

SOUTH AFRICAN NURSING COUNCIL

CONTINUING PROFESSIONAL DEVELOPMENT FRAMEWORK FOR NURSES AND MIDWIVES IN SOUTH AFRICA OCTOBER 2021



South African Nursing Council
Regulating nursing, advocating for the public

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1. ABBREVIATIONS

AOP	Area of Practice
APC	Annual Practising Certificate
ARC	African Health Professions Regulatory Collaborative
CDC	Centres for Disease Control and Prevention
CNMF	Commonwealth Nurses and Midwives Federation
CPD	Continuing Professional Development
EL	Ethical Legal domain
ECSA-HC	East, Central and Southern African Health Community
ECSACON	East, Central and Southern College of Nursing
I-TECH	International Training and Education Centre for Health
LM	Leadership and Management

PPA	Packaged Point Allocation
PEPFAR	President's Emergency Plan for AIDS Relief
PoE	Portfolio of Evidence
SANC	South African Nursing Council
T	Teaching
TOR	Terms of Reference
R	Research

2. DEFINITIONS

Area of Practice	Field of practice in which the Practitioner is working (i.e. clinical nursing, occupational nursing, education and training, management, regulation and policy formulation).
Continuing Professional Development (CPD)	A purposeful, statutory process whereby Practitioners registered with SANC, engage in learning activities/events/ programmes to maintain and improve their knowledge, skills, attitudes and professional integrity in order to keep up to date with new science, innovation and health care developments, and to practise safely, ethically, competently, and legally within their evolving scope of practice.
CPD recognition Standards/ Guidelines	Statements or directives describing the qualities, responsibilities and expected levels of performance of an accredited CPD activity/event/programme.
CPD activity/ event/ programme	An individual or group learning activity/event/programme that has been accredited by SANC-approved evaluators to create opportunities for Practitioners to gain knowledge, develop skills and shape their attitudes in order to maintain high professional standards.
CPD approval panel/evaluators	A body appointed by the SANC and constituted by experts in the profession of which at least one shall be a member of the relevant Professional Society. Evaluators will be responsible for certifying that CPD activities/events/programmes and providers meet the required criteria.
CPD Cycle	Period in which a Practitioner is expected to accrue CPD points, beginning in July and ending in June of the following year.
CPD Declaration	Attestation by the Practitioner of completion of annual required CPD points.
CPD Framework	Document outlining the process of continuing professional development as approved by Council.
CPD point Allocation	The number of CPD points assigned to a given activity/event/ programme based on the CPD weighting criteria.

CPD points	Total points gained by a Practitioner; irrespective of number of contact hours allotted to a CPD activity/event/ programme.
CPD Weighting	Designation of CPD points based upon level of complexity of CPD activities/events/programmes.
CPD Provider	Organisation/institution recognised by the SANC to provide CPD activities/events/programmes according to criteria defined in Section 10 of the CPD Framework.
E-Learning	The delivery of learning content via electronic media, including computers and mobile devices, this must be accompanied by a certificate or other proof of compliance to learning requirements.
Ethical domain	Codes that guide and influence the practice of nursing and midwifery.
Facility-based Learning	Learning activities/events/programmes that take place at the Practitioner's work station, health unit or practice.
Group Activity/ event	Any organised event offered by a CPD Provider in which three or more Practitioners are assembled for purposes of sharing information, building knowledge, developing skills and shaping attitudes on a subject of professional interest.
Indigenous Training	Health practices, approaches, knowledge and beliefs incorporating healing and wellness while using ceremonies, plant, animal, mineral-based medicines, energetic therapies or physical hands-on techniques.
Leadership	A process of social influence which maximises the efforts of others towards the achievement of a goal.
Learning Activities	A range of activities undertaken by students and supported by facilitators within the classroom, simulation laboratory and clinical practice intended to bring about the desired learning programme outcomes.
Legal domain	Legislation and policies that govern and influence nursing.
Management	A process of reaching organisational goals by working with or through people and other organisations.

Organisations/Institutions	An organised group of people with a particular purpose, it can be professional, educational, religious or social purpose etc.
Portfolio of Evidence (PoE)	A collection of documentary proof of activities/events/ programmes which were undertaken to accrue CPD points.
Practitioners	Any person registered in terms of Section 31(1) of the Nursing Act 2005 (<i>Act No. 33 of 2005</i>).
Recognition Certificate	Document attesting that the CPD Provider is authorised by SANC or other authorising body recognised by SANC to offer CPD activity/event/programme.
Relevant authority	The structure within an organisation that has the power to make and enforce decisions.
Research	A scientific process to discover new or collate existing facts which contribute to the improvement or enrichment of nursing practice and the body of knowledge of nursing.
Teaching	A learner- centred activity in which the lecturer facilitate learning to make it possible for students to learn and supports, guides and encourage students in their active and independent creation of new competence.
Training Needs Assessment	Process by which the CPD training needs of a Practitioner are identified.
South African Nursing Council (SANC)	The Council established in terms of Section 2 of the Nursing Act, 2005 (<i>Act No 33 of 2005</i>), which is the ultimate policymaking authority under the Act, and includes any Committee authorised to do so by the Council.

