



FINAL DOCUMENT

CONTINUING PROFESSIONAL DEVELOPMENT

GUIDELINES FOR THE HEALTH PROFESSIONS

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GLOSSARY

Accreditor/s is a group or institution that meets the criteria set out by the CPD Committee. The role of the Accreditor is to review applications for provision of Level 1 CPD activities by non-accredited service providers according to the requirements for service providers and CPD activities; to monitor these activities; and to revise continuing education units (CEUs) allocated where the provider failed to comply with the rules and regulations of the CPD guidelines. Professional Boards may delegate their responsibility of accrediting service providers to Accreditors with the mutual agreement of the Accreditor.

Attendance register is the record of attendees at any form of learning activity in levels 1 and 3 (where relevant), reflecting the names and HPCSA registration number of those present and their signatures on completion of the activity (once off, at the end of the activity; regularly recurring, on completion of the series). This register must be held by the presenting organisation or institution for 3 years following the activity; the original register may be called in for validation of a compliance check.

Compliance checks of individual practitioners take place at least twice a year on a randomly selected sample of practitioners from every register. The CPD Department of Council conducts the checks. Practitioners submit the information requested by that Department within 21 days of receipt of notification of the compliance draw.

Continuing Education Units (CEUs) the value attached to a learning activity for Continuing Professional Development.

Continuing Professional Development

In terms of Section 26 of the Health Professions Act, 1974 (Act No. 56 of 1974) the Council may from time to time make rules which prescribe-

- (a) conditions relating to continuing education and training to be undergone by persons registered in terms of this Act in order to retain such registration;
- (b) the nature and extent of continuing education and training to be undergone by persons registered in terms of this Act; and
- (c) the criteria for recognition by the council of continuing education and training courses and education institutions offering such courses.

HPCSA CPD Committee is made up of representatives from each Professional Board and works with the Professional Boards to develop policy proposals for Continuing Professional Development. The Committee is accountable to Council.

CPD Division of the Registrations Department of the Council administers and monitors the entire CPD process.

Criteria and guidelines for Accreditors sets out the criteria and the process to be followed for the review, approval and accreditation of Level 1 activities offered by non-accredited Service Providers (organisation and/or individuals), as well as the procedures for recordkeeping.

Criteria and guidelines for Service Providers sets out the criteria and requirements for Accredited Service Providers as well as the learning activities and their CEUs at each level of the hierarchy together with the process to be followed to publicise, present and record the activities.

Deferment is formal permission from the CPD Committee to defer a practitioner from CPD requirements for a period of time, reasonably determined by the Committee in response to an application. There are conditions for re-entry into practice and CPD.

HPCSA Individual CPD Activity Record is the document held by individual health practitioners as a record of every learning activity attended or completed. It should be accompanied by the Attendance Certificates for each event or series of events. For level 3 qualifications, a certified copy of the qualification is required. The record must be regularly updated and current. In the event that a practitioner's name is drawn in the compliance check the original Individual CPD Activity Record for the previous 3 years, together with the original attendance certificates and certified copies of qualifications that may have been obtained during this period, must be sent to the CPD Department of Council within 21 days of receipt of notification of the draw.

Learning activity/ies are the 3 levels of activities, those with non measurable outcomes, those with measurable outcomes and those associated with formally structured learning programmes that are eligible for accreditation for CPD and from which Continuing Education Units are obtained.

National Accreditors Forum is the structure for the regular meeting of Accreditors at which policy and issues of common concern are discussed. Feedback is to the CPD Committee of Council.

Non-compliance is the failure of an individual to obtain 30 CEUs and maintain a balance of 60 CEUs in a 24 month period. There are various penalty options; these are applied as appropriate by individual Professional Boards in collaboration with the HPCSA CPD Committee.

Restoration after erasure takes place according to conditions that vary, depending upon the duration of the erasure. The CPD Committee considers the application and may consult a Professional Board if necessary; the Manager of the CPD Department attends to the technical aspects of restorations to the register once these have been approved.

