

**KENYA INSTITUTE OF SUPPLIES MANAGEMENT DRAFT ACCREDITATION
POLICY**

KENYA INSTITUTE OF SUPPLIES MANAGEMENT
“Promoting Professionalism in Supply Chain Management”



DRAFT ACCREDITATION POLICY
DRAFT 2

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DEFINITION OF TERMS

a) Continuous professional development (CPD):

A determined process that requires KISM members to keep enhancing their professional capacity through continuous learning measured through obtaining a specified number of points annually, by attending or participating in relevant activities of a professional nature.

b) Professional Standards Committee (PSC):

A committee appointed by the KISM Council as provided for in clause 7 of the SPMA Act schedule. It is a committee of the council that certifies quality and ensures that training activities and training service providers meet the required criteria for CPD purposes.

c) CPD Activity: a learning activity a professional undertakes to develop and enhance his/her professional abilities. Such enables learning to become conscious and proactive.

d) Training Firm/ Agency:

A firm licensed and accredited by the Institute to carry out CPD activity as provided under this policy

e) Member:

As defined in section 3A of the SPMA Act 2007

f) Member in Good Standing: "A member who is up to date in payment of all dues and fees and is not under disciplinary sanctions".

g) Licensed firm: A firm that has met the requirements of SPMA and is issued with a current practicing license by KISM

h) Accredited firm: A firm that has met the requirements of this policy and is authorized to offer trainings for award of CPD points

i) Accredited course: A course that has been taken through the accreditation procedure stipulated in this policy and has qualified as a training for CPD points.

ACRONYMS

PSC	:	Professional Standards Committee
CPD	:	Continuous Professional Development
KISM	:	Kenya Institute of Supplies Management
SCM	:	Supply Chain Management
CEO	:	Chief Executive Officer
NITA	:	National Industrial Training Authority
KRA	:	Kenya Revenue Authority
PIN	:	Personal Identification Number
VAT	:	Value Added Tax
ID NO.	:	Identification Number
CV	:	Curriculum Vitae
CR 2	:	Company Registration Form 2

1.0 POLICY STATEMENT

The Kenya Institute of Supplies and Management (KISM) within the mandate bestowed upon it by the Supplies Practitioners Management Act of 2007 of Laws of Kenya and within its obligation as a member of International Federation of Purchasing and Supplies Management has responsibility of developing and regulating the supply chain profession in Kenya. As part of this responsibility, the Institute through its Professional Standards Committee (PSC) shall remain committed to delivering quality, relevant and up to date Continuous Professional Development (CPD) program to its members. The accreditation policy shall guide the processes and decisions involved in the process of accrediting such persons or firms or business entities keen in offering such training towards CPD allocation to its members.

1.1 ACCREDITATION

The essence of accreditation is to give KISM an opportunity to collaborate with other partners in providing CPD programs to its members while maintaining the quality of the trainings. Accreditation shall happen at two levels as proposed below;

1.1.1 ACCREDITATION OF FACILITATORS

Annually, KISM shall undertake a National Call for Expression of Interest inviting qualifying persons to apply for inclusion in the pool of trainers. The call of expression of interest shall clearly outline the expected academic, professional and other competencies. After the vetting process, KISM shall publish the list of accredited trainers for use in its own events as well as by the accredited trainers.

KISM shall apply and use all known information in assessing suitability of trainers including, but not limited to, their standing in society. After accreditation, KISM shall mount a Trainer of Trainers programme to equip the selected trainers with presentation skills and agreement on service level deliverables.

KISM shall use both evaluation by workshop/conference participants as well as deploy peer evaluators to events to coordinate quality control. Where a facilitator is rated below par by participants and/or peers, such a facilitator shall be informed of the less than satisfactory performance and advised on areas for improvement.

In the event that after advice for remedial action the facilitator is rated poorly by participants, they shall be removed from the training pool and will thus lose the opportunity to facilitate KISM and its accredited trainings.

1.1.2 ACCREDITATION OF COURSES & TRAINING EVENTS

Institutions and individual consultants wishing to accredit their programs shall apply to KISM in the prescribed format **(as detailed in the Application for Firm Accreditation Form)** providing course details including

1. A brief on the overall theme and objectives
2. Topics and sub-topics to be covered under the theme
3. Objectives for each topic
4. Learning outcomes for each topic
5. Training approach and tools to be employed
6. Event programme indicating venue, dates, time and facilitators for each session and side activities.
7. Quality Control Measures
8. Target audience
9. Expected number of participants, date and venue for the programme
10. Name and contact of the overall seminar / event coordinator including their resume and contacts
11. Charges for seminar delegates where applicable

NOTE

After the event/training the accredited entity shall provide a report to the CEO in the prescribed format including original evidence of attendance by way of attendance sheets signed by participants within 7 days post training.

1.1.2.1 IN-HOUSE TRAININGS

Employers organizing in-house trainings for their staff shall submit the information required in 1.1.2 above for accreditation and they shall be charged an agreed fee for the award of CPD points.

