



THE PHARMACEUTICAL SOCIETY OF UGANDA

**THE PHARMACY AND DRUGS
(CONTINUING PROFESSIONAL DEVELOPMENT)
(SUPPLEMENTARY) BYELAWS, 2026**

*Approved as the general CPD instrument to be read together with the Pharmacy and Drugs
(Continuing Professional Development Accreditation) Byelaws, 2026.*

A handwritten signature in blue ink, appearing to be "CPD" followed by a flourish.

A handwritten signature in blue ink, appearing to be "L. K. K. K." followed by a flourish.

ARRANGEMENT

PART I — PRELIMINARY	4
1. Citation.....	4
2. Commencement.....	4
3. Application	4
4. Objects	4
5. Interpretation	4
PART II — PROFESSIONAL CPD OBLIGATION	5
6. Duty to undertake CPD	5
7. Annual minimum requirement.....	5
8. CPD cycle and professional development planning.....	5
PART III — RECOGNISED CPD ACTIVITIES AND CREDIT	5
9. Categories of recognised CPD.....	5
10. Activities not ordinarily qualifying.....	6
11. Allocation and recognition of points.....	6
PART IV — EXEMPTION, DEFERMENT AND ALTERNATIVE COMPLIANCE	6
12. Newly registered pharmacists and interns	6
13. Formal study.....	6
14. Exceptional circumstances	7
15. Pharmacists not engaged in pharmacy practice	7
PART V — RECORDS, VERIFICATION AND MONITORING.....	7
16. Individual CPD record	7
17. Verification.....	7
18. Provider records.....	7
PART VI — GOVERNANCE AND ADMINISTRATION.....	8
19. Council authority	8
20. Education and Professional Development Committee	8
21. Technical advice and administration.....	8
PART VII — COMPLIANCE, ENFORCEMENT AND REVIEW	8
22. Compliance for AMC and COP.....	8
23. Non-compliance.....	8
24. False or fraudulent CPD claims	9
25. Administrative review.....	9
PART VIII — MONITORING, QUALITY IMPROVEMENT AND MISCELLANEOUS.....	9
26. Monitoring and evaluation	9
27. Accessibility and inter-professional learning	9
28. Financing and commercial independence.....	10



29. Implementation instruments 10

30. Transitional arrangements 10

SCHEDULE 1 — CPD CREDIT POINT FRAMEWORK 11

SCHEDULE 2 — MINIMUM CPD RECORD 13

SCHEDULE 3 — APPLICATION FOR DEFERMENT, REDUCTION OR ALTERNATIVE COMPLIANCE.... 13

PROPOSED COUNCIL RESOLUTION 14

Council approval and execution 14



THE PHARMACY AND DRUGS (CONTINUING PROFESSIONAL DEVELOPMENT) (SUPPLEMENTARY) BYELAWS, 2026

(Under sections 22(1), 22(2)(f) and 22(3)(a) of the Pharmacy and Drugs Act, Cap. 309)

PART I — PRELIMINARY

1. Citation

(1) These Byelaws may be cited as the Pharmacy and Drugs (Continuing Professional Development) (Supplementary) Byelaws, 2026.

2. Commencement

(1) These Byelaws shall come into force on the date approved by Council or on such later date as Council may appoint.

3. Application

(1) These Byelaws apply to every pharmacist who is a member of the Pharmaceutical Society of Uganda and to an intern pharmacist to the extent expressly provided.

(2) They shall be read together with the Pharmacy and Drugs (Continuing Professional Development Accreditation) Byelaws, 2026.

(3) Where an activity or provider requires accreditation, no credit shall be recognised unless the applicable accreditation requirements have been satisfied.

4. Objects

(1) to maintain and enhance the professional competence, ethical practice and continuing fitness to practise of pharmacists;

(2) to establish transparent and auditable minimum CPD requirements;

(3) to recognise diverse forms of relevant professional learning while maintaining quality and integrity;

(4) to link CPD compliance to annual professional practice requirements in a fair and proportionate manner; and

(5) to provide a framework for recording, verification, monitoring, review and enforcement of CPD obligations.

