



# Physiotherapy, Podiatry and Biokinetics **NEWS**

Newsletter of the Professional Board for Physiotherapy, Podiatry and Biokinetics



## FROM THE CHAIRPERSON

**W**elcome to the first edition of the Physiotherapy Podiatry and Biokinetics (PPB) Board newsletter. The new Board was inaugurated just over a year ago and all the subcommittees of the Board have been constituted and are functioning efficiently.

I am privileged to serve with such dedicated Board Members who diligently contribute to the work and the decision making of the professions. The Board is beginning to settle in after having held two meetings and after hosting a successful Roadshow in Limpopo, where we met with Physiotherapists and Biokineticists. Unfortunately, there were no Podiatrists present at the meeting, however, we will make efforts to reach out to this group. The interactions and exchange of knowledge during the roadshow was enlightening. It was interesting to note how the practitioners were unsure whether the Board could negotiate salaries or deal with contracts with the medical aids. This highlights the importance of stakeholder engagements.

The vision of the Board is to ensure quality and specialised skills in Physiotherapy, Podiatry and Biokinetics for all. The strategic objectives of the board are to guide and regulate the profession;

- Protect the public;
- Advocacy, advisory and
- Stakeholder engagement
- Effective and efficient functioning of the Board.

In guiding the profession the Board intends to review the scope of the professions, together with the minimum standards of all the professions within the Board. This will include the areas of overlap in order to deter transgression of scope. The Board is also aware that communication with stakeholders requires more attention and plans have been developed to address this. As part of Council's mandate to protect the public, the Board will endeavour to empower, inform and educate the public on their rights in respect to PPB services. The public is often unaware of the services rendered by each of the professions in our Board. Therefore, the Board intends to improve



the public awareness through the available media platforms as well as face to face engagements. There are some gaps that exist within the regulations, thus we shall identify these gaps in the policy and encourage research that will influence policy. When areas of research are identified, partnerships and or collaborations with institutions of higher learning will be forged. The results of this research will inform regulations and policies of the Board, which in turn, will influence the policy of Council.

A risk monitoring tool is being developed to monitor the functioning and performance of the Board. This is important as it will determine whether the Board is able to achieve its strategic objectives.

We look forward to being of service to our colleagues for the next four years.

*Mrs Zola Dantile  
Chairperson of Physiotherapy, Podiatry and Biokinetics Board*

### HIGHLIGHTS IN THIS ISSUE

**Misrepresentation of qualification by practitioners registered under the Physiotherapy, Podiatry & Biokinetics Board**

**Use of the title "Physiotherapist" & "Physical Therapist"**

**Implementation of a 4-year Biokinetics degree programme**

**Scope of Profession for Physiotherapy, Podiatry and Biokinetics**

**Who's in the PPB Board**

## MISREPRESENTATION OF QUALIFICATION BY PRACTITIONERS REGISTERED UNDER THE PHYSIOTHERAPY, PODIATRY AND BIOKINETICS BOARD.

*By Dr D Mathye (Chairperson of the Preliminary Committee of Inquiry)*

**I**n an effort to guide the professions registered under the Board of Physiotherapy, Podiatry and Biokinetics (PPB) as provided for in Section 15A (h) of the Health Professions Act 56 of 1974 ("Act"), the PPB Board has resolved to advise professionals in particular, physiotherapists, to desist from misrepresenting their qualifications on professional stationery or any other related professional materials.

Even though a BSc (Physiotherapy) or B. Physiotherapy degrees offered by accredited Universities in South Africa are at National Qualification Framework (NQF) level 8, which is on the same footing as an honours degree, these qualifications are not honours degrees unless specified as such on the degree certificate or provided for in the Regulations relating to the registration by physiotherapists of additional qualification (BN 77/GG 31327/2008).

### In terms of Section 35 (3) of the Act:

"No registered person shall take, use or publish in any way whatsoever any name, title, description or

symbol indicating or calculated to lead persons to infer that he/she holds any professional qualification which is not shown in the register as registered against his/her name, nor shall any registered person practise as a specialist or hold himself/herself out to be a specialist unless his/her speciality has been registered as prescribed".

Any practitioner who masquerades to be in possession of a BSc Physio (Honours) will be in contravention of Section 35 (3) of the Act. Similarly, a practitioner who advertises his or her services and utilises professional stationery bearing the BSc Physio (Honours) will be contravening Rule 3 (1) of the Ethical Rules of Conduct for practitioners registered under the Act which provides that:

"A practitioner shall be allowed to advertise his/her services or permit, sanction or acquiesce to such advertisement: Provided that the advertisement is not unprofessional, untruthful, deceptive or misleading or causes consumers unwarranted anxiety that they may be suffering from any health condition".

