, in person at the Mogadishu campus or client premises; in-house cohort option (proposed).
Contact hours by day (derived)	Day 1: 5 h, Day 2: 5 h, Day 3: 5 h, Day 4: 5 h, Day 5: 5 h, Day 6: 5 h (30 hours in all).
Language of delivery	English; Somali or bilingual delivery; Arabic where required (Chapter 6).
Syllabus status	Complete syllabus, version 0.2, Stage 2 Design complete. In the book the course remains a course card until approval.
Source references	Catalogue RA-PMG-305; this draft (v0.1)
Award pathways	Stand-alone course (no Advanced Certificate or Diploma role defined in the Catalogue).
Course owner and review date	To be named (open item, Annex E). First review: the Stage 6 annual review after the first delivery (Chapter 9.4).

B Rationale, aim and learning outcomes (fields 3 to 5)

Field 3 · Rationale

Strategic plans become results only when they are converted into projects with clear scope, resources, accountabilities and risks. In health institutions, projects range from building works and equipment installation to information-system roll-outs, service redesign and donor-funded programmes, and they commonly meet the same problems: scope that grows, estimates that are too optimistic, risks that nobody owns and benefits that nobody measures. Research on large projects shows that cost and schedule overruns are common and that optimism in early estimates is a major cause (Flyvbjerg 2014).

The course teaches a compact, standards-based method of project definition and control. Participants turn one priority into a charter, a work breakdown and schedule, and a risk and benefits register, and learn the reporting and change-control routines that keep a project on course. The method follows the structure of ISO 21502 and the PMBOK Guide, which remain the property of their publishers; the course teaches the practice and not their text.

Field 4 · Course aim

Catalogue aim (unchanged). Convert institutional priorities into scoped, resourced, risk-managed and reportable projects.

Field 5 · Learning outcomes

On successful completion, participants will be able to:

LO1 Draft a project charter that states purpose, objectives, scope boundaries, success criteria, deliverables, constraints, governance and authority for a sponsor's approval.

LO2 Analyse stakeholders' interests, influence and support and select engagement actions.

LO3 Construct a work breakdown structure and a schedule with dependencies, durations, milestones and a critical path.

LO4 Calculate project cost and resource needs from the work breakdown, stating assumptions and contingency.

LO5 Develop a risk and benefits register in which each major risk has an owner, response and trigger and each benefit a measure, baseline, target and owner.

LO6 Apply status reporting, change control and escalation routines to a project scenario.

Each outcome opens with one assessable verb from the controlled list (Table 33) and is traced to an instrument in Part D. Level profile of this draft: Creating 3, Analysing 1, Applying 2. Catalogue dominant outcome level: Creating. Catalogue principal assessed artefact: Project charter, schedule and risk register.

C Content and method (fields 6 to 8)

Field 6 · Module structure

Day	Hours	Theme	Core content
Day 1	5	Projects, programmes and the institutional portfolio	What a project is; projects, programmes and portfolios; life cycle and development approaches (predictive, iterative, hybrid). Choosing projects from institutional priorities. Business case and benefits. Roles of sponsor, manager and team. Governance and decision gates. Selecting the working case.
Day 2	5	Defining the project: the charter and stakeholders	Charter contents; objectives and success criteria; scope in and out; assumptions and constraints; the authority of the project manager. Stakeholder identification, interest–influence analysis and an engagement plan. Partner and donor requirements.
Day 3	5	Scope, work breakdown and schedule	Decomposing scope into a work breakdown structure and work packages; the WBS dictionary. Activities, sequencing and dependencies; estimating durations; critical path, float and milestones; resource loading. Presenting a schedule.
Day 4	5	Cost, resources and procurement	Cost-estimation methods (analogous and bottom-up); contingency and management reserve; cash flow by period; reference-class thinking and optimism bias. Resource allocation and conflicts. Procurement as a project activity; the link to the institutional budget.
Day 5	5	Risks and benefits	The risk-management process (context, identification, analysis, evaluation, treatment, monitoring and communication) following ISO 31000; risk-register fields; responses, triggers and contingency plans. Benefits: definition, measures, baselines, targets, owners and timing of realisation; the benefits register.
Day 6	5	Control, reporting and closure	Monitoring progress; status reports and traffic-light reporting; earned-value basics; change control; escalation; steering-committee decisions. Closure, handover and lessons learned. Steering-committee simulation. Assembly of the plan pack; panel defence; action planning.

Field 7 · Session plans

Day-level plans: the sequence, duration and method of each session and the required output of the day. Session objectives, facilitator notes and per-session materials are an open item (Part G).

Day	Session sequence	Required output of the day
Day 1	• Input: projects, programmes and portfolios (60 min) • Project-selection and business-case laboratory (105 min) • Roles, governance and gates workshop (90 min) • Coaching and day review (45 min)	Working case chosen; business-case sketch
Day 2	• Input: the charter (60 min) • Charter-drafting laboratory (120 min) • Stakeholder-analysis workshop (75 min) • Coaching and day review (45 min)	Project charter (first draft) and stakeholder map
Day 3	• Input: scope, WBS and scheduling (60 min) • WBS laboratory (90 min) • Scheduling and critical-path laboratory (105 min) • Coaching and day review (45 min)	Work breakdown and schedule (draft)
Day 4	• Input: estimating, contingency and resources (60 min) • Cost-estimation laboratory (105 min) • Resource-conflict clinic (90 min) • Coaching and day review (45 min)	Cost and resource estimate (draft)
Day 5	• Input: risk and benefits management (60 min) • Risk-register laboratory (105 min) • Benefits-register workshop (90 min) • Coaching and day review (45 min)	Risk and benefits register (draft)
Day 6	• Input: control, reporting and change (45 min) • Steering-committee simulation (observed) (90 min) • Panel defence (individual) (105 min) • Closure and action planning (60 min)	Project plan pack defended; observed simulation record

Notional workload

Component	Hours
Contact sessions	30
Directed reading and case preparation	8
Between-session exercises	7
Preparation of assessed outputs	15
Total notional hours	**60**

Field 8 · Methodology

Each participant works on one real or proposed project from the first morning, so that the charter, schedule and registers are the participant's own and usable on return. Teaching is short; laboratories use templates that participants keep. Peer review of charters and schedules is built into each day.

A steering-committee simulation presents a mid-project scenario with a late deliverable, a cost pressure and a new risk, and tests decisions on change control and escalation. Confidential institutional documents are used only with permission (Chapter 6.6).

D Assessment (field 9)

Field 9 · Assessment scheme

Instrument weights follow Table 24: the principal applied output 50 to 60%, the analytical or simulation component 20 to 30%, and participation 10 to 25%.

Instrument and component	Weight	Rubric and gate	Outcomes
1 Project charter, schedule and risk register (principal assessed output)	**55%**		
• Project plan pack	45%	Rubric C (written capstone) · at least 60/100	LO1, LO3, LO5
• Panel defence	10%	Rubric D (defence) · at least 60/100	LO1, LO3, LO5
2 Analytical portfolio	**25%**		
• Stakeholder analysis and engagement plan	10%	Rubric A (applied assignment) · at least 50/100	LO2
• Cost and resource estimate	15%	Rubric A (applied assignment) · at least 50/100	LO4
3 Steering-committee simulation and participation	**20%**		
• Steering-committee simulation	10%	Rubric S (observed simulation) · at least 60/100	LO6
• Participation and reflection	10%	Rubric R (participation and reflection) · at least 50% (normalised)	LO2, LO4, LO5, LO6
Total	**100%**		

Evidence at threshold competence (proposed)

Component	What a threshold submission or performance shows
Project plan pack	Charter (purpose, objectives, success criteria, scope in and out, deliverables, constraints, assumptions, governance, authority, summary budget and timeline); work breakdown to work-package level with a dictionary; schedule with dependencies, milestones and a critical path; risk register in which each top risk has an owner, response and trigger; benefits register with measure, baseline, target, owner and timing.
Panel defence	Explains the scope, schedule logic and top risks to a sponsor, states what would trigger a change request and answers questions on feasibility.
Stakeholder analysis and engagement plan	Identifies stakeholders including partners and beneficiaries; rates interest and influence with evidence; chooses engagement actions with owners.
Cost and resource estimate	Cost built bottom-up from the work breakdown with stated assumptions; contingency justified; cash flow by period consistent with the schedule; resource conflicts identified and resolved.
Steering-committee simulation	Observed in the steering committee: reports status honestly, applies the change-control rule, escalates within authority and records the decision.
Participation and reflection	Rubric R criteria: preparedness, constructive contribution, peer-feedback quality and reflection depth.

Competency threshold	Overall at least 60/100. At least 50/100 in each applied assignment (Rubric A) and in the normalised participation and reflection mark (Rubric R). At least 60/100 in the observed simulation (Rubric S), the written capstone, here the principal written output (Rubric C) and the defence (Rubric D). Attendance of at least 80% of scheduled contact time. Every course competence safeguard is met. All required outputs and identity checks are complete. Chapter 7.3, Table 25 (Decision D19).
Competence safeguards (proposed)	Internal consistency. The schedule's dependencies and milestones follow from the work breakdown and the charter's scope, and every risk rated high has an owner, a response and a trigger. A high average cannot compensate for a failed safeguard (Table 25). The safeguards take effect only if the Academic Board approves them.

Marking and moderation	Marking is criterion-referenced against the rubrics of Annex H.2, with common performance bands of 80–100 Strong, 70–79 Secure, 60–69 Threshold, 50–59 Developing and 0–49 Insufficient. A second marker reviews every fail, every safeguard failure and every result within two points of a classification boundary. Online defences use two assessors. Independent internal moderation covers a sample of the cohort; marking and moderation are kept separate (Chapters 7.3 and 7.5).
Feedback, late work, reassessment	Formative comments within seven calendar days of a submission and provisional summative feedback within ten working days. Unapproved work up to seven calendar days late loses five percentage points. One reassessment within 30 calendar days of feedback, capped at 60/100. Appeals within 15 working days (Chapter 7.4).
Learning-gain indicator	An unweighted pre-test and post-test. A gain of 20 percentage points is a cohort quality indicator and not an individual pass rule (Chapter 7.1).
Integrity and data	No patient data is required. Participants obtain permission before using workplace documents, upload no confidential data to external tools and acknowledge any use of AI (Chapter 6.6).

Alignment matrix (Chapter 9.3)

No outcome is omitted and every assessed component has a stated learning purpose. The weight is the share of the final mark that tests the outcome.

Learning outcome	Method that builds it	Instrument that tests it (weight)	Weight
LO1 · Draft	Day 1 business-case laboratory; Day 2 charter-drafting laboratory; peer review	• Project plan pack (14) • Panel defence (3)	17%
LO2 · Analyse	Day 2 stakeholder-analysis workshop	• Stakeholder analysis and engagement plan (10) • Participation and reflection (2)	12%
LO3 · Construct	Day 3 WBS and scheduling laboratories	• Project plan pack (15) • Panel defence (3)	18%
LO4 · Calculate	Day 4 cost-estimation laboratory; resource-conflict clinic	• Cost and resource estimate (15) • Participation and reflection (2)	17%
LO5 · Develop	Day 5 risk-register laboratory and benefits-register workshop	• Project plan pack (16) • Panel defence (4) • Participation and reflection (2)	22%
LO6 · Apply	Day 6 steering-committee simulation (observed)	• Steering-committee simulation (10) • Participation and reflection (4)	14%
Total			**100%**

E Resources, framework integration and applied outputs (fields 10 to 13)

Field 10 · Materials and tools

Item	Proposed content	Status
Workbook	Charter guide, WBS guide, scheduling guide and register guides.	To be produced
Slide deck	Short inputs for Days 1 to 6.	To be produced
Case pack	A model institutional project (for example an equipment installation or a service redesign) with a worked charter and schedule, and a mid-project scenario for the simulation.	To be produced
Templates	Business-case sketch; charter; stakeholder map; WBS and dictionary; schedule (spreadsheet); cost estimate; risk register; benefits register; status report; change-request form.	To be produced
Instruments	Rubric sheets A, C, D, S and R; simulation scenario and observation sheet; unweighted pre-course and post-course test.	To be produced
Datasets	Illustrative cost and duration data for the estimating laboratory.	To be produced

Each item marked "To be produced" is to be produced, version-controlled and approved before the first delivery (Annex E).

Field 11 · Readings

Each item was checked against the issuing body's own page, or a bibliographic record of the journal, on 9 October 2026. The course owner confirms editions, access and licences before each cohort. Listing a source implies no endorsement or partnership, and no third-party text is reproduced (Chapter 3.5).

Type	Full attribution	Learning use and notes
Core 1	Project Management Institute (2021). *A Guide to the Project Management Body of Knowledge (PMBOK Guide) and The Standard for Project Management*, 7th edition. Newtown Square, PA: PMI. Page checked: pmi.org (PMBOK Guide seventh edition listing)	Principles and performance domains of project management; used on Days 1 and 6. Note: A licensed publication.
Core 2	ISO 21502:2020. *Project, programme and portfolio management: guidance on project management*. Geneva: International Organization for Standardization. Page checked: scc-ccn.ca/standardsdb/standards/8176145	International guidance on project management; used on Days 1 to 3. Note: A licensed standard.
Core 3	ISO 31000:2018. *Risk management: guidelines*. Geneva: International Organization for Standardization. Page checked: committee.iso.org/sites/tc262/home/projects/published/iso-31000-2018-risk-management.html	Risk-management process and principles; used on Day 5. Note: A licensed standard.
Supplementary 1	Flyvbjerg B (2014). What you should know about megaprojects and why: an overview. *Project Management Journal* 45(2): 6–19. Page checked: pmi.org/learning/library/what-you-should-know-megaprojects-11656	Evidence on optimism bias and overruns; used on Day 4.

Field 12 · Framework integration map

Element names are the controlled names of Chapter 3.5 (Table 9). The mapping is proposed; the course owner re-checks it at Stage 3 (Annex F).

Framework	Controlled element	Developed in
MANAGER	Navigate	LO3, LO6
	Allocate	LO4
	Execute	LO3, LO6
	Measure	LO5
	Review	LO6
DIRECTOR	Define	LO1
	Risk-manage	LO5
	Track	LO6
	Report	LO6
LEADER	Align	LO1, LO2
	Engage	LO2, LO6
	Decide	LO6
LEADERSHIP	Execution	LO3 to LO6
	Partnership	LO2

#	Controlled competency (Catalogue)	Emphasis	Where developed and assessed
1	Ethical and accountable leadership	Supporting	Honest status reporting and benefits (Days 5, 6)

#	Controlled competency (Catalogue)	Emphasis	Where developed and assessed
2	Strategic thinking, direction-setting and public-value orientation	Supporting	Choosing projects from institutional priorities (Day 1; LO1)
3	Governance, fiduciary oversight, risk management and institutional stewardship	Supporting	Risk and governance gates (Days 1, 5)
4	Evidence-informed decision-making, policy analysis and data literacy	Supporting	Estimating and measuring benefits (Days 4, 5)
5	People, team, stakeholder and partnership leadership	Primary	Stakeholders, sponsors and teams (Days 1, 2, 6; LO2, LO6)
6	Execution, change management, service improvement and performance discipline	Primary	Execution, change control and performance discipline (Days 3 to 6; LO3 to LO6)
7	Communication, influence, reflection and adaptive learning	Supporting	Sponsor communication and reflection (Day 6; Rubrics D and R)

Field 13 · Applied outputs

The output names are those of the Catalogue and are unchanged. The descriptions and standards are proposed.

Applied output	Description and standard	Assessed in
Project charter	Charter ready for a sponsor's approval (part of the principal assessed artefact).	Project plan pack
Work-breakdown and schedule	Work breakdown with dictionary and a schedule with critical path (part of the principal assessed artefact).	Project plan pack
Risk and benefits register	Risk register and benefits register for the project (part of the principal assessed artefact).	Project plan pack

F Compliance with the fourteen-field standard (Chapter 9.1)

Field	Content	Where	Status in this draft
1	Course identity	Part A	Complete (Catalogue data)
2	Participant profile	Part A	Proposed; tier from the Catalogue
3	Rationale	Part B	Proposed
4	Course aim	Part B	Complete (Catalogue text)
5	Learning outcomes	Part B	Proposed; each traced to an instrument
6	Module structure	Part C	Proposed
7	Session plans	Part C	Partly drafted (day level); open item
8	Methodology	Part C	Proposed
9	Assessment scheme	Part D	Proposed; weights total 100%; safeguards need Board approval
10	Materials and tools	Part E	Listed; none produced yet; open item
11	Readings and frameworks	Part E	Proposed; checked 9 October 2026
12	Framework integration map	Part E	Proposed
13	Applied outputs	Part E	Complete (Catalogue names)
14	Course owner and review date	Part A	Open item

G Open items, source note and approval record

Open items for the course owner and the Academic Board

1. ISO 21502, ISO 31000 and the PMBOK Guide are licensed publications. The course teaches the practice; participants consult the standards through their institution or library, and no text is reproduced.
2. The scheduling tool is a spreadsheet template by default; the use of project-management software is for the course owner to decide.
3. The model project and mid-project scenario have to be produced.
4. Distinction from RA-EXP-704 (Project & Grants Management, Short Course) and from RA-GWR-405 to be confirmed at scrutiny.
5. Course owner (field 14). No owner is named. The owner is named, and the review date set, at approval (Chapter 9.7; Annex E).
6. Session plans (field 7) are drafted at the level of the day: the sequence, duration and method of each session and its required output. Session objectives, facilitator notes and per-session materials are to be completed by the course owner before Stage 3.
7. Materials (field 10) do not yet exist. Each item is to be produced, version-controlled and approved before the first delivery (Annex E).
8. Readings were checked against the issuing bodies on 9 October 2026. The course owner confirms editions, access and licences before each cohort and records the version of any web resource.
9. Rubrics and gates. Rubric A is described in Annex H.2 as specific to the Executive Programmes; this draft uses it for the applied assignments of an Executive Course. The principal written output and its defence are treated as the written capstone and defence of the gates (at least 60/100 each). The Academic Board confirms both uses (Decision D19).
10. Competence safeguards in Part D are proposals. They apply only if the Academic Board approves them (Table 25).
11. Pilot and moderation. The instruments are piloted and moderated in the first delivery cycle (Chapters 7.5 and 9.4). The Board confirms the panel size for defences (about ten minutes for each participant, with parallel panels above about ten participants).
12. Drafting method. This draft was prepared with AI assistance (Claude) from the sources of the book. A subject specialist has not reviewed it. Local facts (laws, institutions, data, tools) must be verified by the course owner before Stage 3.

Source and harmonisation note

Catalogue: 6 days, 6 RCP, retained unchanged (Decision D4). Contact hours are derived at five per RCP: 30 contact hours over six days of five hours.

Approval record (Chapter 9.4)

Stage	Owner	Evidence retained	Decision reference and date	Status
2 Design	Course owner	Draft syllabus, version 0.x	v0.1 prepared 9 October 2026 (AI-assisted); v0.2 completed 5 November 2026	Complete; owner not yet named
3 Academic scrutiny	Academic Board	Board minute and conditions		Not started
4 Pilot	Course owner	Pilot report; moderation record		Not started
5 Approval	Academic Board	Approved syllabus, version 1.0		Not started

A course cannot be scheduled until its syllabus is complete, approved by the Academic Board and lodged in the curriculum register (Chapter 9).

RA-RES-401 · Applied Research Design & Methods

Complete syllabus, version 0.2 (Stage 2 Design complete). Awaiting Academic Board approval. References are to RIYAADA-UCS-2026-001, Version 1.0.

Status of this draft

Complete syllabus, version 0.2 (Stage 2 Design complete). It has not yet been through Academic Board scrutiny, piloting or approval, and it does not replace the course card in the book until it is approved (Chapter 9.4).

The Catalogue statements of identity, credit, tier, aim and applied outputs are retained unchanged. Everything else is proposed content written on 9 October 2026 with AI assistance. A subject specialist has not reviewed it.

Items that need a decision are listed in Part G.

A Course identity and participant profile (fields 1, 2 and 14)

Code	RA-RES-401
Full title	Applied Research Design & Methods
Family and level	Executive Course · RL2 Professional Certificate
School	S4 · School of Research, Evaluation & Knowledge
Credit and hours	6 RCP · 60 notional hours · 30 contact hours (derived) · 7 days
Award	RIYAADA Professional Certificate in Applied Research Design & Methods
Participant profile (proposed)	Programme managers, quality and monitoring and evaluation officers, clinicians in management roles, policy analysts and faculty who need to design studies that answer institutional questions. Primarily Tier 02 and Tier 03 (Catalogue).
Management tier	Tier 02 and Tier 03
Prerequisite knowledge (proposed)	Admission evidence as in Chapter 8. A research or evaluation question from the participant's institution to develop (real or proposed). Familiarity with descriptive statistics is helpful; no advanced statistics are required.
Delivery (proposed)	Seven days: six days of 4.5 contact hours and a final day of 3 hours (30 contact hours), as a continuous block or in two modules of 4 + 3 days, in person at the Mogadishu campus or client premises; in-house cohort option (proposed).
Contact hours by day (derived)	Day 1: 4.5 h, Day 2: 4.5 h, Day 3: 4.5 h, Day 4: 4.5 h, Day 5: 4.5 h, Day 6: 4.5 h, Day 7: 3 h (30 hours in all).
Language of delivery	English; Somali or bilingual delivery; Arabic where required (Chapter 6).
Syllabus status	Complete syllabus, version 0.2, Stage 2 Design complete. In the book the course remains a course card until approval.
Source references	Catalogue RA-RES-401; this draft (v0.1)
Award pathways	AC-ARE
Course owner and review date	To be named (open item, Annex E). First review: the Stage 6 annual review after the first delivery (Chapter 9.4).