5. Interpretation

(1) In these Byelaws, unless the context otherwise requires— “AMC” means Annual Membership Certificate; “COP” means Certificate of Practice; “Council” means the Council of the Pharmaceutical Society of Uganda; “CPD” means the continuous process by which a pharmacist maintains, develops and broadens knowledge, skills, professional judgment, ethical competence and performance throughout his or her career; “CPD credit point” means a unit recognised by Council as evidence of qualifying CPD; “CPD year” means the calendar year unless Council prescribes another annual cycle; “recognised CPD activity” means an activity qualifying for credit under these Byelaws and, where applicable, accredited under the companion Accreditation Byelaws; and “Secretary” means the Secretary of the Pharmaceutical Society of Uganda.



PART II — PROFESSIONAL CPD OBLIGATION

6. Duty to undertake CPD

- (1) Every pharmacist engaged in pharmacy practice shall undertake CPD as a continuing professional obligation.
- (2) A pharmacist shall identify learning needs, undertake appropriate learning, maintain evidence of participation or achievement, and reflect where appropriate on the relevance of learning to professional practice.
- (3) CPD shall be relevant to pharmacy practice, professional responsibilities, patient or public safety, health systems, leadership, ethics, regulation, research, education, innovation or another area approved by Council.

7. Annual minimum requirement

- (1) Subject to these Byelaws, a pharmacist shall accumulate at least forty (40) CPD credit points in each CPD year.
- (2) At least five (5) of the forty (40) points shall relate to professional ethics, law, regulation, patient safety, professional accountability or another ethics-related area approved by Council.
- (3) No more than eighty per cent (80%) of the annual minimum may ordinarily be obtained from a single category of activity, unless Council determines that the nature of a formal programme or other exceptional learning justifies otherwise.
- (4) Points in excess of the annual minimum shall not ordinarily be carried forward to the following CPD year, but may be recognised for awards or professional recognition.
- (5) Council may, by a published schedule, revise the annual point requirement or category caps prospectively, provided that no revision takes effect during a CPD year without reasonable notice to members.

8. CPD cycle and professional development planning

- (1) A pharmacist should, where practicable, follow a cycle of identifying learning needs, planning learning, undertaking learning and evaluating its effect on practice.
- (2) Failure to document every stage of the cycle shall not invalidate genuine learning where the pharmacist provides sufficient evidence that the activity qualifies for CPD.

PART III — RECOGNISED CPD ACTIVITIES AND CREDIT

9. Categories of recognised CPD

- (1) Council may recognise CPD arising from— (a) accredited conferences, seminars, workshops, symposia and scientific meetings; (b) accredited lectures, webinars and other structured online learning; (c) self-directed learning supported by verifiable evidence; (d) mentorship, supervision and structured workplace learning; (e) research, peer-reviewed publication and scholarly review; (f) development of professional guidelines, modules, training materials or other professional resources; (g) formal postgraduate or other relevant education; (h) professional presentations and facilitation; (i) innovations or quality-improvement initiatives relevant to pharmacy practice; (j) participation in



technical or professional work assigned or recognised by Council; and (k) any other learning activity approved by Council.

(2) An activity shall not qualify merely because a pharmacist attended it; the activity must have a demonstrable professional-development purpose and satisfy any evidence or accreditation requirement prescribed by Council.

10. Activities not ordinarily qualifying

(1) Routine activities performed solely as part of a pharmacist's ordinary job description shall not, without an identifiable additional learning component, qualify for CPD credit.

(2) Purely commercial or promotional meetings, routine administrative meetings, ordinary ward rounds, social events, tours or exhibitions without a structured learning component, and unverifiable activities shall not qualify.

(3) Council may recognise an activity falling within subrule (1) where the pharmacist demonstrates a distinct structured learning, innovation, reflective, research or quality-improvement component beyond ordinary duties.

11. Allocation and recognition of points

(1) CPD credit shall be allocated in accordance with Schedule 1 or a Council-approved schedule consistent with these Byelaws.

(2) Where an activity is not listed in the Schedule, the committee designated by Council may assess its learning intensity, duration, evidence, relevance and outcome and recommend an appropriate credit value to Council.

(3) No pharmacist shall claim the same learning event more than once merely because the same presentation, recording or content was repeated.

(4) Council may require assessment, reflection, evidence of completion or other verification before points are recognised.

