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The past year has seen quite a few changes at the HPCSA. The Business Process Re-engineering project has taken off which promises significant improvements in administrative processes in the HPCSA and thus also service-delivery to practitioners. The information technology system of the HPCSA was improved, resulting in improved functioning of the HPCSA website. This has made online annual renewal of registration possible.

Practitioners are reminded that annual fees were due on 1 April. Practitioners need to ensure that they paid their full annual fee to avoid suspension. Because there is a statutory requirement on practitioners to be registered in order to practice, practitioners must formally inform the Council should they wish to stop practicing for any reason, including relocation to another country. If this is not done by 31 March, the practitioner will be liable for the annual fee. It is advisable to keep copies of correspondence with the HPCSA in a place where it can be easily accessed, even many years in the future.

The Board has finalised a number of regulatory documents in the past year, relating to the professions of Arts Therapy, Occupational Therapy as well as one document that spans a variety of professions, including Medical Orthotics and Prosthetics and Occupational Therapy.

The Regulations pertaining to the qualifications for registration of Arts Therapists were published for comments. No comments were received thus the regulations will be finalised. This includes the University of the Witwatersrand’s qualification in Drama Therapy.

The Regulations pertaining to the updated scope of the profession of Occupational Therapy served at the Council in November 2017. The HPCSA legal advisor assisted the Board with the legal drafting of the document, resulting in significant changes to the document and thus the document served for a second time at Council in June 2018 and will be forwarded to the Minister of Health forthwith. Barring any queries from the Office of the Minister, the regulations should be published for comment in 2019. The process of formulating the scope was a lengthy one, consisting of extensive consultation with stakeholders and thorough consultation with other professions. The nature of occupational therapy makes this consultation process very important.

The Board initiated drafting a position paper on assistive devices in 2014. Since then we have consulted with the then Medicines Control Council to ensure buy-in from another important regulator pertaining to assistive devices. The document was also circulated to other Professional Boards of the HPCSA and a special inter-Board Forum was constituted to deliberate on the position paper. This document was finalised in May 2018 and will be published on the Board’s web page after the document has served at the Council meeting. This document is of importance to among others Medical Orthotists and Prosthetists, Occupational Therapists and Physiotherapists.
2018 also saw the finalisation of a 4-year long process to update the list of standardised tests that occupational therapists can administer. This list not only is more comprehensive than any previous lists, but also includes other pertinent information such as the occupational and/or pre-occupational categories that can be assessed using the test and information relating to the standardisation of the respective tests. Occupational therapists who are experts in various fields of occupational therapy were co-opted to work with assist the Board with this mammoth task. The result is a comprehensive, informative document of which we are very proud. Members can access the document on the Board’s website. We are working with the HPCSA’s IT department to enable search functionality of this comprehensive list. Should practitioners in future wish to add new tests to the list, they must provide information on the test in the same format as the Board’s list, to enable the Board to resolve on the proposed test’s inclusion.

The process to create a register for Orientation and Mobility Practitioners is continuing. Drafts of documents that are necessary for the creation of the register have been finalised with input from orientation and mobility practitioners. These include a scope of profession and minimum standards of training. Discussions about important aspects pertaining to registration, such as grandfathering clause for practitioners who would have been practising at the time of creating the register have also been fruitful. A task team will meet soon to discuss details pertaining to supervision of orientation and mobility practitioners.

The Board has partnered with the Occupational Therapy Association of South Africa regarding matters that are of importance to occupational therapy assistants and technicians. Of concern is the fact that although the Board has approved updated documentation pertaining to a 240-credit level qualification for these practitioners in 2012 already, there remains no training providers for this essential cadre of health care practitioners.

Congratulations to the Occupational Therapy Association of South Africa for organizing and hosting a successful and interesting World Federation of Occupational Therapy Congress in May 2018. Among the myriad of local and international presenters were four Board members who presented posters and/or oral papers at the congress.

The Board welcomes the new Deputy Company Secretary, Ms Adelle Taljaard and her team who were providing secretariat support from 1 August.