## THE IMPORTANCE OF RECORD KEEPING

*Ms Nonzamo Duma*

**Q**uality medical records are vital for effective communication between healthcare professionals and their patients. Any practitioner may be faced with a patient complaint, a HPCSA disciplinary enquiry or medical negligence case. The state of the medical records may determine the outcome of the case; this could have a negative impact on the practice or one's career. Record keeping is essential for continuous effective patient care. An inaccurate or incomplete record of a patient's information is simply poor clinical practice, thus poor patient care, which could expose patient to risk. It is every practitioner's ethical and statutory duty to provide good patient care.

A patient's medical record is made up of: hand written clinical notes, electronic records, consent forms,

emails, text messages, verbal correspondences between the health professional and the patient, medico legal and other reports, radiology films and copies, photographs, video and audio recording and forms completed during consultation.

The HPCSA requires every practitioner to keep good medical records which are: comprehensive, contemporaneous, comprehensible and accurate as well as attributable and tamper proof.

The following constitutes the essential requirements of a medical record:

- Personal identifying particulars of the patient.
- Bio psychosocial history of the patient.
- Separate entry for each consultation with date, time, and place.
- Assessment.

- Detailed clinical management.
- Prescribed or dispensed medication and dosages.
- The patient's reaction to treatment and medication, including adverse effects.
- Results of the investigations.
- In cases where patient was booked off, details thereof.
- Written informed consent.

All the above entries must be eligible and signed.

### Case Study:

Patient X filed a complaint to the HPCSA regarding Practitioner Y. She stated that Practitioner Y, came to her bed side in hospital, introduced himself and made her walk across the passage a few times. She has now received a letter of demand from the practitioner, for treatment she claims she didn't even receive and the medical aid didn't pay.

The practitioner was then requested to provide copies of the patient's medical records to the HPCSA.

### The findings of the case were as follows:

The Practitioner was found clear of the charge regarding services not rendered, as it was indicated clearly in the clinical notes, dated and signed. However, no signed copy of the consent form was available, thus found guilty on that charge. The patient could not be liable for payment, as the practitioner did not have proof of, the claim submitted to medical aid on time, nor invoice or statement of account sent to the patient on time.

Inadequate record keeping may result in devastating consequences to the patient and all concerned in patient care. The HPCSA has published Guidelines on the Keeping of Patient Records (2008), practitioners familiarity with these would be of benefit to all.

## THE IMPORTANCE OF COMMUNICATION IN OBTAINING INFORMED CONSENT

Lorraine Jacobs

A patient who is satisfied with his or her practitioner is less likely to sue, even if there is an adverse outcome. A satisfied patient regards his or her healthcare practitioner as concerned, accessible, and willing to communicate.

Poor communication skills and the failure of the patient-physician relationship increase the risk of being sued, whether an error has occurred or not. Patients complain that practitioners do not listen or offer information. Practitioners with a high frequency of litigation were most likely to be dissatisfied with the human aspects of care, such as interpersonal skills and communication, rather than clinical expertise.

The process of obtaining informed consent is an opportunity to enhance patient-practitioner communication and rapport. This opportunity is lost if the practitioner does not take time to go through all the elements of consent, which includes explaining the procedure along with the specific risks, possible complications, and alternate treatments available. This sharing of information has been shown to improve a patient's understanding, thus decreasing anxiety and increasing trust in the practitioner.

This process allows time to dispel any unrealistic

expectations before the treatment begins. The objective of informed consent should be to replace some of the patient's anxiety by providing a sense of participation in and control over his or her care. Obviously, this cannot occur if the informed consent process consists merely of handing the patient a piece of paper to sign.

### References:

- *HPCSA Guidelines for Good Practice in the Healthcare Professions - Booklet 9: Seeking patients' informed consent: the ethical considerations.*
- *Hickson GB, Clayton EW, Entman SS, et al. Obstetricians' prior malpractice experience and patients' satisfaction with care. JAMA. 1994;272(20):1583-1587.*
- *Huntington, B., & Kuhn, N. (2003). Communication gaffes: a root cause of malpractice claims. Proceedings (Baylor University Medical Center), 16(2), 157-161.*
- *Falker ES. The medical malpractice in obstetrics: a gestalt approach to reform. Cardozo Women's Law Journal. 1997; 4:1-32.*
- *Use of the title "Physiotherapist" and "Physical Therapist" From the Committee of Preliminary Inquiry of the Professional Board*

## REGISTERING AN ADDITIONAL QUALIFICATION OR POST-GRADUATE DEGREE FOR PHYSIOTHERAPISTS, PODIATRISTS AND BIOKINETICISTS

Lorraine Jacobs



Any practitioner who has completed a post-graduate degree is entitled to register this degree with the HPCSA under the Health Professions Act 56 of 1974 Section 35, with the following restrictions:

### Extracted from Section 35:

- (1) A person who desires to have a qualification registered, other than the qualification by virtue of which he or she has in the first instance been registered, shall, upon payment of a prescribed fee and subject to the provisions of subsection (2), be entitled to have such additional qualification entered in the register.
- (2) No registered person shall take, use or publish in any way whatsoever any name, title, description or

symbol indicating or calculated to lead persons to infer that he or she holds any professional qualification which is not shown in the register as registered against his or her name, nor shall any registered person practise as a specialist or hold himself or herself out to be a specialist unless his or her specialty has been registered as prescribed.