PART IV — EXEMPTION, DEFERMENT AND ALTERNATIVE COMPLIANCE

12. Newly registered pharmacists and interns

(1) A pharmacist first registered during a CPD year may be exempted from the annual minimum for that year or required to meet a proportionate requirement determined by Council.

(2) An intern pharmacist shall undertake any CPD programme specifically prescribed by Council for internship or entry to membership, but shall not be required to satisfy the full annual minimum applicable to practising pharmacists unless Council expressly provides otherwise.

13. Formal study

(1) A pharmacist undertaking a relevant full-time formal programme of at least six months may apply for recognition of the programme in satisfaction of the annual CPD requirement.

(2) Council may recognise completion or satisfactory progression in a relevant programme as satisfying all or part of the annual requirement, subject to evidence of enrolment, participation and achievement.

(3) Formal study shall not automatically exempt a pharmacist from any ethics, law, patient-safety or other mandatory topic that Council expressly requires for all practising pharmacists.



14. Exceptional circumstances

(1) A pharmacist who is unable to comply fully because of serious illness, disability, parental or caregiving circumstances, prolonged absence from practice, humanitarian emergency or another exceptional circumstance may apply to Council for deferment, reduction, alternative compliance or exemption.

(2) Council shall determine each application on its merits, having regard to fairness, the duration and effect of the circumstance, whether the pharmacist is actively practising, and the need to protect the public.

(3) An exemption from CPD shall not by itself establish competence or entitlement to practise where another legal requirement must be satisfied.

15. Pharmacists not engaged in pharmacy practice

(1) A pharmacist who is not engaged in pharmacy practice and does not seek a COP for the relevant period may apply for exemption from the annual CPD requirement.

(2) Before returning to practice, Council may require evidence of recent CPD, a return-to-practice programme, supervised practice, assessment or another measure reasonably necessary to demonstrate current competence.

PART V — RECORDS, VERIFICATION AND MONITORING

16. Individual CPD record

(1) Every pharmacist shall maintain an accurate CPD record in the form or electronic system approved by Council.

(2) The record shall identify the activity, date, provider or source, credit claimed, evidence relied upon and any other particulars prescribed by Council.

(3) A pharmacist shall retain supporting evidence for at least three years after the end of the CPD year to which it relates, or for a longer period prescribed by Council.

17. Verification

(1) Council may verify any CPD claim and may require a pharmacist to produce certificates, attendance records, assessments, publications, reflective records, confirmations from providers or other evidence.

(2) Council may undertake risk-based or random compliance audits and may prescribe the proportion of members to be audited in a particular year.

(3) A pharmacist selected for audit shall provide the requested evidence within fourteen (14) days or such longer period as Council permits for reasonable cause.

18. Provider records

(1) Records supplied by accredited CPD providers shall be treated as supporting evidence but shall not prevent Council from independently verifying a pharmacist's claim.

(2) Provider obligations concerning attendance, certificates, records and credit particulars are governed by the companion Continuing Professional Development Accreditation Byelaws, 2026.

PART VI — GOVERNANCE AND ADMINISTRATION

19. Council authority

- (1) Council has overall responsibility for the regulation, administration and oversight of CPD.
- (2) Council shall approve the annual CPD requirements, categories and point schedules, determine exemptions and material compliance decisions, and exercise any power affecting a pharmacist's eligibility for AMC or COP.
- (3) Council may act through a committee, panel, officer or Secretariat for administrative, technical, verification and recommendation functions, but no delegation shall permit the waiver of a mandatory requirement contrary to these Byelaws.

20. Education and Professional Development Committee

- (1) The Education and Professional Development Committee shall support Council in identifying learning needs, developing CPD strategy, promoting professional development and coordinating Council-sponsored CPD.
- (2) Where the Committee or another PSU organ provides CPD, the activity shall be subject to the same applicable quality, conflict-of-interest, documentation and accreditation standards as comparable external activities.

21. Technical advice and administration

- (1) Council may designate a CPD technical committee or panel to advise on point allocation, exemptions, compliance, audits, appeals and other technical matters.
- (2) The Secretariat shall maintain the CPD register or electronic system, receive records and applications, communicate decisions and undertake other administrative functions assigned by Council.
- (3) A committee, panel or officer exercising a function under this rule shall disclose and manage conflicts of interest and shall not determine a matter in which that person has a material personal or institutional interest.