In -house workshops facilitated by KISM shall be accredited and aligned to the CPD policy of the institution.

1.1.2.2 Courses by Independent Trainers and Institutions

Independent trainers applying for accreditation shall submit information in the required format (as in the **Application for Firm Accreditation Form**) and pay an accreditation fee.

The minimum annual accreditation fees shall be KSH. 100,000/= for CPD training firms or entities.

The training institution shall further remit KSH. 1,000/= per trainee member as CPD allocation fees per training.

Upon registration of participants the Institute shall get an allocation of CPD points in line with the CPD policy.

NOTE:

In the event that the training institution has not paid the CPD allocation fees, members attending such programs shall pay CPD administrative cost of KSH. 1,000/= to the institute before being allocated the CPD points.

2.1 QUALITY CONTROLS

Accredited programs will be subjected to quality control by KISM. The training institution (CPD Accredited Trainer) shall facilitate attendance of the Institute's training quality control officer.

3.1 ACCREDITATION COMMITTEE

Accreditation shall be done by the Council through the Professional Standards Committee. The council/ PSC shall schedule meetings accordingly for the purpose of accreditation.

The committee shall nominate persons to undertake quality checks and compliance with the KISM Training Manual and Quality Control Policy for Training events.

In approving courses for accreditation, the committee shall ensure there are no overlaps and conflicts with KISM's own events/training.

4.1 BENEFITS OF ACCREDITATION

4.1.1 Automatic award of agreed CPD points by KISM

4.1.2 The right to market with clear information regarding accreditation and the number of CPD points that will be awarded

4.1.3 Presence of the accredited event on the KISM website

4.1.4 One free quarterly communication to KISM members on accredited events.

4.1.5 Additional communication to members regarding the accredited event will be at an agreed fee.

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ANNEX I: APPLICATION FOR FIRM ACCREDITATION FORM



KENYA INSTITUTE OF SUPPLIES MANAGEMENT

Promoting Professionalism in Supply Chain Management

KENYA INSTITUTE OF SUPPLIES MANAGEMENT APPLICATION FOR FIRM ACCREDITATION FORM

1.0 PARTICULARS OF ORGANIZATION

Name of Applicant	
Organization/ Company	
Date of Registration/Incorporation	
Certificate No.	
PIN No.	
VAT No.	
County	
Building /Road	
Postal Address & Code	
City	
Office Line	
Mobile	
Email	
Website	
KISM License No.	
NITA Registration No.	

2.0: REQUIRED ATTACHMENTS

Please attach the following support documents:

- i. KISM license (firm),
- ii. NITA Registration Certificate,
- iii. Tax Compliance Certificate,
- iv. Annual training program
- v. Firm details: Copy of Registration/Incorporation certificate; PIN/VAT; company profile; CR12; trade/business licenses; shareholding; previous

training experiences; memorandum and Articles of Association where applicable

3.0 PARTICULARS OF LEAD TRAINER/FACILITATOR

Name of Lead Trainer/Facilitator	
ID No./Passport Number	
KISM License No.	
Qualifications	
Years of relevant experience in SCM	
Date of appointment to the position	

NOTE:

Attach ID/Passport copy, Detailed CV, Appointment letter of appointment to the position of Lead Trainer and Copy of KISM license.

4.0 DECLARATION BY APPLICANT

I declare that the statements made herein are correct to the best of my knowledge and belief and I agree to be bound by the Kenya Institute of Supplies Management Act, No. 17 2007, Code of Professional Conduct and Ethics, and the rules and regulations of the Kenya Institute of Supplies Management, as they currently exist and as they may hereafter be altered.

SIGNATURE

DATE

ID/Passport (Attach Copy)

FOR OFFICIAL USE

Date of Receipt of Application.....

Date of Review of the Application

Evidence of Payment of Accreditation fees

Kindly note that the approved annual accreditation fees for training firms is KSHS. 100,000.

The fee payable directly to KISM Bank Accounts

Committee Decision

At the meeting of the Professional Standards Committee held on..... and as minuted at.....this application is Approved} / Approved subject to {} or Rejected {}

Reasons for Rejection/ Conditional Approval

.....
.....
.....

Chairman, PSC.....

Signature.....

Date.....

Chief Executive Officer, KISM.....

Signature.....

Date.....

Head of Training, KISM.....

Signature.....

Date.....