B Rationale, aim and learning outcomes (fields 3 to 5)

Field 3 · Rationale

Institutions repeatedly need answers to practical questions: whether a service reached those who needed it, why a programme under-performs, what a reform cost, or how users experience care. Studies that are badly designed waste resources and mislead decisions, and if ethical safeguards are weak they can harm the people who take part. International standards for ethical conduct (the Declaration of Helsinki and the CIOMS guidelines)

and for reporting (the EQUATOR Network library) set the expectations that a protocol must meet before any data are collected.

This course moves participants from an institutional problem to a protocol that an ethics review body could assess: a focused question, a design suited to it, a sampling and measurement plan, instruments tested on a small sample, a data-management and analysis plan fixed in advance, and an ethics and integrity section. It addresses applied and operational questions of institutions; it does not train for clinical trials or advanced statistical analysis.

Field 4 · Course aim

Catalogue aim (unchanged). Design ethical, feasible and methodologically defensible studies that answer institutional questions.

Field 5 · Learning outcomes

On successful completion, participants will be able to:

LO1 Formulate a focused research question and objectives from an institutional problem, justified by a structured review of existing evidence.

LO2 Compare candidate study designs for a given question against validity, feasibility and cost.

LO3 Design a sampling strategy and measurement plan with variables, operational definitions and a justified sample size or sampling frame.

LO4 Construct a data-collection instrument and pre-test it, revising it from the pre-test findings.

LO5 Appraise the ethical risks of a proposed study and specify safeguards for consent, confidentiality, vulnerable participants and data protection.

LO6 Develop an analysis plan and a data-management plan that specify in advance how each objective will be answered.

Each outcome opens with one assessable verb from the controlled list (Table 33) and is traced to an instrument in Part D. Level profile of this draft: Creating 4, Evaluating 1, Analysing 1. Catalogue dominant outcome level: Creating. Catalogue principal assessed artefact: Research protocol and analysis plan.

C Content and method (fields 6 to 8)

Field 6 · Module structure

Day	Hours	Theme	Core content
Day 1	4.5	From problem to research question	Institutional questions and research questions; operational, health-systems and implementation research. Problem analysis; question structures such as population–intervention–comparison–outcome; objectives. Searching for and appraising evidence: sources, search strategy, critical appraisal and summarising the evidence gap. Reference management and avoiding plagiarism.
Day 2	4.5	Choosing a study design	Descriptive, analytic and evaluative questions; cross-sectional, case-control, cohort, quasi-experimental and experimental designs; qualitative designs; mixed methods; case studies. Validity: bias, confounding and chance. Trade-offs of feasibility, time and cost. The design matrix: question, design, data, analysis.
Day 3	4.5	Sampling and measurement	Population, sampling frame and unit; probability and purposive sampling; the logic of sample size for estimates and comparisons, using a calculator; response and non-response. Variables, indicators, operational definitions and scales; validity and reliability of measures.
Day 4	4.5	Building and testing instruments	Questionnaire, interview and focus-group guide design: question wording, order and scales; translation and back-translation between English, Somali and Arabic where needed; pre-testing. Fieldwork logistics, enumerator training, quality control and the safety of field teams. Laboratory: construct and pre-test an instrument.

Day	Hours	Theme	Core content
Day 5	4.5	Ethics and research integrity	Principles of the Declaration of Helsinki and the CIOMS guidelines: respect, beneficence and justice; risks and benefits; informed consent; vulnerable groups, children and displaced populations; confidentiality and data protection; community engagement; conflicts of interest. Ethics review routes and what a committee examines. Research integrity and authorship. Ethics-committee simulation.
Day 6	4.5	Analysis plan, data management and use	Analysis plan by objective: descriptive and inferential methods, qualitative coding and thematic analysis, mixed-method integration; pre-specification. Data-management plan: entry, cleaning, storage, security, sharing and retention. Reporting guidelines from the EQUATOR library. Dissemination and use of findings; budget and timeline.
Day 7	3	Protocol assembly and defence	Protocol structure and compilation; peer review against a checklist; panel defence; revision plan and next steps.

Field 7 · Session plans

Day-level plans: the sequence, duration and method of each session and the required output of the day. Session objectives, facilitator notes and per-session materials are an open item (Part G).

Day	Session sequence	Required output of the day
Day 1	• Input: from problem to question (45 min) • Question-formulation laboratory (75 min) • Evidence-search and appraisal laboratory (105 min) • Coaching and day review (45 min)	Research question, objectives and evidence-gap summary (draft)
Day 2	• Input: study designs and validity (60 min) • Design-comparison laboratory (90 min) • Design-matrix workshop (75 min) • Coaching and day review (45 min)	Design matrix (draft)
Day 3	• Input: sampling and measurement (60 min) • Sampling and sample-size laboratory (90 min) • Variables and definitions workshop (75 min) • Coaching and day review (45 min)	Sampling plan and variable list (draft)
Day 4	• Input: instrument design (45 min) • Instrument-construction laboratory (90 min) • Pre-test and revision workshop (90 min) • Coaching and day review (45 min)	Instrument (pre-tested draft)
Day 5	• Input: ethics and integrity (60 min) • Ethics-risk appraisal laboratory (75 min) • Ethics-committee simulation (observed) (90 min) • Coaching and day review (45 min)	Ethics section (draft); observed simulation record
Day 6	• Input: analysis and data management (60 min) • Analysis-plan laboratory (90 min) • Data-management and reporting workshop (75 min) • Coaching and day review (45 min)	Analysis plan and data-management plan (draft)
Day 7	• Protocol compilation and peer review (75 min) • Panel defence (individual) (75 min) • Revision plan and close (30 min)	Protocol defended (written protocol submitted before the panel)

Notional workload

Component	Hours
Contact sessions	30
Directed reading and evidence search	8
Between-session exercises	7
Preparation of assessed outputs	15
Total notional hours	**60**

Field 8 · Methodology

Participants build one protocol throughout, starting from a question from their own institution. Each day ends with a section of the protocol, reviewed in a structured peer clinic. Evidence searching and critical appraisal are done on real, openly available literature using a simple appraisal checklist. Instruments are pre-tested on classmates or volunteers (not on patients or the public) and revised.

In the ethics-committee simulation participants take the roles of applicant and committee member and review one another's protocol sections against a checklist built from the Declaration of Helsinki and the CIOMS guidelines. No human-participant data are collected in the course itself (Chapter 6.6).

D Assessment (field 9)

Field 9 · Assessment scheme

Instrument weights follow Table 24: the principal applied output 50 to 60%, the analytical or simulation component 20 to 30%, and participation 10 to 25%.

Instrument and component	Weight	Rubric and gate	Outcomes
1 Research protocol and analysis plan (principal assessed output)	**55%**		
• Written protocol	45%	Rubric C (written capstone) · at least 60/100	LO1, LO2, LO3, LO5, LO6
• Panel defence	10%	Rubric D (defence) · at least 60/100	LO2, LO5, LO6
2 Analytical portfolio	**25%**		
• Instrument set	15%	Rubric A (applied assignment) · at least 50/100	LO4
• Evidence summary and appraisal	10%	Rubric A (applied assignment) · at least 50/100	LO1, LO2
3 Ethics-committee simulation and participation	**20%**		
• Ethics-committee simulation	10%	Rubric S (observed simulation) · at least 60/100	LO5
• Participation and reflection	10%	Rubric R (participation and reflection) · at least 50% (normalised)	LO1, LO3, LO4, LO6
Total	**100%**		

Evidence at threshold competence (proposed)

Component	What a threshold submission or performance shows
Written protocol	Background and justification from an appraised evidence summary; question and objectives; design and its rationale; setting, population, sampling and sample size; variables and measures; data-collection procedures; data-management plan; analysis plan for each objective; ethics section (risks, consent, confidentiality, vulnerable participants, data protection, review route); limitations; timeline and budget.

Component	What a threshold submission or performance shows
Panel defence	Explains why the design answers the question, defends the sample and the ethics safeguards, and states the main threats to validity.
Instrument set	Instrument or instruments aligned to the objectives and variables, with clear wording and logical order, a translation approach and a pre-test log recording the revisions made.
Evidence summary and appraisal	Search strategy with sources and terms; selection of studies; appraisal of at least three studies against a stated checklist; synthesis stating what is known, what is uncertain and the gap.
Ethics-committee simulation	Observed as applicant and as committee member: identifies risks and benefits, asks about consent, confidentiality and vulnerable participants, and records a reasoned decision.
Participation and reflection	Rubric R criteria: preparedness, constructive contribution, peer-feedback quality and reflection depth.

Competency threshold	Overall at least 60/100. At least 50/100 in each applied assignment (Rubric A) and in the normalised participation and reflection mark (Rubric R). At least 60/100 in the observed simulation (Rubric S), the written capstone, here the principal written output (Rubric C) and the defence (Rubric D). Attendance of at least 80% of scheduled contact time. Every course competence safeguard is met. All required outputs and identity checks are complete. Chapter 7.3, Table 25 (Decision D19).
Competence safeguards (proposed)	Research ethics. The protocol contains an ethics section that identifies risks to participants, consent procedures, confidentiality and data protection, and the review route. A protocol without it does not meet the safeguard, whatever the average mark. A high average cannot compensate for a failed safeguard (Table 25). The safeguards take effect only if the Academic Board approves them.
Marking and moderation	Marking is criterion-referenced against the rubrics of Annex H.2, with common performance bands of 80–100 Strong, 70–79 Secure, 60–69 Threshold, 50–59 Developing and 0–49 Insufficient. A second marker reviews every fail, every safeguard failure and every result within two points of a classification boundary. Online defences use two assessors. Independent internal moderation covers a sample of the cohort; marking and moderation are kept separate (Chapters 7.3 and 7.5).
Feedback, late work, reassessment	Formative comments within seven calendar days of a submission and provisional summative feedback within ten working days. Unapproved work up to seven calendar days late loses five percentage points. One reassessment within 30 calendar days of feedback, capped at 60/100. Appeals within 15 working days (Chapter 7.4).
Learning-gain indicator	An unweighted pre-test and post-test. A gain of 20 percentage points is a cohort quality indicator and not an individual pass rule (Chapter 7.1).
Integrity and data	No patient data is required. Participants obtain permission before using workplace documents, upload no confidential data to external tools and acknowledge any use of AI (Chapter 6.6).

Alignment matrix (Chapter 9.3)

No outcome is omitted and every assessed component has a stated learning purpose. The weight is the share of the final mark that tests the outcome.

Learning outcome	Method that builds it	Instrument that tests it (weight)	Weight
LO1 · Formulate	Day 1 question-formulation and evidence-search laboratories	• Written protocol (8) • Evidence summary and appraisal (6) • Participation and reflection (2)	16%
LO2 · Compare	Day 2 design-comparison laboratory and design-matrix workshop	• Written protocol (7) • Panel defence (3) • Evidence summary and appraisal (4)	14%
LO3 · Design	Day 3 sampling and sample-size laboratory; variables workshop	• Written protocol (10) • Participation and reflection (2)	12%
LO4 · Construct	Day 4 instrument-construction laboratory; pre-test and revision workshop	• Instrument set (15) • Participation and reflection (2)	17%
LO5 · Appraise	Day 5 ethics-risk laboratory and ethics-committee simulation	• Written protocol (8) • Panel defence (4) • Ethics-committee simulation (10)	22%
LO6 · Develop	Day 6 analysis-plan laboratory; data-management and reporting workshop	• Written protocol (12) • Panel defence (3) • Participation and reflection (4)	19%
Total			**100%**

E Resources, framework integration and applied outputs (fields 10 to 13)

Field 10 · Materials and tools

Item	Proposed content	Status
Workbook	Protocol outline, design matrix, sample-size guide and ethics checklist.	To be produced
Slide deck	Short inputs for Days 1 to 7.	To be produced
Case pack	Three short institutional research questions with background, and an example protocol with a model ethics section.	To be produced
Templates	Evidence-search log; appraisal checklist; design matrix; instrument template; ethics-application template; data-management plan; analysis-plan table.	To be produced
Instruments	Rubric sheets A, C, D, S and R; ethics-committee simulation scenario and observation sheet; unweighted pre-course and post-course test.	To be produced
Datasets	None required; sample-size exercises use supplied parameters.	Not required

Each item marked “To be produced” is to be produced, version-controlled and approved before the first delivery (Annex E).

Field 11 · Readings

Each item was checked against the issuing body's own page, or a bibliographic record of the journal, on 9 October 2026. The course owner confirms editions, access and licences before each cohort. Listing a source implies no endorsement or partnership, and no third-party text is reproduced (Chapter 3.5).

Type	Full attribution	Learning use and notes
Core 1	World Medical Association. *WMA Declaration of Helsinki: ethical principles for medical research involving human participants*. First adopted June 1964; most recently amended October 2024 by the 75th WMA General Assembly, Helsinki. Page checked: wma.net/policies-post/wma-declaration-of-helsinki/	Ethical principles for research with human participants; used on Day 5.
Core 2	Council for International Organizations of Medical Sciences (2016). *International ethical guidelines for health-related research involving humans*. Geneva: CIOMS. Page checked: cioms.ch/ethical-guidelines-2016/	International guidance on applying those principles in health research; used on Day 5.
Core 3	Creswell JW, Creswell JD (2022). *Research design: qualitative, quantitative, and mixed methods approaches*, 6th edition. Thousand Oaks, CA: SAGE. Page checked: sagepub.com/shop/buy-a-book/research-design-6-270550	Quantitative, qualitative and mixed-method designs; used on Days 2 and 3.
Core 4	EQUATOR Network (current). *Library of reporting guidelines for health research*, including STROBE, CONSORT, PRISMA, STARD and SQUIRE. Oxford: EQUATOR Network (equator-network.org). Page checked: equator-network.org	Library of reporting guidelines; used on Day 6. Note: Guidelines are versioned; the course owner records the version used.
Supplementary 1	World Health Organization (2011). *Standards and operational guidance for ethics review of health-related research with human participants*. Geneva: WHO. Page checked: who.int/publications/i/item/9789241502948	Standards for ethics review; used on Day 5 for the review route.
Supplementary 2	Page MJ, McKenzie JE, Bossuyt PM, et al. (2021). The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *BMJ* 372: n71. Page checked: pubmed.ncbi.nlm.nih.gov (PRISMA 2020 records); eprints.whiterose.ac.uk/173303	Reporting standard for reviews; used on Day 1 for the evidence summary.
Supplementary 3	Greenhalgh T (2019). *How to read a paper: the basics of evidence-based medicine and healthcare*, 6th edition. Chichester: Wiley. Page checked: library catalogue and bookseller records (ISBN 9781119484721)	Critical appraisal of papers; used on Day 1. Note: Confirmed through catalogue records, not the publisher's own page.
Supplementary 4	Booth WC, Colomb GG, Williams JM, Bizup J, FitzGerald WT (2024). *The craft of research*, 5th edition. Chicago: University of Chicago Press. Page checked: chicagoreference.com (University of Chicago Press listing)	From topic to question and argument; used on Day 1.
Supplementary 5	ALLEA (2023). *The European Code of Conduct for Research Integrity: revised edition 2023*. Berlin: ALLEA – All European Academies. Page checked: allea.org/allea-publishes-2023-revised-edition-of-the-european-code-of-conduct-for-research-integrity/	Principles of research integrity; used on Day 5.

Field 12 · Framework integration map

Element names are the controlled names of Chapter 3.5 (Table 9). The mapping is proposed; the course owner re-checks it at Stage 3 (Annex F).

Framework	Controlled element	Developed in
LEADERSHIP	Evidence	LO1, LO2, LO6
	Accountability	LO5
	Innovation	LO3, LO4
DIRECTOR	Ensure ethics	LO5
	Define	LO1

Framework	Controlled element	Developed in
	Risk-manage	LO5
MANAGER	Measure	LO3, LO4
	Navigate	LO2
LEADER	Reflect	LO5: peer review and reflection

#	Controlled competency (Catalogue)	Emphasis	Where developed and assessed
1	Ethical and accountable leadership	Primary	Research ethics, integrity and authorship (Days 1, 5; LO5)
2	Strategic thinking, direction-setting and public-value orientation	Supporting	Questions that serve institutional strategy (Day 1; LO1)
3	Governance, fiduciary oversight, risk management and institutional stewardship	Supporting	Ethics governance and risk (Day 5)
4	Evidence-informed decision-making, policy analysis and data literacy	Primary	Evidence, design, measurement and analysis (Days 1 to 6; LO1 to LO6)
5	People, team, stakeholder and partnership leadership	Supporting	Community engagement and peer review (Days 5, 7)
6	Execution, change management, service improvement and performance discipline	Not addressed	–
7	Communication, influence, reflection and adaptive learning	Supporting	Protocol defence and reflection (Day 7; Rubrics D and R)

Field 13 · Applied outputs

The output names are those of the Catalogue and are unchanged. The descriptions and standards are proposed.

Applied output	Description and standard	Assessed in
Research protocol	A protocol for an institutional question, including the ethics section (part of the principal assessed artefact).	Written protocol; panel defence
Instrument set	A pre-tested questionnaire or guide with a pre-test log.	Portfolio
Analysis plan	An analysis plan and data-management plan fixed before data collection (part of the principal assessed artefact).	Written protocol

F Compliance with the fourteen-field standard (Chapter 9.1)

Field	Content	Where	Status in this draft
1	Course identity	Part A	Complete (Catalogue data)
2	Participant profile	Part A	Proposed; tier from the Catalogue
3	Rationale	Part B	Proposed
4	Course aim	Part B	Complete (Catalogue text)
5	Learning outcomes	Part B	Proposed; each traced to an instrument
6	Module structure	Part C	Proposed
7	Session plans	Part C	Partly drafted (day level); open item
8	Methodology	Part C	Proposed
9	Assessment scheme	Part D	Proposed; weights total 100%; safeguards need Board approval
10	Materials and tools	Part E	Listed; none produced yet; open item
11	Readings and frameworks	Part E	Proposed; checked 9 October 2026
12	Framework integration map	Part E	Proposed
13	Applied outputs	Part E	Complete (Catalogue names)
14	Course owner and review date	Part A	Open item

G Open items, source note and approval record

Open items for the course owner and the Academic Board

1. Duration. The Catalogue gives 7 days and 6 RCP (30 contact hours), an average of 4.3 hours a day (retained, Decision D4). This draft uses six days of 4.5 hours and one of 3 hours; the Academic Board may prefer six days of five hours.
2. The research ethics review bodies that apply in the participants' jurisdictions, and their procedures, are not stated here; the course owner records them before delivery. National data-protection law is likewise unverified.
3. Boundary with RA-SWP-403 (Scientific Writing & Academic Publishing) and with RA-RSCH-622 (Long Course): RA-RES-401 designs the study, RA-SWP-403 starts from a manuscript, and RA-RSCH-622 covers both. The Board decides at scrutiny whether to sequence or consolidate.
4. Translation and back-translation between English, Somali and Arabic need qualified language support.
5. Participants need access to literature; open-access sources are used where subscriptions are not available.
6. Course owner (field 14). No owner is named. The owner is named, and the review date set, at approval (Chapter 9.7; Annex E).
7. Session plans (field 7) are drafted at the level of the day: the sequence, duration and method of each session and its required output. Session objectives, facilitator notes and per-session materials are to be completed by the course owner before Stage 3.
8. Materials (field 10) do not yet exist. Each item is to be produced, version-controlled and approved before the first delivery (Annex E).
9. Readings were checked against the issuing bodies on 9 October 2026. The course owner confirms editions, access and licences before each cohort and records the version of any web resource.
10. Rubrics and gates. Rubric A is described in Annex H.2 as specific to the Executive Programmes; this draft uses it for the applied assignments of an Executive Course. The principal written output and its defence are treated as the written capstone and defence of the gates (at least 60/100 each). The Academic Board confirms both uses (Decision D19).
11. Competence safeguards in Part D are proposals. They apply only if the Academic Board approves them (Table 25).
12. Pilot and moderation. The instruments are piloted and moderated in the first delivery cycle (Chapters 7.5 and 9.4). The Board confirms the panel size for defences (about ten minutes for each participant, with parallel panels above about ten participants).
13. Drafting method. This draft was prepared with AI assistance (Claude) from the sources of the book. A subject specialist has not reviewed it. Local facts (laws, institutions, data, tools) must be verified by the course owner before Stage 3.