PART VII — COMPLIANCE, ENFORCEMENT AND REVIEW

22. Compliance for AMC and COP

- (1) Compliance with the applicable CPD requirement shall be taken into account in the issuance or renewal of AMC and COP to the extent authorised by the Pharmacy and Drugs Act and other applicable law.
- (2) Before an adverse decision is made solely or materially on the basis of CPD non-compliance, the pharmacist shall be notified of the deficiency and given a reasonable opportunity to provide evidence, correct an administrative error or make representations.
- (3) Where the deficiency is capable of remedy without compromising public protection, Council may permit remedial CPD within a specified period.

23. Non-compliance

- (1) Where Council determines that a pharmacist has failed to comply with these Byelaws, it may, according to the seriousness and circumstances of the failure— (a) issue a compliance direction; (b)



require remedial CPD; (c) require additional verification or audit; (d) defer consideration of AMC or COP pending compliance where lawful; or (e) refer conduct raising an ethical or disciplinary issue to the appropriate body under applicable law.

(2) A sanction or referral shall be proportionate, reasoned and subject to applicable procedural fairness requirements.

(3) Administrative non-compliance shall not automatically be treated as professional misconduct.

24. False or fraudulent CPD claims

(1) A pharmacist shall not knowingly submit false, altered, duplicated or misleading evidence for CPD credit.

(2) Where there is a reasonable basis to suspect falsification or fraud, Council may place the affected credit on hold pending verification and shall give the pharmacist an opportunity to respond before making an adverse finding.

(3) Confirmed falsification may result in cancellation of the affected points, compliance action and referral for disciplinary consideration under applicable law.

25. Administrative review

(1) A pharmacist aggrieved by a material CPD compliance decision may request administrative review by Council within thirty (30) days after notification of the decision.

(2) A review may be based on material procedural error, failure to consider relevant evidence, factual or identity error, or new authoritative evidence that could not reasonably have been provided earlier.

(3) A review shall not be used to waive a mandatory requirement merely because compliance would be inconvenient.

PART VIII — MONITORING, QUALITY IMPROVEMENT AND MISCELLANEOUS

26. Monitoring and evaluation

(1) Council shall periodically evaluate the CPD system, including member compliance, accessibility, relevance, quality, distribution of learning opportunities and contribution to professional practice and patient safety.

(2) Council may publish periodic reports or aggregated statistics, provided that personal data and confidential information are protected in accordance with applicable law.

(3) Council shall periodically review the CPD point schedule and implementation arrangements in light of evidence, member experience and developments in pharmacy practice.

27. Accessibility and inter-professional learning

(1) Council shall promote reasonable access to CPD for pharmacists in rural, public-sector and resource-limited settings and shall recognise appropriate in-person, online, blended, workplace and self-directed learning modalities.

(2) Relevant inter-professional learning may qualify for CPD where it contributes to a pharmacist's competence or professional responsibilities.

28. Financing and commercial independence

- (1) CPD may be supported by Council, providers, employers, participants, sponsors or partners through transparent arrangements.
- (2) Funding shall not compromise the independence, scientific integrity or educational purpose of CPD.
- (3) Accreditation fees, participation fees and other charges may be prescribed by Council in accordance with applicable law and policy.

29. Implementation instruments

- (1) Council may approve forms, checklists, standard operating procedures, electronic processes, evidence requirements, point schedules and administrative guidance necessary to implement these Byelaws.
- (2) An implementation instrument shall be consistent with these Byelaws and the Continuing Professional Development Accreditation Byelaws, 2026, and shall not waive, dilute or contradict a mandatory requirement.

30. Transitional arrangements

- (1) Council may prescribe transitional arrangements for the first CPD year following commencement, including recognition of points already lawfully earned under an existing PSU CPD system.
- (2) No person shall lose credit for a genuine activity completed before commencement solely because these Byelaws introduce a different administrative form, provided that the activity was recognised under the system then in force and can be verified.