Service Provider/s are the accredited institutions, professional associations or formally constituted professional interest groups, that present learning activities for Continuing Professional Development.

PREAMBLE

Ethical practice of the health professions requires consistent and ongoing commitment from all concerned to update and develop the knowledge, skills and ethical attitudes that underpin competent practice. This perspective protects the public interest and promotes the health of all members of the South African society.

Guided by the principle of **beneficence** health professionals aspire to standards of excellence in health care provision and delivery. The Health Professions Act, 1974 (Act No. 56 of 1974) endorses Continuing Professional Development (CPD) as the means for maintaining and updating professional competence and for ensuring that the public interest will always be promoted and protected or ensuring the best possible service to the community. CPD should address the emerging health needs and be relevant to the health priorities of the country.

In this spirit of dedication to best practice and a desire to act and serve wisely and well, the following Guidelines for Continuing Professional Development through continuing education activities is presented for all health professionals who are registered with the Health Professions Council of South Africa. The hierarchy of activities set out herein should be viewed from a developmental perspective: learning is structured in a hierarchy from traditional learning experiences such as conference presentations and workshops through to structured courses and quality assurance audits of practices or groups of professionals in their work environments. This should encourage CPD providers to offer CPD activities that will meet the goal of continuing education: the acquisition and maintenance of new, current knowledge, relevant professional skills and ethical professional attitudes with an end benefit to the patient/client.

The system rests on a foundation of trust. The HPCSA believes that health professionals will commit themselves to meeting the requirement for continuing education in the belief that both they and their patients/clients will reap the benefits of ongoing learning, personal and professional development. The proposals for CPD are consistent with the philosophy of life long learning and build on adult education principles.

1. INTRODUCTION

The purpose of CPD is to assist practitioners to maintain and acquire new and updated levels of knowledge, skills and ethical attitudes that will be of measurable benefit in professional practice and enhance and promote professional integrity. The beneficiary will ultimately be the patient/client. All registered health professionals are required to complete a series of accredited continuing education activities each year. The activities are clustered together to represent a hierarchy of learning approaches and strategies. Health professionals should select activities from the hierarchy to meet their particular needs or the demands of their practice environments. It is anticipated that the system will also address the unique South African environment by providing a range of activities that will be readily accessible to all.

The **Council's CPD Committee** works with Professional Boards to develop policy proposals for a uniform but flexible system of CPD that will accommodate the diversity amongst health professions; facilitate continuing assessment of all practitioners registered with the HPCSA and the Professional Boards; deal with all CPD related issues, within the existing policy parameters of Council and the Professional Boards; and report thereon to Council and the Professional Boards. All Professional Boards will approve and appoint Accreditors. Professional Boards may designate the function of approving applications for accredited Service Providers to its Accrerator/s.

In terms of Section 26 of the Health Professions Act, 1974 (Act No. 56 of 1974) the Council may from time to time make rules which prescribe-

- (d) conditions relating to continuing education and training to be undergone by persons registered in terms of this Act in order to retain such registration;
- (e) the nature and extent of continuing education and training to be undergone by persons registered in terms of this Act; and
- (f) the criteria for recognition by the council of continuing education and training courses and education institutions offering such courses.

2. GENERAL

- The CPD system will be administered and monitored by the **CPD division of the Registrations Department** of the Council.
- There will be one National Accreditors' Forum with representation from each Professional Board's accreditors.
- A generic set of Guidelines for Accreditors will be developed by the CPD Committee in consultation with Accreditors. This will enable the Accreditors to fulfil their mandate easily and speedily and will standardise the process of accreditation.
- **Existing Accreditors** who have already been approved by a Professional Board will continue to function. New accreditors should apply to the relevant Professional Boards for registration as an Accrerator.

