



## **SUPERVISED PRACTICE GUIDELINES FOR RESTORATION TO THE REGISTER FOR THE MEDICAL AND DENTAL PROFESSIONS BOARD**

In these guidelines, any word or expression to which a meaning has been assigned in the Act shall bear such meaning and unless the context otherwise indicates –

### **DEFINITIONS**

**“board”** means a professional board established in terms of section 15(1) of the Act;

**"health practitioner"** means a person registered under the Act;

**“supervision”** means the overseeing of the professional acts of a person registered in the category of supervised practice by a supervising practitioner and the acceptance by that supervising practitioner of liability for such professional acts;

**“supervised practice”** means practicing a health profession under the supervision of an appropriately qualified health practitioner at an approved facility as determined by the board;

**“the Act”** means the Health Professions Act, 1974 (Act No. 56 of 1974);

## **PREAMBLE**

These guidelines describe the process to be followed for restoration to the register after removal from the register in terms of Section 19 and Section 19A of the Act.

Section 19 of the Health Professions Act 56 of 1974 as amended (“the Act”) deals with removal from the register the name of any person:

*Section 19(1): The professional board or a committee to whom the function has been delegated may direct the registrar to, or the registrar acting on the established policies of the professional board may, remove from the register the name of any person -*

- (a) who has failed to notify the registrar ... of his or her present address*
- (b) who has requested that his or her name be removed ...*
- (c) who has failed to pay .... any annual fee ...*
- (d) whose name has been removed from the ... record ... of [any institution] from which that person received the qualification ... whereof he or she was registered*
- (e) who has been registered in error or through fraud*
- (f) who has been found guilty of unprofessional conduct and on whom a penalty ... is imposed*

*Section 19(3) of the Act: As from the date on which notice has been given in terms of subsection (2) –*

- (a) any registration certificate issued in terms of this Act to the person concerned shall be deemed to be cancelled;*

*such person shall cease to practice the health profession in respect of which he or she was registers or to perform any act which he or she, in his or her capacity as a registered person, was entitled to perform, until such time as his or her name or the entry removed from the register in terms of section 18(5), as the case may be, is restored to the register.*

*Section 19(5) of the Act deals with restoration by the person concerned:*

- (a) applying on the prescribed form*
- (b) paying the fee prescribed ...*
- (c) in the case where his or her name has been removed from the register in terms of [the Mental Health Care Act] ... submitting proof ... in terms of his or her discharge ...*
- (d) complying with such other requirements as the relevant professional board may determine.*

*Section 19A(1) of the act deals with the suspension of registration of any person:*

- (a) who has failed to notify the registrar ... of his or her present address*
- (b) who has failed to pay his or her annual fee ...*
- (c) who has been found guilty of unprofessional conduct and on whom a penalty ... is imposed*
- (d) who has failed to comply with the requirements of ... continuing professional development ...*
- (e) who is ... posing an imminent threat or danger to the public*

*Section 19A(4) deals with the revocation of that suspension upon”*

- (a) the payment of any annual fee which was not paid, and payment of a restoration fee and other penalties as may be prescribed*
- (b) the expiry of the suspension period*
- (c) such person complying with requirement in respect of continuing professional development ...*
- (d) such person complying with such other requirements as the relevant professional board may determine.*

## **BACKGROUND**

These guidelines apply to registered health professionals whose names were removed from the HPCSA register in terms of Section 19 and 19A of the Act who are required to work under supervision of appropriately qualified and experienced supervisors for a period specified in the [Board Policy on Restoration and Revocation](#) in order to assure the Board (as per 3.1 of the Restoration and Revocation Policy) that they have regained competencies needed to handle patients safely, professionally, ethically and effectively.

## **PURPOSE**

The purpose of supervised practice for restoration is to determine fitness to practice, competency and conformance to other requirements as determined by the Board. These guidelines provide the framework for supervised practitioners, supervisors and the Board to monitor and assess a health practitioners' performance. Good supervision should enable a practitioner to develop and enhance their knowledge, skills and professionalism.

[Article 3 of the Board Policy on Restoration and Revocation](#) outlines the procedure to be followed upon receipt of an application for restoration.

## **ACTIVITIES OF SUPERVISION**

### **SUPERVISEEE**

- Apply for restoration
- Identify qualified Supervisor (practitioner in good standing and registered continuously for at least 3 years in the category they wish to be restored), and facility in line with 5, 6, 7 and 8 of the Restoration and Revocation Policy of the Board
- Obtain written agreement with the supervisor in the stipulated format (Consent Form)
- Submit written agreement of supervision to the Board for approval of supervisor by the Board
- Comply with CPD requirements of the intended registration category undertaken during the supervision period and submit proof of compliance
- Submit signed and completed logbook (with evaluation form) at completion of supervision period
- The supervised practitioner to inform the Board in writing of any transfers from the initial institution and change of principal supervisor and detailed reasons to be furnished to the Board for approval
- Must not perform acts that are beyond their level of education, training and experience
- Comply with any other requirements determined by the Board and agreed to at the beginning of the supervision period

### **SUPERVISOR**

- Must be a practitioner in good standing and continuous registration with the HPCSA for at least 3 years
- Must be registered in the same category the supervised practitioner wishes to be restored in
- Must accept responsibility and liability (for the professional acts) for supervising the practitioner (in writing)
- Must certify that the facility meets the requirements for all domains of supervised practice
- Must obtain appointment letter from the Board to be supervisor
- Must submit quarterly reports in the prescribed format (Supervisory Reports)
- Must monitor and facilitate the supervision process e.g. signing of logbook, communicating with the HPCSA, submission of reports and any other
- Must inform the Board in writing of any transfers from the initial institution and change of principal supervisor and detailed reasons be furnished to the Board for approval
- Must not supervise more than three (3) Clinical Associates
- Must not expect the Clinical Associate to perform acts beyond their scope of practice

