

POLICY ON THE RESTORATION OR REVOCATION OF NAME TO THE REGISTER AFTER REMOVAL OR SUSPENSION FOR PRACTITIONERS REGISTERED UNDER THE REGISTER OF THE MEDICAL AND DENTAL PROFESSIONS BOARD

1 Introduction

Section 19(1) of the Health Professions Act 56 of 1974 as amended (“the Act”) deals with removal 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(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.

2 Statements

- In terms of the Act, “removal” and “erasure” are taken to be synonymous.
- Restoration and revocation are considered to be independent of the offence or cause for removal or suspension, but are dependent on rehabilitation if applicable to the offence.
- Fees payable for restoration / revocation / registration will be revised by Council from time to time to take into account the costs incurred for administration and for any accreditation visits of sites of supervised practice.

3 Procedure

The procedure requires three steps after receipt of an application:

3.1 Determination of fitness to practice: This would apply to any person whose name has been removed in terms of section 19(4) of the Act, as required in section 19(5)(c) of the Act, as well as to reasons for removal or suspension for bringing the profession into disrepute following conviction in a criminal/civil offence, unprofessional conduct, incompetence, or any other reasons as determined by the Board on a case-by-case basis. A psychological and/or psychiatric evaluation will be required from a panel appointed by the Board, to determine the need, if any, for rehabilitation.

- a. Should the recommendation be for further rehabilitation, the applicant may apply again only after twelve (12) months have elapsed from the date of the determination.

3.2 Determination of competence: This is based on the time the applicant has spent not practising his or her profession as set out in the guidelines of this Policy.

3.3 Conformity to any other requirements as determined by the Board.

4 Guidelines for the restoration or revocation of persons registered in clinical categories, excluding interns.

4.1 Determination of competence to practice

After determination of fitness to practice as per step one of the Procedure of this Policy if applicable, *the following criteria are based on the time spent not practising as determined from appropriate evidence:*

- a. Five years or less: applicant to comply with the administrative requirements for registration.
- b. Five to ten years: applicant to spend a minimum of twelve (12) months in supervised practice and thereafter to be assessed administratively for compliance with the requirements of supervised practice of this Policy. If there is doubt concerning such compliance, Administration will refer the matter to the relevant sub-committee of the Board.
- c. Ten years or more: applicant to take the relevant Board examination for competence. If successful, to spend a minimum of twelve (12) months in supervised practice and thereafter to be assessed administratively for compliance with the requirements of supervised practice of this Policy. If there is doubt concerning such compliance Administration will refer the matter to the relevant sub-committee of the Board.

4.2 Permission to register for supervised practice

Permission will only be granted after the supervisor and site of practice have been accredited by the Board as per the requirements for supervised practice of this Policy.

4.3 Declination of Restoration / Revocation after determination of competence

- a. Should the Board decide that further service in supervised practice be necessary following the determination of compliance to section 4.1 above or under the determination of competence of this Policy, a further twelve (12) months of supervised practice will be required.
- b. If the applicant is still not assessed as having conformed to the requirements for competence after this additional time in supervised practice, the applicant's name will be removed from the Register. The applicant may only apply again after a

period of 5 years from the date of this removal, to allow the applicant time to obtain further education and training as necessary.

5 Guidelines for those who have obtained a qualification requiring the completion of internship for registration but who have not completed internship

5.1 This covers the situation where a person did not undertake internship at all, or commenced but did not complete internship; the criteria are based on time spent since qualifying:

- a. Five years or less: applicant to comply with the administrative requirements for registration as an intern, and to register and complete the full requirements for internship. Applicants who have completed a portion of internship may apply to the Internship Committee for that portion to be credited;
- b. Five years or more: applicant to take the relevant Board examination for competence. If successful, to complete the full requirements for internship.

6 Guidelines for those who have maintained their registration but without practising in the Republic.

6.1 In cases where a health professional has maintained their registration with the Council, but has not been practising in the country, and has now returned to practise, proof must be submitted of their having been practising, together with a Certificate of Good Standing with the relevant regularity body of the country in which they have been practising.

6.2 In cases where a health professional has maintained their registration with the Council, but have not been practising in this or any other country, and have now returned to practise, must comply with section 4 of this policy.