The Board remains committed to communication with stakeholders. We have broadened the annual stakeholder engagement to not only pertain to training providers, but to include other stakeholders and thus also address general issues pertaining to the professions. The Board’s second annual stakeholder meeting was held in Johannesburg in June 2018 and had broad representation from associations, training providers and some of the provincial departments of health.

Practitioners are encouraged to engage with the Board through the Deputy Company Secretary, Ms Adelle Taljaard.

Chairperson: Professional Board for Occupational Therapy, Medical Orthotics and Prosthetics and Arts Therapy.

Matty van Niekerk
HPCSA Online Registration Renewal System

Carmenita Dampies

The Health Professions Council of South Africa (HPCSA) is mandated to protect the public and guide the professions. In guiding the professions, it aims to provide efficient and effective service to its practitioners. In the third quarter of the 2016/17 financial year, Council engaged a systems development company to develop an Online Renewal and Fee Payment Portal which it believes is in line with its strategic objective of improving performance and functionality. This portal provides a simpler, quicker and efficient renewal registration process.

The benefits of the online system are:

- Practitioners are able to go through the renewal process online
- Practitioners are able to make annual fee payments and other outstanding amounts, as invoiced, online
- Practitioners are able to download an electronic practitioner card including an encrypted QR code, which when scanned, will reveal much more information about the practitioner than is currently the case, with real-time validation
- Practitioners who prefer the printed format are able to print their HPCSA registration details from the system
- Practitioners are able to view, verify and confirm, or update their contact details, as they renew their membership, or at any time through this portal;
- The portal allows the practitioner to view their qualification(s) and registration details, and where required, send a service request for queries.

Since 1 March 2017, practitioners were renewing their registration and making annual fee payments online through the HPCSA website, www.hpcsa.co.za choosing the online renewal tab. We are encouraging all practitioners to use the online portal as it has the capability to generate a Practising Card immediately after payment is made. The new Practising Card can be saved on any device, sent via email or printed and is acceptable proof of renewal of registration.

Step-by-step guide on Renewal and Payment. Renewal and payment processes are completed in four easy steps as follows:

- **Step 1**: Create an HPCSA account – Requirements: 13-digit ID number or passport number
- **Step 2**: With ID Number as username and password created in Step 1, LOGIN and Renew. Personal details may be edited at this stage
- **Step 3**: Make Annual Payment through Credit or Debit Card or Integrated EFT or Bank Deposit
- **Step 4**: Access the HPCSA Practising Card – electronically or print out.
Alternative Payment Methods:
The current payment process via Electronic Funds Transfer (EFT) or bank deposits to HPCSA’s ABSA bank account will still be available for practitioners who prefer this method.

Banking details:
ABSA
Branch: Arcadia
Branch Code: 63 2005
Account Name: HPCSA
Account Type: Cheque
Account Numbers: Annual Fees: 405 00 33 481
Other moneys: 061 00 00 169
Swift Code: ABSAZAJJ
Deposit References: Include your HPCSA registration number as reference

New registrations use your ID or passport number as a reference.

Even if Practitioners decide not to pay online, they are encouraged to update contact details and provide other relevant information which is requested by the HPCSA on the portal. For practitioners who opt to pay via EFT or bank deposit, the practising card will only be accessible on the portal after 72 hours of receiving payment depending on payment method used.

We have now fully migrated to the new electronic format for the 2018/2019 renewal period.

For a step-by-step guide to access the Online Renewal and Payment Portal and a guide on the scanning process of the QR code, please go to www.hpcsa.co.za.

Enquiries: Practitioners may contact the HPCSA on our Call Centre number: (012) 338 9300/1 or email us on: info@hpcsa.co.za for assistance.
The ethical practice of the Health Professions Council of SA requires consistent and ongoing commitment to lifelong learning by all healthcare practitioners, through the process of Continuous Professional Development (CPD). CPD assists healthcare professionals to update and develop their knowledge, skill and ethical attitudes that underpin competent practice. A healthcare practitioner is required to engage and accumulate CEU’s per twelve-month period of which a specific number of the CEUs should be for ethics, human rights and medical law. All CEUs are valid for 24 months from the date which the activity took place/ended.

