

HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA
Professional Board for Environmental Health Practitioners

Subject:	SOP for CPD for Environmental Health Practitioners and EHAs	Doc number:	SOP01
Compiled by:	Education Committee	Page number:	1 of 28
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STANDARD OPERATING PROCEDURE STATEMENT

In order to effectively deal with accreditation of service providers, non-accredited organisations and individuals and for Practitioners to accumulate CEU's, procedures will be documented to determine responsibilities, authority and actions needed.

1. AIM OR PURPOSE

The aim of this operating procedure is to:

- Ensure clarity regarding the procedure to be followed for accreditation of service providers;
- Ensure clarity regarding the procedure to be followed for non-accredited organisations and individuals;
- Ensure clarity regarding the procedures to be followed by Environmental Health Practitioners to accumulate Continuing Educational Units.

2. SCOPE

This SOP applies to all Environmental Health Practitioners and the Professional Board for Environmental Health Practitioners.

3. INFORMATION

- Board Manager – Ms Tebogo Vundule, Tel/fax 0123389448
email: TebogoV@hpcsa.co.za
- Committee Coordinator – Mr Tlou Maboya, Tel/fax 0123383985 e-mail: TlouM@hpcsa.co.za
- Non-Board approved training providers – Training Institutions not accredited by the CHE and the PB for EHPs to train EHPs
- APPLICATIONS MUST BE SUBMITTED AT LEAST A MONTH BEFORE THE INTENDED DATE OF THE EVENT AS THE OVERALL ACCREDITATION PROCESS WILL TAKE ONE MONTH.
- Accreditors must submit their recommendation on the application within 14 days (maximum) after receiving the application.

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4. ABBREVIATIONS

EHP	-	Environmental Health Practitioner
PB for EHPs	-	Professional Board for Environmental Health Practitioners
CEU	-	Continuing Educational Units
CPD	-	Continuing Professional Development
HPCSA	-	Health Professions Council of South Africa
SAIEH	-	South African Institute for Environmental Health
SANC	-	South African Nursing Council
CHE	-	Council for Higher Education
EH	-	Environmental Health
SOP	-	Standard Operating Procedure

5. ANNEXURES

1. Application for Accreditation as a service provider (Form CPD2);
2. Information to accompany the application form for Training Institutions;
3. List of evidence for Training Institutions;
4. Example of certificate for CEU's (Form CPD3);
5. List of evidence for Organisations;
6. Information to accompany the application form for organisations;
7. Information to accompany the application form for Individuals;
8. List of evidence for Individuals;
9. Guidelines for allocation of CEU's;
10. Information for service providers re record keeping and CEU allocation;
11. Application for approval of CPD activities (Form CPD2A);
12. Accreditation fees for Environmental Health activities;
13. List of provincial reviewers from the Educational Committee that will approve individual applications.
14. Example of the individual activity record.

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STANDARD OPERATING PROCEDURE: CONTINUING PROFESSIONAL DEVELOPMENT

1. PROCEDURE FOR SERVICE PROVIDERS APPLYING FOR ACCREDITATION

1.1. EDUCATIONAL INSTITUTIONS/PRIVATE TRAINING ORGANISATIONS & LEVEL 2 ACTIVITIES:

- a. All applications must be completed on Form CPD2 (**Annexure 1**) and all relevant information must accompany the application – **Annexure 2**;
- b. All applicants must provide evidence as listed in **Annexure 3**;
- c. All applications should be directed to the Board Manager of the PB for EHPs and also a copy to the Chairperson of the Educational Committee of the PB for EHPs;
- d. All applications will be considered twice a year, during the Educational Committee meetings;
- e. If all the necessary information is not provided, the application will not be considered and the documents will be referred back to the applicant, only to be reconsidered at the next meeting when submitted with all the necessary documents/evidence;
- f. All short courses submitted by Universities of Technology must first be approved by the University Senate and the approval be attached to the necessary documents required with the application.
- g. The application will not be considered unless proof of full payment has been submitted to the Board Manager according to the fees determined by the Prof Board for EHPs – **Annexure 12**;
- h. If the application was successful, the institution will be informed in writing by the CPD Committee of the HPCSA, including the accreditation number that has to appear on all CEU-certificates – see example – **Annexure 4**;
- i. The details of the service provider will be kept on record by the Board Manager for the PB for EHPs;
- j. Accreditation is only valid for one year (January – December) and therefore all service providers must re-apply annually.
- k. A service provider shall keep record of information regarding each activity that will be presented for CPD purposes before that Activity Number and accompanying CEU's are published – see **Annexure 10**;
- l. If a non-Board approved educational institution applies for accreditation as a service provider, a more detailed submission