A list of the post-graduate qualifications that are currently registrable can be found on the PPB page on the HPCSA website under Rules and Regulations:

### Physiotherapists

(Available at [http://www.hpcsa.co.za/Uploads/editor/UserFiles/downloads/legislations/regulations/ppb/rules/rules\\_bn72\\_2007.pdf](http://www.hpcsa.co.za/Uploads/editor/UserFiles/downloads/legislations/regulations/ppb/rules/rules_bn72_2007.pdf))



### Podiatrists

(Available at [http://www.hpcs.co.za/Uploads/editor/UserFiles/downloads/legislations/regulations/ppb/regulations/regulations\\_gnr2295\\_76.pdf](http://www.hpcs.co.za/Uploads/editor/UserFiles/downloads/legislations/regulations/ppb/regulations/regulations_gnr2295_76.pdf)) The following qualifications held by podiatrists shall be registrable as additional qualifications under section 35 of the Act:

1. Any qualification recognised by Council in terms of section 32 (1) of the Act and listed in the rules for the registration of podiatrists.

## CPD UPDATE

*Dr S Maharaj (CPD representative)*

**M**andatory Continuing Professional Development (CPD) is now fully implemented for all professionals registered with the Health Professions Council of South Africa (HPCSA). The rationale for CPD is to improve healthcare, by ensuring that all practitioners participate in relevant accredited activities. These activities are essentially learner-centered and self-directed and require attendance and engagement of short courses, in-service training, workshops, research publications and post graduate activities, etc.

However, recent audits by the HPCSA reveal low compliance to CPD requirements, with some challenges such as the high cost of courses, attendance time and limited professional specific courses serving as barriers for non-compliance. The CPD committee of the HPCSA is trying to improve the compliance rate by encouraging journal clubs as well as online, professional specialists and in-service courses for all health professionals.

It is important to note that all Professionals registered with the HPCSA are audited randomly. During this process activities are based on Continuing Education Units (CEUs). For the professions of Physiotherapy, Podiatry, and Biokinetics (PPB) a minimum 30 CEUs must be accumulated per year, including a minimum

2. The Society of Podiatrists, London (after examination)

### Biokineticists

There are currently no registerable post graduate qualifications listed for Biokineticists.

#### How do you register your qualification?

If your post-graduate qualification appears on the list you will have to register it with the HPCSA using Form 19 and make a payment fee of (currently R214).

Either the original degree or a copy that has been certified by an attorney in his or her capacity as a Notary Public (not by a Commissioner of Oaths), and posted by Registered Post to the HPCSA. If your post-graduate qualification does not appear on the list, the relevant academic institution will have to apply through the Education Committee of the PPB Board to have it registered.