- The implementation of CPD will be delivered through a system of **approved accredited Service Providers** who will present activity/activities throughout the year.
- A generic set of Guidelines for Service Providers will be developed by the CPD Committee in consultation with Accreditors, Service Providers and Professional Boards and these will include criteria for accreditation as a Service Provider.
- **Service Providers** should apply to a Professional Board or its designated functionary to be formally accredited according to the criteria and guidelines determined by the CPD Committee. Accredited Service Providers will be allocated a Service Provider specific identification number linked to the relevant profession.
- **Activities** or events will mainly be presented by accredited Service Providers.
- **Individual practitioners** shall attend CPD activities in order to comply with the statutory requirements as determined by the Council. They shall keep a record of their attendance at CPD activities. Health practitioners are encouraged to give feedback to accreditors and providers regarding the quality of the activities presented by the Accredited Service Providers.
- **Professional Boards** will ensure that high standards are set and maintained for their Accreditors and accredited Service Providers. A Professional Board or designated functionary will be responsible for conducting quality checks on the activities the Service Providers present to their respective practitioners from time to time while the CPD Committee shall consult with representatives from the National Accreditors Forum on matters of policy and quality assurance.

3. PROCESS

A departure from the old system will be the accreditation of Service Providers rather than the accreditation of every activity except for activities in level 1. This means that it will no longer be necessary to accredit every activity. Activities will be presented by accredited Service Providers who will also, under the new system no longer be required to submit any attendance data electronically to the HPCSA. Individual health professionals will retain certificates of attendance from the accredited Service Providers and keep a record of activities attended and Continuing Education Units (CEUs) accrued. When an individual or organisation, not accredited as a Service Provider, wishes to present a single Level 1 activity she/it may apply to an approved Accreditor for accreditation of that activity. This new approach will have the positive effect of enhancing the efficiency of CPD delivery and administration.

Application for accreditation as a Service Provider

Service Providers shall submit an application for accreditation on the relevant application form. The Guidelines for Service Providers set out all of the information and documentation that should accompany the application. Applications should be accompanied by the relevant fee. The National Accreditors Forum shall together with the CPD Committee recommend the scale of fees for the accreditation process.

The Service Provider will be allocated a profession specific identification number. This number should appear on all of the accredited Service Provider's documentation. (In those instances where there is a specific need for an individual activity to be accredited an activity number will be provided by the accreditor).

Presentation of an activity by a Service Provider

An accredited Service Provider will publicise the proposed activity/ies together with its CEUs. The activity will take place as advertised. Service Providers shall hold an attendance record that reflects attendance at a full event or a complete activity. Following the CPD activity Service Providers shall issue an attendance certificate to all practitioners who attended the activity containing:

- the name and number of the accredited Service Provider or individual activity accreditation number;
- the topic of the activity;
- the level of the activity;
- the number of CEUs for that activity;
- the attendance/completion date; and
- the name and HPCSA registration number of the attendee.

Service Providers shall provide certificates to attendees on completion of the activity or event or a series of events. If these are not available on the day/on completion of the activity or event they should be sent to attendees within one month. (Note: in those instances where a practitioner completes a structured learning programme for degree or certification purposes, the practitioner is obviously constrained by the administrative process of the providing institution regarding the time delay between completion and formal recognition of the programme; the Accreditor will take this into consideration).

Service Providers shall keep a record of attendance at their continuing professional development activities and shall retain these **for a period of three years after the activity**. These may be required for a compliance check.

The HPCSA **Registrations Department (CPD Division)** will conduct compliance checks of individual health professionals at least twice a year on a randomly selected sample of practitioners. The result of this compliance check will be sent to the Professional Boards for action as set out in paragraph 7 of this document.

Individual health professionals shall ensure that they are in possession of the standard certificate of attendance for every activity they have attended. They shall keep these for at least two years so that their certificates will be available if required for a random compliance check.

Individual CPD Activity Record

In future every practitioner shall maintain an official **HPCSA Individual CPD Activity Record** which shall include the following:

- The name and registration number of the practitioner;

- The name and number of the Accredited Service Provider or individual activity accreditation number;
- The topic of the activity;
- The level of the activity;
- The number of CEUs; and
- The attendance/completion date.