3. INTRODUCTION

The South African Nursing Council (SANC), in terms of the Nursing Act, 2005 (*Act No. 33 of 2005*), has the responsibility to serve and protect the public in matters involving nursing and midwifery services, and to uphold and maintain professional conduct, ethics, and practice standards. The development of a Continuing Professional Development (CPD) System for nurses and midwives in South Africa has been a growing priority for the SANC in terms of the Nursing Act, (Act no 33 of 2005). The Council is mandated to determine conditions relating to CPD. To this end, the 14th Council, inaugurated in June 2008, prioritised CPD in its *Five-year Strategy* as one of the projects to be introduced. Within this mandate SANC has established a CPD framework for all Practitioners registered with the Council.

4. BACKGROUND

The development of a Continuing Professional Development (CPD) system for nurses and midwives was first discussed by the Council in 2001. The formal process to develop CPD as informed by the provisions of the Act and the strategy of Council started in 2013. This initiative was strengthened by the concurrent support from Atlantic Philanthropies (AP), I-TECH, as well as the Commonwealth Secretariat, and the Commonwealth Nurses and Midwives Federation (CNMF) through the African Health Professions Regulatory Collaborative (ARC), which provided technical as well as financial support to the Council. The purpose of the ARC was to assist strengthen regulatory capacity for countries in the East, Central and Southern Africa Health Community (ECSA-HC). Partners in the ARC initiative were the United States Centre for Disease Control and Prevention (CDC) under the US President's Emergency Plan for AIDS Relief (PEPFAR), Emory University's Lillian Carter Centre for Global Health and Social Responsibility, ECSA-HC through the East, Central and Southern Africa College of Nursing (ECSACON) and CNMF.

Participation by South Africa in the ARC initiative led to the establishment of the South Africa ARC Team, appointed by the Minister of Health. The team consisted of representatives from the National Department of Health (NDoH), SANC, Professional Association and Nursing Academia referred to as the ARC QUAD.

The SANC established the CPD Technical Working Group (TWG) in order to facilitate the project in a consultative way. The composition of the TWG was based on the format of the ARC model, with the addition of Organised Labour, provincial representatives and a CPD researcher to align to the South African context.

The SANC CPD TWG developed the Draft Zero CPD framework in August 2013. The Draft Zero framework was reviewed based on narrow consultation as well as CPD feasibility study outcomes, and inputs from the international benchmarking exercise. Thereafter, a version 1 framework was developed and subjected to national consultation from May to September 2014. Inputs from the consultation led to the development of version 2 framework, which served as a policy document for a pilot study conducted for six months in some districts in Gauteng and Mpumalanga from August 2015 to January 2016. The CPD framework version 3 was the outcome of the pilot study. The SANC will continue to review the CPD framework and related documents from time to time.

The CPD System will be implemented in a phased manner, starting with practising midwives working in selected districts across all nine (9) provinces. A wide range of formal and informal learning activities/events will generate CPD points. Each Practitioner is expected to accrue 15 CPD points annually. Documentation regarding CPD activities/events/programmes must be kept in a Portfolio of Evidence (PoE), the format of which will be determined by SANC. A standardised category-specific Declaration of Compliance form with CPD criteria has to be submitted to SANC annually.

5. DEFINITION OF CPD

CPD means a “purposeful statutory process whereby Practitioners registered with SANC, through personal commitment, engage in a range of learning activities/events/programmes to maintain and improve their knowledge, skills, attitudes and professional integrity to keep up to date with new science, innovation and health care developments; to enable them to practise safely, ethically, competently, and legally within their evolving scope of practice; and to provide quality care to the South African community.”

6. PURPOSE

The purpose of CPD is to promote and maintain professional standards of excellence, and ensure that the practice of nurses and midwives remains up to date and relevant to the constantly changing health needs of the South African community.

CPD promotes life-long learning as well as safe, ethical, competent and evidence-based practice; and also provides opportunities for Practitioners to pursue and achieve professional growth throughout their careers.

CPD strengthens the accountability of Practitioners to themselves, their profession, their employer, their patients, clients, and communities; to promote health, protect the public interest, and deliver quality nursing care to the South African community.

7. PRINCIPLES

CPD is:

- 7.1 Based on learning needs identified and prioritised by the individual and the employer through a rigorous and continuous self-analysis of practice, against professional standards;
- 7.2 Based on the values of availability, accessibility, affordability and quality;
- 7.3 Built around an individual's existing knowledge, skills, and links learning to practice;
- 7.4 Self-directed, reflective and relevant to current and future professional practice;
- 7.5 Planned in advance, and structured and budgeted for, through an individual professional development plan;
- 7.6 Based on adult-based education and learning principles, and acknowledges varying learning styles;
- 7.7 Inclusive of both formal and informal learning activities/events/programmes
- 7.8 Inclusive of clinical and non-clinical roles – including management, education, research, policy development, regulation, labour and industrial services;
- 7.9 Linked to annual licensing to practise.

