

Table 1 List of recommendations for transforming and scaling up the education of health professionals and training based on quality of evidence and strength of recommendation (after WHO) (1)

Key area	Recommendation	Quality of supporting evidence ^a	Strength ^b
Faculty development	1. HPETI should consider designing and implementing continuous professional development programmes for faculty and teaching staff relevant to the evolving health care needs of their communities.	Moderate	Conditional
	2. Governments, funders and accrediting bodies should consider supporting mandatory FDPs that are relevant to the evolving health care needs of their communities	Low	Conditional
	3. HPETI should consider innovative expansion of faculty, through the recruitment of community-based clinicians and health workers as educators	Low	Conditional
Curriculum Development	4. HPETI should consider adapting curricula to the evolving health care needs of their communities.	Low	Conditional
Simulation methods	5. HPETI should use simulation methods (high fidelity methods in settings with appropriate resources and lower fidelity methods in resource limited settings) of contextually appropriate fidelity levels in the education of health professionals.	Moderate	Strong
Direct entry of graduate	6. HPETI should consider direct entry of graduates from relevant undergraduate, postgraduate or other educational programmes into different or other levels of professional studies	Moderate	Conditional
Admission procedures	7. HPETI should consider using targeted admissions policies to increase the socioeconomic, ethnic and geographical diversity of students.	Low	Conditional
Streamlined educational pathways and ladder programmes	8. HPETI should consider using streamlined educational pathways, or ladder programmes, for the advancement of practising health professionals	Low	Conditional
Inter-professional education	9. HPETI should consider implementing inter-professional education in both undergraduate and postgraduate programmes.	Low	Conditional
Accreditation	10. National governments should introduce accreditation of health professionals' education where it does not exist, and strengthen it where it does exist.	Low	Strong
Continuous professional development	11. HPETI should consider implementing continuous professional development and in-service training of HPs relevant to the evolving health care needs of their communities.	Moderate	Conditional
Governance and planning	12. Government at the highest level should demonstrate political commitment for HPETI. Formal collaboration and shared accountability between the Ministry of Health, the Ministry of Education, and other related ministries. A national plan to produce and retain graduates informed by the needs and absorptive capacity of the labour market, and aligned with the national creation or strengthening of national or sub-national institutions, capacities or mechanisms to support transforming and scaling up health professionals' education and training.	-	-

HPETI = health professionals' education and training institutions.

^aWHO followed the GRADE system, which categorized the quality of evidence as high, moderate, low and very low (based on nature of study design, potential bias, imprecision data, ethical issues, inconsistency of results, dubious publication, dose response, confounders, etc.).

^bThe strength of the recommendation echoes the degree to which the Guideline Development Group was positive that the anticipated benefits were greater than the potential risks.