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would be required and a more in-depth evaluation would be done.

- m. Applications for renewal of accreditation of the activity/ies approved the year before can be handled by administration provided there are no changes to the course content.

2. PROCEDURE FOR NON-ACCREDITED ORGANISATIONS OR INDIVIDUALS OFFERING ONCE OFF CPD ACTIVITIES

2.1. ORGANISATIONS (LEVEL 1 ACTIVITY):

- a. All applications must be completed on Form CPD2A (**Annexure 11**) and all relevant information must accompany the application - **Annexure 6**;
- b. All applicants must provide evidence - **Annexure 5**;
- c. All applications should be directed to the Board Manager of the PB for EHPs and will forward an electronic copy to the relevant Provincial reviewers - see list and contact details – **Annexure 13**;
- d. All applications will be considered by the relevant provincial reviewers/accreditors and if the application was successful, the organisation will be informed in writing by the Board Secretariat, including the accreditation number that has to appear on all CPD-certificates – see example – **Annexure 4**;
- e. If all the necessary information is not provided, the application will not be considered and the documents will be referred back to the applicant, only to be reconsidered if submitted as a new application with all the necessary documents/evidence;
- f. The application will not be considered unless proof of full payment has been submitted to the Board Manager according to the fees determined by the Prof Board – **Annexure 12**;
- g. The details of the organisation will be kept on record by the Board Manager for the PB for EHPs;

2.2. INDIVIDUALS (LEVEL 1 ACTIVITY):

- a. All applications must be completed on Form CPD2A - **Annexure 11** and all relevant information must accompany the application - **Annexure 7**;
- b. All applicants must comply with evidence - **Annexure 8**;
- c. All applications should be directed to the Board Manager of the PB for EHPs that will forward an electronic copy to the relevant Provincial reviewers – **Annexure 13**;

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- d. All applications will be considered by the relevant provincial reviewers and if the application was successful, the organisation will be informed in writing by the Board Secretariat, including the accreditation number that has to appear on all CEU-certificates – see example – **Annexure 4**;
- e. The application will not be considered unless proof of full payment has been submitted to the Board Manager according to the fees determined by the Prof Board – **Annexure 12**;
- f. If all the necessary information is not provided, the application will not be considered and the documents will be referred back to the applicant, only to be reconsidered if submitted as a new application with all the necessary documents/evidence;
- h. The details of the individual will be kept on record by the Board Manager for the PB for EHPs;

3. PROCEDURE FOR ACCREDITORS

- a. The Education Committee of the PB for EHPs will be the only Accreditor for the PB for EHPs regarding all CPD activities;
- b. The mentioned Accreditor will consider all applications for Service Providers two (2) times a year at the Education Committee meetings;
- c. Organisations and Individual applications will be considered and approved by representatives from the Education Committee (provincial reviewers) – **Annexure 13**;
- d. The Accreditor will follow the guidelines for accreditor as approved by the CPD committee of the HPCSA;
- e. Approved service providers and non-accredited organisation and individuals will be notified in writing by the CPD Committee of the HPCSA;
- f. The Accreditor will not consider incomplete applications;
- g. The application will not be considered unless proof of full payment has been submitted to the Board Manager according to the fees determined by the Prof Board – **Annexure 12**;
- h. The Accreditor will keep a record of each activity to be presented for CPD purposes before the accreditation number and CEU's are published.