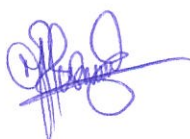


SCHEDULE 1 — CPD CREDIT POINT FRAMEWORK

The following schedule rationalises the activity categories contained in the Working Draft Guidelines. Council may amend the schedule prospectively under rule 7(5) and rule 29.

Activity	Evidence	Credit
Attendance at accredited workshop, seminar, conference, symposium or scientific congress	Certificate/verified attendance	2 points per day; max 10 per event; max 20/year
Attendance at accredited PSU or other recognised structured CPD session	Certificate/verified attendance	Up to 3 points per activity, according to approved accreditation
Ethics, law, regulation, patient safety or professional accountability session	Certificate/verified attendance	As accredited; at least 5 points required annually
Presentation/facilitation at scientific or professional learning activity	Attestation/programme	3 points local; 5 points international; max 20/year
Mentorship/supervision with structured learning component	Attestation and brief record	Up to 5 points per trainee; max 10/year
Self-directed structured learning	Completion evidence/reflection	Up to 5 points per verified activity; max 10/year
Development of professional guideline, module or substantial training material	Evidence of contribution and final material	5 points per substantial output; max 10/year
Peer-reviewed research publication/book chapter	Published output	10 points per output; max 20/year
Peer review of scientific paper, book, conference paper or research protocol	Request/confirmation of completed review	5 points per completed review; max 15/year
Relevant postgraduate diploma, fellowship, Masters or PhD programme	Official enrolment/progression/completion evidence	Up to 40 points for the relevant CPD year, subject to rule 13
Relevant formal course of six months or more	Official completion/progression evidence	Up to 40 points for the relevant CPD year, subject to rule 13
Innovation or quality-improvement initiative relevant to pharmacy practice	Documented initiative and evidence of implementation/presentation	Up to 15 points per initiative; max 30/year
Participation in Council-assigned technical working group or professional	Appointment/invitation and evidence of participation	5 points/year

committee involving substantive professional work		
Structured on-the-job training beyond routine duties	Attestation and learning record	Up to 5 points per programme; max 10/year
Relevant accredited webinar or online learning	Electronic completion/attendance record	As accredited; subject to annual category cap
Other activity approved by Council	Evidence prescribed by Council	Points determined on learning intensity, duration, relevance and outcome




SCHEDULE 2 — MINIMUM CPD RECORD

- Name and PSU registration/membership number.
- CPD year.
- Date and title of activity.
- Provider or source of learning.
- Mode of delivery and duration.
- Accreditation/activity reference number, where applicable.
- Category of activity.
- CPD points claimed and points verified.
- Evidence relied upon.
- Brief statement of relevance or learning outcome where required.
- Verification status and date.
- Any audit, correction, deferment or Council decision affecting the entry.

SCHEDULE 3 — APPLICATION FOR DEFERMENT, REDUCTION OR ALTERNATIVE COMPLIANCE

An application should state the CPD year concerned; the relief sought; the circumstances relied upon; the period affected; whether the applicant was actively practising; supporting evidence; CPD already completed; and any proposed alternative or remedial learning. Council may request additional information reasonably necessary to determine the application.



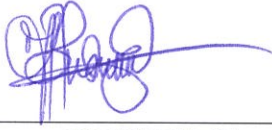
COUNCIL RESOLUTION

RESOLVED THAT the Council approves the Pharmacy and Drugs (Continuing Professional Development) Byelaws, 2026, together with the Pharmacy and Drugs (Continuing Professional Development Accreditation) Byelaws, 2026, subject to amendments agreed at the meeting and completion of any formalities required by the Pharmacy and Drugs Act and other applicable law.

FURTHER RESOLVED THAT the Education and Professional Development Committee, Standards and Compliance Committee and Secretariat are authorised, within their respective mandates, to incorporate amendments approved by Council and prepare the final implementation schedules, forms and electronic processes, provided that no implementation instrument alters or waives a mandatory requirement of the Byelaws.

Council approval and execution

Approved by the Council of the Pharmaceutical Society of Uganda at its 127th Ordinary Council meeting held at the Pharmacy House Kampala on the __4th__ day of __September__ 2026.



PRESIDENT
Pharmaceutical Society of Uganda



SECRETARY
Pharmaceutical Society of Uganda