Source and harmonisation note

Catalogue: 7 days, 6 RCP, retained unchanged (Decision D4). Contact hours are derived at five per RCP: 30 contact hours.

Approval record (Chapter 9.4)

Stage	Owner	Evidence retained	Decision reference and date	Status
2 Design	Course owner	Draft syllabus, version 0.x	v0.1 prepared 9 October 2026 (AI-assisted); v0.2 completed 5 November 2026	Complete; owner not yet named
3 Academic scrutiny	Academic Board	Board minute and conditions		Not started
4 Pilot	Course owner	Pilot report; moderation record		Not started
5 Approval	Academic Board	Approved syllabus, version 1.0		Not started

A course cannot be scheduled until its syllabus is complete, approved by the Academic Board and lodged in the curriculum register (Chapter 9).

RA-MEL-402 · Monitoring, Evaluation, Accountability & Learning

Complete syllabus, version 0.2 (Stage 2 Design complete). Awaiting Academic Board approval. References are to RIYAADA-UCS-2026-001, Version 1.0.

Status of this draft

Complete syllabus, version 0.2 (Stage 2 Design complete). It has not yet been through Academic Board scrutiny, piloting or approval, and it does not replace the course card in the book until it is approved (Chapter 9.4).

The Catalogue statements of identity, credit, tier, aim and applied outputs are retained unchanged. Everything else is proposed content written on 9 October 2026 with AI assistance. A subject specialist has not reviewed it.

Items that need a decision are listed in Part G.

A Course identity and participant profile (fields 1, 2 and 14)

Code	RA-MEL-402
Full title	Monitoring, Evaluation, Accountability & Learning
Family and level	Executive Course · RL2 Professional Certificate
School	S4 · School of Research, Evaluation & Knowledge
Credit and hours	5 RCP · 50 notional hours · 25 contact hours (derived) · 6 days
Award	RIYAADA Professional Certificate in Monitoring, Evaluation, Accountability & Learning
Participant profile (proposed)	Monitoring, evaluation and learning officers, programme and project managers, planning and quality leads and partner-organisation staff who design or oversee a results framework and its evaluation. Primarily Tier 02 and Tier 03 (Catalogue).
Management tier	Tier 02 and Tier 03
Prerequisite knowledge (proposed)	Admission evidence as in Chapter 8. A programme, project or institutional strategy to work on (real or proposed).
Delivery (proposed)	Six days: five days of 4 contact hours and a sixth day of 5 hours (25 contact hours), as a continuous block or in two modules of 3 + 3 days, in person at the Mogadishu campus or client premises; in-house cohort option (proposed).
Contact hours by day (derived)	Day 1: 4 h, Day 2: 4 h, Day 3: 4 h, Day 4: 4 h, Day 5: 4 h, Day 6: 5 h (25 hours in all).
Language of delivery	English; Somali or bilingual delivery; Arabic where required (Chapter 6).
Syllabus status	Complete syllabus, version 0.2, Stage 2 Design complete. In the book the course remains a course card until approval.
Source references	Catalogue RA-MEL-402; this draft (v0.1)
Award pathways	AC-ARE
Course owner and review date	To be named (open item, Annex E). First review: the Stage 6 annual review after the first delivery (Chapter 9.4).

B Rationale, aim and learning outcomes (fields 3 to 5)

Field 3 · Rationale

Many institutions report on indicators required by funders yet cannot say whether their programmes work, for whom, or why. Monitoring that only counts activities, evaluations that arrive too late to inform decisions and accountability mechanisms that never reach the people served all waste effort. Evaluation guidance such as the OECD DAC criteria (relevance, coherence, effectiveness, efficiency, impact and sustainability) and the norms and standards of the United Nations Evaluation Group set a common standard for what good evaluation looks like.

This course shows participants how to build a theory of change, derive a small set of well-defined indicators from it, plan evaluation questions and designs that fit the decisions to be made, and set up feedback and learning routines. The product is a monitoring, evaluation, accountability and learning (MEAL) plan that an institution can run with its own staff.

Field 4 · Course aim

Catalogue aim (unchanged). Build results frameworks, indicators and evaluation designs that produce usable learning, not only reporting compliance.

Field 5 · Learning outcomes

On successful completion, participants will be able to:

LO1 Construct a theory of change that links activities to outcomes through stated assumptions and context.

LO2 Develop an indicator reference sheet that defines each indicator, its source, frequency, disaggregation, baseline and target.

LO3 Appraise a set of indicators against standard quality criteria and revise the weak ones.

LO4 Formulate evaluation questions and select an evaluation design that fits the questions, the evidence available and ethical constraints.

LO5 Design accountability and feedback mechanisms and learning routines that connect findings to decisions.

LO6 Produce a MEAL plan that sets out roles, data sources, collection methods, schedule, quality assurance, reporting and budget.

Each outcome opens with one assessable verb from the controlled list (Table 33) and is traced to an instrument in Part D. Level profile of this draft: Creating 5, Evaluating 1. Catalogue dominant outcome level: Creating. Catalogue principal assessed artefact: Theory of change and MEAL plan.

C Content and method (fields 6 to 8)

Field 6 · Module structure

Day	Hours	Theme	Core content
Day 1	4	Results and theory of change	Purpose of MEAL and how its parts fit. The results chain: inputs, activities, outputs, outcomes and impact. Building a theory of change: problem, pathways, assumptions, context and risks. Theory of change and logical framework compared. Laboratory: draft a theory of change.
Day 2	4	Indicators and results frameworks	Types of indicator; criteria for good indicators; selecting from standard lists such as the WHO core health indicators; defining numerator, denominator, source, frequency, disaggregation, baseline and target. The indicator reference sheet. Avoiding too many indicators. Laboratory: write reference sheets.
Day 3	4	Data collection, quality and ethics in MEAL	Data sources: routine data, surveys, qualitative methods and community feedback. The data-collection plan and schedule; sampling for monitoring; baselines and targets; data quality assurance; consent and ethical handling of data; disaggregation by sex, age, disability and location. Using national systems where possible.
Day 4	4	Evaluation questions and designs	Purposes and types of evaluation; the OECD DAC criteria; evaluation questions that fit decisions; designs (theory-based, quasi-experimental, qualitative and mixed-method); the Rainbow Framework as a menu of choices; terms of reference; independence and the UNEG norms; commissioning and using an evaluation.
Day 5	4	Accountability and learning	Accountability to the people served: information, participation, feedback and complaints mechanisms and response protocols; protection from sexual exploitation and abuse. Learning routines: after-action and learning reviews, data-use meetings, learning agendas and adaptive management. Learning-review simulation (observed).
Day 6	5	Assembling the MEAL plan	Plan contents: purpose, theory of change, results framework, indicators, data collection, roles, quality assurance, evaluation plan, accountability and learning plan, reporting calendar and budget. Peer review; panel defence; action planning.

Field 7 · Session plans

Day-level plans: the sequence, duration and method of each session and the required output of the day. Session objectives, facilitator notes and per-session materials are an open item (Part G).

Day	Session sequence	Required output of the day
Day 1	• Input: results chain and theory of change (50 min) • Theory-of-change laboratory (110 min) • Assumptions and context workshop (50 min) • Coaching and day review (30 min)	Theory of change (first draft)
Day 2	• Input: indicators and results frameworks (50 min) • Indicator-writing laboratory (110 min) • Indicator-quality clinic (50 min) • Coaching and day review (30 min)	Results framework and indicator reference sheets (draft)
Day 3	• Input: data collection and quality (50 min) • Data-collection plan laboratory (100 min) • Data-quality and ethics workshop (60 min) • Coaching and day review (30 min)	Data-collection plan (draft)
Day 4	• Input: evaluation questions and designs (50 min) • Evaluation-question laboratory (100 min) • Design-choice workshop (60 min) • Coaching and day review (30 min)	Evaluation question matrix and design note
Day 5	• Input: accountability and learning (45 min) • Feedback-mechanism design laboratory (75 min) • Learning-review simulation (observed) (90 min) • Debrief and coaching (30 min)	Accountability and learning plan (draft); observed simulation record
Day 6	• Plan assembly clinic (90 min) • Peer review of plans (60 min) • Panel defence (individual) (105 min) • Action planning and close (45 min)	MEAL plan defended (written plan submitted before the panel)

Notional workload

Component	Hours
Contact sessions	25
Directed reading and case preparation	7
Between-session exercises	6
Preparation of assessed outputs	12
Total notional hours	**50**

Field 8 · Methodology

Each participant builds a MEAL plan for one real or proposed programme. Work proceeds in a fixed sequence: theory of change, indicators, data, evaluation, accountability and learning. Each day's product feeds the plan. Indicators are written and then challenged by peers acting as a data collector, a funder and a beneficiary.

A learning-review simulation tests whether participants can lead a session that turns findings into decisions rather than a reporting ritual. Programme data used in class are aggregate or illustrative (Chapter 6.6).

D Assessment (field 9)

Field 9 · Assessment scheme

Instrument weights follow Table 24: the principal applied output 50 to 60%, the analytical or simulation component 20 to 30%, and participation 10 to 25%.

Instrument and component	Weight	Rubric and gate	Outcomes
1 Theory of change and MEAL plan (principal assessed output)	**55%**		
• Written MEAL plan	45%	Rubric C (written capstone) · at least 60/100	LO1, LO4, LO5, LO6
• Panel defence	10%	Rubric D (defence) · at least 60/100	LO1, LO4, LO6
2 Analytical portfolio	**25%**		
• Indicator reference sheet	15%	Rubric A (applied assignment) · at least 50/100	LO2
• Indicator appraisal	10%	Rubric A (applied assignment) · at least 50/100	LO3
3 Learning-review simulation and participation	**20%**		
• Learning-review simulation	10%	Rubric S (observed simulation) · at least 60/100	LO5
• Participation and reflection	10%	Rubric R (participation and reflection) · at least 50% (normalised)	LO2, LO3, LO4, LO6
Total	**100%**		

Evidence at threshold competence (proposed)

Component	What a threshold submission or performance shows
Written MEAL plan	Theory of change with pathways, assumptions and context; a results framework linked to it; the data-collection plan and schedule; evaluation questions and a design suited to them; accountability, feedback and learning routines; roles, quality assurance, reporting calendar and budget; consistency among all parts.
Panel defence	Explains how the plan will produce usable learning, defends the choice of indicators and evaluation design, and answers questions on cost and feasibility.
Indicator reference sheet	For each indicator: definition, numerator and denominator, source, frequency, disaggregation, baseline, target, responsible person and the result in the theory of change that it measures.
Indicator appraisal	Tests a supplied set of indicators against stated criteria, identifies those that are unclear, unmeasurable or unused, and proposes replacements.
Learning-review simulation	Observed leading a learning review on a case dataset: frames questions, listens, draws conclusions from the data, agrees decisions and records follow-up.
Participation and reflection	Rubric R criteria: preparedness, constructive contribution, peer-feedback quality and reflection depth.

Competency threshold	Overall at least 60/100. At least 50/100 in each applied assignment (Rubric A) and in the normalised participation and reflection mark (Rubric R). At least 60/100 in the observed simulation (Rubric S), the written capstone, here the principal written output (Rubric C) and the defence (Rubric D). Attendance of at least 80% of scheduled contact time. Every course competence safeguard is met. All required outputs and identity checks are complete. Chapter 7.3, Table 25 (Decision D19).
Competence safeguards (proposed)	Indicator completeness and link. Every indicator in the plan has a complete reference sheet and traces to a result in the theory of change. A high average cannot compensate for a failed safeguard (Table 25). The safeguards take effect only if the Academic Board approves them.

Marking and moderation	Marking is criterion-referenced against the rubrics of Annex H.2, with common performance bands of 80–100 Strong, 70–79 Secure, 60–69 Threshold, 50–59 Developing and 0–49 Insufficient. A second marker reviews every fail, every safeguard failure and every result within two points of a classification boundary. Online defences use two assessors. Independent internal moderation covers a sample of the cohort; marking and moderation are kept separate (Chapters 7.3 and 7.5).
Feedback, late work, reassessment	Formative comments within seven calendar days of a submission and provisional summative feedback within ten working days. Unapproved work up to seven calendar days late loses five percentage points. One reassessment within 30 calendar days of feedback, capped at 60/100. Appeals within 15 working days (Chapter 7.4).
Learning-gain indicator	An unweighted pre-test and post-test. A gain of 20 percentage points is a cohort quality indicator and not an individual pass rule (Chapter 7.1).
Integrity and data	No patient data is required. Participants obtain permission before using workplace documents, upload no confidential data to external tools and acknowledge any use of AI (Chapter 6.6).

Alignment matrix (Chapter 9.3)

No outcome is omitted and every assessed component has a stated learning purpose. The weight is the share of the final mark that tests the outcome.

Learning outcome	Method that builds it	Instrument that tests it (weight)	Weight
LO1 · Construct	Day 1 theory-of-change laboratory; assumptions workshop	• Written MEAL plan (10) • Panel defence (2)	12%
LO2 · Develop	Day 2 indicator-writing laboratory; Day 3 data-collection plan laboratory	• Indicator reference sheet (15) • Participation and reflection (3)	18%
LO3 · Appraise	Day 2 indicator-quality clinic	• Indicator appraisal (10) • Participation and reflection (2)	12%
LO4 · Formulate	Day 4 evaluation-question laboratory; design-choice workshop	• Written MEAL plan (10) • Panel defence (3) • Participation and reflection (2)	15%
LO5 · Design	Day 5 feedback-mechanism laboratory; learning-review simulation	• Written MEAL plan (7) • Learning-review simulation (10)	17%
LO6 · Produce	Day 6 plan-assembly clinic and peer review	• Written MEAL plan (18) • Panel defence (5) • Participation and reflection (3)	26%
Total			**100%**

E Resources, framework integration and applied outputs (fields 10 to 13)

Field 10 · Materials and tools

Item	Proposed content	Status
Workbook	Theory-of-change guide, indicator guide, evaluation-design menu and MEAL plan outline.	To be produced
Slide deck	Short inputs for Days 1 to 6.	To be produced
Case pack	A case health programme with a strategy, a draft indicator list containing deliberate weaknesses, and a small dataset for the learning review (illustrative).	To be produced
Templates	Theory-of-change sheet; indicator reference sheet; data-collection plan; evaluation question matrix; feedback-mechanism sheet; MEAL plan outline.	To be produced
Instruments	Rubric sheets A, C, D, S and R; learning-review scenario and observation sheet; unweighted pre-course and post-course test.	To be produced
Datasets	Illustrative programme data for the learning review.	To be produced

Each item marked "To be produced" is to be produced, version-controlled and approved before the first delivery (Annex E).

Field 11 · Readings

Each item was checked against the issuing body's own page, or a bibliographic record of the journal, on 9 October 2026. The course owner confirms editions, access and licences before each cohort. Listing a source implies no endorsement or partnership, and no third-party text is reproduced (Chapter 3.5).

Type	Full attribution	Learning use and notes
Core 1	OECD DAC Network on Development Evaluation (2019). *Better criteria for better evaluation: revised evaluation criteria definitions and principles for use*. Paris: OECD. Page checked: oecd.org/en/publications/better-criteria-for-better-evaluation_15a9c26b-en	Evaluation criteria and principles for their use; used on Day 4.
Core 2	United Nations Evaluation Group (2016). *Norms and standards for evaluation*. New York: UNEG. Page checked: unevaluation.org/document/detail/1914	Norms and standards for evaluation, including independence and ethics; used on Day 4.
Core 3	Kusek JZ, Rist RC (2004). *Ten steps to a results-based monitoring and evaluation system: a handbook for development practitioners*. Washington, DC: World Bank. Page checked: documents1.worldbank.org (curated PDF)	A stepwise approach to building results-based monitoring and evaluation; used on Days 1 to 3.
Core 4	Rogers P (2014). *Theory of change*. Methodological Briefs: Impact Evaluation No. 2. Florence: UNICEF Office of Research. Page checked: ideas.repec.org/s/ucf/metbri.html	Concise guide to theory of change; used on Day 1.
Supplementary 1	World Health Organization (2011). *Monitoring, evaluation and review of national health strategies: a country-led platform for information and accountability*. Geneva: WHO (IHP+ framework). Page checked: uhc2030.org (M&E framework 2011); who.int/publications/i/item/9789241502276	Country-led platform for monitoring, evaluation and review of national health strategies; context for sector alignment.
Supplementary 2	BetterEvaluation (current). *The Rainbow Framework*. betterevaluation.org. Page checked: betterevaluation.org/tools-resources/using-betterevaluation-rainbow-framework	Menu of evaluation methods and options; used on Day 4.
Supplementary 3	World Health Organization (2018). *2018 global reference list of 100 core health indicators (plus health-related SDGs)*. WHO/HIS/IER/GPM/2018.1. Geneva: WHO. Page checked: who.int/publications/i/item/2018-global-reference-list-of-100-core-health-indicators-(-plus-health-related-sdgs)	Reference list of core health indicators; used on Day 2.
Supplementary 4	Inter-Agency Standing Committee (2019). *Six core principles relating to sexual exploitation and abuse*. Geneva: IASC. Page checked: interagencystandingcommittee.org/node/39533	Core principles on sexual exploitation and abuse; used on Day 5 for accountability mechanisms.

Field 12 · Framework integration map

Element names are the controlled names of Chapter 3.5 (Table 9). The mapping is proposed; the course owner re-checks it at Stage 3 (Annex F).

Framework	Controlled element	Developed in
LEADERSHIP	Evidence	LO2, LO3, LO4
	Accountability	LO5
	Direction	LO1
	Systems	LO1, LO6
MANAGER	Measure	LO2, LO3
	Review	LO5

Framework	Controlled element	Developed in
	Navigate	LO6
LEADER	Listen	LO5
	Reflect	LO5
	Align	LO1
DIRECTOR	Track	LO2, LO6
	Report	LO6
	Ensure ethics	LO4, LO5

#	Controlled competency (Catalogue)	Emphasis	Where developed and assessed
1	Ethical and accountable leadership	Supporting	Accountability to the people served and ethical data handling (Days 3, 5)
2	Strategic thinking, direction-setting and public-value orientation	Supporting	Theory of change and direction (Day 1)
3	Governance, fiduciary oversight, risk management and institutional stewardship	Supporting	Oversight data and reporting (Days 2, 6)
4	Evidence-informed decision-making, policy analysis and data literacy	Primary	Indicators, evaluation questions and designs (Days 2 to 4; LO2 to LO4)
5	People, team, stakeholder and partnership leadership	Supporting	Stakeholders in participatory design (Days 1, 5)
6	Execution, change management, service improvement and performance discipline	Supporting	Adaptive management (Day 5; LO5)
7	Communication, influence, reflection and adaptive learning	Primary	Learning routines, reflection and communication of findings (Day 5; LO5; Rubrics S and R)

Field 13 · Applied outputs

The output names are those of the Catalogue and are unchanged. The descriptions and standards are proposed.

Applied output	Description and standard	Assessed in
Theory of change	Pathways, assumptions and context for a programme (part of the principal assessed artefact).	Written MEAL plan
Indicator reference sheet	Complete reference entries for each indicator in the results framework.	Portfolio
MEAL plan	Plan for monitoring, evaluation, accountability and learning (with the theory of change, the principal assessed artefact).	Written MEAL plan; panel defence

F Compliance with the fourteen-field standard (Chapter 9.1)

Field	Content	Where	Status in this draft
1	Course identity	Part A	Complete (Catalogue data)
2	Participant profile	Part A	Proposed; tier from the Catalogue
3	Rationale	Part B	Proposed
4	Course aim	Part B	Complete (Catalogue text)
5	Learning outcomes	Part B	Proposed; each traced to an instrument
6	Module structure	Part C	Proposed
7	Session plans	Part C	Partly drafted (day level); open item
8	Methodology	Part C	Proposed
9	Assessment scheme	Part D	Proposed; weights total 100%; safeguards need Board approval
10	Materials and tools	Part E	Listed; none produced yet; open item
11	Readings and frameworks	Part E	Proposed; checked 9 October 2026
12	Framework integration map	Part E	Proposed
13	Applied outputs	Part E	Complete (Catalogue names)
14	Course owner and review date	Part A	Open item

G Open items, source note and approval record

Open items for the course owner and the Academic Board

1. Duration. The Catalogue gives 6 days and 5 RCP (25 contact hours), an average of 4.2 hours a day (retained, Decision D4). This draft uses five days of 4 hours and a final day of 5 hours.
2. The national health monitoring and evaluation plan and platform are not stated here; the course owner records the current national instruments before delivery.
3. Depth of the safeguarding content (sexual exploitation and abuse) is set with a safeguarding specialist.
4. Distinction from RA-RES-401 (study design) and from monitoring content in the Advanced Certificate AC-ARE to be confirmed at scrutiny.
5. Course owner (field 14). No owner is named. The owner is named, and the review date set, at approval (Chapter 9.7; Annex E).
6. Session plans (field 7) are drafted at the level of the day: the sequence, duration and method of each session and its required output. Session objectives, facilitator notes and per-session materials are to be completed by the course owner before Stage 3.
7. Materials (field 10) do not yet exist. Each item is to be produced, version-controlled and approved before the first delivery (Annex E).
8. Readings were checked against the issuing bodies on 9 October 2026. The course owner confirms editions, access and licences before each cohort and records the version of any web resource.
9. Rubrics and gates. Rubric A is described in Annex H.2 as specific to the Executive Programmes; this draft uses it for the applied assignments of an Executive Course. The principal written output and its defence are treated as the written capstone and defence of the gates (at least 60/100 each). The Academic Board confirms both uses (Decision D19).
10. Competence safeguards in Part D are proposals. They apply only if the Academic Board approves them (Table 25).
11. Pilot and moderation. The instruments are piloted and moderated in the first delivery cycle (Chapters 7.5 and 9.4). The Board confirms the panel size for defences (about ten minutes for each participant, with parallel panels above about ten participants).
12. Drafting method. This draft was prepared with AI assistance (Claude) from the sources of the book. A subject specialist has not reviewed it. Local facts (laws, institutions, data, tools) must be verified by the course owner before Stage 3.

