

No.	Indicator	Target	Measurement	Data Source	Frequency and Proposed Use
<b>Inputs</b>					
1.	Ministry of Health (MOH) has ownership of the FELTP (“Program”).	<p>MOH provides technical, human, and in-kind resources.</p> <p>MOH provides direct financial support to program.</p> <p>Program has authority/mandate to lead/participate in public health emergency investigations.</p>	<p>Describe the role of the MOH in supporting the program. Consider these factors:</p> <ol style="list-style-type: none"> <li>For the investigation of outbreaks, what functions does the MOH serve and what is the role of the program.</li> <li>Describe how the MOH facilitates routine access and use of national surveillance data.</li> <li>The number and proportion of trainees/officers in each cohort supported (and released to perform program work) by MOH.</li> <li>The number of full time and part time MOH staff assigned as program staff.</li> <li>Other as appropriate</li> </ol>	Resident Advisor, Program Director and others as needed.	<p>Frequency: Described at beginning of program or start of Monitoring process. Reviewed annually and any changes reported.</p> <p>Proposed use: The role of the program and the Ministry should be clearly laid out in the program plan.</p> <p>Use the information on key aspects of the program to track how well the plan is being implemented.</p>
2.	Plan for program sustainability exists.	<p>Program has a distinct place in organizational chart of MOH.</p> <p>Action is being taken to assure role of program and sustainability. A written sustainability plan exists which addresses the organizational, budgetary, and workforce development needs of the program.</p> <p>Trainee selection criteria and process written and used.</p>	<p>Describe the position of the program within the MOH and answer the following:</p> <ol style="list-style-type: none"> <li>Is it in the organizational chart?</li> <li>Is the program located physically within the MOH?</li> <li>Is there a written plan and budget for the future sustainability and integration of the program? Does it contain organizational and budgetary needs of the program?</li> <li>Does it include career path/progression for graduates? Describe.</li> </ol> <p>Program is using and has documented the selection criteria and process for candidate selections.</p>	Resident Advisor and Program Director Program records	<p>Frequency: Described at beginning of program or start of Monitoring process. Reviewed annually and any changes reported.</p> <p>Proposed use: The plan for long term sustainability, the placement of the program within the Ministry and system that supports this should be in a program plan.</p> <p>Use the information to track how well the plan for sustainability is being implemented.</p>

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3.	Accreditations	Graduates receive accreditation for training recognized by public health system	<ul style="list-style-type: none"> <li>a. Describe type of accreditation given to trainees for completing the training.</li> <li>b. Indicate how recognized by the MOH.</li> </ul>	Resident Advisor, Program Director, Program records	<p>Frequency: Described at beginning of program or start of Monitoring process. Reviewed annually and any changes reported.</p> <p>Proposed use: Accreditation and its recognition contribute to program success and sustainability.</p>
4.	National or provincial level laboratory staff are partners in training and supporting investigations.	<p>National or provincial level laboratory staff actively participates in training program's didactic and field activities.</p> <p>National or other level laboratory resources are available for trainees' investigations</p>	<ul style="list-style-type: none"> <li>a. Indicate how laboratory staff is involved in training.</li> <li>b. Describe what laboratory facilities are available and used for trainees' investigations.</li> </ul>	Resident Advisor, Program Director, and others as needed.	<p>Frequency: Described at beginning of program or start of Monitoring process. Reviewed annually and any changes reported.</p> <p>Proposed use: This information will allow the program to identify and address gaps that exist in laboratory support to the program.</p>