| Examining Authority and Qualification                          | Abbreviation for registration                                   |
|--|---|
| <b>Chartered Society of Physiotherapy</b>                      |   |
| Diploma for Teachers of Physiotherapy Fellow                   | Dip TP CSP<br>FCSP  |
| <b>University of Cape Town</b>                                 |   |
| Certificate in Teaching Physiotherapy                          | CTP Cape Town   |
| Diploma in Teaching Physiotherapy                              | Dip TP Cape Town  |
| Advanced Diploma in Teaching Physiotherapy                     | Dip Advanced TP Cape Town                                       |
| Diploma in Intensive Care Physiotherapy                        | Dip ICP Cape Town   |
| Advanced Diploma in Intensive Care Physiotherapy               | Dip Advanced ICP Cape Town                                      |
| Baccalaureus Scientiae Medical Honours in Sport Science        | BSc (Med)(Hons) Sport Science Cape Town                         |
| Master of Science (Physiotherapy)                              | MSc (Phys) Cape Town  |
| Doctor of philosophy (physiotherapy)                           | PhD (Phys) Cape Town  |
| <b>University of the Free State</b>                            |   |
| Tertiary Education Diploma                                     | Dip TersiSre Ond Free State                                     |
| Honours Bachelor of Science in Physiotherapy                   | BSc Hons (Fis) Free State                                       |
| Master of Science in Physiotherapy                             | MSc (Fis) Free State  |
| <b>University of Limpopo (Formerly Medunsa)</b>                |   |
| Master of Science in Physiotherapy                             | MSc (Phys) Limpopo  |
| Doctor of Philosophy (Physiotherapy)                           | PhD (Phys) Limpopo  |
| <b>University of Kwazulu-Natal (Formerly Durban-Westville)</b> |   |
| Diploma in Teaching Physiotherapy                              | Dip TP Kwazulu-Natal  |
| Master of Physiotherapy  | M Phys Kwazulu-Natal  |
| <b>University of Pretoria</b>                                  |   |
| Diploma in Physiotherapy Education                             | Dip PE Pret   |
| Diploma in Tertiary Education                                  | DTO Pret  |
| Baccalaureus Honores in Physiotherapy                          | BPhysT (Hons) Pret  |
| Master of Physiotherapy  | MPhysT Pret   |
| Philosophiae Doctor (Physiotherapy)                            | PhD Fisioterapie Pret   |
| Bachelor of Arts Honours in Physical Education (Biokinetics)   | BA (LO) (Hons) Biokinetika Pret                                 |
| Postgraduate Diploma in Hand Therapy                           | Postgrad Dip Hand Therapy (Pret)                                |
| <b>University of South Africa</b>                              |   |
| Tertiary Education Diploma                                     | Dip Tersiere Ond Suid-Africa                                    |
| Higher Education Diploma (Technical)                           | HOD (Tegnies)(AGD) Suid-Afrika                                  |
| <b>University of Stellenbosch</b>                              |   |
| Honours Bachelor of Science in Physiotherapy                   | Hons BSc (Fisio) Stellenbosch                                   |
| Master of Science in Physiotherapy                             | MSc (fisio) Stellenbosch  |
| Honours Bachelor in Medical Sciences (Epidemiology)            | Hons BSc Geneeskundige Wetenskappe (Epidemiologic) Stellenbosch |
| Master of Business Administration in Health Management         | MBA Gesondheidsbestuur Stellenbosch                             |
| Master of Public Administration in Health                      | MPA Openbare-gesondheidsbestuur Stellenbosch                    |
| Management Doctor of Philosophy                                | (Med) PhD (Med) Stellenbosch                                    |
| <b>University of Western Cape</b>                              |   |
| Honours Baccalaureus Scientiae in Physiotherapy                | Hons BSc (Phys) Western Cape                                    |
| Physiotherapy  | Hons (BSc (Phys) Western Cape                                   |
| Magister Scientiae in Physiotherapy                            | MSc (Phys) Western Cape   |
| <b>University of the Witwatersrand</b>                         |   |
| Diploma in Advanced Physiotherapy                              | Dip Advanced Phys Witwatersrand                                 |
| Diploma in Physiotherapy Education                             | Dip PE Witwatersrand  |
| Advanced Diploma in Physiotherapy Education                    | Advanced Dip PE Witwatersrand                                   |
| Master of Science in Physiotherapy                             | MSc (Phys) Witwatersrand  |
| Doctor of Philosophy   | PhD Witwatersrand   |

## IMPLEMENTATION OF A 4-YEAR **BIOKINETICS** DEGREE PROGRAMME

by Dr Jeanne Grace

**O**n 28 June 2016 a meeting was held between the Professional Board of Physiotherapy, Podiatry and Biokinetics and the Heads of Departments and Biokinetics programme coordinators of institutions that offer Biokinetics. The purpose of the meeting was to clarify whether these institutions were compelled to do the four-year professional degree programme, or could continue with the 3 + 1 year programme.

Professor K Naidoo from the Council of Higher Education (CHE) presented on the Higher Education Qualification Sub-framework and the Deputy Director of the Department of Higher Education and Training, Mrs N Zulu-Siwela also attended the meeting.

### The following resolutions and recommendations were made to the PPB Board:

- It is imperative that the Board completes its processes pertaining to the delineation of scopes of practice and profession, as well as development of minimum standards of training and graduate attributes;
- Institutions should continue to offer the

current programmes until such time that the Board advises universities on the way forward regarding the implementation of the four year professional degree in Biokinetics.

- Work integrated learning (WIL) will be included in the programmes from the first year of study;
- Institutions are encouraged to engage the CHE to assist with facilitating processes of development of curricula implementation of WIL and alignment of programmes;
- Institutions are encouraged to consult with UF, University of North West (UNW) and Nelson Mandela Metropolitan University (NMMU), which currently offer the four year professional degree in Biokinetics when considering to apply to convert to the Four Year Professional Degree in Biokinetics;
- The Department of Higher Education and Training has requested that the Board and institutions consider developing diploma programmes (mid-level qualifications) in the profession to accommodate people who are unable to enter the profession through the degree channels.