Source and harmonisation note

Catalogue: 6 days, 5 RCP, retained unchanged (Decision D4). Contact hours are derived at five per RCP: 25 contact hours.

Approval record (Chapter 9.4)

Stage	Owner	Evidence retained	Decision reference and date	Status
2 Design	Course owner	Draft syllabus, version 0.x	v0.1 prepared 9 October 2026 (AI-assisted); v0.2 completed 5 November 2026	Complete; owner not yet named
3 Academic scrutiny	Academic Board	Board minute and conditions		Not started
4 Pilot	Course owner	Pilot report; moderation record		Not started
5 Approval	Academic Board	Approved syllabus, version 1.0		Not started

A course cannot be scheduled until its syllabus is complete, approved by the Academic Board and lodged in the curriculum register (Chapter 9).

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RA-DAT-404 · Data Literacy & Evidence for Decision-Makers

Complete syllabus, version 0.2 (Stage 2 Design complete). Awaiting Academic Board approval. References are to RIYAADA-UCS-2026-001, Version 1.0.

Status of this draft

Complete syllabus, version 0.2 (Stage 2 Design complete). It has not yet been through Academic Board scrutiny, piloting or approval, and it does not replace the course card in the book until it is approved (Chapter 9.4).

The Catalogue statements of identity, credit, tier, aim and applied outputs are retained unchanged. Everything else is proposed content written on 9 October 2026 with AI assistance. A subject specialist has not reviewed it.

Items that need a decision are listed in Part G.

A Course identity and participant profile (fields 1, 2 and 14)

Code	RA-DAT-404
Full title	Data Literacy & Evidence for Decision-Makers
Family and level	Executive Course · RL2 Professional Certificate
School	S4 · School of Research, Evaluation & Knowledge
Credit and hours	4 RCP · 40 notional hours · 20 contact hours (derived) · 5 days
Award	RIYAADA Professional Certificate in Data Literacy & Evidence for Decision-Makers
Participant profile (proposed)	Executives, directors and senior managers who receive, commission or present data to make decisions: ministry and authority leaders, hospital directors, board members, programme directors and partner leads. Primarily Tier 01 and Tier 02 (Catalogue). No statistical background is assumed.
Management tier	Tier 01 and Tier 02
Prerequisite knowledge (proposed)	Admission evidence as in Chapter 8. A decision that the participant must make with data (real or proposed), used as the working case.
Delivery (proposed)	Five days of four contact hours each (20 contact hours), as a continuous block or in two modules of 3 + 2 days, in person at the Mogadishu campus or client premises; in-house cohort option (proposed).
Contact hours by day (derived)	Day 1: 4 h, Day 2: 4 h, Day 3: 4 h, Day 4: 4 h, Day 5: 4 h (20 hours in all).
Language of delivery	English; Somali or bilingual delivery; Arabic where required (Chapter 6).
Syllabus status	Complete syllabus, version 0.2, Stage 2 Design complete. In the book the course remains a course card until approval.
Source references	Catalogue RA-DAT-404; this draft (v0.1)
Award pathways	AC-HFU
Course owner and review date	To be named (open item, Annex E). First review: the Stage 6 annual review after the first delivery (Chapter 9.4).

B Rationale, aim and learning outcomes (fields 3 to 5)

Field 3 · Rationale

Senior decision-makers meet data in every meeting: dashboards, indicator tables, charts in a donor report, the claim in a briefing that coverage has risen by a tenth. Few have been taught how to question them. Misleading presentation is rarely dishonest; a missing denominator, a truncated axis, a favourable time window or a correlation presented as cause is usually enough to push a decision the wrong way (Huff 1954; Spiegelhalter 2019). An executive who can ask the right questions protects the institution from costly mistakes.

The course does not train analysts. It teaches executives to interrogate an indicator, to read variation and uncertainty, to recognise misleading displays, to commission an analysis with a clear question, and to turn evidence into a one-page decision brief. The Fundamental Principles of Official Statistics, especially those on professional standards and the prevention of misuse, serve as the ethical frame.

Field 4 · Course aim

Catalogue aim (unchanged). Enable non-specialist executives to interrogate data, resist misleading presentation and commission good analysis.

Field 5 · Learning outcomes

On successful completion, participants will be able to:

LO1 Critique an indicator for its definition, denominator, source, comparability and usefulness to a decision.

LO2 Analyse a table or chart for pattern, variation and uncertainty and state what it can and cannot support.

LO3 Diagnose misleading presentation, including missing denominators, truncated axes, selective time windows and causal claims drawn from correlation.

LO4 Investigate the source, definition and quality of the data behind a reported figure.

LO5 Design a dashboard specification that states purpose, audience, indicators, data sources, refresh rate and display rules.

LO6 Produce a one-page decision brief that states the decision, evidence, uncertainty, options, recommendation and any analysis to be commissioned.

Each outcome opens with one assessable verb from the controlled list (Table 33) and is traced to an instrument in Part D. Level profile of this draft: Creating 2, Evaluating 1, Analysing 3. Catalogue dominant outcome level: Analysing. Catalogue principal assessed artefact: One-page decision brief.

C Content and method (fields 6 to 8)

Field 6 · Module structure

Day	Hours	Theme	Core content
Day 1	4	Asking the right question	Data in decisions: the problem–plan–data–analysis–conclusion cycle. Types of data and measures. Counts, rates, proportions and denominators. Indicators: definition, source, comparability. Critiquing an indicator. The questions an executive should ask of any number.
Day 2	4	Reading numbers: variation, trend and uncertainty	Averages and spread; trends and seasonality; small numbers and random variation; margins of error and what “significant” does and does not mean; comparisons and rankings; correlation, confounding and cause; base-rate and selection effects. Interpreting tables from routine reports.
Day 3	4	Seeing data: charts, misleading displays and dashboards	How charts mislead: truncated axes, dual axes, cumulative figures versus rates, selective windows, area and three-dimensional effects, cherry-picked comparisons. Principles of effective display. Dashboard purpose, audience and layout, and the discipline of few indicators. Dashboard-specification laboratory.
Day 4	4	Where data come from and commissioning analysis	Data sources in the executive’s institution: routine reports, surveys, administrative and financial data, partner data. Data-quality questions: completeness, timeliness, consistency, who collected the data and why. Working with analysts: writing the question, the commissioning brief, quality checks and challenging results. Official-statistics principles and the misuse of statistics. Observed exercise: an analyst presents a flawed analysis.
Day 5	4	From evidence to decision	The one-page decision brief: decision required, context, evidence, uncertainty, options, recommendation and next steps. Writing for a board. Presenting numbers orally. Panel briefing; action planning.

Field 7 · Session plans

Day-level plans: the sequence, duration and method of each session and the required output of the day. Session objectives, facilitator notes and per-session materials are an open item (Part G).

Day	Session sequence	Required output of the day
Day 1	• Input: questions, denominators and indicators (45 min) • Indicator-critique laboratory (90 min) • Executive-questions workshop (70 min) • Coaching and day review (35 min)	Indicator critique (draft)
Day 2	• Input: variation, uncertainty and cause (60 min) • Interpretation laboratory on routine tables (90 min) • Small-numbers and comparison clinic (55 min) • Coaching and day review (35 min)	Annotated interpretation of a routine report
Day 3	• Input: charts and misleading displays (50 min) • Misleading-display detection laboratory (70 min) • Dashboard-specification laboratory (85 min) • Coaching and day review (35 min)	Dashboard specification (draft)
Day 4	• Input: data sources, quality and commissioning (50 min) • Data-quality questions laboratory (60 min) • Analyst-questioning exercise (observed) (95 min) • Debrief and coaching (35 min)	Commissioning brief; observed exercise record
Day 5	• Input: the decision brief (40 min) • Brief-writing laboratory (75 min) • Panel briefing and questions (individual) (90 min) • Action planning and close (35 min)	One-page decision brief submitted and briefed

Notional workload

Component	Hours
Contact sessions	20
Directed reading and case preparation	6
Between-session exercises	4
Preparation of assessed outputs	10
Total notional hours	**40**

Field 8 · Methodology

Teaching uses real, openly available health and financial tables and charts, including examples of misleading presentation that participants must detect. Each participant works on a decision from their own institution, or from the case pack, and applies each day's skill to it: indicator critique, interpretation, display, sourcing and the brief.

The observed exercise puts the participant in the role of an executive questioning an analyst who presents a flawed analysis. No statistical software is needed; calculations are done with a calculator or a spreadsheet.

D Assessment (field 9)

Field 9 · Assessment scheme

Instrument weights follow Table 24: the principal applied output 50 to 60%, the analytical or simulation component 20 to 30%, and participation 10 to 25%.

Instrument and component	Weight	Rubric and gate	Outcomes
1 One-page decision brief (principal assessed output)	**50%**		
• Decision brief	40%	Rubric C (written capstone) · at least 60/100	LO2, LO3, LO4, LO6
• Panel briefing	10%	Rubric D (defence) · at least 60/100	LO2, LO4, LO6
2 Analytical portfolio	**30%**		
• Indicator critique	15%	Rubric A (applied assignment) · at least 50/100	LO1, LO3
• Dashboard specification	15%	Rubric A (applied assignment) · at least 50/100	LO5
3 Analyst-questioning exercise and participation	**20%**		
• Analyst-questioning exercise	10%	Rubric S (observed simulation) · at least 60/100	LO3, LO4
• Participation and reflection	10%	Rubric R (participation and reflection) · at least 50% (normalised)	LO1, LO2, LO5, LO6
Total	**100%**		

Evidence at threshold competence (proposed)

Component	What a threshold submission or performance shows
Decision brief	One page: the decision required; context; the evidence with sources and definitions; the uncertainty and what the data cannot say; options with trade-offs; a recommendation; any analysis to be commissioned; next steps and owner. Figures are accurate and a lay reader can follow.
Panel briefing	Delivers the recommendation in three minutes, answers questions on the numbers and states what would change the recommendation.
Indicator critique	Tests at least three indicators for definition, denominator, source, comparability and use in a decision; identifies weaknesses and proposes improvements.
Dashboard specification	States purpose, audience and the decisions supported; a limited set of indicators with definitions and sources; refresh frequency; display rules that avoid misleading forms; data-quality caveats; named owner.
Analyst-questioning exercise	Observed questioning an analyst: asks about definitions, denominators, sources and uncertainty, challenges an unsupported conclusion and asks for the further analysis needed.
Participation and reflection	Rubric R criteria: preparedness, constructive contribution, peer-feedback quality and reflection depth.

Competency threshold	Overall at least 60/100. At least 50/100 in each applied assignment (Rubric A) and in the normalised participation and reflection mark (Rubric R). At least 60/100 in the observed simulation (Rubric S), the written capstone, here the principal written output (Rubric C) and the defence (Rubric D). Attendance of at least 80% of scheduled contact time. Every course competence safeguard is met. All required outputs and identity checks are complete. Chapter 7.3, Table 25 (Decision D19).
Competence safeguards (proposed)	Uncertainty and limits. The decision brief states the uncertainty and what the data cannot support. A brief that presents a single figure as certain does not meet the safeguard. A high average cannot compensate for a failed safeguard (Table 25). The safeguards take effect only if the Academic Board approves them.

Marking and moderation	Marking is criterion-referenced against the rubrics of Annex H.2, with common performance bands of 80–100 Strong, 70–79 Secure, 60–69 Threshold, 50–59 Developing and 0–49 Insufficient. A second marker reviews every fail, every safeguard failure and every result within two points of a classification boundary. Online defences use two assessors. Independent internal moderation covers a sample of the cohort; marking and moderation are kept separate (Chapters 7.3 and 7.5).
Feedback, late work, reassessment	Formative comments within seven calendar days of a submission and provisional summative feedback within ten working days. Unapproved work up to seven calendar days late loses five percentage points. One reassessment within 30 calendar days of feedback, capped at 60/100. Appeals within 15 working days (Chapter 7.4).
Learning-gain indicator	An unweighted pre-test and post-test. A gain of 20 percentage points is a cohort quality indicator and not an individual pass rule (Chapter 7.1).
Integrity and data	No patient data is required. Participants obtain permission before using workplace documents, upload no confidential data to external tools and acknowledge any use of AI (Chapter 6.6).

Alignment matrix (Chapter 9.3)

No outcome is omitted and every assessed component has a stated learning purpose. The weight is the share of the final mark that tests the outcome.

Learning outcome	Method that builds it	Instrument that tests it (weight)	Weight
LO1 · Critique	Day 1 indicator-critique laboratory; executive-questions workshop	• Indicator critique (12) • Participation and reflection (2)	14%
LO2 · Analyse	Day 2 interpretation laboratory on routine tables; small-numbers clinic	• Decision brief (10) • Panel briefing (3) • Participation and reflection (3)	16%
LO3 · Diagnose	Day 3 misleading-display detection laboratory	• Decision brief (6) • Indicator critique (3) • Analyst-questioning exercise (5)	14%
LO4 · Investigate	Day 4 data-quality questions laboratory; analyst-questioning exercise	• Decision brief (6) • Panel briefing (3) • Analyst-questioning exercise (5)	14%
LO5 · Design	Day 3 dashboard-specification laboratory	• Dashboard specification (15) • Participation and reflection (3)	18%
LO6 · Produce	Day 5 brief-writing laboratory; panel briefing	• Decision brief (18) • Panel briefing (4) • Participation and reflection (2)	24%
Total			**100%**

E Resources, framework integration and applied outputs (fields 10 to 13)

Field 10 · Materials and tools

Item	Proposed content	Status
Workbook	Executive-questions card, indicator-critique guide and brief template.	To be produced
Slide deck	Short inputs for Days 1 to 5.	To be produced
Case pack	A set of routine reports and charts, some with deliberate flaws labelled in the facilitator's copy, and a decision case.	To be produced
Templates	Indicator-critique sheet; commissioning brief; dashboard specification; one-page decision brief.	To be produced

Item	Proposed content	Status
Instruments	Rubric sheets A, C, D, S and R; analyst-questioning scenario and observation sheet; unweighted pre-course and post-course test.	To be produced
Datasets	Illustrative routine data tables; no personal data.	To be produced

Each item marked "To be produced" is to be produced, version-controlled and approved before the first delivery (Annex E).

Field 11 · Readings

Each item was checked against the issuing body's own page, or a bibliographic record of the journal, on 9 October 2026. The course owner confirms editions, access and licences before each cohort. Listing a source implies no endorsement or partnership, and no third-party text is reproduced (Chapter 3.5).

Type	Full attribution	Learning use and notes
Core 1	Spiegelhalter D (2019). *The art of statistics: learning from data*. London: Pelican. Page checked: penguin.co.uk (Pelican Books listing)	A practical cycle for working with data and the main ideas of uncertainty; used on Days 1 and 2.
Core 2	Huff D (1954). *How to lie with statistics*. New York: W. W. Norton. Page checked: library catalogue records	The classic account of how statistics mislead; used on Day 3. Note: Confirmed through catalogue records, not the publisher's own page.
Core 3	Few S (2013). *Information dashboard design: displaying data for at-a-glance monitoring*, 2nd edition. Burlingame, CA: Analytics Press. Page checked: analyticspress.com/idd.php	Principles of dashboard design; used on Day 3.
Supplementary 1	World Health Organization (2018). *2018 global reference list of 100 core health indicators (plus health-related SDGs)*. WHO/HIS/IER/GPM/2018.1. Geneva: WHO. Page checked: who.int/publications/i/item/2018-global-reference-list-of-100-core-health-indicators-(-plus-health-related-sdgs)	Reference list of core health indicators; used on Day 1 for indicator definitions.
Supplementary 2	United Nations General Assembly (2014). *Fundamental Principles of Official Statistics*. Resolution 68/261. Page checked: unstats.un.org/unsd/dnss/gp/fundprinciples.aspx	Ethical frame for official statistics and the prevention of misuse; used on Day 4.
Supplementary 3	World Health Organization. *Data quality assurance (DQA) toolkit: module 1 framework and metrics; module 2 desk review of data quality; module 3 data verification and system assessment*. Geneva: WHO (web resource). Page checked: who.int/data/data-collection-tools/health-service-data/data-quality-assurance-dqa	Dimensions and checks of data quality; used on Day 4. Note: Cited without a year because the page does not date the modules; the course owner records the version used.

Field 12 · Framework integration map

Element names are the controlled names of Chapter 3.5 (Table 9). The mapping is proposed; the course owner re-checks it at Stage 3 (Annex F).

Framework	Controlled element	Developed in
LEADER	Listen	LO4: questioning an analyst
	Decide	LO6
	Reflect	LO1
MANAGER	Measure	LO1, LO2
	Review	LO5
DIRECTOR	Track	LO5
	Report	LO6
	Ensure ethics	LO3: misuse of statistics
LEADERSHIP	Evidence	LO1 to LO6

#	Controlled competency (Catalogue)	Emphasis	Where developed and assessed
1	Ethical and accountable leadership	Supporting	Honest use of data and refusing to mislead (Days 3, 4)
2	Strategic thinking, direction-setting and public-value orientation	Not addressed	–
3	Governance, fiduciary oversight, risk management and institutional stewardship	Supporting	Oversight through well-chosen indicators (Day 3)
4	Evidence-informed decision-making, policy analysis and data literacy	Primary	Data literacy and evidence-informed decisions (Days 1 to 5; LO1 to LO6)
5	People, team, stakeholder and partnership leadership	Supporting	Working with analysts (Day 4)
6	Execution, change management, service improvement and performance discipline	Not addressed	–
7	Communication, influence, reflection and adaptive learning	Primary	Communicating evidence to a board (Day 5; LO6; Rubrics D and R)

Field 13 · Applied outputs

The output names are those of the Catalogue and are unchanged. The descriptions and standards are proposed.

Applied output	Description and standard	Assessed in
Indicator critique	Assessment of the definition, denominator, source and use of selected indicators.	Portfolio
One-page decision brief	The decision, evidence, uncertainty, options and recommendation on one page (the principal assessed artefact).	Decision brief; panel briefing
Dashboard specification	A specification for a decision dashboard; no software build is required.	Portfolio

F Compliance with the fourteen-field standard (Chapter 9.1)

Field	Content	Where	Status in this draft
1	Course identity	Part A	Complete (Catalogue data)
2	Participant profile	Part A	Proposed; tier from the Catalogue
3	Rationale	Part B	Proposed
4	Course aim	Part B	Complete (Catalogue text)
5	Learning outcomes	Part B	Proposed; each traced to an instrument
6	Module structure	Part C	Proposed
7	Session plans	Part C	Partly drafted (day level); open item
8	Methodology	Part C	Proposed
9	Assessment scheme	Part D	Proposed; weights total 100%; safeguards need Board approval
10	Materials and tools	Part E	Listed; none produced yet; open item
11	Readings and frameworks	Part E	Proposed; checked 9 October 2026
12	Framework integration map	Part E	Proposed
13	Applied outputs	Part E	Complete (Catalogue names)
14	Course owner and review date	Part A	Open item

G Open items, source note and approval record

Open items for the course owner and the Academic Board

1. Real, openly available reports and charts for the case pack have to be selected, with sources and licences recorded. Flawed examples are labelled as such and used only as permitted.
2. The course is designed for four hours a day to suit senior executives; the Academic Board confirms the schedule.
3. Distinction from RA-DHG-206 (data quality and governance) and from RA-EXD-703 (Data for Decision-Making, DHIS2 and Analytics, Short Course) to be confirmed at scrutiny.
4. Course owner (field 14). No owner is named. The owner is named, and the review date set, at approval (Chapter 9.7; Annex E).
5. Session plans (field 7) are drafted at the level of the day: the sequence, duration and method of each session and its required output. Session objectives, facilitator notes and per-session materials are to be completed by the course owner before Stage 3.
6. Materials (field 10) do not yet exist. Each item is to be produced, version-controlled and approved before the first delivery (Annex E).
7. Readings were checked against the issuing bodies on 9 October 2026. The course owner confirms editions, access and licences before each cohort and records the version of any web resource.
8. Rubrics and gates. Rubric A is described in Annex H.2 as specific to the Executive Programmes; this draft uses it for the applied assignments of an Executive Course. The principal written output and its defence are treated as the written capstone and defence of the gates (at least 60/100 each). The Academic Board confirms both uses (Decision D19).
9. Competence safeguards in Part D are proposals. They apply only if the Academic Board approves them (Table 25).
10. Pilot and moderation. The instruments are piloted and moderated in the first delivery cycle (Chapters 7.5 and 9.4). The Board confirms the panel size for defences (about ten minutes for each participant, with parallel panels above about ten participants).
11. Drafting method. This draft was prepared with AI assistance (Claude) from the sources of the book. A subject specialist has not reviewed it. Local facts (laws, institutions, data, tools) must be verified by the course owner before Stage 3.