This record is the only data collection required by individual practitioners. It should be duly completed so that it accurately reflects a health professional's CPD activities for the previous 24 months. This is the record that will be called in for a compliance check should the practitioner be drawn in the audit sample.

When an individual is drawn in the audit, that professional may submit the data in one of the following three ways:

- A paper copy of the Excel spreadsheet that records his/her Individual CPD Activity Record (submitted by post to the CPD Division at HPCSA at P O Box 205, PRETORIA);
- Electronic copy of the Excel spreadsheet that records his/her Individual CPD Activity Record (submitted electronically to the CPD Division at HPCSA at helenad@hpcsa.co.za);
- An Electronic copy of the Excel spreadsheet that has been captured and held by arrangement between the professional and a relevant individual or business (submitted electronically to the CPD Division at HPCSA at helenad@hpcsa.co.za).

Health professionals who are non-compliant will automatically be included in the following audit call.

4. CONTINUING EDUCATION UNITS (CEUs)

The following principle applies: Every registered practitioner will be required to accumulate **30 CEUs** per 12 month period. Accrued CEUs for CPD activities will be valid for a period of 24 months hence the required maximum number of CEUs to cover this period will be 60. The purpose of the new approach to CPD is to **reach and MAINTAIN** a level of 60 CEUs at all times and **in any level**. The system operates on a trust basis. Where applicable, Professional Boards will determine the CEUs required of practitioners who are on the assistant or supplementary registers. CEUs are linked to a hierarchy of learning activities based on whether the outcome is measurable or not, or is a structured learning programme.

The CEUs will be valid (have a 'shelf life') for 24 months from the date that the activity took place or ended (in the event of post graduate studies). The implication of this decision is that practitioners should aim to accumulate a balance of 60 CEUs by the end of the second year and thereafter top up the balance as the 'sell by date' (24 month validity period) expires.

CEUs accumulated during the 24 months prior to the implementation date of the new CPD system may be credited with proof of certification. In addition, in order to facilitate the implementation of the new system, all practitioners will be given a starting balance of 30 CEUs (or a pro rata allocation for practitioners who are on the assistant or supplementary registers).

In those instances where practitioners are registered in two professions they are required to obtain **30 CEUs per profession per 12 month period**. Practitioners registered in more than one

category **within the same Professional Board** should accrue only 30 CEUs per 12 month period. Any person who registers for the first time as a health professional after 1st January of a particular year will commence with his or her CPD programme immediately. CPD is not compulsory for new graduates serving their Intern and Community Service years, however, they are encouraged to attend and may accrue the associated CEUs. Health administrators who are not in clinical practice are required to comply with CPD requirements.

At least twice per year a random sample audit will be undertaken by the CPD Section of the Department: CPD, Registrations and Records to check compliance. The percentage drawn for the sample will depend on the size of the registers. Practitioners will be obliged to submit the required documents within 21 working days of the date of the audit call.

5. HIERARCHY OF LEARNING ACTIVITIES

Qualification and certification as a professional health care service provider does not guarantee that an individual's proficiency will be maintained for the rest of his/her professional life. There are two primary reasons for this. Firstly the acquisition of new knowledge and skills for any health related field is advancing constantly and this new knowledge is not easily communicated to practitioners. Secondly the information acquired by health professional as students becomes obsolete at some point in future. Continuing professional development therefore provides the vehicle for practitioners to acquire new knowledge and skills as well as maintain a core level of competence in their field.

There are 3 levels of activities, those with non measurable outcomes, those with measurable outcomes and those associated with formally structured learning programmes. **A Practitioner may obtain all of the CEUs in one level or the number of CEUs across different levels depending on personal circumstances and individual learning needs.**

Level 1

These are activities that do not have a clearly measurable outcome and are presented on a once-off non-continuous basis:

These activities do not have a clearly measurable outcome. CEUs are allocated according to time, 1 CEU per hour to a maximum of 8 CEUs per day.