The following guidelines are to advise healthcare practitioners on the requirements for CPD. These guidelines will also assist healthcare practitioners by providing them with guidance on the processes to follow to comply with CPD as well as a varied list of activities to explore in order to remain compliant.

Each individual is required to obtain thirty (30) CEUs annually, or the required CEUs for their register as determined by their Professional Board, of which should include at least, 5 CEUs for ethics, human rights or health law.

- HPCSA Individual activity record (Form CPD IAR 1), each individual/health practitioner should keep this as a record of every learning activity attended or completed.
- The record form should include the following:
  - Name and registration number of the health practitioner
  - Name and number of the accredited Service Provider or individual activity accreditation number
  - Topic of the activity
  - Number of CEUs
  - Attendance/Completion date
- The attendance certificates for each event or series of events should accompany it and be kept for at least two (2) years so that it is available if required for a random compliance check
- For level 2 qualifications certified copy of the qualification is required
- The record should be regularly updated and kept current
- Practitioners may obtain their units within their own discipline, category or speciality or sub-speciality or within another relevant discipline category, speciality, sub-speciality.

**Learning activities: Level 1:**
- These CPD activities for which Continuous Education Units are obtained, might have measurable and non-measurable outcomes. Those with measurable outcomes that do not necessarily constitute full years of earned CEUs.

**Learning Portfolio: Level 2:**
- The record of a healthcare practitioners learning and self-development over time, reflecting the healthcare practitioner’s growth and improved practice.
The numbers of CUEs to be accumulated per year by healthcare practitioners who are active on the register are stipulated per profession category below:

<table>
<thead>
<tr>
<th>Register</th>
<th>Minimum number of CEUs</th>
<th>Ethics, Human rights, Health law</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational Therapists</td>
<td>30</td>
<td>5</td>
</tr>
<tr>
<td>Occupational Therapy Assistant</td>
<td>15</td>
<td>2</td>
</tr>
<tr>
<td>Occupational Therapy Technician</td>
<td>15</td>
<td>2</td>
</tr>
<tr>
<td>Medical Orthotist and Prothetist</td>
<td>15</td>
<td>2</td>
</tr>
<tr>
<td>Supplementary Medical Orthotist and Prothetist</td>
<td>15</td>
<td>2</td>
</tr>
<tr>
<td>Orthopaedic Technical Assistant</td>
<td>15</td>
<td>2</td>
</tr>
<tr>
<td>Orthopaedic Footwear Technician</td>
<td>15</td>
<td>2</td>
</tr>
<tr>
<td>Assistant Medical Orthotist, Prothetist &amp; Leatherworker</td>
<td>15</td>
<td>2</td>
</tr>
<tr>
<td>Arts Therapist</td>
<td>30</td>
<td>5</td>
</tr>
</tbody>
</table>
As an autonomous body the Health Professions Council of South Africa (HPCSA) receives no grants or subsidies from government or any other source. It is totally funded by the fees it receives from registered persons representing the professions under its jurisdiction. Each Professional Board, however, administers its own budget in a transparent manner from the funds allocated by the HPCSA, based on fees paid by various professions to Council. Such fees are not necessarily uniform but depend on the actual cost of running the Board; on the levy paid by the Professional Boards to Council towards a stabilisation fund from which Council can allocate money in contingency circumstances, and on the cost of the running of the HPCSA.

The annual fee paid by healthcare professionals is used to cover the costs of:

- Running the Professional Board under the jurisdiction of Council as well as the HPCSA and its structures;
- Administering the professions registered with the HPCSA in terms of registration, maintaining of standards of education and training as well as the maintaining of fair standards of professional practice.

Annual fees are payable to the HPCSA by 1 April and are valid until 31 March of the following year. Registration is the responsibility of every registered practitioner to ensure that his/her annual fee is paid by 1 April of each year. Registered healthcare practitioners who have not paid their annual fees by 1 April of a particular year, will be erased from the register within three months of the due date of 1 April.