8. MANDATE

In terms of the legislative and policy directives listed below, the SANC has the authority to direct, approve and revise the CPD system for nurses and midwives. Legislative and policy directives which inform the development of the CPD system include but are not limited to the following:

- 8.1 The Constitution of the Republic of South Africa (Act No. 108 of 1996)** Chapter 2, Section 29 (1b) which provides that everyone has a right to further education and the state, through reasonable measures, must make education progressively available and accessible.
- 8.2 The National Health Act, 2003 (Act No. 61 of 2003)** Section 52 (a & b), provides that the Minister of Health may make regulations regarding human resources within the national health system in order to ensure that adequate resources are available for the education and training of health care personnel to meet the human resources requirements of the national health system and further ensure that the education and training of health care personnel to meet the requirements of the national health system.
- 8.3 The Nursing Act, 2005 (Act No. 33 of 2005)**, Sections 39(a)(b)(C) and 59 (1) (a)(b)(C) stipulates that the Nursing Council may determine conditions relating to Continuing Professional Development (CPD) to be undergone by Practitioners to retain such registration, the nature and extent of CPD to be undergone by Practitioners and the criteria for recognition by the Council of CPD activities and accredited institutions offering such activities.
- 8.4 The Human Resource for Health Strategy 2012/13 – 2016/17**, Strategic priority seven, quality professional care which emphasises the importance of the development of a CPD system by statutory bodies and enforcing compliance with CPD requirements.
- 8.5 The National Strategic Plan for Nurse Education, Training and Practice 2012/13 – 2016/17**, strategic priority 5, Positive Practice Environment which provides for the development and implementation of a CPD system for nurses and midwives, making CPD mandatory and aligning it to renewal of the Annual Practising Certificate (APC)

8.6 The Skills Development Act, 1998 (*Act No. 97 of 1998*), Chapter 3, stipulates that the Minister must determine a discrete sector for the purposes of subsection (1) by reference to categories of employers and for the purposes of that determination take into account - (a) the education and training needs of employers and employees.

8.7 Promotion of Access to Information Act, 2000 (Act No.2 of 2000), section 5 stipulates that data subjects a right to have their personal information be processed in accordance with the conditions of lawful processing.

9. REQUIREMENTS

According to the Nursing Act 2005 (*Act No. 33 of 2005*) every Practitioner is to undertake CPD activities/events/programmes. A minimum of 15 CPD points will be required each year for the renewal of the Annual Practicing Certificate (APC).

9.1. CPD POINTS ALLOCATION

CPD points are allocated to a given activity/event/programme, based on the level of complexity and participation in the activities/events/programmes undertaken, i.e. CPD weighting. These are defined as “Packaged Point Allocation” (PPA), and are allocated regardless of time spent on the activity/event/programme (***See Table 1***). The CPD points allocation structure, according to PPA, will enhance the individual’s opportunity to conduct activities/events/programmes across the five thematic areas. The examples are generic and applicable to all nursing categories. Where the nurse/midwife is employed for a specific role/job, they cannot be allocated points for the job, unless they do something beyond their job description. For example, a lecturer cannot be allocated points for teaching, and a mentor cannot be allocated points for his/her mentoring role; BUT if either writes an article on the work they do, they can be allocated a point.

Table 1: CPD Allocation Criteria

Packaged Point Allocation (PPAs)	Definition	Points
Observation and Attendance	Refers to a situation where the Practitioner is part of an audience or is receptive to knowledge or information (e.g. attending a conference or a participant in training)	1
Actioning	Refers to a situation where the Practitioner takes charge and leads the activity/event (e.g. facilitating training or presenting of activity/event/programme.	2
Development	Refers to a situation where the Practitioner develops a product or provides maximum input into a product to obtain maximum output. This requires a maximum level of engagement (e.g. development of a policy/guideline or development of training curriculum).	3

9.2. CPD ACTIVITIES/EVENTS/PROGRAMMES WITH PROPOSED POINT ALLOCATION AND THEMATIC AREAS

The following are guiding principles for CPD point allocation:

- PPAs are allocated under ONLY one (1) primary thematic area, determined by the purpose of the activity/event/ programme. For example, if the activity/event/programme is mainly about nursing care, directly or indirectly and had a section on Acts, Scope of Practice, etc., point allocation would be for the Area of Practice (AOP) only and not for Ethical and Legal (EL).
- Nurses can accrue as many points as possible, as the emphasis is on development rather than gaining points. CPD points allocated by any CPD Service Providers are therefore acceptable for the year in which they are accrued but cannot be “**banked**”.
- Nurses and Midwives on full-time study are exempted from CPD, after approval by SANC.
- The list is not exhaustive, but provides examples of activities/events/ programmes that might take place in various work situations.

Workplace activities/events & Packaged points	Observation & Attendance	Actioning	Development	Themes for delivery: abbreviations
	1 CPD point	2 CPD points	3 CPD points	EL; AOP; LM; T;R
In-service education on Clinical Practice				
• Attend a clinical meeting/ward round as observer	✓			AOP
• Attend a mandatory in-	✓			AOP

Workplace activities/events & Packaged points	Observation & Attendance	Actioning	Development	Themes for delivery: abbreviations
	1 CPD point	2 CPD points	3 CPD points	EL; AOP; LM; T;R
service education session				
• Practise a skill under supervision		√		AOP,EL,T,R
• Develop a procedure/ training manual			√	AOP EL or LM
• Develop a training plan /system to manage CPD in the unit/department			√	LM, AOP
Policy/Guidelines/ Protocol				
• Attend a meeting where a new policy/guideline/ protocol is being presented or discussed	√			AOP, EL
• Conduct an orientation session for colleagues or subordinates on a policy/guideline/		√		AOP, EL, LM, T, R