Source and harmonisation note

Catalogue: 5 days, 4 RCP, retained unchanged (Decision D4). Contact hours are derived at five per RCP: 20 contact hours over five days of four hours.

Approval record (Chapter 9.4)

Stage	Owner	Evidence retained	Decision reference and date	Status
2 Design	Course owner	Draft syllabus, version 0.x	v0.1 prepared 9 October 2026 (AI-assisted); v0.2 completed 5 November 2026	Complete; owner not yet named
3 Academic scrutiny	Academic Board	Board minute and conditions		Not started
4 Pilot	Course owner	Pilot report; moderation record		Not started
5 Approval	Academic Board	Approved syllabus, version 1.0		Not started

A course cannot be scheduled until its syllabus is complete, approved by the Academic Board and lodged in the curriculum register (Chapter 9).

RA-GWR-405 · Grant Writing & Resource Mobilisation

Complete syllabus, version 0.2 (Stage 2 Design complete). Awaiting Academic Board approval. References are to RIYAADA-UCS-2026-001, Version 1.0.

Status of this draft

Complete syllabus, version 0.2 (Stage 2 Design complete). It has not yet been through Academic Board scrutiny, piloting or approval, and it does not replace the course card in the book until it is approved (Chapter 9.4).

The Catalogue statements of identity, credit, tier, aim and applied outputs are retained unchanged. Everything else is proposed content written on 9 October 2026 with AI assistance. A subject specialist has not reviewed it.

Items that need a decision are listed in Part G.

A Course identity and participant profile (fields 1, 2 and 14)

Code	RA-GWR-405
Full title	Grant Writing & Resource Mobilisation
Family and level	Executive Course · RL2 Professional Certificate
School	S4 · School of Research, Evaluation & Knowledge
Credit and hours	4 RCP · 40 notional hours · 20 contact hours (derived) · 5 days
Award	RIYAADA Professional Certificate in Grant Writing & Resource Mobilisation
Participant profile (proposed)	Directors, programme and finance managers, business-development and partnership leads, and senior officers of public, academic and non-governmental institutions who prepare or approve funding proposals. Primarily Tier 01 and Tier 02 (Catalogue).
Management tier	Tier 01 and Tier 02
Prerequisite knowledge (proposed)	Admission evidence as in Chapter 8. An institutional priority, and a real or recent funding call (or the call supplied in the case pack) to prepare a proposal against.
Delivery (proposed)	Five days of four contact hours each (20 contact hours), as a continuous block or in two modules of 3 + 2 days, in person at the Mogadishu campus or client premises; in-house cohort option (proposed).
Contact hours by day (derived)	Day 1: 4 h, Day 2: 4 h, Day 3: 4 h, Day 4: 4 h, Day 5: 4 h (20 hours in all).
Language of delivery	English; Somali or bilingual delivery; Arabic where required (Chapter 6).
Syllabus status	Complete syllabus, version 0.2, Stage 2 Design complete. In the book the course remains a course card until approval.
Source references	Catalogue RA-GWR-405; this draft (v0.1)
Award pathways	Stand-alone course (no Advanced Certificate or Diploma role defined in the Catalogue).
Course owner and review date	To be named (open item, Annex E). First review: the Stage 6 annual review after the first delivery (Chapter 9.4).

B Rationale, aim and learning outcomes (fields 3 to 5)

Field 3 · Rationale

Many capable institutions lose funding not because their ideas are weak but because their proposals do not answer the funder’s question, break its rules, or cannot show that the institution can manage the money. Funders increasingly require evidence of due diligence, safeguarding, financial control and results, and they judge competing proposals against published criteria. In fragile settings, humanitarian and pooled funds, bilateral donors and foundations each have their own templates, thresholds and timelines.

The course converts an institutional priority into a proposal package that is fundable, compliant and competitive: a concept note, a logical framework and a consistent budget, and a donor-ready package. It also treats funding as a partnership. The Busan principles of effective development co-operation (ownership, a focus on results, inclusive partnerships, and transparency and accountability) frame the relationship with funders, and safeguarding against sexual exploitation and abuse is a requirement and not an annex. The Somalia Humanitarian Fund is used only as an example of a funder's call document.

Field 4 · Course aim

Catalogue aim (unchanged). Convert institutional priorities into fundable, compliant and competitive proposals.

Field 5 · Learning outcomes

On successful completion, participants will be able to:

LO1 Appraise the fit between an institutional priority and a funder's call, eligibility rules, thresholds and assessment criteria, and decide whether to apply.

LO2 Audit an institution's readiness for funding against a due-diligence checklist covering legal status, governance, financial control, policies and track record.

LO3 Draft a concept note that states the problem, the intervention logic, the results and the institution's added value within the funder's format.

LO4 Construct a logical framework with objectives, indicators, means of verification and assumptions that follow from the intervention logic.

LO5 Develop a budget and budget narrative that are consistent with the activities, comply with the funder's cost rules and show value for money.

LO6 Produce a donor-ready proposal package that passes a compliance check against the call.

Each outcome opens with one assessable verb from the controlled list (Table 33) and is traced to an instrument in Part D. Level profile of this draft: Creating 4, Evaluating 1, Analysing 1. Catalogue dominant outcome level: Creating. Catalogue principal assessed artefact: Donor-ready proposal package.

C Content and method (fields 6 to 8)

Field 6 · Module structure

Day	Hours	Theme	Core content
Day 1	4	Funders, calls and institutional readiness	The funding landscape: bilateral, multilateral, pooled and humanitarian funds, foundations, government and private sector. Reading a call: purpose, eligibility, thresholds, timelines and scoring criteria. The go/no-go decision. Institutional due diligence: registration, governance, financial systems, audit, policies (safeguarding, anti-fraud, procurement, conflict of interest) and past performance. Readiness audit.
Day 2	4	Problem, intervention logic and concept note	Problem and needs statement with evidence; theory of change and objective hierarchy; beneficiaries and inclusion; the institution's added value and partners; concept-note formats and length; writing clearly for reviewers. Concept-note laboratory.
Day 3	4	Logical framework and results	The logical framework: goal, outcome, outputs, activities, indicators, means of verification, assumptions and risks. Linking to the funder's results framework. A brief monitoring and evaluation plan. Laboratory: build a logframe from the concept note.
Day 4	4	Budget, cost rules and compliance	Budget structure: direct and indirect costs, staff, equipment, subcontracts and overheads; unit costs and assumptions; cost-sharing; currency and inflation. Budget narrative and consistency with the logframe and work plan. Cost eligibility and value for money. Compliance requirements: safeguarding, anti-fraud, sanctions and counter-terrorism clauses. Budget laboratory; compliance checklist.
Day 5	4	Package, review and relationship	Assembling the package: forms, annexes, letters of support and organisational documents. Submission logistics. Mock review panel: scoring peers' concept notes against the call criteria. After submission: clarification, negotiation, award and reporting; managing the funder relationship; learning from rejection. Action planning.

Field 7 · Session plans

Day-level plans: the sequence, duration and method of each session and the required output of the day. Session objectives, facilitator notes and per-session materials are an open item (Part G).

Day	Session sequence	Required output of the day
Day 1	• Input: funders and calls (50 min) • Call-reading and go/no-go laboratory (80 min) • Due-diligence readiness-audit workshop (75 min) • Coaching and day review (35 min)	Funder-fit matrix and readiness audit (draft)
Day 2	• Input: problem, logic and concept note (50 min) • Intervention-logic laboratory (70 min) • Concept-note writing laboratory (85 min) • Coaching and day review (35 min)	Concept note (draft)
Day 3	• Input: the logical framework (50 min) • Logframe laboratory (110 min) • Indicator and assumptions clinic (45 min) • Coaching and day review (35 min)	Logframe (draft)
Day 4	• Input: budgets, cost rules and compliance (50 min) • Budget laboratory (100 min) • Compliance-check workshop (55 min) • Coaching and day review (35 min)	Budget and narrative (draft); compliance checklist
Day 5	• Input: package, submission and relationship (35 min) • Package assembly clinic (35 min) • Mock review panel (observed) (90 min) • Donor-panel pitch and questions (individual) (45 min) • Action planning and close (35 min)	Package submitted; mock-panel and pitch records

Notional workload

Component	Hours
Contact sessions	20
Directed reading and call preparation	6
Between-session exercises	4
Preparation of assessed outputs	10
Total notional hours	**40**

Field 8 · Methodology

Participants prepare a proposal against a real call or a call supplied in the case pack, based on a published funder format. The package is built in layers across the five days: every day's product is a section that the funder would require. A mock review panel makes participants score one another's concept notes against the call criteria, which is the quickest way to learn how reviewers read.

Only publicly available call documents are used, and participants do not share confidential institutional documents beyond their own.

D Assessment (field 9)

Field 9 · Assessment scheme

Instrument weights follow Table 24: the principal applied output 50 to 60%, the analytical or simulation component 20 to 30%, and participation 10 to 25%.

Instrument and component	Weight	Rubric and gate	Outcomes
1 Donor-ready proposal package (principal assessed output)	**55%**		
• Proposal package	45%	Rubric C (written capstone) · at least 60/100	LO3, LO4, LO5, LO6
• Donor-panel pitch	10%	Rubric D (defence) · at least 60/100	LO1, LO3, LO6
2 Analytical portfolio	**25%**		
• Funder-fit and readiness audit	8%	Rubric A (applied assignment) · at least 50/100	LO1, LO2
• Concept note	8%	Rubric A (applied assignment) · at least 50/100	LO3
• Logframe and budget	9%	Rubric A (applied assignment) · at least 50/100	LO4, LO5
3 Mock review panel and participation	**20%**		
• Mock review panel	10%	Rubric S (observed simulation) · at least 60/100	LO1, LO6
• Participation and reflection	10%	Rubric R (participation and reflection) · at least 50% (normalised)	LO2, LO4, LO5, LO6
Total	**100%**		

Evidence at threshold competence (proposed)

Component	What a threshold submission or performance shows
Proposal package	The complete set required by the call: concept note or narrative, logframe, work plan, budget and budget narrative, organisational capacity and management, risk, safeguarding and anti-fraud statements, and required annexes. Narrative, logframe and budget are consistent with one another, and the package responds to each assessment criterion.
Donor-panel pitch	Presents the proposal in three minutes against the call's criteria and answers questions on feasibility, cost and risk.
Funder-fit and readiness audit	Matches the priority to the call with evidence; applies eligibility and threshold rules; completes a due-diligence checklist for the institution and records gaps with corrective actions; gives a go/no-go recommendation.
Concept note	States the problem with evidence, the intervention logic, expected results, beneficiaries, partners and the institution's added value, in the required length and format.
Logframe and budget	Logframe hierarchy follows from the logic; indicators have means of verification; budget lines trace to activities with stated assumptions; totals reconcile to the narrative; the cost rules of the call are applied.
Mock review panel	Observed as a reviewer: scores peers' concept notes against published criteria, justifies each score with evidence, calibrates with other reviewers and records a decision.
Participation and reflection	Rubric R criteria: preparedness, constructive contribution, peer-feedback quality and reflection depth.

Competency threshold	Overall at least 60/100. At least 50/100 in each applied assignment (Rubric A) and in the normalised participation and reflection mark (Rubric R). At least 60/100 in the observed simulation (Rubric S), the written capstone, here the principal written output (Rubric C) and the defence (Rubric D). Attendance of at least 80% of scheduled contact time. Every course competence safeguard is met. All required outputs and identity checks are complete. Chapter 7.3, Table 25 (Decision D19).

Competence safeguards (proposed)	Compliance and consistency. The package passes the compliance checklist of the call (eligibility, format and required annexes), includes safeguarding and anti-fraud statements, and the budget reconciles to the narrative and the logframe. A high average cannot compensate for a failed safeguard (Table 25). The safeguards take effect only if the Academic Board approves them.
Marking and moderation	Marking is criterion-referenced against the rubrics of Annex H.2, with common performance bands of 80–100 Strong, 70–79 Secure, 60–69 Threshold, 50–59 Developing and 0–49 Insufficient. A second marker reviews every fail, every safeguard failure and every result within two points of a classification boundary. Online defences use two assessors. Independent internal moderation covers a sample of the cohort; marking and moderation are kept separate (Chapters 7.3 and 7.5).
Feedback, late work, reassessment	Formative comments within seven calendar days of a submission and provisional summative feedback within ten working days. Unapproved work up to seven calendar days late loses five percentage points. One reassessment within 30 calendar days of feedback, capped at 60/100. Appeals within 15 working days (Chapter 7.4).
Learning-gain indicator	An unweighted pre-test and post-test. A gain of 20 percentage points is a cohort quality indicator and not an individual pass rule (Chapter 7.1).
Integrity and data	No patient data is required. Participants obtain permission before using workplace documents, upload no confidential data to external tools and acknowledge any use of AI (Chapter 6.6).

Alignment matrix (Chapter 9.3)

No outcome is omitted and every assessed component has a stated learning purpose. The weight is the share of the final mark that tests the outcome.

Learning outcome	Method that builds it	Instrument that tests it (weight)	Weight
LO1 · Appraise	Day 1 call-reading and go/no-go laboratory; Day 5 mock review panel	• Donor-panel pitch (3) • Funder-fit and readiness audit (4) • Mock review panel (5)	12%
LO2 · Audit	Day 1 due-diligence readiness-audit workshop	• Funder-fit and readiness audit (4) • Participation and reflection (3)	7%
LO3 · Draft	Day 2 intervention-logic and concept-note laboratories	• Proposal package (10) • Donor-panel pitch (3) • Concept note (8)	21%
LO4 · Construct	Day 3 logframe laboratory; indicator and assumptions clinic	• Proposal package (8) • Logframe and budget (4) • Participation and reflection (2)	14%
LO5 · Develop	Day 4 budget laboratory; compliance-check workshop	• Proposal package (12) • Logframe and budget (5) • Participation and reflection (3)	20%
LO6 · Produce	Day 5 package-assembly clinic; donor-panel pitch	• Proposal package (15) • Donor-panel pitch (4) • Mock review panel (5) • Participation and reflection (2)	26%
Total			**100%**

E Resources, framework integration and applied outputs (fields 10 to 13)

Field 10 · Materials and tools

Item	Proposed content	Status
Workbook	Call-reading guide, due-diligence checklist, logframe guide and budget guide.	To be produced

Item	Proposed content	Status
Slide deck	Short inputs for Days 1 to 5.	To be produced
Case pack	A call document based on a published funder format, a model concept note, a worked logframe and budget, and a compliance checklist.	To be produced
Templates	Funder-fit matrix; due-diligence checklist; concept-note template; logframe; budget template with narrative; compliance checklist; reviewer scoring sheet.	To be produced
Instruments	Rubric sheets A, C, D, S and R; mock-panel scenario and observation sheet; unweighted pre-course and post-course test.	To be produced
Datasets	Illustrative unit-cost tables for the budget laboratory.	To be produced

Each item marked "To be produced" is to be produced, version-controlled and approved before the first delivery (Annex E).

Field 11 · Readings

Each item was checked against the issuing body's own page, or a bibliographic record of the journal, on 9 October 2026. The course owner confirms editions, access and licences before each cohort. Listing a source implies no endorsement or partnership, and no third-party text is reproduced (Chapter 3.5).

Type	Full attribution	Learning use and notes
Core 1	European Commission, EuropeAid Co-operation Office (2004). *Aid delivery methods, volume 1: project cycle management guidelines*. Brussels: European Commission. Page checked: capacity4dev.europa.eu/library/aid-delivery-methods-project-cycle-management-guidelines-europeaid-2004_en	The logical-framework method and project cycle; used on Days 2 and 3. Note: Older than the other readings; used for the logical-framework method, which the course owner may replace with a funder's current guidance.
Core 2	Busan Partnership for Effective Development Co-operation (2011). *Outcome document of the Fourth High Level Forum on Aid Effectiveness*, Busan, 29 November – 1 December 2011. Page checked: capacity4dev.europa.eu/library/outcome-document-busan-partnership-effective-development-co-operation_en	Principles of effective development co-operation; used on Day 1 for the funder relationship.
Supplementary 1	Inter-Agency Standing Committee (2019). *Six core principles relating to sexual exploitation and abuse*. Geneva: IASC. Page checked: interagencystandingcommittee.org/node/39533	Core principles on sexual exploitation and abuse; used on Day 4 for safeguarding statements.
Supplementary 2	United Nations Office for the Coordination of Humanitarian Affairs. *Somalia Humanitarian Fund: operational manual and current allocation strategy*. OCHA Somalia. Page checked: reliefweb.int (Somalia Humanitarian Fund allocation dashboards); mptf.undp.org (operational manual)	Example of a pooled humanitarian fund's call documents; used on Day 1 as a worked call. The current manual is obtained from the fund's manager. Note: The current manual and allocation strategy must be obtained from OCHA before each delivery.
Supplementary 3	OECD DAC Network on Development Evaluation (2019). *Better criteria for better evaluation: revised evaluation criteria definitions and principles for use*. Paris: OECD. Page checked: oecd.org/en/publications/better-criteria-for-better-evaluation_15a9c26b-en	Criteria that funders commonly use to judge relevance, effectiveness, efficiency and sustainability; used on Days 2 and 5.

Field 12 · Framework integration map

Element names are the controlled names of Chapter 3.5 (Table 9). The mapping is proposed; the course owner re-checks it at Stage 3 (Annex F).

Framework	Controlled element	Developed in
LEADER	Align	LO1, LO3
	Engage	LO6: panel pitch
	Decide	LO1: go/no-go
MANAGER	Allocate	LO5

Framework	Controlled element	Developed in
	Navigate	LO6
DIRECTOR	Define	LO3
	Ensure ethics	LO2, LO6: safeguarding
	Control	LO2, LO5
	Report	LO6
LEADERSHIP	Partnership	LO1, LO6
	Direction	LO3
	Accountability	LO2

#	Controlled competency (Catalogue)	Emphasis	Where developed and assessed
1	Ethical and accountable leadership	Supporting	Safeguarding and integrity statements (Days 1, 4)
2	Strategic thinking, direction-setting and public-value orientation	Primary	Aligning institutional priorities with funding (Days 1, 2; LO1, LO3)
3	Governance, fiduciary oversight, risk management and institutional stewardship	Supporting	Due diligence, financial control and compliance (Days 1, 4; LO2, LO5)
4	Evidence-informed decision-making, policy analysis and data literacy	Supporting	Evidence for the problem statement and results (Days 2, 3)
5	People, team, stakeholder and partnership leadership	Primary	Partnership with funders and consortium partners (Days 1, 5)
6	Execution, change management, service improvement and performance discipline	Supporting	Submission planning and work plan (Days 3, 5)
7	Communication, influence, reflection and adaptive learning	Primary	Persuasive writing and the panel pitch (Days 2, 5; Rubrics D and S)

Field 13 · Applied outputs

The output names are those of the Catalogue and are unchanged. The descriptions and standards are proposed.

Applied output	Description and standard	Assessed in
Concept note	A concept note within the funder's format.	Portfolio
Logframe and budget	A logical framework and a consistent budget with narrative.	Portfolio; proposal package
Donor-ready proposal package	The complete compliant package for a named call (the principal assessed artefact).	Proposal package; donor-panel pitch

F Compliance with the fourteen-field standard (Chapter 9.1)

Field	Content	Where	Status in this draft
1	Course identity	Part A	Complete (Catalogue data)
2	Participant profile	Part A	Proposed; tier from the Catalogue
3	Rationale	Part B	Proposed
4	Course aim	Part B	Complete (Catalogue text)
5	Learning outcomes	Part B	Proposed; each traced to an instrument
6	Module structure	Part C	Proposed
7	Session plans	Part C	Partly drafted (day level); open item
8	Methodology	Part C	Proposed
9	Assessment scheme	Part D	Proposed; weights total 100%; safeguards need Board approval
10	Materials and tools	Part E	Listed; none produced yet; open item
11	Readings and frameworks	Part E	Proposed; checked 9 October 2026
12	Framework integration map	Part E	Proposed
13	Applied outputs	Part E	Complete (Catalogue names)
14	Course owner and review date	Part A	Open item

G Open items, source note and approval record

Open items for the course owner and the Academic Board

1. Funders' current rules. Call documents are obtained for each delivery. The current Somalia Humanitarian Fund manual and allocation strategy are obtained from the fund's manager before it is used as an example.
2. Cost-eligibility and indirect-cost rules differ by funder; the course teaches the principles and applies the rules of the call used.
3. Sanctions and counter-terrorism clauses need review by a compliance specialist before they are taught.
4. Distinction from RA-EXP-704 (Project & Grants Management, Short Course) and from RA-PMG-305 to be confirmed at scrutiny.
5. Course owner (field 14). No owner is named. The owner is named, and the review date set, at approval (Chapter 9.7; Annex E).
6. Session plans (field 7) are drafted at the level of the day: the sequence, duration and method of each session and its required output. Session objectives, facilitator notes and per-session materials are to be completed by the course owner before Stage 3.
7. Materials (field 10) do not yet exist. Each item is to be produced, version-controlled and approved before the first delivery (Annex E).
8. Readings were checked against the issuing bodies on 9 October 2026. The course owner confirms editions, access and licences before each cohort and records the version of any web resource.
9. Rubrics and gates. Rubric A is described in Annex H.2 as specific to the Executive Programmes; this draft uses it for the applied assignments of an Executive Course. The principal written output and its defence are treated as the written capstone and defence of the gates (at least 60/100 each). The Academic Board confirms both uses (Decision D19).
10. Competence safeguards in Part D are proposals. They apply only if the Academic Board approves them (Table 25).
11. Pilot and moderation. The instruments are piloted and moderated in the first delivery cycle (Chapters 7.5 and 9.4). The Board confirms the panel size for defences (about ten minutes for each participant, with parallel panels above about ten participants).
12. Drafting method. This draft was prepared with AI assistance (Claude) from the sources of the book. A subject specialist has not reviewed it. Local facts (laws, institutions, data, tools) must be verified by the course owner before Stage 3.