When an event is presented by a non-accredited organisation or individual, the application for accreditation of the single event/activity is submitted to an Accreditor for approval and allocation of an activity number.

These activities include:

Small groups

- Breakfast meetings or presentations;
- Formally arranged hospital or inter-departmental meetings or updates;
- Case study discussions;
- Formally organised special purpose teaching/learning ward rounds (not including the routine daily ward rounds and teaching ward rounds);
- Formally organised special purpose lectures that are not part of a business meeting;
- Mentoring and supervision activities that is specific to certain professions eg. psychology;

Large groups

- Conferences, symposia, refresher courses, short courses without a measurable outcome

Level 2

Education, Training, Research and Publications.

This includes activities that have an outcome but do not constitute a full year of earned CEUs. (Teaching to under-graduate and post-graduate students, and examining, will not be accredited if these activities fall within a registered professional's job description).

- Principal author of a peer reviewed publication or chapter in a book (15 CEUs)
- Co-author of a peer reviewed publication or chapter in a book (5 CEUs);
- Review of an article/chapter in a book (3 CEUs per item)
- All presenters/authors of a paper/poster at a congress/refresher course (10 CEUs)
- All presenters of accredited short courses (10 CEUs);
- Interactive skills workshop with an evaluation of the outcome (10 CEUs per presenter, 5 CEUs per participant)
- Multiple Choice Questionnaires (MCQ) in journals, including electronic journals with a pass rate of 70% (3 CEUs per questionnaire);
- Keynote speaker at an accredited conference (3 CEUs per conference);
- Guest/occasional lecturer at an accredited institution (3 CEUs per lecture);
- Personnel appointed to public sector posts (health and education) and who supervise under-graduate clinical/technical training at an accredited institution on a regular basis during the academic year (if not in the job description) (2 CEUs per student up to a maximum of 16 CEUs per calendar year);
- External examiner of Master and Doctoral theses on completion (5 CEUs per thesis);
- Dedicated workshops, lectures, seminars on ethics (not including general presentations with a so-called component on ethics) (3 CEUs per activity) ;
- Single modules of Masters degrees with part-time enrolment for study (5 CEUs on completion of the module).

Professional Interest Groups (including Journal Clubs) that are formally constituted and present a regularly recurring programme that extends for one year with a minimum of 6 meetings per year. (3 CEUs per meeting). These activities have a measurable outcome that is assessed according to criteria determined by the group.

Level 3

Structured learning (by which is understood a formal programme that is planned and recorded, presented by an accredited training institution, evaluated by an accredited assessor, with a measurable outcome).

This category will earn the required CEUs for a year i.e. 30. Units earned from degrees will be valid for a 2 year period, thus valid for 48 months.

Activities include:

- Post graduate degrees and diplomas that are recognised as additional qualifications by the relevant Professional Board (in the case of qualifications that extend beyond 2 years, at the end of the first year of study 15 CEUs should be claimed and at the end of the second year the balance of 15 may be claimed provided that there is supporting documentation regarding the course and progress of the relevant study programme);
- Short courses with a minimum of 25 hours of direct contact time with additional clinical hands-on training, plus a formal assessment of the outcome;
- Learning portfolios;
- Practice audit.

The latter are two new proposals from the CPD Committee and it is recommended that individual Professional Boards determine the scope and content of these activities together with the necessary protocols and accompanying documentation.

6. ACTIVITIES THAT DO NOT QUALIFY FOR CEUs

The following activities will not qualify for CEUs:

- time spent in planning, organising or facilitating any activity;
- published congress proceedings;
- non-referenced letters to the Editor of accredited journals;
- daily ward rounds;
- written assignments;
- compilation of student training manuals for internal use;
- staff and/or administrative meetings;
- tours and/or viewing of exhibits and technological demonstrations;
- modules/courses that form part of a formal/structured framework of a post-graduate degree; undergraduate teaching activities;
- membership of professional bodies, Professional Boards or associations; and
- holding a portfolio on the professional body's executive or council structure.