Workplace activities/events & Packaged points	Observation & Attendance	Actioning	Development	Themes for delivery: abbreviations
	1 CPD point	2 CPD points	3 CPD points	EL; AOP; LM; T;R
protocol				
<ul style="list-style-type: none"> Develop a policy/guideline/protocol for clinical management, in-service education, etc. 			√	AOP, EL, LM,
<ul style="list-style-type: none"> Keeping a reflective practice journal 		√		AOP
Supervision/Mentoring/Preceptorship				
<ul style="list-style-type: none"> Attend/ receive mentorship/ Preceptorship 	√			AOP, T, R
<ul style="list-style-type: none"> Supervise the implementation/ demonstration of a procedure/activity/event by a subordinate 		√		LM
Academic reading, Writing and Review				
<ul style="list-style-type: none"> Attend a “brown bag” or other session 	√			AOP

Workplace activities/events & Packaged points	Observation & Attendance	Actioning	Development	Themes for delivery: abbreviations
	1 CPD point	2 CPD points	3 CPD points	EL; AOP; LM; T;R
where an article relevant to your practice is discussed				
• Conduct a library search (physically or online) for articles relevant to your practice		√		T,R
• Write a journal article for publication			√	T,R
• Conduct an article review			√	R
• Start a journal club			√	T,R, AOP, LM
• Write a book chapter			√	T,R, AOP
• Reviewing educational/ practice material (article, standard operating procedure, book chapter etc.)			√	LM, AOP, T, R
Acts and Regulations				

Workplace activities/events & Packaged points	Observation & Attendance	Actioning	Development	Themes for delivery: abbreviations
	1 CPD point	2 CPD points	3 CPD points	EL; AOP; LM; T;R
• Attend a presentation where an Act /Regulation is being presented or discussed	√			AOP, EL
• Give feedback to colleagues about an Act/Regulation after attending a presentation		√		AOP, EL
• Plan and conduct a workshop for the application of an Act/Regulation in an area of practice			√	T, R, AOP, EL
Quality assurance				
• Attend a quality assurance meeting	√			AOP
• Give feedback after a clinical audit		√		AOP, T
• Prepare/collect information for a case review meeting			√	AOP, R

Workplace activities/events & Packaged points	Observation & Attendance	Actioning	Development	Themes for delivery: abbreviations
	1 CPD point	2 CPD points	3 CPD points	EL; AOP; LM; T;R
• Conduct a clinical audit		√		AOP, LM
• Develop a clinical audit tool			√	AOP, LM
• Develop a quality improvement plan (QIP)			√	AOP, LM
• Implement QIP			√	AOP, LM
Research				
• Attend a research workshop	√			T,R
• Participate in a research study as informant/subject		√		T, R
• Conduct a research study/project as primary (co)-investigator assistant			√	T, R, AOP
• Present a research report to a target community after the study		√		T, R, AOP
Conferences/Seminars/Workshops				

Workplace activities/events & Packaged points	Observation & Attendance	Actioning	Development	Themes for delivery: abbreviations
	1 CPD point	2 CPD points	3 CPD points	EL; AOP; LM; T;R
• Attend a 1-2-day conference/seminar/workshop with one Thematic area	√			Either AOP, LM, EL or T,R
• Attend a 3 or more days' conference with two or more Thematic areas			√	AOP, LM, EL T,R
• Give planned feedback to a group after attending a conference/seminar/workshop		√		Either AOP, LM, EL or T,R
• Evidence of implementation of a structured plan			√	
• Prepare or assist in the preparations/ planning for a conference/seminar/workshop			√	Either AOP, LM, EL or T,R
• Present/co-present at a conference/seminar/workshop			√	Either AOP, LM, EL or T,R
Community /other Engagement				

Workplace activities/events & Packaged points	Observation & Attendance	Actioning	Development	Themes for delivery: abbreviations
	1 CPD point	2 CPD points	3 CPD points	EL; AOP; LM; T;R
• Doing volunteer work relevant to health/nursing/ Midwifery		√		AOP, LM
• Marking/moderating examination scripts			√	AOP, T, R
• Being an external examiner of a dissertation/thesis			√	AOP, T, R
• Being an expert witness			√	AOP, EL
• Undertaking an accredited/non-accredited short learning programme without assessment		√		Either AOP, LM, EL or T,R
• Undertaking an accredited/non-accredited short learning programme with assessment			√	Either AOP, LM, EL or T,R
Professional /Committee membership				
• Being a member of a book club/journal	√			AOP, LM