## **BOARD**

- Process application for restoration
- Approve the supervisor and the facility at which such supervised practice shall happen and issue a letter of appointment to supervisor and copy the practitioner
- Advise the supervisor of the quarterly reports submission requirement
- Monitor the clinical skills, ethical conduct and ensure that formal mentorship of the practitioner is implemented;
- Acknowledge receipt of supervisory reports
- Consider reasons for any transfers from the facility and change of supervisor
- At the completion of the supervised practice period, the report provided by the Board appointed supervisor, signed by the designated authority, the Board will determine whether the practitioner is suitable for full registration or will require further assessment/supervision.

## **SUPERVISION REPORT STRUCTURE**

A comprehensive report signed by the supervisor and head of department where applicable with the documented strengths and weaknesses of the practitioner to be restored must be submitted for Board consideration.

A portfolio of clinical cases indicating clinical management, professionalism, patient safety and clinical practice should be completed in the supervisor form, which evaluates the following domains of practice :

**Domains of Practice**

<b>PROFESSIONALISM</b>	<b>SAFETY &amp; QUALITY</b>	<b>COMMUNICATION</b>	<b>KNOWLEDGE, SKILLS &amp; PERFORMANCE</b>
<ul style="list-style-type: none"> <li>• Good practice</li> <li>• Integrity</li> <li>• Intercultural competence</li> </ul>	<ul style="list-style-type: none"> <li>• Systems to protect patients/clients</li> <li>• Respond to risks to safety</li> <li>• Protect patients/clients from risks posed by colleagues</li> </ul>	<ul style="list-style-type: none"> <li>• Communicate effectively</li> <li>• Work constructively with colleagues</li> </ul>	<ul style="list-style-type: none"> <li>• Develop and maintain professional performance</li> <li>• Apply knowledge and experience to practice</li> <li>• Maintain clear, accurate and legible records</li> </ul>

**Clinical Management:**

- History taking, examination, investigation management
- Care planning, decision making , referral/consultation
- Clinical judgement
- Emergencies, recognition and management
- Discharge planning (where relevant)

**Communication:**

- With patients
- With families/rlatives (cultural and privacy)
- Within clinical team
- With other medical practitioners, including specialists (handover, discharge and transfers)
- Documentation of care

**Professionalism:**

- Compassion and sensitivity for patients; culture, ethnicity and spiritual issues
- Punctuality, reliability, prioritisation
- Requesting assistance
- Personal health management

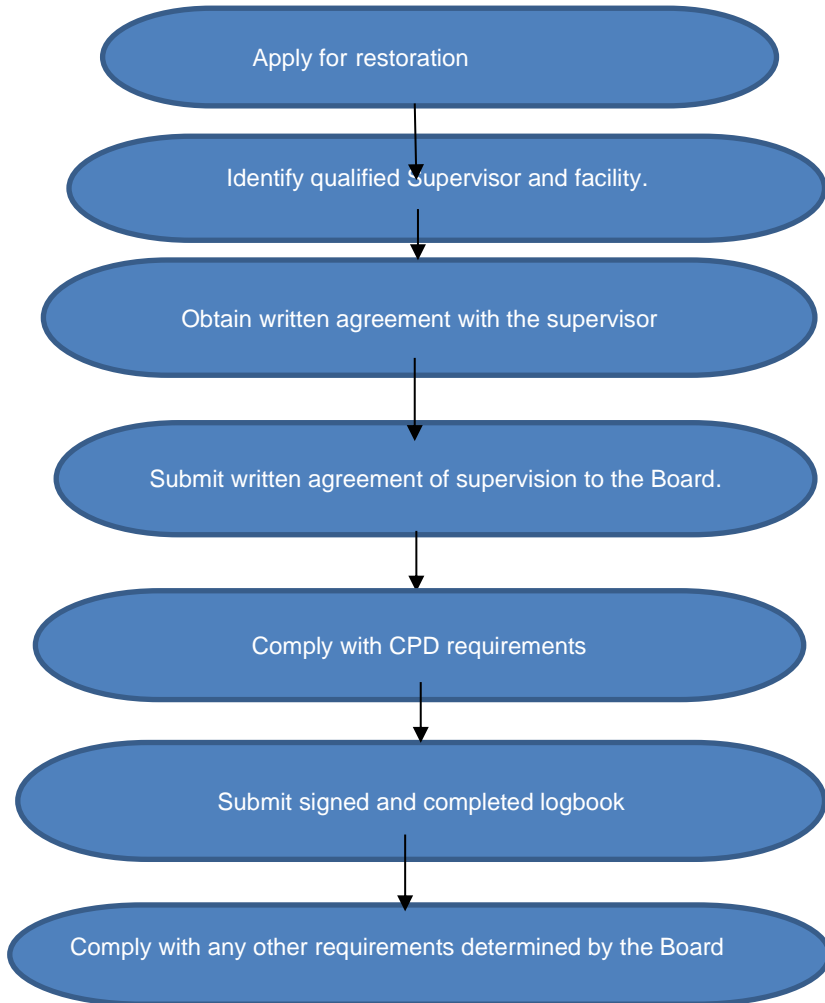
**Patient safety:**

- Drug prescribing, medication safety
- Infection control principles
- Adverse event recognition and reporting

**Formal Mentorship Programme (provide details)**

## ACTIVITIES OF SUPERVISION

### SUPERVISEE



### SUPERVISOR