Source and harmonisation note

Catalogue: 5 days, 4 RCP, retained unchanged (Decision D4). Contact hours are derived at five per RCP: 20 contact hours over five days of four hours.

Approval record (Chapter 9.4)

Stage	Owner	Evidence retained	Decision reference and date	Status
2 Design	Course owner	Draft syllabus, version 0.x	v0.1 prepared 9 October 2026 (AI-assisted); v0.2 completed 5 November 2026	Complete; owner not yet named
3 Academic scrutiny	Academic Board	Board minute and conditions		Not started
4 Pilot	Course owner	Pilot report; moderation record		Not started
5 Approval	Academic Board	Approved syllabus, version 1.0		Not started

A course cannot be scheduled until its syllabus is complete, approved by the Academic Board and lodged in the curriculum register (Chapter 9).

Syllabi: two Long Courses

Two Long Courses of twelve weeks. The book holds only a title and a credit for each, so the aim, outcomes, weekly outline, outputs and assessment scheme are all proposed.

RA-PHSC-621 · Pharmaceutical Regulation & Supply Chain

Complete syllabus, version 0.2 (Stage 2 Design complete). Awaiting Academic Board approval. References are to RIYAADA-UCS-2026-001, Version 1.0.

Status of this draft

Complete syllabus, version 0.2 (Stage 2 Design complete). It has not yet been through Academic Board scrutiny, piloting or approval, and it does not replace the course card in the book until it is approved (Chapter 9.4).

The book holds only a title and a credit for this course. The aim, outcomes, weekly outline, outputs, assessment scheme, methodology, materials, readings and framework map are all proposed content written on 9 October 2026 with AI assistance. A subject specialist has not reviewed them.

Items that need a decision are listed in Part G.

A Course identity and participant profile (fields 1, 2 and 14)

Code	RA-PHSC-621
Full title	Pharmaceutical Regulation & Supply Chain
Family and level	Long Course · RL2 Professional Certificate
Theme	T2 Health Systems Strengthening
Duration and hours	12 weeks · 24 contact hours · 72 notional hours
Credit	7 RCP (legacy: 2 credits at 36 notional hours each; Decision D10)
Award	RIYAADA Professional Certificate in Pharmaceutical Regulation & Supply Chain
Participant profile	Practising and aspiring leaders and managers in health systems, ministries, hospitals, public-health authorities and academic organisations (Programme Philosophy §2); entry as in Chapter 8. Proposed emphasis: ministry and regulatory-authority staff, central medical store and procurement officers, hospital and facility pharmacists and managers, health-insurance and partner logistics staff. A pharmacy qualification is not required.
Management tier (proposed)	Tier 02 and Tier 03 (proposed; the sources do not state a tier for Long Courses)
Prerequisite knowledge (proposed)	Entry as in Chapter 8. Experience in, or close to, the regulation, supply or use of medicines or health commodities is expected.
Delivery (proposed)	The 12-week pattern of the Long Course standard model (Chapter 19.1). Proposed weekly unit: one two-hour live session (24 contact hours), with about four hours of directed study and assessed work each week. In person at the Mogadishu campus or live online.
Weekly contact time (derived)	2 hours a week for 12 weeks (24 contact hours).
Language of delivery	English; Somali or bilingual delivery; Arabic where required (Chapter 6).
Syllabus status	Complete syllabus, version 0.2, Stage 2 Design complete. In the book the course remains a course card until approval.
Source references	PB PHSC-621; this draft (v0.1)
Course owner and review date	To be named (open item, Annex E). First review: the Stage 6 annual review after the first delivery (Chapter 9.4).

B Rationale, aim and learning outcomes (fields 3 to 5)

Field 3 · Rationale

Medicines are among the largest items of health spending and among the first things patients and staff judge a health system by. A system that cannot assure the quality of medicines, or cannot keep them in stock at the point of care, loses lives and public confidence. Substandard and falsified medical products are a global problem that WHO monitors through a global surveillance and monitoring system, and weak regulation and weak supply chains reinforce each other: unregulated markets supply products of unknown quality, while unreliable public supply drives patients towards them.

The course links the two halves of the pharmaceutical system. Regulation answers whether a product and a supplier can be trusted; the supply chain answers whether the right product reaches the right place, in the right condition and at the right time. Participants learn how national regulatory systems are assessed (the WHO Global Benchmarking Tool), how reliance on other regulators can help small authorities, and how selection, quantification, procurement, storage and distribution are managed. It is written for settings with limited regulatory capacity and fragmented, partner-supported supply. WHO's Somalia programme page records a National Medicines Policy (2014), the establishment of a Medicines Regulatory Authority (2016) with an Institutional Development Plan (2017), and technical support to a medicines law (2019). The page does not show which instruments are now in force, so the course owner verifies the status of each before delivery.

Field 4 · Course aim

Equip participants to assess national medicines regulation and to design supply-chain procedures that keep quality medicines available at the point of care.

Proposed. The book holds no aim for this course.

Field 5 · Learning outcomes

On successful completion, participants will be able to:

LO1 Describe the functions of a national medicines regulatory system and map them to the institutions responsible in a named country.

LO2 Appraise a regulatory system against the WHO Global Benchmarking Tool and its maturity levels and identify priority capacity gaps.

LO3 Investigate a reported quality concern or a suspected substandard or falsified product, from detection to action and reporting.

LO4 Calculate medicine requirements by consumption, morbidity and service-based methods and compare the results.

LO5 Evaluate procurement methods, supplier qualification and contract performance for a defined set of medicines.

LO6 Develop a supply-chain redesign plan and standard operating procedures for storage, distribution and inventory control that maintain quality and availability.

Each outcome opens with one assessable verb from the controlled list (Table 33) and is traced to an instrument in Part D. Level profile of this draft: Creating 1, Evaluating 2, Analysing 1, Applying 1, Remembering / understanding 1.

C Content and method (fields 6 to 8)

Field 6 · Module structure

Week-by-week themes and core content, in the stages of the 12-week pattern (Chapter 19.1).

Week	Stage	Theme	Core content
Week 1	Foundations	Medicines in the health system	Access to medicines as a system function. The pharmaceutical sector map: regulator, procurement agency, central and regional stores, facilities, private sector and informal market. National medicines policy. The essential medicines concept and the WHO Model List of Essential Medicines.
Week 2	Foundations	Regulatory functions and institutions	Marketing authorisation, licensing of establishments, inspection, quality-control laboratory services, market surveillance, pharmacovigilance, import and export control and control of promotion. Legal basis and independence; the regulator's relationship with the ministry and procurement bodies.
Week 3	Foundations	Assessing and strengthening regulation	The WHO Global Benchmarking Tool and its maturity levels; institutional development plans; reliance on other regulators and good reliance practices; regulatory capacity in small and fragile systems.
Week 4	Applied systems	Quality assurance and substandard and falsified products	Definitions; detection by visual inspection, screening devices and laboratory testing; risk-based post-market surveillance; reporting to WHO's global system; communication, recall and enforcement.
Week 5	Applied systems	Selection and quantification	Selection from the essential medicines list and standard treatment guidelines. Forecasting by consumption, morbidity and service-based methods; reconciling with the budget. Quantification workshop.
Week 6	Applied systems	Procurement	Procurement methods; supplier qualification and prequalification; the model quality assurance system for procurement agencies; tender documents and evaluation; contract management and supplier performance; pooled procurement and donated commodities; integrity in procurement.
Week 7	Integration	Storage and distribution	Good storage and distribution practices: warehouse layout, temperature control and cold chain, first-expiry-first-out. Transport and last-mile delivery, including insecure or hard-to-reach areas; security; expiry and disposal.
Week 8	Integration	Inventory control and logistics information	Stock records, minimum–maximum levels, reorder and emergency orders. Logistics management information: stock on hand, consumption and losses; reporting rates; links to health information systems; stock-out analysis.
Week 9	Integration	Safety, rational use and system design	Pharmacovigilance and adverse-reaction reporting; product quality complaints; rational use and stewardship. Pricing, affordability and the financing of medicines, including in insurance schemes. Integrated and parallel supply chains; emergency supply.
Week 10	Diagnostic review	Diagnostic review and feedback clinic	Presentation and peer critique of each participant's diagnostic of a regulatory or supply-chain function; faculty feedback; refining the capstone question.
Week 11	Application	Laboratories and workshops	Supply-chain redesign laboratory; SOP-writing workshop; mock inspection of a storage facility (case-based); recall simulation.
Week 12	Capstone	Capstone submission and presentation	Submission of the supply-chain redesign plan and SOP pack; presentations and panel defence; course close.

Field 7 · Session plans

Week-level plans: the sequence, duration and method of each session and the required output of the week. Session objectives, facilitator notes and per-session materials are an open item (Part G).

Week	Session sequence	Required output of the week
Week 1	• Input and discussion (40 min) • Sector-mapping exercise (55 min) • Application clinic and next-week brief (25 min)	Sector map of the participant's setting
Week 2	• Input and discussion (40 min) • Regulatory-function mapping exercise (55 min) • Application clinic and next-week brief (25 min)	Map of regulatory functions and responsible institutions

Week	Session sequence	Required output of the week
Week 3	• Input and discussion (40 min) • Benchmarking self-assessment of one function (55 min) • Application clinic and next-week brief (25 min)	Benchmarking self-assessment of one regulatory function
Week 4	• Input and discussion (40 min) • Case investigation: a suspect product (55 min) • Application clinic and next-week brief (25 min)	One-page quality-concern response plan
Week 5	• Input and discussion (40 min) • Quantification workshop (55 min) • Application clinic and next-week brief (25 min)	Quantification worksheet for five medicines
Week 6	• Input and discussion (40 min) • Procurement case analysis (55 min) • Application clinic and next-week brief (25 min)	Procurement method and supplier-qualification note
Week 7	• Input and discussion (40 min) • Storage-assessment exercise (55 min) • Application clinic and next-week brief (25 min)	Storage and distribution gap list
Week 8	• Input and discussion (40 min) • Stock-status analysis of a case facility (55 min) • Application clinic and next-week brief (25 min)	Stock-status analysis
Week 9	• Input and discussion (40 min) • Design-options discussion (55 min) • Application clinic and next-week brief (25 min)	Supply-chain design options note
Week 10	• Diagnostic presentations (80 min) • Feedback clinic (40 min)	Diagnostic report submitted; feedback record
Week 11	• Supply-chain redesign laboratory (55 min) • SOP-writing workshop (50 min) • Close and capstone brief (15 min)	Redesign plan and SOP drafts
Week 12	• Capstone presentations and panel defence (90 min) • Close and reflection (30 min)	Capstone submitted and defended

Notional workload

Component	Hours
Contact sessions (12 × 2 hours)	24
Directed weekly study and reading (about 2 hours a week)	24
Preparation of assessed work	24
Total notional hours	**72**

Field 8 · Methodology

Each weekly unit combines a short input with an exercise on a real or case supply chain. Participants keep a working file for their own setting, to which each week's output is added, so that the diagnostic report in Week 10 and the redesign plan in Week 12 are built from material gathered over the term. Case exercises use public documents and illustrative data; no confidential tender or stock data are brought to class without permission (Chapter 6.6).

Week 10 is a diagnostic review and feedback clinic, Week 11 is given to laboratories and workshops, and Week 12 to capstone submission and presentation, as in the standard model. Site visits, if any, are case-based or to facilities where permission and safety are assured.

D Assessment (field 9)

Field 9 · Assessment scheme

A proposed scheme with four instruments (30, 40, 20 and 10%). The sources give none for this course; the Academic Board selects the scheme before the first cohort (Table 24; Decision D18).

Instrument and component	Weight	Rubric and gate	Outcomes
1 Diagnostic report	**30%**		
• Diagnostic report	30%	Rubric A (applied assignment) · at least 50/100	LO1, LO2, LO3
2 Capstone: supply-chain redesign plan and SOP pack	**40%**		
• Redesign plan and SOP pack	40%	Rubric C (written capstone) · at least 60/100	LO4, LO5, LO6
3 Presentation and defence	**20%**		
• Presentation and defence	20%	Rubric D (defence) · at least 60/100	LO3, LO4, LO5, LO6
4 Participation and reflection	**10%**		
• Participation and reflection	10%	Rubric R (participation and reflection) · at least 50% (normalised)	LO1, LO2, LO3, LO5, LO6
Total	**100%**		

Evidence at threshold competence (proposed)

Component	What a threshold submission or performance shows
Diagnostic report	Describes the regulatory functions and the supply chain of the participant's setting (or a case), maps institutions and flows, scores regulatory capacity against stated benchmarks, identifies the principal weaknesses in quality assurance, availability and cost, and ranks priority actions.
Redesign plan and SOP pack	Supply-chain redesign plan with problem and baseline, quantification and procurement approach, storage and distribution design, inventory control and information flow, quality-assurance and recall procedures, owners, timeline and indicators; and an SOP pack of at least three procedures in a usable format.
Presentation and defence	Presents the redesign to a panel in ten minutes, answers questions on feasibility, cost and quality assurance, and states the first 90 days of action.
Participation and reflection	Rubric R criteria: preparedness, constructive contribution, peer-feedback quality and reflection depth.

Competency threshold	Overall at least 60/100. At least 50/100 in each applied assignment (Rubric A) and in the normalised participation and reflection mark (Rubric R). At least 60/100 in the written capstone (Rubric C) and the defence (Rubric D). Attendance of at least 80% of scheduled contact time. Every course competence safeguard is met. All required outputs and identity checks are complete. Chapter 7.3, Table 25 (Decision D19).
Competence safeguards (proposed)	Product quality assurance. The redesign plan and SOP pack include receipt inspection and quarantine of suspect products, a route for reporting quality concerns and a recall procedure. A high average cannot compensate for a failed safeguard (Table 25). The safeguards take effect only if the Academic Board approves them.
Marking and moderation	Marking is criterion-referenced against the rubrics of Annex H.2, with common performance bands of 80–100 Strong, 70–79 Secure, 60–69 Threshold, 50–59 Developing and 0–49 Insufficient. A second marker reviews every fail, every safeguard failure and every result within two points of a classification boundary. Online defences use two assessors. Independent internal moderation covers a sample of the cohort; marking and moderation are kept separate (Chapters 7.3 and 7.5).

Feedback, late work, reassessment	Formative comments within seven calendar days of a submission and provisional summative feedback within ten working days. Unapproved work up to seven calendar days late loses five percentage points. One reassessment within 30 calendar days of feedback, capped at 60/100. Appeals within 15 working days (Chapter 7.4).
Learning-gain indicator	An unweighted pre-test and post-test. A gain of 20 percentage points is a cohort quality indicator and not an individual pass rule (Chapter 7.1).
Integrity and data	No patient data is required. Participants obtain permission before using workplace documents, upload no confidential data to external tools and acknowledge any use of AI (Chapter 6.6).

Alignment matrix (Chapter 9.3)

No outcome is omitted and every assessed component has a stated learning purpose. The weight is the share of the final mark that tests the outcome.

Learning outcome	Method that builds it	Instrument that tests it (weight)	Weight
LO1 · Describe	Weeks 1 and 2 input and mapping exercises	• Diagnostic report (8) • Participation and reflection (2)	10%
LO2 · Appraise	Week 3 benchmarking self-assessment; Week 10 diagnostic clinic	• Diagnostic report (12) • Participation and reflection (2)	14%
LO3 · Investigate	Week 4 case investigation; Week 11 recall simulation	• Diagnostic report (10) • Presentation and defence (4) • Participation and reflection (2)	16%
LO4 · Calculate	Week 5 quantification workshop	• Redesign plan and SOP pack (10) • Presentation and defence (4)	14%
LO5 · Evaluate	Week 6 procurement case; Week 9 design-options discussion	• Redesign plan and SOP pack (10) • Presentation and defence (4) • Participation and reflection (2)	16%
LO6 · Develop	Weeks 7 and 8 practice exercises; Week 11 redesign laboratory and SOP-writing workshop	• Redesign plan and SOP pack (20) • Presentation and defence (8) • Participation and reflection (2)	30%
Total			**100%**

E Resources, framework integration and applied outputs (fields 10 to 13)

Field 10 · Materials and tools

Item	Proposed content	Status
Workbook	Weekly exercise sheets and the working-file outline.	To be produced
Slide deck	Short inputs for Weeks 1 to 9.	To be produced
Case pack	A case country sector description, a case warehouse and facility network, a supplier-qualification case, a suspect-product case and a recall scenario (illustrative).	To be produced
Templates	Sector map; benchmarking self-assessment sheet; quantification worksheet; supplier-qualification sheet; stock-status sheet; SOP template; redesign-plan outline.	To be produced
Instruments	Rubric sheets A, C, D and R; unweighted pre-course and post-course test.	To be produced
Datasets	Illustrative consumption and stock data for the quantification and stock-status exercises.	To be produced

Each item marked “To be produced” is to be produced, version-controlled and approved before the first delivery (Annex E).

Field 11 · Readings

Each item was checked against the issuing body's own page, or a bibliographic record of the journal, on 9 October 2026. The course owner confirms editions, access and licences before each cohort. Listing a source implies no endorsement or partnership, and no third-party text is reproduced (Chapter 3.5).

Type	Full attribution	Learning use and notes
Core 1	World Health Organization (2020). Good storage and distribution practices for medical products. *WHO Technical Report Series No. 1025, Annex 7*. Geneva: WHO. Page checked: who.int/publications/m/item/trs-1025-annex-7	Storage and distribution practices; used in Week 7.
Core 2	World Health Organization (2021). *WHO Global Benchmarking Tool (GBT) for evaluation of national regulatory system of medical products, Revision VI*. Geneva: WHO. Page checked: who.int/publications/i/item/9789240020245	Tool and maturity levels for assessing national regulatory systems; used in Weeks 2 and 3.
Core 3	World Health Organization (2021). Good reliance practices in the regulation of medical products: high level principles and considerations. *WHO Technical Report Series No. 1033, Annex 10*. Geneva: WHO. Page checked: who.int/publications/m/item/annex-10-trs-1033; who.int/news/item/29-04-2021-who-publishes-new-guidance-to-promote-strong-efficient-and-sustainable-regulatory-systems	Principles of reliance on other regulators; used in Week 3.
Core 4	World Health Organization (2014). WHO model quality assurance system for procurement agencies. *WHO Technical Report Series No. 986, Annex 3*. Geneva: WHO. Page checked: who.int/publications/m/item/trs-986-annex-3	Quality assurance system for procurement agencies; used in Week 6.
Core 5	Management Sciences for Health (2012). *Managing access to medicines and health technologies* (MDS-3), 3rd edition. Arlington, VA: MSH. Page checked: msh.org/resources/mds-3-managing-access-to-medicines-and-health-technologies/	Reference text on selection, quantification, procurement and distribution; used in Weeks 5 to 8. Note: The MSH page announces that its website would be retired after 30 June 2024; the course owner confirms an accessible copy.
Supplementary 1	World Health Organization (2025). *WHO Model List of Essential Medicines, 24th list*, published in *The selection and use of essential medicines 2025* (WHO Technical Report Series No. 1064, 2026). Geneva: WHO. Page checked: who.int/publications/i/item/9789240119741	The current model list of essential medicines; used in Week 1.
Supplementary 2	World Health Organization (2017). *WHO Global Surveillance and Monitoring System for substandard and falsified medical products*. Geneva: WHO. With: *Activity report, August 2017 – December 2021* (Geneva: WHO, 2024). Page checked: who.int/publications-detail-redirect/9789241513425; who.int/publications/i/item/9789240097513	Global surveillance and monitoring system for substandard and falsified products; used in Week 4.
Supplementary 3	World Health Organization, Somalia country programme (current). *Essential medicines and pharmaceutical policies*. emro.who.int/somalia. Page checked: emro.who.int/somalia/priority-areas/essential-medicines-and-pharmaceutical-policies.html	Programme page on essential medicines and pharmaceutical policies in Somalia; used in Weeks 1 and 2 as context. Each instrument it names is checked at source. Note: A programme page reporting WHO support. It does not show whether any instrument is in force; the course owner obtains each official text and its current status.