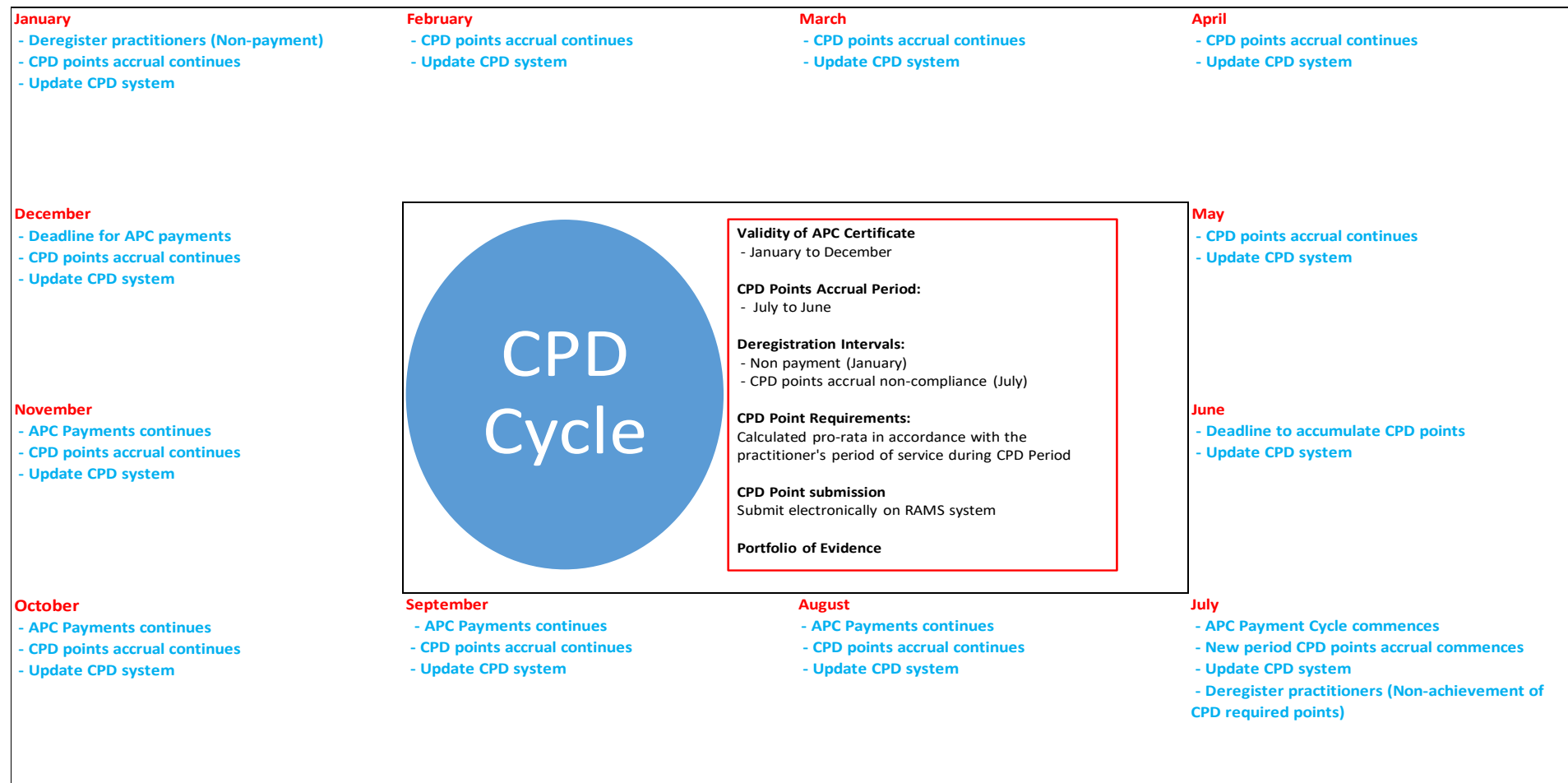
Workplace activities/events & Packaged points	Observation & Attendance	Actioning	Development	Themes for delivery: abbreviations
	1 CPD point	2 CPD points	3 CPD points	EL; AOP; LM; T;R
club/professional discussion or reading group				
• Being an active member of a professional special interest group/ professional association/organisation	√			LM
• Serving on the management structure of professional special interest group/ professional association/organisation		√		LM

9.3. CPD CYCLE

Practitioners are expected to accrue the minimum required fifteen (15) CPD points during a twelve (12) month period, commencing from 01 July in a given year up to 30 June of the next year (**See Diagram 1**). All CPD points that have been accrued during the period as set out above, must be submitted via a *Declaration of Compliance form (SANC CPD Form 7)* at any point during the year, the 30th of June being the annual deadline. Payment for the APC for the following year can however, only be made from the 1st July until the 31st December of the current year.

A three (3)-month extension period within which to accrue the minimum CPD points required for registration in the subsequent year can be requested, by no later than June 30 of the current year. Such an application for extension will be considered and will be subject to approval at the absolute discretion of SANC. Any granting of such extension will not reduce the obligation of the Practitioner to earn the full complement of required CPD points for the new CPD cycle. The application for extension (***SANC CPD Form 8***) must be properly motivated and the reasons/extenuating circumstances to be considered by SANC, are to be clearly detailed.

Diagram 1: CPD Cycle



Footnote:
This cycle applies where there is compliance.

10. SCOPE

The CPD activities/events/programmes are divided into the following five themes:

- Ethical and Legal domains
- Area of practice
- Leadership/management
- Teaching
- Research

Each Practitioner will be expected to accumulate a total of fifteen (15 CPD) points per annum. (01 July to 30 June) (See Table 2 and Table 3).

Table 2: Continuing Professional Development Grid - Themes for Delivery

CONTINUING PROFESSIONAL DEVELOPMENT GRID						
NURSING CATEGORY	THEMES FOR DELIVERY AND REQUIRED CPD POINTS					
	Ethical and Legal domains EL	Area of Practice AoP	Leadership/ Management LM	Teaching T	Research R	Total CPD Points
Professional Nurse	4	6	3	1	1	15
Midwife	4	6	3	1	1	15
General Nurse	4	6	3	1	1	15
Enrolled Nurse	3	9	1	2	Nil	15
Auxiliary Nurse	3	10	1	1	Nil	15

The theme for delivery should be determined by the primary purpose and content of the activity/event/ programme. CPD points cannot be utilised more than once across thematic areas. The nurse should select the primary activity/event/ programme and code it as such. The activity/event/ programme is only eligible to receive the three (3) CPD points under one thematic area.