The registrar of the HPCSA must keep registers in respect of persons registered in terms of the Health Professions Act 56/1974 (HPA), and must enter in the appropriate register the following information:

- Name
- Relevant contact details
- Qualifications
- Date of initial registration and such other particulars (including the registration category in which they hold registration and the name of their speciality, subspeciality, professional category or categories, if any) as the relevant Professional Board may determine, of every person whose application for registration in terms of section 17(2) has been granted.

The registrar must keep the registers correctly and in accordance with the provisions of the Health Professions Act and shall remove the names of deceased practitioners, or practitioners whose names have been erased from the register in accordance with provisions of the Act, such as in the case of persons who have been found guilty of severe misconduct and have thus been struck off the register.

The HPCSA prescribes that should a person registered with the HPCSA change their contact details, they must notify the registrar in writing within thirty days after such change. This can be done by email to records@hpcsa.co.za or info@hpcsa.co.za

Practitioners should note that their names could be suspended from the register, e.g. when they fail to notify the registrar of their changed contact details following communication from the registrar by registered mail to their address on the register, or failure to pay annual fees. The HPCSA retains jurisdiction over practitioners when their names are suspended from the register and thus can continue to take disciplinary steps against them. These practitioners’ registration is not in good standing and they should not practice their profession. If their name is removed from the register, they have to apply for restoration.

When a practitioner’s name is struck off the register, they must cease practising their profession immediately. Should they continue to practise whilst unregistered, they are committing a criminal offence. Their names are handed over to the HPCSA’s Inspectorate, who in cooperation with the South African Police Services, will initiate criminal proceedings against them, as it is a criminal offence to work as a healthcare practitioner in a profession under the ambit of the HPCSA while not registered.
A practitioner’s name can be removed or suspended from the register in the following circumstances:

• Failure to pay annual fees

• If the registrar sent an enquiry to a practitioner by certified mail to the address appearing on the register for this practitioner, and the practitioner failed to notify the registrar, within a period of three months as from the date of the enquiry, of his or her present address

• Who has been found guilty of unprofessional conduct and suspension from the register is the sanction

• When an impaired practitioner has been found to be a danger to him/herself and the public (patients)

• When a practitioner requests that his/her name is removed from the register. It should be noted that should a practitioner make such a request, they may be required to provide the registrar with an affidavit stating that no unprofessional conduct nor criminal proceedings are pending against him/her,

• If a registered practitioner’s name is suspended from the institution who granted the qualification on the basis of which the practitioner could register with the HPCSA and practice a profession

• Who has been registered in error or through fraud

• Who has been found guilty of unprofessional conduct and removal from the register is the sanction

A healthcare professional may apply for exemption of payment of the annual fee if he/she turns seventy one (71) before 1 April of the year, otherwise the practitioner will only be exempted from the following year. The request must be submitted in writing and supported with a copy of the ID document which could be faxed to (+27) 12 328 5120 or (+27) 12 325 2074.

A person whose name was erased from the register has to apply to restore his/her name to the register by duly completing the Application for Restoration form, Form 18 which has to be submitted together with proof of payment of the restoration fee, which is calculated as follows:

1. Restoration within a period of six months after the erasure date is equivalent to two (2) times the current annual fee, plus the outstanding annual fee(s).

2. Restoration after a period of more than six months since the erasure date but within a year is equivalent to four (4) times the current annual fee, plus the outstanding fee(s);

3. Restoration after a period of 12 months since the erasure date is equivalent to five (5) times the current annual fee, plus the outstanding fee(s).