## SCOPE OF PROFESSION FOR PHYSIOTHERAPY, **PODIATRY AND BIOKINETICS**

Dr Marianne Unger

**W**hilst the practice of the Professions – Physiotherapy, Podiatry and Biokinetics – has evolved, the documents pertaining to the scopes thereof have not been updated since they were first promulgated – for Physiotherapy in 1976, Podiatry in 1986 and Biokinetics in 1994.

The burden of disease and healthcare in South Africa however, has changed and the professions have had to adapt. The focus of healthcare has shifted to primary care. Advancements in technology and the increasing evidence emanating from research is forcing professions to reflect on what they are doing and how they are doing it. It is evident that there is a huge need for screening and therapy services in both the public and private sectors. Practitioners are grabbing opportunities as they present and upskilling themselves. A significant increase in the number of

complaints to the HPCSA has prompted the previous Board to revisit the scope of practice as these no longer suffice to guide the professions. Any form of renewal requires multiple stakeholders input in order to make informed comments. The current Board has decided to embark on mixed methods approach which involves content mapping of scope documents from around the globe, and then via a Delphi process ask identified experts in each profession to comment on relevance of the content for each profession within the South African healthcare setting. This is unfortunately a time-consuming process. This will concurrently proceed with the minimum standards of training which is also being revised. It is estimated that this process will take another year before completion, after which it needs to follow a process for approval by the Minister of Health.

## WHO'S IN THE **PPB BOARD**

Zola Dantile



Zola qualified as a physiotherapist in 1986 at the Medical University of Southern Africa, Pretoria in South Africa, followed by a Higher Education Diploma in 1990 through UNISA, and a MSc. Physiotherapy in 2000. She is currently registered as a doctoral student at the University of Western Cape.

She has been in private practice since 2000, and manages musculoskeletal injuries, neurological conditions, post traumatic soft tissue and orthopaedic conditions. She has been involved in medico-legal assessments and reports since 2001. She is a part-time lecturer at the University of Pretoria, lecturing ethics and practice management.

She has extensive academic experience. She lectured kinesiology, cardiothoracic management in intensive care and applied research at the Medical University of Southern Africa (now MEDUNSA (Sefako Makgato)) from 1997 to 1999. Before that, from 1990 to 1996, she lectured respiratory therapy, kinesiology, community health and managed a clinical co-ordination portfolio at the University of Western Cape. She has served as an external examiner at various physiotherapy training Universities in South Africa, has presented Research Papers and delivered key note addresses both at national and international Physiotherapy Congresses.

She is a former President of the South African Society of Physiotherapy and was bestowed with an Honorary Life Membership. She is a past Vice President of the World Confederation of Physical Therapy (WCPT) and is a former Africa Representative on WCPT Executive Committee. The Nigerian Society of Physiotherapy bestowed on her an award in recognition of the contribution to the profession both in the region and internationally. She is the current Chairperson of the Professional Board for Physiotherapy, Podiatry and Biokinetics of the Health Professions Council of South Africa, and is a member of Council of the HPCSA. She serves in the Subcommittees of Business Practice Committee and REMCO.

### What makes me excited about the work of the Board?

The fact that I am making a difference in shaping the profession as well as being part of the team that seeks to improve the image of Council. The ability to read the enormous volumes of the Board packs with understanding and being able to comprehend is an added advantage to doing the work of the Board. I enjoy engaging with issues that the professions faced with and dealing with them head on. The Board has also identified grey areas in some of regulations that require further clarification. Such issues excite me to carry on seeking for alternative ways to improve the health of communities.

I look forward to the next four years when I can look back and count the achievements of the team.

Dr Sonill Maharaj



Dr Maharaj has served on the PPB Board since 2010 to 2015 as Chair of the Education Committee and this is his second term as a Board member. He has 23 years of clinical experience of which 13 years were at the University of KwaZulu-Natal, where he also served as the Head of

Physiotherapy for almost 10 years. In addition to his Physiotherapy degree he has an education degree, a post graduate degree in education, a master's degree in Sports Medicine and a doctorate in the management of HIV/AIDS in public hospitals. He has presented at local, national and international congresses and is affiliated to the OMICS Rehabilitation Group in the USA. He has published in many areas of Physiotherapy in national and international journals and is actively involved with research, having graduated master's candidates, and currently supervises PhD students locally and from Nigeria.

Dr Maharaj is passionate about Physiotherapy in public hospitals and has provided numerous CPD courses mainly for Physiotherapists in KwaZulu-Natal public hospitals. He also facilitated the upgrading programme for the conversion of Physiotherapy assistants to Physiotherapy technicians in KwaZulu-Natal, which was the only province to undertake this task. When not engaging in his work, his hobbies

are gardening and do it yourself (DIY) projects at home. His vision is to ensure that the professions of Physiotherapy, Podiatry and Biokinetics maintain and improve their recognition and status and that his knowledge and experience will assist the current committee to achieve this.