Table 3: Definitions of Scope

DEFINITION OF SCOPE		
Ethical and Legal Domains	<p>Legal domain refers to “legislation and policies governing and influencing nursing”</p> <p>Ethical domain refers to “codes of practice that guide and influence the practice of nursing.” Ethical and Legal must pull through as a theme in all aspects</p>	<p>Examples include, but are not exclusive to:</p> <ul style="list-style-type: none"> - Nursing Act, 2005 (<i>Act No. 33 of 2005</i>) - National Health Act, 2003 (<i>Act No. 61 of 2003</i>) - Scope of Practice Regulations and Code of Ethics for Nursing registered practitioners
Area of Practice	Refers to the “field of practice in which registered practitioners are working” e.g. clinical nursing, occupational nursing, education and training, management and regulatory, policy formulation	Should include essential competencies related to the field of practice
Leadership and Management	Leadership refers to a “process of social influence which maximizes the efforts of others	Should be relevant to the practitioner’s position in area of practice

DEFINITION OF SCOPE		
	<p>towards the achievement of a goal”</p> <p>Management refers to a “process of reaching organisational goals by working with or through people and other organisational resources”</p>	
Teaching	<p>Teaching is a learner-centred activity in which the lecturer/facilitator facilitates learning to make it possible for students/colleagues/health care users to learn and supports, guides and encourages them in their activity and independent creation of new competence.</p>	<p>All categories of nurses have a teaching role towards colleagues or health care users</p>
Research	<p>Research is “an endeavour to discover new or collate old facts [evidence] by conducting and/or utilising scientific study”</p>	<p>Practitioners are encouraged to use an evidence-based approach to practise and to take part in research activities/events that generate evidence.</p>

11. ROLES OF PRACTITIONERS, EMPLOYERS AND CPD PROVIDERS

Employers, professional associations, societies, unions and CPD Providers have a responsibility to ensure that CPD is supported for all nurses and midwives, so that they are able to meet their CPD requirements. These roles are defined below and include, but are not limited to the following:

11.1. Practitioners

Practitioners are expected to:

- 11.1.1. identify learning needs and associated CPD activities/events/programmes and develop a Personal learning plan.
- 11.1.2. take responsibility for identifying relevant CPD activities/events/programmes.
- 11.1.3. obtain management/supervisor approval to participate in CPD activities/events/programmes.
- 11.1.4. complete a Portfolio of Evidence (PoE), including the Log sheet, in the required format.
- 11.1.5. submit a completed Declaration of Compliance form annually to SANC.
- 11.1.6. apply to the SANC for exemption in June, if need be; prior to the submission deadline of the Declaration of Compliance form.
- 11.1.7. submit supporting documentation if audited and when required.
- 11.1.8. keep documentation for a minimum of three (3) years following the year of submission of a Declaration of Compliance form.

11.2. Employers

Employers are expected to:

- 11.2.1. create an enabling environment for CPD activities/events/programmes.
- 11.2.2. monitor employees' compliance regarding CPD activities/events/programmes, routinely.
- 11.2.3. facilitate CPD compliance and registration.
- 11.2.4. keep documentation relevant to CPD activities/events/programmes for a minimum of three (3) years following the year of submission of a Declaration of Compliance form.

11.3. CPD Providers

CPD Providers are expected to:

- 11.3.1. obtain SANC recognition as a CPD Provider (SANC CPD Form 1).
- 11.3.2. always display SANC recognition number/unique code number in all correspondence.
- 11.3.3. register and obtain CPD allocation and weighting for each CPD activity/event/programme.
- 11.3.4. submit attendance registers and/or other evidence of activity/event/programme to SANC as required.
- 11.3.5. participate in audits as and when required by SANC.
- 11.3.6. enter all training activities/events/programmes into the agreed-upon electronic database.
- 11.3.7. keep CPD-related documentation for a minimum of three (3) years following the year of submission and/or per organisational data management policies.

12. RECOGNITION OF CPD PROVIDERS

The SANC may recognise organisations/institutions as CPD Providers upon compliance with the criteria as determined by SANC.

12.1. Criteria for recognition

The SANC will prioritise activities/events/programmes that are aligned with the national strategic priorities and the quadruple burden of disease.

SANC criteria for recognition of CPD Providers is set out in the Criteria and Process for recognition of CPD Providers.

12.2. Process for Recognition as SANC CPD Providers

SANC process for recognition of CPD providers is set out in the Criteria and Process for recognition of CPD Providers.

13. EVALUATION OF NON-ACCREDITED ACTIVITIES/ EVENTS/PROGRAMMES BY SANC CPD EVALUATION STRUCTURES

Evaluation of non-accredited activities/events/programmes will be conducted by SANC CPD Committee as set out in the Roles and Responsibilities of CPD evaluation structures.

14. DOCUMENTATION BY PRACTITIONERS

It is the responsibility of each Practitioner to keep documentary evidence of the CPD activities/events/ programmes they undertake, to demonstrate that they have met the mandatory annual CPD requirement for renewal of the Annual Practising Certificate. This will be documented in a standardised *Log sheet* (**SANC CPD Form 6**) and *Portfolios of Evidence* (PoEs) (**SANC CPD Form 5**). This documentary evidence must be kept for three (3) years after submission of the *Declaration of Compliance* form to SANC (**SANC CPD Form 7**), for audit purposes. A *Declaration of Compliance* form for completed CPD

activities/events/programmes will be submitted annually to SANC, as a pre-requisite for renewal of the Annual Practising Certificate.