Meetings arranged by pharmaceutical companies and manufacturers or importers of products and technical devices (including assistive device technology) or their representatives purely for the purpose of **marketing and/or promoting their products** are not eligible for accreditation.

7. NON COMPLIANCE

The CPD Department will investigate the reasons for non compliance whereafter the names of bona fide non-compliant practitioners will be sent to the Professional Boards for noting. At the same time those names will be submitted to the CPD Committee for action in consultation with the relevant Professional Board.

The following actions may be taken:

- A letter will be sent to the non-compliant practitioner requesting a reason for the non compliance. A practitioner will be required to furnish the CPD Department with a letter of explanation within two weeks of receipt of the letter of enquiry from the CPD Department.
- Should the explanation be acceptable, the practitioner will be given six months to comply with the CPD requirements. Evidence of such compliance must be received by the CPD Department within two weeks of the end of the six months period.
- Should the practitioner not comply with the requirement his/her name will be forwarded without delay to the Committee of Preliminary Enquiry. The Committee of Preliminary Enquiry may decide on the basis of evidence, to grant a final additional 6 month period to comply with the CPD requirements.

Should the practitioner still not comply with the CPD requirements within the second six months period, one of the following actions will be taken:

- Registration in a category that will provide for supervision as considered appropriate by the relevant Professional Board;
- A remedial programme of continuing education and training as specified by the Professional Board;
- An examination as determined by the Professional Board;
- Suspension from practice for a period of time as determined by the Professional Board; or
- Any other action as recommended by the Professional Board.

8. DEFERMENT

Practitioners may apply for deferment of CPD and the CPD Committee will review such applications individually on an ad hoc basis. The application should be strongly motivated.

Deferment may be granted in the case of:

- a) a practitioner who is outside South Africa for a period of time exceeding 12 months **and is not practising his/her profession;**
- b) a practitioner who is outside of South Africa and practising in a country where formal continuing professional development does not take place;
- c) a practitioner who is registered for an additional qualification but is of the view that s/he will not meet the outcome within two years and thus will not be able to claim CEUs.

Deferment may be granted for a maximum period of three years. Deferment will not be granted for a period of less than 12 months (in view of the fact that a professional may collect CEUs in a following year).

Any practitioner mentioned in the above paragraphs wishing to re-enter the system after deferment will be subject to the following conditions:

- If deferment was granted for more than 12 months but less than 2 years, proof of full employment in the profession during that time should be submitted and the practitioner will, on review by the CPD Committee, be allowed to recommence the CPD year immediately.
- If deferment was granted for more than 2 years but less than 3 years, the practitioner must submit proof of his/her employment during that time and the practitioner will, on the recommendation of the CPD Committee, be required to complete a period of supervised practice as determined by the Professional Board in his/her area of practice, and will recommence the CPD year immediately
- If deferment was granted for longer than 12 months and the practitioner did not practice his/her profession during the deferment period, he/she will be required to complete a period of supervised practice as determined by the Professional Board in his/her area of practice.
- If deferment was granted because the practitioner was engaged in formal education and training for an additional qualification, CEUs will not be allocated for obtaining the additional

qualification. Proof of the additional qualification must be supplied to the CPD Office and the practitioner will recommence the CPD year immediately.

9. PRACTITIONERS ABROAD

Practitioners who are practising abroad in countries where a continuing professional development system is in place **should comply** with the requirements in that country. They should retain documentary proof of attendance at CPD activities for submission in the event of being drawn in the sample audit. For re-registration purposes documentary proof of compliance must be submitted for continuing professional development purposes in South Africa. This may be in the form of a letter from the accrediting authority in the country concerned.

When practitioners who are actively practicing in South Africa attend an accredited professional or academic meeting or activity abroad it will be recognised for CPD purposes. This activity should be reflected in the Individual CPD Activity Record of the practitioner.