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4. PROCEDURE FOR ENVIRONMENTAL HEALTH PRACTITIONERS

- a. All EHPs attending any CPD activity, must request the accreditation number of that specific activity beforehand to ensure that the activity has been accredited;
- b. All EHPs must ensure that they receive a certificate of attendance from the service provider, stating all the necessary information – see **Annexure 4** as an example;
- c. Each EHP must keep an individual activity record with evidence on how their CEU's have been accumulated – **Annexure 14**;
- d. CEU's can be accumulated according to guidelines for allocation of CEU's – see **Annexure 9**

Authorised by:

CHAIRPERSON: EDUCATION COMMITTEE

CHAIRPERSON: PROFESSIONAL BOARD FOR ENVIRONMENTAL HEALTH PRACTITIONERS

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ANNEXURE 1

 Health Professions Council of South Africa Form CPD 2	APPLICATION FOR ACCREDITATION AS A SERVICE PROVIDER TRAINING INSTITUTIONS/PROFESSIONAL ASSOCIATIONS/PROFESSIONAL INTEREST GROUPS
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Complete and submit electronically or in hard copy to the Professional Board

Providing organisation and/or Name of provider	
Name of responsible person	
Name of CPD co-ordinator or administrative person	
Postal Address	
Contact Telephone	
Contact Fax No	
E-mail address	

The following information must be submitted in support of your application

A broad outline of the programme for the forthcoming year	
What facilities are available for the presentation of CPD activities (lecture rooms, etc)	
What method will be used to record attendance?	
What fees will be levied for CPD activities in Level 1	
A copy of the proposed attendance certificate	
A copy of the certificate that will be provided on completion of the activity	
What method will be used for obtaining feedback or evaluation of the event?	
What involvement or experience do you/your	

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institution have in health care education?			
Who are your proposed target audience, e.g. , optometrists			
Has an application already been submitted to another Accreditor requesting approval?	YES	If YES, to whom and what was the outcome?	
	NO		

In order to be accredited as a service provider you have to agree to: Record attendance and CEUs awarded for each attendee, record the identity of every participant including the professional registration number at the CPD activities and validate attendance for the **entire** event, validate completion of the CPD activity by the participant, provide the participant with evidence of completion, safe keep the records for at least 3 years, be subjected to quality assurance checks as may be deemed necessary by the HPCSA from time to time

SIGNED

DATE

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ANNEXURE 2

GUIDELINES FOR APPLYING FOR SERVICE PROVIDER STATUS

1. Educational institutions (including facilities in the private, health and education public sectors)

- The name of the Department/s, Discipline/s or Unit/s that will offer CPD;
- The name of the Manager or Chairperson of that Department or Discipline (and/or a formally designated CPD officer);
- The contact telephone number or email address of that person;
- A broad outline of the programme for the forthcoming year (the names and qualifications of the presenters of CPD activities and the topics, are to be submitted on finalisation/completion of the programme);
- The facilities available for the presentation of CPD activities (lecture rooms, seminar rooms, breakaway rooms; internet access, e-mail; computers and data projectors, overhead projectors, copier; dedicated administrative support, name and contact details of this person);
- The scale of fees that will be levied for CPD activities in **Level 1, 2 and 3**;
- A copy of the attendance register form/s that will be used to record attendance;
- A copy of the certificate that will be provided on completion of the activity (Form CPD 3); and
- An indication of the method for obtaining feedback or evaluation of the event (not the aesthetics, comfort, convenience or ambience of the venue).

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ANNEXURE 3

CRITERIA FOR ACCREDITED SERVICE PROVIDER STATUS:

1. **Educational institutions** (including those in the health and education public sector) must provide evidence to support the existence of:
 - Department/s, Discipline/s or Unit/s that has/have the capacity to deliver CPD through full-time or part-time members of staff;
 - A CPD co-ordinator, contactable by telephone, fax, email;
 - Dedicated, contactable administrative support;
 - Facilities for presentation of CPD (lecture rooms, seminar rooms, breakaway rooms; computers, internet access, e-mail; data and overhead projectors; copier);
 - Paper or electronic attendance records;
 - Certificates of attendance;
 - Formal evaluation procedure for all CPD activities.