14.1. Portfolios of Evidence (PoEs)

Practitioners need to keep their own CPD activity/event records in a Portfolio of Evidence (PoE) file for a period of three (3) years (**SANC CPD Form 5: PoEs Cover Sheet**) after submission of the *Declaration of Compliance form* to SANC. The PoEs must be submitted to SANC upon request for auditing.

14.2. Log sheet

Practitioners will maintain a *Log sheet* of activities/events/programmes, to be kept in the Portfolios of Evidence (PoEs) file for a period of three (3) years (**SANC CPD Form 6: SANC CPD Activity/event Log sheet**). The Log sheet must be co-signed by a relevant Supervisor/CPD Provider and made available for submission to SANC upon request. Where there is no Supervisor/CPD Provider is available, this must be indicated in the appropriate column and be substantiated if appropriate.

14.3. Declaration of Compliance form

Practitioners will submit a *Declaration of Compliance form* on completion of the required CPD points for the respective year. Each category of Practitioner will have their own *Declaration of Compliance form* (**SANC CPD Form 7: Declaration of Compliance forms**).

15. COMPLIANCE AND NON-COMPLIANCE

15.1. Compliance

Compliance with CPD criteria is based on completion of the required CPD requirements and submission of the *Declaration of Compliance form* by the Practitioner. This form can

be submitted in conjunction with an application for renewal of the Annual Practising Certificate.

CPD recognition will be evidence-based. Practitioners are therefore required to maintain their Log sheets and PoEs related to CPD attainment, for a period of three (3) years. SANC may audit a random sample of Practitioners each year. If a Practitioner is selected for auditing, he/she will be required to provide SANC with a Log sheet and PoE within 21 days of receipt of such notification. In respect of individuals selected for auditing, submission of the required documentation, supported by their PoEs and Log sheets, will render them compliant after being reviewed and verified.

Practitioners will not be allowed to “bank” CPD points from the previous year. This is due to the evolving nature of health service delivery and practice. Practitioners change jobs and many nurses rotate through units within their healthcare facilities thus making the CPD activities/events/programmes conducted in the previous year irrelevant to their current area of practice.

15.2. Non-Compliance

A practitioner who has not in any one year acquired the required number of CPD points for renewal of the Annual Practising Certificate, will be considered non-compliant.

A Practitioner will be considered non-compliant if he or she:

- 15.2.1. fails to declare attainment of the required number of CPD points within the required timeframe.
- 15.2.2. fails to produce a PoE for auditing within 21 days of the SANC’s request
- 15.2.3. produces a PoE which does not adequately support his/her Declaration of Compliance form upon auditing.

A Practitioner who is found to be non-compliant will be contacted by SANC, advising them of their non-compliant status; and requesting a response within 21 days, advising SANC of the reasons for not adhering to the mandatory annual CPD requirements.

A Practitioner who is found to be non-compliant will be unable to renew his or her Annual Practising Certificate.

The following steps may be taken against Practitioners who are not compliant:

- a. An extension of an additional three (3) months may be given in order to accrue the remaining CPD points.
- b. A financial fine (to be determined by SANC) will be imposed.
- c. Removal from SANC Register.

16. EXEMPTIONS AND EXTENSIONS

16.1. Exemptions

Practitioners eligible for exemption may apply in writing to the SANC for a period of exemption from their annual CPD requirements for renewal of the Annual Practising Certificate. The *Exemption form (SANC CPD Form 4)* must state the reason why exemption is being sought. Exemptions are not automatic and will be decided by the SANC on an individual basis. An administrative fee will apply.

Practitioners eligible for exemption are:

- 16.1.1. those who are registered for formal education and training for a specific year (proof of registration will be required).
- 16.1.2. those who have been working for five (5) or less months during the course of the CPD accrual cycle, such as those on sick leave or living/working outside of South Africa.
- 16.1.3. retired nurses who are not working however, choose to maintain their registration.
- 16.1.4. those who wish to remain on the Register despite the fact that their area of practice is not in the field of nursing or midwifery.
- 16.1.5. those on military and national assignments.
- 16.1.6. those who are undertaking indigenous training.

NB:

- I. Application for exemption is to be accompanied by reason (s) for the request.
- II. Practitioners who worked for less than five (5) months of the CPD accrual cycle may be eligible for accrual of fewer CPD points. Practitioners who are eligible for accrual of a fewer number of points must apply in writing to SANC.

16.2. Extensions

Practitioners, who in extenuating circumstances, are unable in any year to acquire the minimum number of CPD points for renewal of the Annual Practising Certificate, may apply in writing (**SANC CPD Form 8**) to the SANC for an extension to complete their CPD requirements, stating the reasons for the request. The extension will be granted for three (3) months from July to September. At the end of the period of extension, the practitioner may be audited to ensure that the CPD requirements have been met. Extensions are not automatic and will be determined by the SANC on an individual basis. An administrative fee will apply.

17. AUDITING

The SANC will audit up to 10% of Practitioners per annum by drawing a stratified sample. Practitioners included in the sample will be required to submit their PoEs to the SANC.