### Dr Jeanne Grace



Dr Grace has been practising as a Biokineticist since 1997 and was the owner of 3 Biokinetics practises. Her academic career at a Higher education institution commenced in 2009 after 13 years of practising as a Biokineticist. It shifted her focus from using exercise

as a modality to prevent and treat individuals with non-communicable diseases to alerting individuals to the effect of physical activity on their lives by converting the above into research publications. Hence, her research interests are related to physical activity and exercise for the prevention and treatment of chronic diseases of lifestyle and in special populations.

She is a lecturer of Biokinetics students at Honours and undergraduate levels. Currently, she consults with patients at the Biokinetics practise at the University.

Following the resignation of Professor Wilders from the PPB Board she was appointed as the representative for the Biokinetics profession. The Board is awaiting the appointment of a second representative from the Biokinetics profession which will be made by the Minister of Health, Dr A Motsoaledi.

Dr Grace is passionate about her profession and believes that it is very rewarding to see how an individual's life can be changed through movement. Her vision for the profession is to address the burden of chronic diseases in South Africa in partnership with other allied health professions. To expand the profession beyond working in private settings towards serving the broader South African community.

### Jacques Lloyd

Mr Jacques Lloyd is a Community Representative on the Professional Board for Physiotherapy, Podiatry and Biokinetics. Mr. Lloyd (or Jacques as he is



known) is a person living with a Spinal Cord Injury, but functioning at a very high pace.

In the past 25 years, he has worked and studied internationally and in South Africa in the field of health and rehabilitation for people with disabilities. He studied Sport Science at Stellenbosch University, specialising in physical rehabilitation for people with disabilities, followed by a Master's degree in Belgium and Norway focusing on Adapted Physical Activities, Physical Education, Rehabilitation Sciences and Physiotherapy. He is currently enrolled as doctoral student at the University of the Western Cape focused on the field of disability, HIV/AIDS and TB infection.

Mr Lloyd has been involved in numerous disability rehabilitation, health, HIV/AIDS and TB related activities including:

1. Appointed by the Minister of Health as disability consultant to serve on the National Department of Health Disability and Rehabilitation Task Team 2013/2014
2. Invited by the Minister of Health to participate in a Civil Society Consultation on the National Health Insurance (NHI) and disability related health matters
3. "Global Fund Program" as practical coordinator and spokesman (2010 – 2013) with the aim to train persons with disabilities as community-based Peer Supporters
4. Assigned to represent the Disability Sector (SADA) on the Civil Society Forum of the South African National AIDS Council (SANAC) from 2012 till 2016.

He is a member of various DPO's and have represented civil society on provincial, national and international levels. Representing the community on the Board gives me the opportunity to ensure that Board structures are sensitised regarding the challenges and needs of the community especially people with chronic illnesses and disabilities.

### Erin Amy Dayaram

Erin Dayaram holds a Bachelors degree of Technology in Podiatry from the University of Johannesburg, awarded in May of 2010. She is a private practicing podiatrist in the south of Gauteng and has been in practice for 6 years.



In 2011, she was offered the opportunity to take the office as the National Treasure of the Podiatry Association and still currently holds this position. In 2015, she was nominated as the Podiatry representative on the PPB Board. In dealing with podiatrists and the public my passion lies in uplifting the profession, upskilling podiatrists and having other professions know and understand the role of a podiatrist in the treatment and management of patients in both private and public settings.

Her vision for the podiatry profession in South Africa, is for all to have prescription rights, create and maintain a public and medical professional perception and awareness of "foot pain - see a podiatrist" and to become leaders of the Podiatry profession which will be recognised globally.

### Dr D Mathye



Dr Desmond Mathye qualified as a physiotherapist from the University of Witwatersrand in 2001 at the age of 19. He has to his credentials a Master's in Early Childhood Intervention (Pretoria), a Master's Degree in Business Administration (MANCOSA) and a PhD in Physiotherapy (Pretoria). He is currently enrolled in a Bachelor of Laws (LLB).

He has over 14 years of working experience as a clinician in both private and public sector; a researcher; an academic as well as being a head of different Physiotherapy Departments in public hospitals such as Malamulele and Evuxakeni in Limpopo Province. He has served as the physiotherapist of the South African Under-23 Soccer team between March and July 2015.

Dr Mathye was recently awarded the World Confederation for Physical Therapy (WCPT) Outstanding Platform Presentation award from the Africa Region at the WCPT Congress 2015 in Singapore in May 2015. He has presented papers at local and international conferences and congresses, published articles in scientific journals and served as a reviewer of research papers for conferences

and accredited journals. Dr Mathye is serving in the Preliminary Committee of Inquiry as its Chairperson.