10. RETIREMENT, ILLNESS AND NON-CLINICAL PRACTICE

Deferment will not be granted to practitioners who are retired or practitioners who are not practising due to ill health. Professional Boards are establishing a separate register for these categories for health professionals. Practitioners who are registered in the category non-clinical practice will be exempted from complying with Continuing Professional Development and when they apply to return to the clinical registers the application must be submitted to the CPD Committee who will in conjunction with the Professional Board concerned, decide on the conditions for registration, which may be any or all of the following:

- (i) passing a Professional Board examination;
- (ii) working under supervised practice; and
- (iii) collecting at least one year's total CEUs.

11. COMMUNITY SERVICE

Practitioners in internship and community service are not required to comply with CPD during the internship and Community Service years but are encouraged to attend and may accrue CEUs which will be to their credit for 2 years.

12. VOLUNTARY REMOVAL FROM REGISTER: DE-REGISTRATION

A practitioner must apply in writing to the HPCSA before the **last day of March** for voluntary removal of his/her name from the register in terms of Section 19(1) (c) of the Act. If a practitioner's

name is voluntarily removed from the register and the practitioner was in no way practicing his/her profession, the following will apply on request for a reinstatement:

- If a person requests reinstatement following a period of 1-3 years, a period of supervised practice as determined by the Professional Board will be required; or alternatively a written and clinical examination in relevant areas of practice may be recommended.
- If a person requests reinstatement after a period of 3 years, a written and clinical examination as determined by the Professional Board will be conducted in relevant areas of practice.

If a person has been registered with an acceptable other Professional Board or an equivalent licensing institution/body outside South Africa and has complied with the CPD requirements of that institution/body he/she may apply for the reinstatement of his/her name by submitting proof of that registration and compliance with the CPD of that country/institution/body.

13. RESTORATION AFTER ERASURE

1. Restoration after erasure in terms of Section 19(1) (d):

- (b) When a practitioner's name has been erased from the register for more than a year but not exceeding two years, **but the practitioner has been attending CPD activities**, the practitioner shall submit proof of CEUs that may have been collected during this period to the CPD Committee before his/her name can be restored to the register.
- (c) Should such applicant then have **at least 67% of the required CEUs for that period** and s/he complies with the other requirements for restoration of his/her name to the register, the Senior Manager: CPD, Registrations and Records may approve the application. The CPD Committee and the Professional Board should be advised of the fact that a practitioner has been restored to the register as soon thereafter as possible.
- (d) Applicants may be requested to submit to the CPD Department further proof of CEUs that they have collected within 3 months following restoration to ensure that they are complying with CPD and to identify whether they will have sufficient CEUs for compliance by the date of the following compliance check.
- (e) When a practitioner's name has been erased from the register for more than a year but not exceeding two years but s/he **has not collected any CEUs** the application for restoration must be submitted to the CPD Committee for a resolution, which may be any or all of the following:
- (i) passing a Professional Board examination;
 - (ii) working under supervised practice; and
 - (iii) collecting at least one year's total CEUs.
- (e) When a practitioner's name has been erased from the register for **three years or more** the application must be submitted to the CPD Committee for a recommendation to the relevant Professional Board for resolution.

2. Restoration after erasure in terms of Section 42: Guilty of misconduct:

These applications do not fall within the ambit of the CPD Committee and must be submitted to the relevant Professional Board.

PROPOSED INTERIM PROCEDURE FOR THE RESTORATION OF NAMES OF PRACTITIONERS TO THE RELEVANT REGISTER::

In light of the mandate given to the CPD Committee and in order to assist with the administration of these applications to prevent long delays in the restoration process, The Senior Manager: CPD, Registrations and Records is authorised to

- Restore the names of practitioners to the register in terms of the existing procedure without information regarding their CPD status; and
- Process these applications until further notice as determined by the CPD Committee of Council.

Secretariat:

The secretariat for CPD shall be located in the CPD, Registrations and Records Department of the HPCSA. All correspondence relating to CPD (but not applications for accreditation of activities or Service Providers) should be addressed to the CPD Secretariat, HPCSA, P O Box 205, Pretoria 0001.