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ANNEXURE 4

FORM CPD 3

NAME OF ACCREDITED SERVICE PROVIDER:

HPCSA ACCREDITATION NUMBER:

TOPIC OF THE ACTIVITY:

LEVEL OF THE ACTIVITY:

NAME AND REGISTRATION NUMBER OF PRACTITIONER:

DATE OF ACTIVITY:

NUMBER OF CEU'S IN LEVEL(S):

Level 1	Level 2	Level 3

SIGNATURE PROVIDER

DATE SIGNED

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ANNEXURE 5

CRITERIA FOR NON-ACCREDITED ORGANISATIONS OFFERING ONCE OFF CPD ACTIVITIES IN LEVEL 1 AND 2

Organisations such as public and private hospitals; private non-profit groups; Commercial enterprises or companies that support health professionals through products or services; schools; non-government organisations shall apply for accreditation of once off activities in level 1 and 2 on Form CPD 2A and supply the relevant documentation. **(Organisations do not qualify for service provider status)**

- A reference from a training institution, professional association in support of the application (this should reflect the relevance of the activities that will be provided, an indication of the code of conduct that guides and informs the organisation's business practices, the professional and ethical reputation of the organisation and its principals);
- The name of the Department/s or Unit/s, Division/s or Branch/es within the organisation that will offer CPD;
- The name and professional qualification/s of the Manager or Chairperson of that Department or Unit (or a formally designated CPD officer);
- The contact telephone number or email address of that person;
- A broad outline of the programme for the forthcoming year (the names and qualifications of the presenters of CPD activities and the topics, are to be submitted on finalisation/completion of the programme);
- The facilities available for the presentation of CPD activities (lecture rooms, seminar rooms, breakaway rooms; internet access, e-mail; computers and data projectors, overhead projectors, copier; dedicated administrative support, name and contact details of this person)
- The scale of fees that will be levied for CPD activities in **Level 1 and 2**;
- A copy of the attendance register form/s that will be used to record attendance;

- A copy of the certificate that will be provided on completion of the activity (Form CPD 3);
- An indication of the method for obtaining feedback or evaluation of the event (not the aesthetics, comfort, convenience or ambience of the venue).

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ANNEXURE 6

EVIDENCE THAT ACCOMPANY THE APPLICATION FORM FOR ORGANISATIONS:

Organisations should also provide with their application evidence to support the existence of:

- access to health professionals who have proven knowledge and skills to provide activities in the relevant area of CPD;
- a CPD co-ordinator, contactable by telephone, fax, email;
- dedicated, contactable administrative support;
- facilities for presentation of CPD (conference venues, lecture rooms, seminar rooms, breakaway rooms; internet access, e-mail; computers and data projectors, overhead projectors; copier);
- paper or electronic attendance records;
- certificates of attendance;
- formal evaluation procedure for all CPD activities.

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ANNEXURE 7

CRITERIA FOR NON-ACCREDITED INDIVIDUALS OFFERING ONCE OFF CPD ACTIVITIES IN LEVEL 1 AND 2

Individuals shall apply for accreditation of once off activities in level 1 and 2 on Form CPD 2A and supply the relevant documentation. **(Individuals do not qualify for service provider status)**

- A certified copy of their HPCSA registration certificate (or other relevant statutory council eg. Nursing, Social Work, Pharmacy);
- A certified copy of their qualifications;
- An indication that they are currently in practice related to the health services (clinical, teaching, research or management) and have been active in these contexts for at least three consecutive years;
- An indication of attendance at a minimum of three national or local professional activities or events of direct relevance to the field of interest during the previous two years;
- The facilities available for the presentation of CPD activities (lecture rooms, seminar rooms, breakaway rooms; internet access, e-mail; computers and data projectors, overhead projectors, copier; dedicated administrative support, name and contact details of this person)
- The scale of fees that will be levied for CPD activities in **Level 1 and 2**;
- A copy of the attendance register form/s that will be used to record attendance;
- A copy of the certificate that will be provided on completion of the activity (Form CPD 3);
- An indication of the method for obtaining feedback or evaluation of the event (not the aesthetics, comfort, convenience or ambience of the venue).