Field 12 · Framework integration map

Element names are the controlled names of Chapter 3.5 (Table 9). The mapping is proposed; the course owner re-checks it at Stage 3 (Annex F).

Framework	Controlled element	Developed in
MANAGER	Measure	LO4, LO6
	Allocate	LO4, LO5
	Navigate	LO6

Framework	Controlled element	Developed in
	Govern	LO1, LO2
	Execute	LO6
	Review	LO2
DIRECTOR	Control	LO2, LO6
	Risk-manage	LO3
	Ensure ethics	LO5: integrity in procurement
	Oversee	LO2
LEADERSHIP	Systems	LO1 to LO6
	Accountability	LO2, LO5
	Partnership	LO5, LO6

#	Controlled competency (Catalogue)	Emphasis	Where developed and assessed
1	Ethical and accountable leadership	Supporting	Integrity in procurement and in responding to suspect products (Weeks 4, 6)
2	Strategic thinking, direction-setting and public-value orientation	Supporting	System design and direction (Weeks 9, 12)
3	Governance, fiduciary oversight, risk management and institutional stewardship	Primary	Regulatory oversight, control and risk (Weeks 2 to 4; LO2, LO3)
4	Evidence-informed decision-making, policy analysis and data literacy	Supporting	Quantification and stock data (Weeks 5, 8)
5	People, team, stakeholder and partnership leadership	Supporting	Partners and fragmented supply (Weeks 6, 9)
6	Execution, change management, service improvement and performance discipline	Primary	Supply-chain performance and redesign (Weeks 7 to 12; LO4 to LO6)
7	Communication, influence, reflection and adaptive learning	Supporting	Presentation and reflection (Week 12; Rubrics D and R)

Field 13 · Signature outputs (proposed)

The book names no output for this course (open item, Annex E). The outputs below are proposed.

Applied output	Description and standard	Assessed in
Supply-chain redesign plan	Redesign of storage, distribution and inventory control with quality-assurance procedures (proposed signature output).	Redesign plan and SOP pack
SOP pack	At least three standard operating procedures in a usable format (proposed signature output).	Redesign plan and SOP pack
Diagnostic report	Diagnostic of the participant's regulatory or supply-chain function.	Diagnostic report

F Compliance with the fourteen-field standard (Chapter 9.1)

Field	Content	Where	Status in this draft
1	Course identity	Part A	Complete (Catalogue data)
2	Participant profile	Part A	Proposed; tier open
3	Rationale	Part B	Proposed
4	Course aim	Part B	Proposed
5	Learning outcomes	Part B	Proposed; each traced to an instrument
6	Module structure	Part C	Proposed
7	Session plans	Part C	Partly drafted (week level); open item
8	Methodology	Part C	Proposed
9	Assessment scheme	Part D	Proposed; weights total 100%; safeguards need Board approval
10	Materials and tools	Part E	Listed; none produced yet; open item
11	Readings and frameworks	Part E	Proposed; checked 9 October 2026
12	Framework integration map	Part E	Proposed
13	Signature outputs	Part E	Proposed
14	Course owner and review date	Part A	Open item

G Open items, source note and approval record

Open items for the course owner and the Academic Board

1. Scheme selection. The sources give no assessment scheme for this course. The scheme proposed here follows the Programme Philosophy pattern of 30%, 40%, 20% and 10% used by most Long Courses; the Academic Board selects the scheme before the first cohort (Decision D18).
2. Medicines law, regulatory authority and policy in Somalia. WHO's programme page reports support to a medicines law and a regulatory authority but does not show whether any instrument is in force. The course owner obtains each official text and records its status; weeks 1 to 3 are adapted to it.
3. Two contact hours a week is short for this content; the weekly study packs and the working file carry the remainder. The Academic Board may prefer a different weekly pattern within 24 contact hours.
4. MSH's Managing Access to Medicines and Health Technologies is cited from a site that announced its retirement after 30 June 2024; an accessible copy is confirmed.
5. Overlap with the medicines content of RA-HSSB-613 (Six Building Blocks) to be reviewed at scrutiny.
6. Course owner (field 14). No owner is named. The owner is named, and the review date set, at approval (Chapter 9.7; Annex E).
7. Session plans (field 7) are drafted at the level of the week: the sequence, duration and method of each session and its required output. Session objectives, facilitator notes and per-session materials are to be completed by the course owner before Stage 3.
8. Materials (field 10) do not yet exist. Each item is to be produced, version-controlled and approved before the first delivery (Annex E).
9. Readings were checked against the issuing bodies on 9 October 2026. The course owner confirms editions, access and licences before each cohort and records the version of any web resource.
10. Rubrics and gates. Rubric A is described in Annex H.2 as specific to the Executive Programmes; this draft uses it for the applied assignments of a Long Course. The written capstone and its defence are the written capstone and defence of the gates (at least 60/100 each). The Academic Board confirms both uses (Decision D19).
11. Competence safeguards in Part D are proposals. They apply only if the Academic Board approves them (Table 25).
12. Pilot and moderation. The instruments are piloted and moderated in the first delivery cycle (Chapters 7.5 and 9.4). The Board confirms the panel size for defences (about ten minutes for each participant, with parallel panels above about ten participants).

13. Drafting method. This draft was prepared with AI assistance (Claude) from the sources of the book. A subject specialist has not reviewed it. Local facts (laws, institutions, data, tools) must be verified by the course owner before Stage 3.

Source and harmonisation note

Long Course card: 12 weeks, 24 contact hours, 72 notional hours; 7 RCP (legacy: 2 credits at 36 notional hours each; Decision D10). The notional hours are those of the Long Course model; the contact hours are 2 hours a week.

Approval record (Chapter 9.4)

Stage	Owner	Evidence retained	Decision reference and date	Status
2 Design	Course owner	Draft syllabus, version 0.x	v0.1 prepared 9 October 2026 (AI-assisted); v0.2 completed 5 November 2026	Complete; owner not yet named
3 Academic scrutiny	Academic Board	Board minute and conditions		Not started
4 Pilot	Course owner	Pilot report; moderation record		Not started
5 Approval	Academic Board	Approved syllabus, version 1.0		Not started

A course cannot be scheduled until its syllabus is complete, approved by the Academic Board and lodged in the curriculum register (Chapter 9).

RA-RSCH-622 · Research Methods, Academic Writing & Ethics

Complete syllabus, version 0.2 (Stage 2 Design complete). Awaiting Academic Board approval. References are to RIYAADA-UCS-2026-001, Version 1.0.

Status of this draft

Complete syllabus, version 0.2 (Stage 2 Design complete). It has not yet been through Academic Board scrutiny, piloting or approval, and it does not replace the course card in the book until it is approved (Chapter 9.4).

The book holds only a title and a credit for this course. The aim, outcomes, weekly outline, outputs, assessment scheme, methodology, materials, readings and framework map are all proposed content written on 9 October 2026 with AI assistance. A subject specialist has not reviewed them.

Items that need a decision are listed in Part G.

A Course identity and participant profile (fields 1, 2 and 14)

Code	RA-RSCH-622
Full title	Research Methods, Academic Writing & Ethics
Family and level	Long Course · RL2 Professional Certificate
Theme	T5 Data, Epidemiology and Digital Health
Duration and hours	12 weeks · 36 contact hours · 108 notional hours
Credit	10 RCP (legacy: 3 credits at 36 notional hours each; Decision D10)
Award	RIYAADA Professional Certificate in Research Methods, Academic Writing & Ethics
Participant profile	Practising and aspiring leaders and managers in health systems, ministries, hospitals, public-health authorities and academic organisations (Programme Philosophy §2); entry as in Chapter 8. Proposed emphasis: faculty and teaching staff, postgraduate students and junior researchers, programme and monitoring and evaluation officers, and clinicians and managers who write protocols, reports and manuscripts.
Management tier (proposed)	Tier 02 and Tier 03 (proposed; the sources do not state a tier for Long Courses)
Prerequisite knowledge (proposed)	Entry as in Chapter 8. A research or writing project to develop during the term (a protocol, a report or a manuscript); basic familiarity with health or social-science concepts.
Delivery (proposed)	The 12-week pattern of the Long Course standard model (Chapter 19.1). Proposed weekly unit: one three-hour live session (36 contact hours), with about six hours of directed study and assessed work each week. In person at the Mogadishu campus or live online.
Weekly contact time (derived)	3 hours a week for 12 weeks (36 contact hours).
Language of delivery	English; Somali or bilingual delivery; Arabic where required (Chapter 6).
Syllabus status	Complete syllabus, version 0.2, Stage 2 Design complete. In the book the course remains a course card until approval.
Source references	PB RSCH-622; this draft (v0.1)
Course owner and review date	To be named (open item, Annex E). First review: the Stage 6 annual review after the first delivery (Chapter 9.4).

B Rationale, aim and learning outcomes (fields 3 to 5)

Field 3 · Rationale

Evidence-based management depends on people who can design studies, read papers critically, write clearly and conduct research with integrity. Institutions that are building research capacity face a publishing environment with predatory outlets, authorship disputes and the growing use of artificial-intelligence tools, which journals and publication-ethics bodies now regulate through explicit policies (ICMJE 2026; COPE).

The course takes a participant from a question to a defensible protocol and then to structured academic writing, with research ethics and integrity treated throughout and not as a last-week topic. It overlaps with RA-RES-401 (Applied Research Design & Methods) and RA-SWP-403 (Scientific Writing & Academic Publishing); the Academic Board decides at scrutiny whether the three should be sequenced or consolidated.

Field 4 · Course aim

Equip participants to design ethical research, appraise evidence critically and write and publish academic work with integrity.

Proposed. The book holds no aim for this course.

Field 5 · Learning outcomes

On successful completion, participants will be able to:

LO1 Formulate a researchable question and objectives from a practical problem, grounded in a structured review of the literature.

LO2 Compare quantitative, qualitative and mixed-method designs and choose one suited to a stated question.

LO3 Appraise the ethical risks of a study against international guidelines and specify the safeguards and review route required.

LO4 Critique a published study for design, bias, analysis and reporting using a recognised reporting guideline.

LO5 Draft the sections of a research paper or report in clear academic prose with accurate citation.

LO6 Apply publication ethics, authorship criteria and journal-selection checks to prepare a manuscript for submission.

Each outcome opens with one assessable verb from the controlled list (Table 33) and is traced to an instrument in Part D. Level profile of this draft: Creating 2, Evaluating 2, Analysing 1, Applying 1.

C Content and method (fields 6 to 8)

Field 6 · Module structure

Week-by-week themes and core content, in the stages of the 12-week pattern (Chapter 19.1).

Week	Stage	Theme	Core content
Week 1	Foundations	Research in the institution	Types of research; research and evidence-based management; from problem to question; the research cycle; writing as thinking; an overview of research integrity (Singapore Statement; European code of conduct as an example); setting up the working project.
Week 2	Foundations	Searching and reviewing the literature	Search strategy, databases and open-access sources; screening and managing references; critical reading; the structure of a literature review; avoiding plagiarism and citation practice.
Week 3	Foundations	Question, objectives and conceptual framework	Question structures; objectives and hypotheses; the conceptual framework; the evidence gap; writing the background and justification.
Week 4	Applied systems	Study designs	Cross-sectional, case-control, cohort, experimental and quasi-experimental designs; qualitative and mixed methods; bias, confounding and validity; the design matrix.
Week 5	Applied systems	Sampling, measurement and instruments	Populations and sampling; the logic of sample size; variables and measures; questionnaire and guide design; pre-testing; translation across Somali, Arabic and English.
Week 6	Applied systems	Data management and analysis planning	The data-management plan; quantitative analysis plan; qualitative coding; mixed-method integration; software options; reproducible workflows; reading results tables.
Week 7	Integration	Research ethics	Principles of the Declaration of Helsinki and the CIOMS guidelines; consent; vulnerable groups; confidentiality and data protection; ethics review routes; ethics in conflict-affected settings; community engagement; writing an ethics application.

Week	Stage	Theme	Core content
Week 8	Integration	Critical appraisal and reporting guidelines	Appraising a published study; reporting guidelines through the EQUATOR Network (for example STROBE, CONSORT, PRISMA); systematic-review basics; what a reviewer looks for.
Week 9	Integration	Academic writing: structure and style	Structure of a paper (introduction, methods, results and discussion); paragraph and argument; tables and figures; clarity, concision and tone; writing methods and results; peer review of drafts.
Week 10	Diagnostic review	Diagnostic review and feedback clinic	Submission of the draft protocol; peer and faculty feedback; revision plan for the capstone.
Week 11	Application	Writing and publication workshops	Writing the discussion and abstract; authorship criteria; journal selection and checks (Think. Check. Submit.; DOAJ; predatory outlets); cover letter and response to reviewers; artificial-intelligence tools and publication policy; copyright and open access.
Week 12	Capstone	Capstone submission and presentation	Submission of the capstone, a research protocol with its ethics application; presentations and panel defence; course close.

Field 7 · Session plans

Week-level plans: the sequence, duration and method of each session and the required output of the week. Session objectives, facilitator notes and per-session materials are an open item (Part G).

Week	Session sequence	Required output of the week
Week 1	• Input and discussion (60 min) • Question-formulation workshop (90 min) • Application clinic and next-week brief (30 min)	Working project and first problem statement
Week 2	• Input and discussion (60 min) • Literature-search workshop (90 min) • Application clinic and next-week brief (30 min)	Search log and reference library
Week 3	• Input and discussion (60 min) • Objectives and framework workshop (90 min) • Application clinic and next-week brief (30 min)	Question, objectives and background paragraph
Week 4	• Input and discussion (60 min) • Design-comparison workshop (90 min) • Application clinic and next-week brief (30 min)	Design matrix
Week 5	• Input and discussion (60 min) • Sampling and instrument workshop (90 min) • Application clinic and next-week brief (30 min)	Sampling plan and instrument draft
Week 6	• Input and discussion (60 min) • Analysis-planning workshop (90 min) • Application clinic and next-week brief (30 min)	Analysis plan and data-management plan
Week 7	• Input and discussion (60 min) • Ethics-risk workshop and application drafting (90 min) • Application clinic and next-week brief (30 min)	Ethics section of the protocol
Week 8	• Input and discussion (60 min) • Appraisal workshop on a published study (90 min) • Application clinic and next-week brief (30 min)	Critical appraisal (draft)
Week 9	• Input and discussion (60 min) • Writing workshop with peer review (90 min) • Application clinic and next-week brief (30 min)	Draft methods and results paragraphs
Week 10	• Protocol and draft presentations (110 min) • Feedback clinic (70 min)	Draft protocol submitted; feedback record

Week	Session sequence	Required output of the week
Week 11	• Writing workshop (90 min) • Publication-ethics and journal-selection workshop (70 min) • Close and capstone brief (20 min)	Publication plan (draft)
Week 12	• Capstone presentations and panel defence (140 min) • Close and reflection (40 min)	Capstone submitted and defended

Notional workload

Component	Hours
Contact sessions (12 × 3 hours)	36
Directed weekly study and reading (about 3 hours a week)	36
Preparation of assessed work	36
Total notional hours	**108**

Field 8 · Methodology

Each weekly unit combines a short input with a workshop in which participants apply the topic to their own working project; the project is the thread that connects the term. Writing is taught by writing: every unit includes drafting and structured peer feedback against a published rubric. Critical appraisal is practised on real, openly available papers. Ethics and integrity are built in from Week 1 and assessed in the capstone.

Week 10 is a diagnostic review and feedback clinic, Week 11 is given to writing and publication workshops, and Week 12 to capstone submission and presentation, as in the standard model. Participants acknowledge all sources and any permitted use of artificial-intelligence tools (Chapter 6.6).

D Assessment (field 9)

Field 9 · Assessment scheme

A proposed scheme with four instruments (30, 40, 20 and 10%). The sources give none for this course; the Academic Board selects the scheme before the first cohort (Table 24; Decision D18).

Instrument and component	Weight	Rubric and gate	Outcomes
1 Assignments: appraisal and literature review; publication plan	**30%**		
• Critical appraisal and literature review	20%	Rubric A (applied assignment) · at least 50/100	LO1, LO4
• Publication plan	10%	Rubric A (applied assignment) · at least 50/100	LO6
2 Capstone: research protocol with ethics application	**40%**		
• Research protocol with ethics application	40%	Rubric C (written capstone) · at least 60/100	LO1, LO2, LO3, LO5
3 Presentation and defence	**20%**		
• Presentation and defence	20%	Rubric D (defence) · at least 60/100	LO2, LO3, LO5, LO6
4 Participation and reflection	**10%**		
• Participation and reflection	10%	Rubric R (participation and reflection) · at least 50% (normalised)	LO1, LO4, LO5, LO6
Total	**100%**		

Evidence at threshold competence (proposed)

Component	What a threshold submission or performance shows
Critical appraisal and literature review	Search strategy and sources stated; at least five sources appraised with a recognised checklist or reporting guideline; a synthesis of what is known and the gap; accurate citation; no copied text.
Publication plan	Names target journals with checks of scope, indexing and policies (Think. Check. Submit.; DOAJ); applies authorship criteria to the project team; states the ethics, conflict-of-interest and artificial-intelligence-use statements that a submission needs.
Research protocol with ethics application	Research protocol in academic form: background and evidence gap, objectives, design with rationale, sampling and sample size, measures and instruments, analysis plan, data-management plan, ethics application (risks, consent, confidentiality, review route), limitations, timeline and budget; references accurate.
Presentation and defence	Presents the protocol in ten minutes, defends the design and the ethics safeguards, and answers a question on authorship and publication ethics.
Participation and reflection	Rubric R criteria: preparedness, constructive contribution, peer-feedback quality and reflection depth.

Competency threshold	Overall at least 60/100. At least 50/100 in each applied assignment (Rubric A) and in the normalised participation and reflection mark (Rubric R). At least 60/100 in the written capstone (Rubric C) and the defence (Rubric D). Attendance of at least 80% of scheduled contact time. Every course competence safeguard is met. All required outputs and identity checks are complete. Chapter 7.3, Table 25 (Decision D19).
Competence safeguards (proposed)	Research integrity. The capstone and the assignments contain no fabricated or unverifiable references, acknowledge all sources and any artificial-intelligence assistance, and include an ethics section. A breach is handled under the institutional integrity procedure (Chapter 7.4). A high average cannot compensate for a failed safeguard (Table 25). The safeguards take effect only if the Academic Board approves them.
Marking and moderation	Marking is criterion-referenced against the rubrics of Annex H.2, with common performance bands of 80–100 Strong, 70–79 Secure, 60–69 Threshold, 50–59 Developing and 0–49 Insufficient. A second marker reviews every fail, every safeguard failure and every result within two points of a classification boundary. Online defences use two assessors. Independent internal moderation covers a sample of the cohort; marking and moderation are kept separate (Chapters 7.3 and 7.5).
Feedback, late work, reassessment	Formative comments within seven calendar days of a submission and provisional summative feedback within ten working days. Unapproved work up to seven calendar days late loses five percentage points. One reassessment within 30 calendar days of feedback, capped at 60/100. Appeals within 15 working days (Chapter 7.4).
Learning-gain indicator	An unweighted pre-test and post-test. A gain of 20 percentage points is a cohort quality indicator and not an individual pass rule (Chapter 7.1).
Integrity and data	No patient data is required. Participants obtain permission before using workplace documents, upload no confidential data to external tools and acknowledge any use of AI (Chapter 6.6).

Alignment matrix (Chapter 9.3)

No outcome is omitted and every assessed component has a stated learning purpose. The weight is the share of the final mark that tests the outcome.

Learning outcome	Method that builds it	Instrument that tests it (weight)	Weight
LO1 · Formulate	Weeks 1 to 3 search and question workshops	• Critical appraisal and literature review (6) • Research protocol with ethics application (4) • Participation and reflection (2)	12%
LO2 · Compare	Weeks 4 to 6 design, sampling and analysis-planning workshops	• Research protocol with ethics application (8) • Presentation and defence (5)	13%
LO3 · Appraise	Week 7 ethics workshop and ethics-application drafting	• Research protocol with ethics application (12) • Presentation and defence (5)	17%
LO4 · Critique	Week 8 appraisal workshop	• Critical appraisal and literature review (14) • Participation and reflection (2)	16%
LO5 · Draft	Weeks 9 and 11 writing workshops; peer review of drafts	• Research protocol with ethics application (16) • Presentation and defence (5) • Participation and reflection (3)	24%
LO6 · Apply	Week 11 publication-ethics and journal-selection workshop	• Publication plan (10) • Presentation and defence (5) • Participation and reflection (3)	18%
Total			**100%**

E Resources, framework integration and applied outputs (fields 10 to 13)

Field 10 · Materials and tools

Item	Proposed content	Status
Workbook	Weekly workshop sheets and the working-project outline.	To be produced
Slide deck	Short inputs for Weeks 1 to 9 and 11.	To be produced
Case pack	A model protocol with ethics application, three published papers for appraisal and a model manuscript structure.	To be produced
Templates	Search log; appraisal checklist; design matrix; instrument template; ethics-application template; data-management plan; publication-plan sheet.	To be produced
Instruments	Rubric sheets A, C, D and R; unweighted pre-course and post-course test.	To be produced
Datasets	None required.	Not required

Each item marked “To be produced” is to be produced, version-controlled and approved before the first delivery (Annex E).