The following should also be submitted by a practitioner whose name has been off register for a period exceeding 2 years was practising their profession abroad/ outside South Africa:

1. Proof of CPD attended to during the preceding 24 months.

2. Proof of practising your profession during the period of erasure/suspension of your name from the register.

3. A certificate of status issued by the regulatory authority where you were practising your profession, not older than three months. The certificate should be submitted by the regulatory authority to hpcsacgs@hpcsa.co.za

All of the above except certificate of status should be submitted by the applicant to HPCSA.
In most of the professions registered at the HPCSA the need for Mid-level workers exists. The Medical Orthotics and Prosthetics field has two categories of Mid-level workers, namely Orthopaedic Footwear Technicians (OB category) and Medical Orthopaedic Technical Assistants (OSA category).

According to the new education standards of ISPO (1) the historical occupational classification for Prosthetic / Orthotic Personnel were defined as follows:

a. Prosthetist / Orthotist (Category I) “The training level aimed at the full breadth of clinical service, leadership, advancing models and / or methods of service delivery” (1)

b. Associate Prosthetist / Orthotist (Category II) “The training level aimed at general clinical service delivery (1)

c. Prosthetic / Orthotic Technician (Category III) “The training level aimed at technical design fabrication of devices without providing clinical intervention” (1)

When viewing this explanation from ISPO, it is clear that the Orthopaedic Footwear Technicians as we know them in South Africa can fall into category II because of the clinical element regarding the measuring & manufacturing of the surgical boots, but also into Category III(2). However, the ISPO document also shows that the category II practitioners work independently. This is a challenge in South Africa as the OFT’s are registered as in a supervised practice category and are therefore more aligned with the category III level of ISPO.

The ISPO document furthermore emphasises the importance of policy makers establishing the training programmes for the quality, the volume and the sustainability of services in each country.

The new model that the ISPO standards suggest includes levels of training according to the European qualification framework. This however is not currently applicable to the South African OFT’s and OSA’s as there is no formal training programme currently in South Africa that is accredited to teach the minimum competencies needed.

The Health Professions Act provides for the rules regarding the education and training programmes for qualifications registerable at the HPCSA (3). The regulation relating the registration of orthopaedic footwear technicians was published in 1981 (4). It states that a person who wants to be registered in this field must have a three year in service training and after successfully doing a Board examination may be registered as an Orthopaedic Footwear Technician (4).

In line with the abovementioned regulation, the OCP Board has developed the guidelines for the Board examination for OFT’s. The guidelines explain the process that has to be followed to be able to write this examination and will be available on the HPCSA website in due course. It further provides information on the content and format of the examination, which includes a portfolio in specific aspects of the OFT’s scope of practice.

The OCP Board is looking forward to the successful implementation of the OFT examination project and would like to encourage candidates that are ready to undergo this process to apply for the examination.

References

Farewell to Professor Margo Graham

Jennie McAdam

The Professional Board for Occupational Therapy, Medical Orthotics and Prosthetics and Arts Therapy (OCP) Board recently bid farewell to Professor Margot Graham, who has served the Board in numerous capacities over an extended period. Professor Graham was a member of the Education Committee since 2010, serving as the coordinator of the Board examinations for foreign qualified practitioners, and also arranging the OTT Top-Up examinations for approximately six years. This huge Board project enabled over 400 OTA practitioners to register as OTTs after successful completion of the examination, thereby contributing significantly to the development of the South African Occupational Therapy workforce.

Professor Graham was also instrumental in the improvement of essential Board functions, having contributed enormously in the Examination, Evaluation and Standardised Test Task Teams. She then also completed numerous Board Evaluations of OT training programmes, as well as sharing her expertise and experience in this regard by training first-time evaluators and evaluation convenors. Margot, thank you for your outstanding service, commitment and generosity in sharing your wisdom, experience and expertise - you will be greatly missed by the OCP Board!
What is the role and functions of the Health Committee?

Composition

The Health Committee of Council shall consist of six (6) members constituted as follows:

a) The Chairperson, elected by Council from amongst its members
b) A Psychiatrist, elected by Council
c) A Psychologist, elected by Council
d) A Psychologist appointed by Council in consultation with the Professional Board for Psychology
e) A Psychiatrist, appointed by Council in consultation with the Medical and Dental Professions Board
f) An Occupational Health Specialist appointed by Council

What are the responsibilities and functions of the Health Committee?