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ANNEXURE 8

EVIDENCE THAT SHOULD ACCOMPANY THE APPLICATION FORM FOR INDIVIDUALS:

Individuals should also provide with their application evidence to support the existence of:

- proven expertise in the relevant professional field;
- being contactable by telephone, fax, email;
- dedicated, contactable administrative support;
- facilities for presentation of CPD (conference venues, lecture rooms, seminar rooms, breakaway rooms; internet access, e-mail; computers and data projectors, overhead projectors; copier);
- paper or electronic attendance records;
- certificates of attendance;
- formal evaluation procedure for all CPD activities.

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ANNEXURE 9

GUIDELINES FOR ALLOCATION OF CEUs

Level 1

These are activities that do not have clearly measurable outcomes and are presented on a once-off non-continuous basis. CEUs are allocated according to time, where 1 CEU is equivalent to 1 learning 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.

Presenters of such activities can be allocated double CEUs, eg. if an attendee receives 1 CEU, presenters can get 2 CEUs at small group activities. Presenters at large group activities are allocated CEU's from level 2.

These activities include:

Small groups

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

Large groups

- Conferences, symposia, refresher courses, short courses without a measurable outcome, international conferences (must be approved by a SA Accreditor if not accredited/recognised for CEU equivalent in the country where it was held)

Level 2

Education, Training, Research and Publications.

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This includes activities that have an outcome but do not constitute a full year of earned CEUs. (Teaching to undergraduate and postgraduate students, and examining, will not be accredited if these activities fall within a registered professional's job description). Presenters/Co-presenters can only claim once for CEU's if the same presentation is given more than once.

- (a) Principal author of a peer reviewed publication or chapter in a book (15 CEUs)
- (b) Co-author of a peer reviewed publication or chapter in a book (5 CEUs);
- (c) Review of an article/chapter in a book/journal (3 CEUs)
- (d) All presenters/authors of a paper/poster at a congress/refresher course (10 CEUs)
- (e) All presenters of accredited short courses (10 CEUs);
- (f) All co-presents of accredited short courses (5 CEUs);
- (g) All co-presenters/co-authors of a paper/poster (5 CEUs);
- (h) Interactive skills workshop with an evaluation of the outcome (10 CEUs per presenter, 5 CEUs per participant)
- (i) Multiple Choice Questionnaires (MCQ) in journals, including electronic journals with a pass rate of 70% (3 CEUs per questionnaire);
- (j) Guest/occasional lecturer at an accredited institution (3 CEUs per lecture);
- (k) Health personnel who supervise undergraduates/interns/postgraduates in clinical/technical training in collaboration with an accredited training 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);
- (l) Part time of external examiner of Master and Doctoral thesis on completion (5 CEUs per thesis);
- (m) Dedicated workshops, lectures, seminars on ethics (not including general presentations with a so-called component on ethics) (2 CEUs per hour) ;
- (n) Single modules of Masters degrees with part-time enrolment for study for non-degree purposes (5 CEUs on completion of the module).
- (o) Professional Interest Groups (this could include Journal Clubs if compliant with the criteria) that are formally constituted and present a regularly recurring programme that extends for one year with a minimum of 6 meetings per year. (up to 3 CEUs per attendee per meeting). These activities are on-going or have a measurable outcome that is assessed according to criteria determined by the group and which may be multi-disciplinary.

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Level 3

This comprises of 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.