### Lorraine Jacobs BSc (Physio) MSc (Physio) Wits MBA

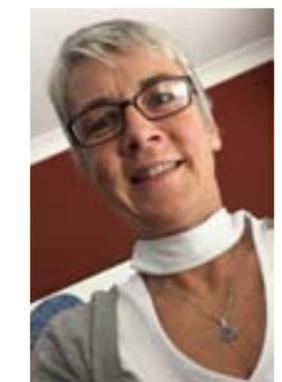


Lorraine Jacobs graduated from the University of Stellenbosch in 1979 with a BSc (Physiotherapy), and an MSc(Physiotherapy) from the University of the Witwatersrand in 2000. She is an associate in an interdisciplinary practice in Johannesburg, which includes physiotherapists, biokineticists,

psychologists, a dietitian and podiatrist, and plays a role in the finance and operations of the practice. Her clinical interest is the management of chronic pain and the prevention of disability. For the past 25 years she is in the management involved in curriculum development of CPD courses in Manual Therapy and Pain Management.

In addition, she has a Master's in Business Administration, and coaches MBA students in leadership development. To keep a balance between her professional commitments and a healthy lifestyle she plays bridge, does yoga and runs regularly.

### Dr Marianne Unger (PhD Physiotherapy)



Dr Unger is a senior lecturer in physiotherapy at Stellenbosch University offering 20 years' experience with a track record as a member of various undergraduate programmes as well as research ethics committees. She joined Stellenbosch University after almost eight years in public/clinical practice.

Her responsibilities at the university are: undergraduate and post-graduate teaching, research and community service. She is skilled at module/course and programme coordination, curriculum development and evaluation; research methods and ethics. Her special interests are in paediatric eurology – more specifically in Cerebral Palsy and Developmental Disorders. She is also very passionate

about Rehabilitation and Movement Science (therapeutic exercise). As an academic, another area of interest is education exploring alternative methods of teaching and learning of practical skills training in physiotherapy.

She lives in Durbanville Cape Town, is married, and has a daughter and two step sons; She is obsessed with exercises, particularly cycling and running. I ride a tandem road bike and once with my daughter and twice with my best friend. I have won the Ladies Tandem category of the Argus/Momentum Cycle Tour.

### Nomzamo Duma



She studied towards her undergraduate podiatry degree at the University of Johannesburg, and with encouragement from her mother she continued to complete her MBA degree while working in the cooperate sector as a training facilitator for Nike South Africa. She is currently working towards her M.Phil in Medical Law and Ethics.

Nomzamo is passionate about patient care, She moved to the public health sector as well as private practice in 2008. She has experience in different levels of the public health sector, including tertiary and primary community healthcare. She is grateful for an opportunity to work with people with disabilities, and has been volunteering in Special olympics since 2007 to date, where she was the Clinical Director for Fit Feet (SA) for 5 (five) years and currently the Fit Feet Regional Clinical Advisor for Africa Region.

An avid 'DIYer' since childhood, she could never miss out on an opportunity to create something new with her family. She recharges and reconnects with herself physically and spiritually by spending time with her family.

As a Board Member in the Physiotherapy, Podiatry and Biokinetics Board, she serves in the following committees: Executive committee, education committee as well as preliminary committee. Her interests lie in maintaining a high standard of healthcare for the South African community in the ever-changing and growing healthcare system and will ensure that the PPB Board and stakeholders work towards that goal in her term.

Profiles of the other remaining Board members including Mr Simelane, Mr Baarjies and Mr Moyo were not available at the time of publishing and will be made available later on.

## ESTABLISHMENT OF AN INSPECTORATE AT THE HPCSA

The Council has, in terms of its strategic plan determined the need for the establishment of an Inspectorate Office. The primary role is to ensure that registered practitioners comply with the provisions of the Act and the regulations. Council approved the establishment of the Inspectorate Office with regional offices currently in Cape Town, Durban and East London. The Inspectorate Office operates within the Legal Department of the HPCSA.

Previously Council did not have the capacity to ensure that practitioners whose names have been removed or suspended from the register do not continue to practise their profession. As a result, Council was also unable to act pro-actively to ensure that practitioners do not conduct their practices in a manner that poses a risk or harm to their patients. The Inspectorate Office only acts when there is a complaint or, as in most instances, as a follow up to adverse media reports.