Field 11 · Readings

Each item was checked against the issuing body’s own page, or a bibliographic record of the journal, on 9 October 2026. The course owner confirms editions, access and licences before each cohort. Listing a source implies no endorsement or partnership, and no third-party text is reproduced (Chapter 3.5).

Type	Full attribution	Learning use and notes
Core 1	World Medical Association. *WMA Declaration of Helsinki: ethical principles for medical research involving human participants*. First adopted June 1964; most recently amended October 2024 by the 75th WMA General Assembly, Helsinki. Page checked: wma.net/policies-post/wma-declaration-of-helsinki/	Ethical principles for research with human participants; used in Week 7.

Type	Full attribution	Learning use and notes
Core 2	Council for International Organizations of Medical Sciences (2016). *International ethical guidelines for health-related research involving humans*. Geneva: CIOMS. Page checked: cioms.ch/ethical-guidelines-2016/	International guidance on applying those principles; used in Week 7.
Core 3	International Committee of Medical Journal Editors (updated January 2026). *Recommendations for the conduct, reporting, editing, and publication of scholarly work in medical journals*. icmje.org. Page checked: icmje.org/news-and-editorials/updated_recommendations_jan2026.html	Recommendations on conduct, reporting and publication, including authorship and artificial-intelligence use; used in Week 11.
Core 4	Committee on Publication Ethics (current). *COPE Core Practices* (the ten core practices). publicationethics.org. Page checked: publicationethics.org/node/35396	Core practices of publication ethics; used in Weeks 1 and 11. Note: Cited without a year; the course owner records the version used.
Core 5	Creswell JW, Creswell JD (2022). *Research design: qualitative, quantitative, and mixed methods approaches*, 6th edition. Thousand Oaks, CA: SAGE. Page checked: sagepub.com/shop/buy-a-book/research-design-6-270550	Research designs and methods; used in Weeks 4 to 6.
Core 6	Booth WC, Colomb GG, Williams JM, Bizup J, FitzGerald WT (2024). *The craft of research*, 5th edition. Chicago: University of Chicago Press. Page checked: chicagoreference.com (University of Chicago Press listing)	From topic to question and argument; used in Weeks 1 to 3 and 9.
Supplementary 1	ALLEA (2023). *The European Code of Conduct for Research Integrity: revised edition 2023*. Berlin: ALLEA – All European Academies. Page checked: allea.org/allea-publishes-2023-revised-edition-of-the-european-code-of-conduct-for-research-integrity/	A code of conduct for research integrity; used in Week 1.
Supplementary 2	Second World Conference on Research Integrity (2010). *Singapore Statement on Research Integrity*. Singapore, 21–24 July 2010. Page checked: wcrif.org/singapore-statement	International statement of research-integrity principles; used in Week 1.
Supplementary 3	Committee on Publication Ethics (2023). *Authorship and AI tools: COPE position statement*. 13 February 2023. publicationethics.org. Page checked: publicationethics.org/node/56046	Position on authorship and artificial-intelligence tools; used in Week 11.
Supplementary 4	Think. Check. Submit. (current). *Choose the right journal for your research: checklist*. thinkchecksubmit.org. Page checked: thinkchecksubmit.org (and library guides that describe it)	Checklist for choosing a journal; used in Week 11. Note: Confirmed through secondary descriptions.
Supplementary 5	Directory of Open Access Journals (current). *DOAJ*. doaj.org. Page checked: doaj.org	Directory for checking open-access journals; used in Week 11.
Supplementary 6	World Health Organization (2011). *Standards and operational guidance for ethics review of health-related research with human participants*. Geneva: WHO. Page checked: who.int/publications/i/item/9789241502948	Standards for ethics review; used in Week 7.
Supplementary 7	Page MJ, McKenzie JE, Bossuyt PM, et al. (2021). The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *BMJ* 372: n71. Page checked: pubmed.ncbi.nlm.nih.gov (PRISMA 2020 records); eprints.whiterose.ac.uk/173303	Reporting standard for systematic reviews; used in Weeks 2 and 8.
Supplementary 8	Greenhalgh T (2019). *How to read a paper: the basics of evidence-based medicine and healthcare*, 6th edition. Chichester: Wiley. Page checked: library catalogue and bookseller records (ISBN 9781119484721)	Critical appraisal of papers; used in Week 8. Note: Confirmed through catalogue records, not the publisher's own page.
Supplementary 9	EQUATOR Network (current). *Library of reporting guidelines for health research*, including STROBE, CONSORT, PRISMA, STARD and SQUIRE. Oxford: EQUATOR Network (equator-network.org). Page checked: equator-network.org	Library of reporting guidelines; used in Week 8. Note: Guidelines are versioned; the course owner records the version used.

Field 12 · Framework integration map

Element names are the controlled names of Chapter 3.5 (Table 9). The mapping is proposed; the course owner re-checks it at Stage 3 (Annex F).

Framework	Controlled element	Developed in
LEADERSHIP	Evidence	LO1 to LO4
	Accountability	LO3, LO6
	Innovation	LO2
DIRECTOR	Ensure ethics	LO3, LO6
	Define	LO1
LEADER	Reflect	LO4, LO5: peer review and reflection
MANAGER	Measure	LO2

#	Controlled competency (Catalogue)	Emphasis	Where developed and assessed
1	Ethical and accountable leadership	Primary	Research ethics, integrity and authorship (Weeks 1, 7, 11; LO3, LO6)
2	Strategic thinking, direction-setting and public-value orientation	Not addressed	–
3	Governance, fiduciary oversight, risk management and institutional stewardship	Supporting	Ethics governance and risk (Week 7)
4	Evidence-informed decision-making, policy analysis and data literacy	Primary	Evidence, design, appraisal and analysis (Weeks 2 to 8; LO1, LO2, LO4)
5	People, team, stakeholder and partnership leadership	Supporting	Collaboration, authorship and peer review (Weeks 9, 11)
6	Execution, change management, service improvement and performance discipline	Not addressed	–
7	Communication, influence, reflection and adaptive learning	Primary	Academic writing, presentation and reflection (Weeks 9 to 12; LO5; Rubrics D and R)

Field 13 · Signature outputs (proposed)

The book names no output for this course (open item, Annex E). The outputs below are proposed.

Applied output	Description and standard	Assessed in
Research protocol with ethics application	Protocol in academic form with an ethics application (proposed signature output; capstone).	Capstone; defence
Critical appraisal and literature review	Appraisal of published studies with a synthesis (proposed signature output).	Assignments
Publication plan	Journal selection, authorship and required statements for a manuscript (proposed signature output).	Assignments

F Compliance with the fourteen-field standard (Chapter 9.1)

Field	Content	Where	Status in this draft
1	Course identity	Part A	Complete (Catalogue data)
2	Participant profile	Part A	Proposed; tier open
3	Rationale	Part B	Proposed
4	Course aim	Part B	Proposed
5	Learning outcomes	Part B	Proposed; each traced to an instrument
6	Module structure	Part C	Proposed
7	Session plans	Part C	Partly drafted (week level); open item
8	Methodology	Part C	Proposed
9	Assessment scheme	Part D	Proposed; weights total 100%; safeguards need Board approval
10	Materials and tools	Part E	Listed; none produced yet; open item
11	Readings and frameworks	Part E	Proposed; checked 9 October 2026
12	Framework integration map	Part E	Proposed
13	Signature outputs	Part E	Proposed
14	Course owner and review date	Part A	Open item

G Open items, source note and approval record

Open items for the course owner and the Academic Board

1. Scheme selection. The sources give no assessment scheme for this course. The scheme proposed here follows the Programme Philosophy pattern (assignments 30%, capstone 40%, defence 20%, participation 10%); the Academic Board selects the scheme before the first cohort (Decision D18).
2. Overlap with RA-RES-401 (Applied Research Design & Methods, Executive Course) and RA-SWP-403 (Scientific Writing & Academic Publishing, Executive Course): the Board decides whether to sequence, consolidate or distinguish by audience.
3. Research ethics review bodies and procedures that apply to participants in Somalia, and national data-protection law, are not stated here; the course owner records them before delivery.
4. A learner policy on artificial-intelligence tools has to be aligned with Chapter 6.6 and with the journals' policies; it is written by the course owner.
5. Participants need access to literature; open-access sources are used where subscriptions are not available.
6. Course owner (field 14). No owner is named. The owner is named, and the review date set, at approval (Chapter 9.7; Annex E).
7. Session plans (field 7) are drafted at the level of the week: the sequence, duration and method of each session and its required output. Session objectives, facilitator notes and per-session materials are to be completed by the course owner before Stage 3.
8. Materials (field 10) do not yet exist. Each item is to be produced, version-controlled and approved before the first delivery (Annex E).
9. Readings were checked against the issuing bodies on 9 October 2026. The course owner confirms editions, access and licences before each cohort and records the version of any web resource.
10. Rubrics and gates. Rubric A is described in Annex H.2 as specific to the Executive Programmes; this draft uses it for the applied assignments of a Long Course. The written capstone and its defence are the written capstone and defence of the gates (at least 60/100 each). The Academic Board confirms both uses (Decision D19).
11. Competence safeguards in Part D are proposals. They apply only if the Academic Board approves them (Table 25).
12. Pilot and moderation. The instruments are piloted and moderated in the first delivery cycle (Chapters 7.5 and 9.4). The Board confirms the panel size for defences (about ten minutes for each participant, with parallel panels above about ten participants).

13. Drafting method. This draft was prepared with AI assistance (Claude) from the sources of the book. A subject specialist has not reviewed it. Local facts (laws, institutions, data, tools) must be verified by the course owner before Stage 3.

Source and harmonisation note

Long Course card: 12 weeks, 36 contact hours, 108 notional hours; 10 RCP (legacy: 3 credits at 36 notional hours each; Decision D10).

Approval record (Chapter 9.4)

Stage	Owner	Evidence retained	Decision reference and date	Status
2 Design	Course owner	Draft syllabus, version 0.x	v0.1 prepared 9 October 2026 (AI-assisted); v0.2 completed 5 November 2026	Complete; owner not yet named
3 Academic scrutiny	Academic Board	Board minute and conditions		Not started
4 Pilot	Course owner	Pilot report; moderation record		Not started
5 Approval	Academic Board	Approved syllabus, version 1.0		Not started

A course cannot be scheduled until its syllabus is complete, approved by the Academic Board and lodged in the curriculum register (Chapter 9).

Completion Supplement — 5 November 2026

Status and scope

This supplement provides proposed teaching, assessment and delivery specifications for the twelve draft syllabi. It supplements rather than replaces their existing course identities, aims, learning outcomes, contact hours, assessment weights and safeguards.

With this supplement the twelve syllabi are complete in all fourteen fields. Completion does not constitute institutional approval, verification of legislation, appointment of a course owner or authorisation to deliver a cohort. Any conflict with the controlled curriculum must be resolved and recorded before approval.

Common session and facilitator requirements

For every teaching session, the facilitator must identify the relevant course learning outcome, explain the required participant output and communicate the assessment criteria before the activity begins.

Use the existing contact-time allocation. Within that allocation, provide an introduction, a worked example, participant practice, feedback and a closing check of learning. Breaks and independent preparation do not count as contact time.

Before each session, check the case materials, calculations, instructions and accessibility of the learning resources. During practice, ask participants to explain their evidence, assumptions and alternatives. Conclude with feedback identifying one strength, one required correction and the next step.

Each session pack must contain participant instructions, the relevant case or dataset, an editable output template, facilitator guidance, a worked example or indicative response, and a feedback checklist. These are specifications for the teaching packs; the packs must be produced and checked before piloting.

Use fictional or authorised de-identified information. Do not require participants to disclose confidential institutional records. Provide printable resources and an offline alternative to software-dependent exercises.

Course-specific completion specifications

Universal Health Coverage and Strategic Purchasing

Session objectives: Assess service-access gaps; apply provider-readiness criteria; compare payment arrangements; specify verifiable quality indicators; draft a training contract; defend purchasing choices; and assemble an implementation plan.

Facilitator guidance: Distinguish coverage commitments from actual service access. Require purchasing proposals to identify their assumptions, budget constraints, verification arrangements and responses to provider failure. Contract specimens are training exercises and require legal review before workplace use.

Required teaching materials: Fictional catchment profiles, provider-readiness records, payment-comparison worksheet, indicator specification template, training contract outline, negotiation briefs and implementation planner.

Quality Improvement and Patient Safety

Session objectives: Define an improvement problem; establish a reliable baseline; analyse contributing system factors; design and document an improvement test; compare baseline and follow-up findings; and present a justified improvement recommendation.

Facilitator guidance: Focus on systems and learning rather than blame. Distinguish a planned improvement cycle from a completed cycle. Do not present simulated follow-up results as observed workplace evidence. Retain the proposed delivery arrangement until the academic review resolves the time needed for re-measurement.

Required teaching materials: Fictional incident scenario, process-mapping worksheet, baseline and follow-up datasets, improvement-test record, audit template and reporting checklist.

Health Workforce Planning and Management

Session objectives: Interpret aggregate workforce information; estimate workload-based staffing requirements; compare deployment options; identify recruitment and retention priorities; design a transparent workforce-management process; and justify a workforce plan.

Facilitator guidance: Use fictional roles and aggregate staffing data, not assessments of identifiable employees. Make assumptions about available working time and workload explicit. Employment procedures must be checked against applicable rules before workplace use.

Required teaching materials: Aggregate staffing dataset, workload worksheet, deployment comparison template, retention-planning worksheet, fictional process scenario and workforce-plan template.

Digital Health and Health Information Governance

Session objectives: Map an information flow; identify data-quality problems; define access and accountability responsibilities; assess a proposed digital intervention; document governance controls; and develop an implementation recommendation.

Facilitator guidance: Separate software functionality from organisational governance. Use synthetic records and demonstration accounts only. Require participants to explain data minimisation, authorised access, retention and incident escalation. Do not imply that demonstration access authorises use of a national production system.

Required teaching materials: Synthetic dataset, information-flow template, data-quality checklist, access matrix, intervention appraisal worksheet and governance-plan template.

Public Financial Management and Institutional Budgeting

Session objectives: Explain the budget cycle; prepare a justified institutional budget; distinguish expenditure, commitments and cash requirements; reconcile fictional records; identify control weaknesses; and present a budget-monitoring recommendation.

Facilitator guidance: Require traceable calculations and consistent assumptions. Use fictional financial records. Treat national legal references as contextual until their official texts and current status are confirmed. Training outputs do not authorise expenditure or replace professional financial review.

Required teaching materials: Fictional budget scenario, costing workbook, commitment register, cash-planning worksheet, reconciliation exercise, control checklist and monitoring template.

Project and Programme Management for Institutions

Session objectives: Define a project problem and scope; develop a results chain; prepare a work breakdown and schedule; connect activities to resources; assess delivery risks; and defend an integrated implementation plan.

Facilitator guidance: Test consistency across scope, schedule, budget, responsibilities and expected results. Ask participants to distinguish manageable assumptions from unresolved dependencies. Use a change scenario to test whether the project plan remains coherent.

Required teaching materials: Fictional project brief, results-chain template, work-breakdown worksheet, schedule, resource table, risk register, change-request form and implementation-plan template.

Applied Research Design and Methods

Session objectives: Formulate a researchable question; justify a suitable design; define sampling and measurement; prepare a data-collection instrument; explain an analysis plan and its limitations; and assemble a research proposal.

Facilitator guidance: Keep exercises at proposal or synthetic-data level. Distinguish research, evaluation and routine monitoring. Require an explanation of ethics review, consent, data protection and necessary permissions. Completion of this course does not authorise recruitment or data collection.

Required teaching materials: Research-question worksheet, design comparison table, fictional sampling frame, instrument template, synthetic dataset, analysis-plan template and ethics checklist.

Monitoring, Evaluation, Accountability and Learning

Session objectives: Develop a results chain; specify measurable indicators; assess data quality; prepare an evaluation question and approach; design a confidential feedback process; and explain how findings inform adaptation.

Facilitator guidance: Require each indicator to include its definition, source, collection frequency and responsible role. Distinguish monitoring evidence from causal claims. Use fictional feedback scenarios and document appropriate referral and confidentiality arrangements.

Required teaching materials: Results-chain template, indicator reference sheet, synthetic monitoring dataset, evaluation-planning worksheet, fictional feedback-process scenario and learning-action log.

Data Literacy and Evidence for Decision-Makers

Session objectives: Interpret a data table; check completeness and consistency; select an appropriate summary; identify misleading presentation; explain uncertainty and limitations; and prepare an evidence-informed decision brief.

Facilitator guidance: Ask participants to check sources, denominators, missing values and time periods before drawing conclusions. Separate association from causation. Provide a manual calculation route and require limitations to accompany every recommendation.

Required teaching materials: Synthetic dataset, data dictionary, quality-check worksheet, calculation exercises, fictional presentation examples and decision-brief template.

Grant Writing and Resource Mobilisation

Session objectives: Interpret a fictional funding call; assess organisational fit; develop a coherent proposal; link activities, results and budget; identify compliance dependencies; and defend a resource-mobilisation plan.

Facilitator guidance: Use a clearly labelled fictional call unless a current authorised call is supplied. Check consistency between narrative, activities, indicators and budget. Do not invent eligibility, partnerships or funding commitments. Obtain specialist review before applying compliance clauses to a real submission.

Required teaching materials: Fictional call, eligibility checklist, proposal outline, results framework, budget worksheet, compliance checklist and resource-mobilisation planner.

Pharmaceutical Regulation and Supply Chain

Session objectives: Distinguish regulatory and supply-chain responsibilities; map a fictional product flow; assess documentation and quality-assurance requirements; interpret stock information; identify escalation needs; and develop a justified improvement proposal.

Facilitator guidance: Keep exercises administrative and educational. Do not provide clinical treatment instructions or authorise product release, procurement or regulatory action. Verify national mandates and applicable instruments before using local examples. Escalation decisions in case exercises must refer to qualified, authorised personnel.

Required teaching materials: Fictional supply-chain map, product-documentation checklist, synthetic stock dataset, procurement quality-assurance worksheet, escalation scenario and improvement-plan template.

Research Methods, Academic Writing and Ethics

Session objectives: Develop a research question; appraise relevant evidence; justify the study design; prepare a methods and analysis plan; write a structured academic argument; and defend an ethically responsible proposal.

Facilitator guidance: Maintain a clear distinction between drafting a proposal and obtaining research approval. Require accurate attribution, verified references and disclosure of permitted assistance. Use synthetic data for analysis practice. Do not require collection of information from human participants during training.

Required teaching materials: Question-development worksheet, evidence-appraisal template, proposal structure, synthetic dataset, academic-writing checklist, reference-verification log, ethics checklist and defence prompts.

Assessment administration

Retain the assessment weights and gates already presented in each syllabus as proposals pending institutional review. This supplement introduces no new marks, penalties or award conditions.

Before piloting, issue an assessment brief specifying the task, required evidence, submission format, applicable rubric, deadline, permitted assistance and feedback arrangements. Publish the approved reassessment, appeal and accommodation procedures with the learner information pack.

For group activities, identify the evidence used to assess each participant individually. Provide formative practice before summative assessment. Retain marking records and moderation evidence in the controlled course file.

Responsibilities and completion evidence

The curriculum function coordinates the review and maintains the issue register. A formally appointed course owner checks delivery feasibility, teaching packs and course-specific facts. A subject specialist reviews disciplinary accuracy. The quality function checks alignment, assessment consistency and learner information. The authorised institutional body records its decision.

Names, appointments, deadlines, signatures and decision references must be entered from authorised records rather than assumed.

For each course, the completion checklist must record:

- Course owner and subject reviewer.
- Session objectives and outcome alignment.
- Teaching-pack version and accessibility check.
- Assessment briefs, rubrics and moderation arrangements.
- Local-source verification and resource-access evidence.
- Delivery pattern and contact-hour check.
- Review decisions and outstanding conditions.
- Pilot evidence, approval reference and authorised release status.

Use the statuses **Drafted**, **Awaiting verification**, **Under review**, **Approved with conditions** and **Approved**. Use either approval status only when supported by an authorised written decision.

Remaining conditions

The teaching specifications in this supplement are drafted. Physical or electronic teaching packs, resource permissions, official local-source checks, specialist review, appointments, pilot evidence and institutional approval remain to be completed or evidenced.

No statement in this supplement certifies that these conditions have been met.