Important Notes

1. Applicant firms, be they local or foreign, must be licensed by KISM
2. Training providers applying for accreditation must be currently registered with NITA
3. Training providers must ensure their trainers meet the relevant professional qualifications and are licensed members of KISM in good standing.
4. Any material changes in the training that occur after the application is made will be brought to the attention of KISM immediately.
5. The applicant agrees to undertake the training in accordance with KISM guidelines including allowing for Quality Assessors and cooperating with such officers once appointed
6. Its only when the application is approved that the accredited institution can market its courses as such. In so doing, there will be no infringing on the Institute's copy rights, trademark and intellectual property.
7. KISM reserves its right to call the institution seeking accreditation to a meeting for clarifications and may upon such additional information grant approval, approve subject to certain conditions or fail to accredit a given course.
8. Applications for local and international firms must be submitted **one month before the training** to allow for review by PSC prior to the training
9. Foreign trainers must have relevant professional qualifications and provide proof of membership status of their professional organization
10. Applicants will be informed of their status upon completion of the review by the Professional Standards Committee
11. Formal communication will be sent to successful applicants informing them of applicable CPD points. An accreditation number for each training will also be issued.
12. Applicants are required to pay accreditation application fees of KSHS. 100,000 and an additional KSHS. 1,000 for each trainee seeking award of CPD points.
13. After the trainings, the accredited institution shall forward to KISM the list of participants (both a scan of a signed attendance registers and a separate excel sheet) clearly indicating KISM membership number for each day of the seminar
14. After the training, applicants must submit training certificates to KISM as evidence for CPD allocation.
15. Institute's bank details:

ACCOUNT NUMBER	0102096929101
BANK NAME	Standard Chartered Bank
BANK BRANCH	Westlands
BRANCH CODE	02015
SWIFT CODE	SCBLKENXXX
EMAIL ADDRESS	programs@kism.or.ke accounts@kism.or.ke

ANNEX II: APPLICATION FOR COURSE ACCREDITATION FORM



**KENYA INSTITUTE OF
SUPPLIES MANAGEMENT**
Promoting Professionalism in Supply Chain Management

APPLICATION FOR COURSE ACCREDITATION FORM

1.0 DETAILS OF PROPOSED TRAINING FOR ACCREDITATION

Program Title/Theme	
Dates	
Venue	
Target Audience	
Charges	

2.0 PROGRAM INFORMATION

Provide details of the program as below:

1. A brief on the overall theme and objectives
2. Topics to be covered under the theme
3. Objectives for each topic
4. Learning outcomes for each topic
5. Training approach and tools to be employed
6. Event program indicating venue, dates, time and facilitators for each session and side activities.
7. Quality Control Measures
8. Target audience
9. Expected number of participants, date and venue for the program
10. Name and contact of the overall seminar / event coordinator including their resume and contacts
11. Charges for seminar delegates where applicable

3.0 PARTICULARS OF LEAD TRAINER/FACILITATOR

Name of Lead Trainer/Facilitator	
ID No./Passport Number	
KISM License No.	
Qualifications	
Years of relevant experience in SCM	
Date of appointment to the position	

NOTE:

Attach ID/Passport copy, Detailed CV, Appointment letter of appointment to the position of Lead Trainer and Copy of KISM license.

4.0 FACILITATORS/SPEAKERS PROFILES

- I. Lead facilitator/trainer
Provide copy of letter of appointment, Copy of KISM license, CV, ID and copies of relevant certificates
- II. Briefs on additional speakers detailing the following;
 - a. academic qualifications,
 - b. professional qualifications and memberships to professional bodies
 - c. Nationality
 - d. Training experience.

5.0 QUALITY CONTROL MEASURES

A brief explanation on the measures that will be employed to ensure the objectives and learning outcomes are achieved.

FOR OFFICIAL USE

Date of Receipt of Application.....
Date of Review of the Application

Evidence of Payment of Accreditation fees

Kindly note that the approved annual accreditation fees for training firms is KSHS. 100,000 and an additional fee of KSHS. 1,000 per member seeking award of CPD points for each training done.

The fee payable directly to KISM Bank Accounts

Committee Decision

At the meeting of the Professional Standards Committee held on..... and as minuted at.....this application is Approved{} / Approved subject to {} or Rejected {}

Reasons for Rejection/ Conditional Approval

.....
.....
.....

Approved CPD points:.....

Chairman, PSC.....

Signature.....

Date.....

Chief Executive Officer, KISM.....

Signature.....

Date.....

Head of Training, KISM.....

Signature.....

Date.....

Important Notes

1. Applicant firms, be they local or foreign, must be licensed by KISM
2. Training providers applying for accreditation must be currently registered with NITA
3. Training providers must ensure their trainers meet the relevant professional qualifications and are licensed members of KISM in good standing.
4. Any material changes in the training that occur after the application is made will be brought to the attention of KISM immediately.
5. The applicant agrees to undertake the training in accordance with KISM guidelines including allowing for Quality Assessors and cooperating with such officers once appointed
6. Its only when the application is approved that the accredited institution can market its courses as such. In so doing, there will be no infringing on the Institute’s copy rights, trademark and intellectual property.
7. KISM reserves its right to call the institution seeking accreditation to a meeting for clarifications and may upon such additional information grant approval, approve subject to certain conditions or fail to accredit a given course.
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BANK NAME	Standard Chartered Bank
BANK BRANCH	Westlands

BRANCH CODE	02015
SWIFT CODE	SCBLKENXXX
EMAIL ADDRESS	programs@kism.or.ke accounts@kism.or.ke

ANNEX III: APPLICATION FOR FIRM LICENSING FORM



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