The responsibility of the office is the enforcement of compliance with the legislative prescripts in terms of the Health Professions Act and the main tasks will include:

1. conducting inspections in terms of Section 41 A of the Act as directed by the Registrar and the Prelim Committees;
2. ensuring compliance with penalties imposed by the Professional Conduct Committees;
3. collection of outstanding fines;
4. conducting inspections to ensure that practitioner's practices do not pose a risk or harm to patients and/or members of the public;
5. attending to criminal matters in respect of unregistered persons (we currently have 154 cases relating to unregistered practitioners).

**Contacts for officials within the Inspectorate Office are:**

### HPCSA HEAD OFFICE AND GAUTENG REGIONAL OFFICE

Mr. Vincent Skosana

553 Madiba Street  
Arcadia  
0083  
P. O. Box 205  
Pretoria  
0001

Tel: 012 338 3984

### HPCSA WESTERN CAPE REGIONAL OFFICE

Mr. Anele Botile

Century City Business Centre  
No 1 Bridgeway Road  
Bridgeway Precinct, Century  
7411

Tel: 021 830 5920/21

### HPCSA KWAZULU NATAL REGIONAL OFFICE

Ms. Busisiwe Nguse

The Business Centre, 2 Ncondo Place  
Ridge Side Umhlanga Ridge  
Postnet Suite 47  
4320

Tel: 031 830 5293/94

### HPCSA EASTERN CAPE REGIONAL OFFICE

Mrs. Hayley Smith

Regus Business Centre  
Office No: 29 & 31  
No: 14 Stewart Street  
Berea  
East London, 5241

Tel: 043 783 9734

# BENEFITS OF REGISTERING WITH HPCSA

Practitioners who practise any of the health professions falling within the ambit of the HPCSA are obliged to register with Council as a statutory body.

The role of the HPCSA, apart from guiding the professions, is to:

## A

### Confer professional status

- The right to practise your profession
- Ensuring no unqualified person practises your profession
- Recognising you as a competent practitioner who may command a reward for services rendered

## B

### Set standards of professional behaviour

- Guiding you on best practices in healthcare delivery
- Contributing to quality standards that promote the health of all South Africans
- Acting against unethical practitioners

## C

### Ensure your Continuing Professional Development through:

- Setting and promoting the principles of good practice to be followed throughout your career.
- By keeping you up to date with healthcare trends
- Improving client care skills

Practitioners who are not practising their profession may in terms of section 19(1) (c) of the Health Professions Act 1974 (Act 56 of 1974) request that their name be removed from the relevant Register on a voluntary basis. A written request should reach Council before 31 March of the year in which the practitioner wishes his or her name to be removed from the Register.

## GENERAL INFORMATION

### For any information or assistance from the Council, please direct your enquiries to the Call Centre:

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

### Working hours:

Mondays - Fridays: 08:00 - 16:30  
Weekends and public holidays: closed

### Where to find us:

553 Madiba Street  
Cnr Hamilton & Madiba Streets  
Arcadia, Pretoria

### Annual Fees, payments and reminders, general information and forms, registration of locally qualified practitioners

Tel: 012 338 3901  
Fax: 012 328 5120  
Email: info@hpcsa.co.za

Tel: 012 338 3935  
Email: hpcsa@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

### Ethical queries, human rights, ethics and undesirable business practice:

**Sadicka Butt**  
Tel: 012 338 9476  
Email: sadickab@hpcsa.co.za

### Compliments and Complaints

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

### Complaints against practitioners Legal Services

Fax: 012 328 4895  
Email: legalmed@hpcsa.co.za

### Communication with the Board should be directed to:

P.O. Box 205  
Pretoria  
0001

## Professional Board for Physiotherapy, Podiatry and Biokinetics

### Board Manager

**Mr Sibusiso Nhlapho**  
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### Committee Coordinator

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### Secretary

**Ms Bongzi Nzuza**  
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### Administrator

**Ms Talent Mbatha**  
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### Administrator

**Ms Matshidiso Mogole**  
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The PPB News is a newsletter for practitioners registered with the PPB Board. It is produced by the Public Relations and Service Delivery department, HPCSA building, 2nd floor, Madiba Street, Arcadia, Pretoria. PPB Professionals are encouraged to **forward their contributions to Fezile Sifunda at feziles@hpcsa.co.za**. The copyright in the compilation of this newsletter, its name and logo is owned by the Health Professions Council of South Africa. You may not reproduce this newsletter, or its name or the logo of the Health Professions Council of South Africa that appears in this newsletter, in any form, or for commercial purposes or for purposes of advertising, publicity, promotion, or in any other manner implying their endorsement, sponsorship of, or affiliation with any product or service, without the Health Professions Council of South Africa's prior express written permission. All information in this newsletter, is provided in good faith but is relied upon entirely at your own risk. By making use of this newsletter and its information you agree to indemnify the Health Professions Council of South Africa, Employees and Service Providers from all liability arising from its use.