18. MONITORING AND EVALUATION

The CPD Framework has four (4) levels of monitoring:

- a. First level: by individual practitioners monitoring their own progress in attaining their CPD points;
- b. Second level: by employers who will monitor, facilitate, support and provide CPD opportunities for their employees;

- c. Third level: by CPD Providers in terms of their CPD training delivery, trainers and content;
- d. Fourth level: by SANC through regular and selected auditing processes.

19. RIGHT TO APPEAL

Any Practitioner who is aggrieved by the findings of and the remedial action(s) imposed by the SANC CPD Committee, may appeal to Council in terms of Section 57 of the Nursing Act (*Act no 33 of 2005*).

20. AREA OF PRACTICE

Area of practice category	Code
Critical Care Nursing (Adult)	AP1
Critical Care Nursing (Child)	AP2
Neonatal ICU	AP3
Emergency Nursing	AP4
Medical unit	AP5
Surgical unit	AP6
Trauma & Emergency unit	AP7
Out Patient Department	AP8
Obstetric & Gynaecological unit	AP9
Midwifery	AP10
Perioperative Nursing	AP11
Orthopaedic Nursing	AP12
Burns unit	AP13
Nephrology Nursing	AP14
Mental Health Nursing	AP15
Nursing Education	AP16
Health Services Management	AP17
Primary Care Nursing	AP18
Child Nursing	AP19
Community Health Nursing	AP 20
Forensic Nursing	AP21
Infection Prevention and Control Nursing	AP22
Occupational Health Nursing	AP23
Oncology and Palliative Nursing	AP24
Ophthalmic Nursing Unit	AP25
OTHER (Not mentioned above, e.g. Blood Bank)- give details	

21. HEALTH DISTRICTS

Eastern Cape	Code	Free State	Code
Buffalo City Metropolitan Council	BUF	Xhariep District Municipality	DC16
Sarah Baardman District Municipality	DC10	Lejweleputswa District Municipality	DC18
Amatole District Municipality	DC12	Thabo Mofutsanyane District Municipality	DC19
Chris Hani District Municipality	DC13	Fezile Dabi District Municipality	DC20
Joe Gqabi District Municipality	DC14	Mangaung District Municipality	MAN
OR Tambo District Municipality	DC15		
Alfred Nzo Bay Metropolitan Municipality	DC44	Gauteng	Code
Nelson Mandela Bat Metropolitan Municipality	NMA	Sedibeng District Municipality	DC42
		West Rand District Municipality	DC48
KwaZulu Natal	Code	Ekurhuleni Metropolitan Council	EKU
UGu District Municipality	DC21	City of Johannesburg Metropolitan Council	JHB
uMgungundlovu District Municipality	DC22	City of Tshwane Metropolitan Council	TSH
uThukela District Municipality	DC23		
uMzinyathi District Municipality	DC24	Limpopo	Code
Amajuba District Municipality	DC25	Mopani District Municipality	DC33
Zululand District Municipality	DC26	Vhembe District Municipality	DC34
uMkhanyakude District Municipality	DC27	Capricorn District Municipality	DC35
King Cetshwayo District Municipality	DC28	Waterberg District Municipality	DC36
iLembe District Municipality	DC29	Sekhukhune District Municipality	DC47
Harry Gwala District Municipality	DC43		
eThekweni Metropolitan Council	ETH	Mpumalanga	Code
		Gert Sibanda District Municipality	DC30
North West	Code	Nkangala District Municipality	DC31
Bojanala Platinum District Municipality	DC37	Ehlanzeni District Municipality	DC32
Ngaka Modiri Molema District Municipality	DC38		
Dr Ruth Segomotsi Mompati District Municipality	DC39	Northern Cape	Code
Dr Kenneth Kaunda District Municipality	DC40	Namakwa District Municipality	DC06
		Pixley Same District Municipality	DC07
Western Cape	Code	ZF Mgcawu District Municipality	DC08
City of Cape Town Metropolitan Municipality	CPT	Francis Baard District Municipality	DC09
West Coast District Municipality	DC01	John Taolo Gaetsewe District Municipality	DC45
Cape Winelands District Municipality	DC02		
Overberg District Municipality	DC03		
Eden District Municipality	DC04		
Central Karoo District Municipality	DC05		

22. TYPE OF ESTABLISHMENTS

Public Health	Code
SAMHS (Military Health Services)	PH1
Dept. of Correctional Services	PH2
National Dept. of Health	PH3
Provincial Dept. of Health	PH4
Local Government / Authority	PH5
Private Health	Code
Private Healthcare	PV1
Private Practice	PV2
Corporate (Health related)	PV3
NGO	PV4
Education and Training	Code
Full Time Student	AC1
Academic (Employed)	AC2
Non-Nursing	Code
Non-health Related	NH1
Retired	NH2
Unemployed	NH3

23. ANNEXURES TO THE CPD FRAMEWORK

ANNEXURE NUMBER	NAME OF DOCUMENT
ANNEXURE 1	CRITERIA AND PROCESS FOR RECOGNITION OF SANC CPD PROVIDERS
ANNEXURE 2	ROLES AND RESPONSIBILITIES OF SANC CPD EVALUATION STRUCTURES
ANNEXURE 3	SANC CPD FORMS (FORM 1 TO FORM 10)

CONTINUING PROFESSIONAL DEVELOPMENT (CPD) FRAMEWORK FOR NURSES AND MIDWIVES IN SOUTH AFRICA WAS APPROVED BY COUNCIL ON 30 NOVEMBER 2021

MS S Mchunu

Registrar and CEO

Date