The Regulations Relating to Impairment of Students
and Practitioners under the Health Professions Act, 56 of 1974 provide a detailed account of the role and responsibilities of the Health Committee of Council and these are summarised as reflected below:

The Health Committee of Council is authorised to:

a) establish policies and procedures and to enlist cooperation and support for the prevention or alleviation of circumstances which may lead to impairment in students and practitioners;

b) establish mechanisms and procedures for the early identification of impairment in students and practitioners;

c) implement procedures for handling crisis situations which may threaten patient safety and care;

d) undertake informal assessments of reports on alleged impaired students and practitioners, to make findings with regard to impairment and, if required, to impose conditions of registration or practice on such persons aimed at protection of patients and treatment of impaired person;

e) appoint investigation committees on an ad hoc basis to undertake formal investigations into reports on alleged impairment in the absence of voluntary cooperation of students or practitioners, to make findings with regard to impairment and, if required, to impose conditions of registration or practice aimed at protection of patients and treatment of impaired students or practitioners;

f) consider applications by students or practitioners who were found to be impaired to have their conditions of registration or practice amended or to have such conditions revoked;

g) oversee the implementation of treatment programmes of impaired students or practitioners and to review the position of each such student or practitioner at least every (3) years;

h) co-opt a member or members of a Professional Board to serve on an ad hoc basis on the Committee as and when particular input is required in respect of a specific profession or health professional registered under a particular Professional Board;

i) Regularly review and make recommendations about changes to the terms of reference of the Committee;

j) Obtain or perform an annual evaluation of the Committee’s performance and make applicable recommendations.

The Health Committee can be contacted by email HealthCommittee@hpcsa.co.za or 012 3383963

Please be on the look out for the next article on the processes and procedures of the Health Committee.
Health Professions Council of South Africa

GENERAL INFORMATION

For any information or assistance from the Council direct your enquiries to the Call Centre

Tel: 012 338 9300/01
Fax: 012 328 5120
Email: info@hpcsa.co.za
Website: www.hpsca.co.za

Where to find us:
553 Madiba Street
Corner Hamilton and Madiba Streets
Arcadia, Pretoria
PO Box 205
Pretoria 0001

Working Hours:
Monday – Friday: 08:00 – 16:30
Weekends and public holidays – Closed
Certificate of Good Standing/ Status, certified extracts verification of licensure
Email: hpcsacgs@hpcsa.co.za

Continuing Professional Development (CPD)
Helena da Silva
Tel: 012 338 9413
Email: cpd@hpcsa.co.za

Raylene Symons
Tel: 012 338 9443
Email: raylenes@hpcsa.co.za
Change of contact details
Email: records@hpcsa.co.za

Registration & Restoration
Email: Registrationgroup@hpsca.co.za

Ethics and professional practice, business practice and human rights:
Adv. Ntsikelelo Sipeka
Tel: 012 338 9304
Email: NtsikeleloS@hpcsa.co.za

Service Delivery
Email: servicedelivery@hpcsa.co.za
Tel: 012 3389301

Complaints against practitioners Legal Services
Fax: 012 328 4895
Email: legalmed@hpcsa.co.za

Statistical Information and Registers:
Yvette Daffue
Tel: 012 338 9354
Email: yvetted@hpcsa.co.za

Professional Board for Occupational Therapy, Medical Orthotics and Prosthetics and Arts Therapy

Secretary
Ms Ncumisa Maphasa
Tel/fax: 012 338 9327
E-mail: ncumisam@hpcsa.co.za

Committee Coordinator
Mrs Seetha Reddy
Tel/fax: 012 338 3920
E-mail: seethar@hpcsa.co.za

Administrator
Mrs Zandile Bapela
Tel/fax: 012 338 9409
E-mail: zandileb@hpcsa.co.za

Deputy Company Secretary
Mrs Adelle Taljaard
Tel/fax: 012 338 9349
E-mail: adellet@hpcsa.co.za

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