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<b>Process</b>					
5.	Sufficient number of qualified applicants for a full training class of qualified personnel.	a. Each class is “full” and all trainees are fully qualified.  (Program supplies target number for class-size and program-specific qualifications.)	a. Provide and track: number of total applicants, number of qualified applicants (key qualifications-degrees), number selected, number enrolled, number dropped out.	Program records	Frequency: Annually, as applications are reviewed.  Proposed use: To monitor the success of the program. Can intervene if changes are needed to increase numbers or seek other types of applicants.
6.	Competencies* required by the program for trainees.  <b>*Competency in this document refers to what the trainee will be expected to be able to do at the completion of training. Programs should translate as appropriate.</b>	a. Expected competencies include: <ul style="list-style-type: none"> <li>• Epidemiology (including Outbreak Investigation)</li> <li>• Biostatistics</li> <li>• Surveillance</li> <li>• Communication</li> <li>• Computing</li> <li>• Management</li> </ul> Recommend: Epidemiology of Communicable and Non-communicable Diseases, Laboratory, Prevention Effectiveness, Ethics.	a. Provide list of competencies being trained for and expected of graduates.  b. For each competency provide the activity or method that is used to indicate achievement of that competency. Indicate whether the activity is required for program completion.  c. Indicate the number and proportion of most recent program trainees who completed required learning activities adequately.  d. Provide the method used to measure quality for each required activity noted above.	Program records	Frequency: Annually, prior to confirming the training plan for the next cohort.  Proposed use: Identification of gaps and training needs to be addressed. Tracking of completion of key activities for all trainees is critical for program monitoring.

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7.	Supervisory support is assessed.	a. Method and plan exist for assessing supervisory support. b. Trainees participate in supervisor assessment.	a. Provide the method and plan for supervisor and mentor assessment. b. Indicate role (if any) that trainees have in that assessment.	Program records	Frequency: Described at beginning of program or start of Monitoring process. Reviewed annually and any changes reported.  Proposed use: Regular assessment of supervisory support can support program quality.
8.	Training program is progressing towards sustainability	a. Program graduates are recruited back as program staff to serve as mentors and supervisors.	a. Indicate number and position of staff or mentors/supervisors who are program graduates.	Program records	Frequency: Annually, or as new staff are brought on.  Proposed use: Monitoring progress toward achieving sustainability should help program stay on track to achieving it.

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<b>Outputs</b>					
9.	Program graduates	100% of trainees/officers graduate from program(s).	Number and proportion of total trainees who start and complete the training cohort.	Program records	Frequency: As each training cohort is selected and as it graduates.  Proposed use: To track completion rates for regular reporting
10.	Investigations of acute health events	100% of trainees/officers investigate 1 or more acute health events or emergencies as lead (or as per program target).	Provide list/description of all outbreak investigations done by each trainee for which a final report was written. a. By cohort year and trainee indicate the emergency investigations done with a written report. b. For each report indicate whether: - recommendations were made. - presented to peers & supervisors. - presented to appropriate public health decision makers.	Program or student records or program/trainee database	Frequency: The data is best documented regularly at the time investigations are undertaken and reports completed to assure accuracy and allow program to track activities and completion.  Proposed use: To track trainee activities, report on program activities and determine follow-up needs for projects.
11.	Planned studies conducted	100% of trainees/officers conduct a planned study or program target.	Provide list/description of all planned studies done by each trainee with approved protocol (do not include here if it is counted in outbreak investigation list or other project list). a. By cohort year & trainee indicate the planned investigations done with reviewed/approved protocol and completed report. b. For each report indicate whether: - recommendations were made. - presented to peers and supervisors. - presented to appropriate public health decision makers.	Program or student records or program/trainee database	Frequency: The data is best documented regularly at the time investigations and reports are completed to assure accuracy and allow program to track activities and completion.  Proposed use: To track trainee activities, report on program activities and determine follow-up needs for projects.

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12.	Surveillance system data analyzed and used.	100% of trainees/officers have analyzed and used surveillance data or conducted other surveillance project, e.g. Evaluation, database analysis or interpretation	Provide list/description of all surveillance system evaluation or surveillance data analysis projects done by each trainee.  Indicate whether: - recommendations were made. - presented to peers and supervisors. - presented to appropriate public health decision makers.	Program or student records or program/trainee database	Frequency: The data is best documented regularly at the time investigations are undertaken and reports completed to assure accuracy and allow program to track activities and completion.  Proposed use: To track and document trainee activities, report on program activities and determine follow-up needs for projects.
13.	Local/regional dissemination of trainee and program work.	Method(s) exists for local/regional dissemination. E.g. Presence of Epi. Bulletin with trainee/officer or program input.  National or regional meetings where trainee/officers present	a. Identify local publications and role of program. b. Provide list/description of all local (in-country) contributions to publications (epi. bulletins, etc.) by each trainee for last graduated cohort. c. Identify appropriate national/regional meetings and role of program d. Provide list/description of all presentations at local (in-country) and regional conferences by each trainee.	Resident Advisor, Program Director, Program or student records or program/trainee database	Frequency: The data is best documented regularly at the time reports or presentations are completed to assure accuracy and allow program to track activities.  Proposed use: To track and report on trainee and program activities. Can indicate achievement of required competency. The data and recommendations from studies have the potential for being important ingredients in priority-setting and intervention activities thus having and using opportunities for reporting locally is critical.
14.	Presentations to International Scientific Conferences.	100% of trainees/officers present at a scientific conference	Provide list/description of all abstracts submitted and accepted for international scientific conferences by each trainee. Indicate whether the presentation was oral or poster	Program or student records or program/trainee database	Frequency: The data is best documented at the time presentations are made to assure accuracy and allow program to track activities and completion.  Proposed use: To track and report on trainee and program activities. Can indicate achievement of required competency. Helps to build credibility and recognition for trainee and program activities.