7 Supervised Practice Requirements

7.1 Supervisor:

- a. must be a practitioner in good standing and have been registered and have experience in the applicable domain or general practice for at least three (3) years
- b. in the case of medical or dental specialists, must have been registered as a specialist for at least three (3) years
- c. must agree in writing to supervise the applicant and take responsibility for all patients treated by the applicant, by completion of the Form 9AS or Form 9DP
- d. in the case of a medical scientist, a practitioner (medical scientists or medical specialist (pathology)) must be in good standing, have been registered and have experience in the applicable discipline and / or professional category (the latter in the case of medical biological scientist) for at least three (3) years
- e. must agree in writing to supervise the applicant and take responsibility for all diagnostic/therapeutic/clinical interventions undertaken by the applicant, by completion of applicable forms in the policy regarding supervision of medical scientists (CMS I)
- f. must complete the relevant Self-Evaluation Report and agree to an evaluation by a Board panel
- g. must be approved by the Board
- h. must comply with any other requirements as determined by the Board

7.2 Evaluation of Facility if not in an accredited training institution

- a. An evaluation panel will be appointed by the relevant committee of the Board, comprising one inspector and one person of the same profession or speciality as the applicant.

- b. The panel will assess the Self-Evaluation Report, and inspect the site of supervised practise and recommend to the Board accreditation of that practise or site of practise.
- c. in the case of medical practice, the facility must allow for the supervised practice of all domains required for a medical practitioner
- d. in the case of dental practice, the facility must allow all for the supervised practice of all procedures normally expected of a general dental practitioner
- e. in the case of medical or dental specialist practice, must allow for the supervised practice of all domains / procedures required for the relevant specialty
- f. in the case of medical scientists, the facility must allow for supervised practice to include the minimum requirement as prescribed in the national curriculum
- g. the facility must comply with any other requirements as determined by the Board

7.3 Log book (in the case of medical and dental practitioners):

- a. the domains, procedures and treatments required to be performed over the twelve (12)-month period of supervised practice will be set out in a log book
- b. the log book must be signed and dated by both the applicant and the supervisor
- c. for administrative compliance, the Board must be notified of those procedures/domains/treatment **not** performed within the twelve (12) months or **not able to be performed at that facility** so that alternative arrangements could be made
- d. must comply with any other requirements as determined by the Board

7.4 Portfolio of Evidence (competency-based Board assessment) in the case of medical scientists:

- a. The components required to be performed over the twelve (12)-month period of supervised practice will be assessed on the portfolio of evidence
- b. the portfolio of evidence must be signed and dated by both the applicant and the supervisor
- c. for administrative compliance, the Board must be notified of those components **not** performed within the twelve (12) months or **not able to be performed at that training facility** so that alternative arrangements could be made
- d. must comply with any other requirements as determined by the Board

7.5 Reports:

- a. quarterly reports must be submitted to the relevant committee of the Board, signed by the Supervisor and the Head of the facility where applicable, using the Supervisor Report Form MP, Supervisor Report Form DP or Supervisor Report Forms D5, D6 or D7 of CMS I
- b. must comply with any other requirements as determined by the Board

7.6 CPD Requirements:

- a. the practitioner must show compliance with the CPD requirements of Council during the period of supervised practice.

8 Guidelines for the restoration or revocation of persons registered in the non-clinical category

- 8.1 Sections 3.1 and 3.3 of this Policy must be complied with
- 8.2 If restoration or revocation is refused, the applicant can apply again after 12 months have elapsed from the date of the refusal.

9 Guidelines for medical and dental specialists requesting conversion of registration to general medical or dental practitioner

- 9.1 Must serve a minimum of six (6) months in supervised practice in order to be capacitated to act as a general medical or dental practitioner
- 9.2 The supervised practice must conform to the Supervised Practice Requirements of this Policy with the exception that a different log book of procedures will set out those procedures / treatments required to be performed.
- 9.3 If after this period, if there is no compliance with the Supervised Practice Requirements a further period of 6 months may be required
- 9.4 If after a further period of 6 months there is still no compliance, then conversion of registration will be refused and the applicant can apply again after twelve (12) months have elapsed from the date of the refusal
- 9.5 Must show compliance with the CPD requirements of Council during the period of supervised practice.
- 9.6 Must comply with any other requirements as determined by the Board

10 Guidelines for persons registered in the non-clinical category to convert to a clinical category

- 10.1 Applicants must comply with section 4 of this policy.