Activities include:

- (a) Postgraduate degrees and diplomas that are recognised as additional qualifications by the relevant Professional Board. At the end of each year of study (not exceeding the normal duration of the degree), 30 CEUs could be claimed upon submitting an academic report on progress. An additional 30 CEUs may be claimed on successful completion of the qualification;
- (b) 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;
- (c) Learning portfolios;
- (d) Practice audit.

The latter are two new proposals from the HPCSA 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.

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ANNEXURE 10

INFORMATION FOR SERVICE PROVIDERS ON RECORD KEEPING AND CEU ALLOCATION

1. An accredited Service Provider shall keep a record of the following information regarding each activity that will be presented for Continuing Professional Development purposes before the Activity Number and accompanying CEUs are publicised:
 - Name and number of the accredited Service Provider that presented the activity;
 - The topic of the activity;
 - The level of the activity;
 - The number of CEUs that have been allocated for the activity;
 - The dates (commencement and completion) of the activity;
 - An attendance record that reflects the names and HPCSA registration numbers of all of the attendees (from commencement to completion of the activity);
 - Where relevant, the programme of the activity/application for mentoring and supervision (for quality control purposes by a Professional Board).
 - A template of the certificate issued to attendees on completion of the activity.
2. Accredited Service Providers shall develop and maintain a record keeping system such that all of the records described in (1) will be held for a period of 3 years after the activity has been presented / completed.
3. 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.
4. Accredited Service Providers have to submit the following information annually to the Professional Board or its delegated authority/Accreditor with regard to the previous year's CPD activities presented:
 - (i) A list of all activities presented/completed;
 - (ii) An indication of ethics activities presented; and

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- (iii) Further indication as to how the activities would enhance the scope of practice of the profession without mere repetition of the same activities.
- 4. Accredited Service Providers have to submit a list of approved CPD activities to the CPD Department at HPCSA on a monthly basis unless the annual programme was already submitted.

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ANNEXURE 11

 Form CPD 2A	APPLICATION FOR APPROVAL OF CONTINUING PROFESSIONAL DEVELOPMENT (CPD) ACTIVITIES NOTE: Activity Programme and Presenter's CV's required to be submitted with this application
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Please complete and submit for a recommendation to the Board Manager

Name of Providing Organisation and/or Name Of Provider/Name of Individual (Including Registration Number)	
Postal Address of Providing Organisation and/or Provider and/or Individual	
Contact Person (Organisation/Provider/Individual)	
Telephone Number (Incl Area Code) (Organisation/Provider/Individual)	
Fax Number (Incl Area Code) (Organisation/Provider/Individual)	
e-Mail Address (Organisation/Provider/Individual)	
Activity Title	
Date(s) of Activity/Programme	
Venue (Full Address) of Activity (If Applicable)	
	Postal
	code
Level of Proposed CPD Activity	

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FOR THE OFFICIAL USE OF THE ACCREDITOR

This is to certify that(name of Accreditor) -

has agreed to the proposed CPD points as follows:

Level 1	Level 2	Level 3	Ethics/Human Rights/Legal Matters

Specify ethical/human rights/legal matters relating to health sciences

TOTAL:

Specify the reasons why the above-named Accreditor does not agree to accreditation:

.....
.....

SIGNATURE ON BEHALF OF DESIGNATED CPD ACCREDITOR

DATE:

NAME AND DESIGNATION:

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ANNEXURE 12

ACCREDITATION FEES FOR ENVIRONMENTAL HEALTH CPD ACTIVITIES

LEVEL	ACTIVITY	* EDUCATIONAL INSTITUTIONS & PRIVATE ORGANISATIONS	**ORGANISATION	*** INDIVIDUAL
1	Small groups(< 30): Presentations, meetings, symposia, case study discussions, technical visits, journal clubs, mentoring/supervising	R 4145 per activity/course annually for all levels of activities	R 1658.00 per activity/course	R70.00
	Large groups (> 30): Conferences, symposia, refresher courses	R 4145.00 per activity/course annually for all levels for all activities	R 1658.00 per activity/course	R70.00
2	Publications (book, journal, article)	–	–	R 50.00 Maximum R 200
	Article review	–	–	R 50.00 Maximum R 200
	Presentations/authors paper/poster at congress	–	Already included in level 1 application	R 50.00 per CEU Maximum R200
	Keynote/invited speaker	–	Already included in level 1 application	R 50.00 per CEU Maximum R200
	Presenter short course/workshop	–	Already included in level 1 application	R 50.00 per CEU Maximum R200
	Article	–	R 50.00 per article & question set	–
	Undergraduate supervisor	–	–	–
	Post graduate examiner	–	–	–
	Single masters modules	–	–	–
Journal clubs with outcome	–	R 210.00	–	
3	Learning portfolios, practice audits	–	–	R 965.00

* Represents Private training organisations/companies and education & training Institutions registered with the CHE and/or accredited by the PB for EHP to offer environmental health programmes

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** Represents organisations such as the SAIEH, Epidemiology Society and the SANC. Representation of e.g. Food Control Committees, EH Departments at Municipalities, Provinces and National Government,

*** Individual Practitioners who attended training programmes not accredited by any Board, consultants, etc.

BANKING DETAILS

Absa bank
Arcadia Branch
Branch code: 632005
Account Name: HPCSA
Account Type: Cheque
Account numbers
Other moneys: 061 00 00 169
Swift code: ABSAZAJJ

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ANNEXURE 13

**LIST OF PROVINCIAL REVIEWERS FROM THE
PROFESSIONAL BOARD THAT WILL APPROVE LEVEL 1
ACTIVITIES**

PROVINCE	ACCREDITOR	CO-ACCREDITOR
Eastern Cape	Dr Andile Zimba	Ms Funeka Bongweni
Free State	Ms Duduzile Sebidi	Dr Andile Zimba
Gauteng	Mr David NemaKonde	Mr Daniel Hlanyane
KwaZulu Natal	Mr Charles Qoto	Ms Tembisa Manciya
Limpopo	Ms Funeka Bongweni	Mr Charles Qoto
Mpumalanga	Mr Bright Khumalo	Mr David NemaKonde
North West	Mr Andre van Zyl	Mr Daniel Hlanyane
Northern Cape	Ms Tembisa Manciya	Mr Andre van Zyl
Western Cape	Mr Joseph Shikwambane	Mr Bright Khumalo

In cases of conflict of interest an accreditor has to declare their interest to the Chairperson of the Education Committee who will appoint another accreditor / co-accreditor from the list above for the evaluation process to be completed.

NB! It must be noted that all applications for accreditation of all continuing professional development (CPD) activities must be sent for the attention of:

Mr Tlou Maboya
E-mail address: TlouM@hpcsa.co.za
Tel/Fax : 012 338 3985

Postal address:

The Registrar/CEO
HPCSA
P.O Box 205
PRETORIA
0001

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ANNEXURE 14

EXAMPLE OF THE INDIVIDUAL ACTIVITY RECORD



Form CPD 1 IAR

HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA

INDIVIDUAL ACTIVITY RECORD

Please complete and return to: The CPD Officer, HPCSA, P O Box 205, PRETORIA, 0001 or submit the above with the supporting documentation electronically to cpd@hpcsa.co.za or fax to 012 328 9690.

This record is the only data collection required for individual practitioners. It must be duly completed and accurately reflect your CPD activities. Please attach all relevant certificates.

Professional Board	
Registration No. with HPCSA	
Surname	
First Names	
ID Number	
Date of the Audit	

Please indicate the category in which you are currently working:

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Public Service Training institution Private Practice Research Education Other.....

Points accrued (Please attach certificates)

Name of Provider	Description of Activity/Accreditation Number	Date		Cat 1 Lev 1	Cat 2 Lev 2	Cat 3 Lev 3	Total
		From	To				
GRAND TOTAL							

I, the undersigned, certify that the information contained in this Individual Activity Record and the attached certificates are correct in all respects.

SIGNATURE

DATE