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15.	Publications in peer reviewed journals	100% of trainees/officers prepare manuscript for submission to peer reviewed journal	Provide list/description of all manuscripts submitted (indicate if accepted) to peer reviewed journal.	Program or student records or program/trainee database	<p>Frequency: The data is best documented regularly at the time manuscripts are submitted and accepted to assure accuracy and allow program to track activities and completion.</p> <p>Proposed use: to track and report on trainee and program activities. Can indicate achievement of required competency. Helps to build credibility and recognition for trainee and program activities.</p>

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<b>Outcomes</b>					
16.	Strengthened public health workforce	80% of graduates working in national public health system two years after graduation (or program target) and using their training in their job.	Provide job title and position description for each graduate 2 years after graduation (by cohort year).	Resident Advisor, Program Director, MOH counterparts or graduate database	Frequency: Annually  Proposed use: Information justifies the program and indicates success and integration of graduates.
17.	Surveillance system improved/expanded by program/trainees.	Evidence of surveillance program improvement by program/trainees.	Provide examples of substantial improvement in surveillance program secondary to action/recommendations by program and/or trainees.	Resident Advisor, Program Director, MOH counterparts or program/trainee database	Frequency: Annually  Proposed use: To determine that the work conducted by trainees and the program result in information and recommendations that, by themselves or along with other evidence, are used to support improvements in prevention and control programs or policies. It demonstrates the impact of program to stakeholders.
18.	Evidence-based public health action for acute health events improved/expanded by program/trainees.	Evidence of improvement in management and response to acute health events by program/trainees.	Provide examples of improved management of acute health events/emergency investigations.	Resident Advisor, Program Director, MOH counterparts or program/trainee database	Frequency: Annually  Proposed use: To determine that the work conducted by trainees and the program result in information and recommendations that, by themselves or along with other evidence, are used to support improvements in prevention and control programs or policies. It demonstrates the impact of program to stakeholders.



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19.	Evidence-based public health programs/projects started and/or due to graduates/program/trainees.	Evidence of public health programs/projects due to trainees.	Provide evidence of improvement or development of public health programs based on work of program and/or trainees.	Resident Advisor, Program Director, MOH counterparts or program/trainee database	Frequency: Annually  Proposed use: To determine that the work conducted by trainees and the program result in information and recommendations that, by themselves or along with other evidence, are used to support improvements in prevention and control programs or policies. It demonstrates the impact of program to stakeholders.
20.	Evidence-based policies/regulations created or improved due to program/trainees.	Evidence of policies/regulations created or improved by program/trainees.	Provide evidence of creation or improvement in a public health policy or regulation based on work of program and/or trainees.	Resident Advisor, Program Director, MOH counterparts or program/trainee database	Frequency: Annually  Proposed use: To determine that the work conducted by trainees and the program result in information and recommendations that, by themselves or along with other evidence, are used to support improvements in prevention and control programs or policies. It demonstrates the impact of program to stakeholders.
21.	National and/or regional public health professional network of graduates.	Functioning network of graduates	Describe the current network of program graduates.	Resident Advisor, Program Director or MOH counterparts	Frequency: Annually  Proposed use: The network can be used as a resource for epidemiology needs for the country and region. It can also serve as an opportunity for continued professional development of epidemiologists.