

**DO HEALTH PROFESSIONS  
QUALIFICATIONS NEED TO HAVE AN  
OCCUPATIONAL FOCUS?  
A VIEW FROM THE HPCSA**

by

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at

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# BACKGROUND

## A NUMBER OF PRESSURE POINTS ARE SQUEEZING THE NATIONAL HEALTH SYSTEM

– e.g:

- The cost of health care (Public and Private) is increasing exponentially
- Human resources for health: production levels, policy and planning
- An exodus of health care professionals outside our borders
- Education, training and skills development across the categories of health workers is an on-going challenge, etc.

The training of health professionals is usually long and the national investment on the production of health workers/practitioners is concomitantly high. By way of illustration:

# 15 Years

Undergraduate  
MB ChB course  
6 yrs



Internship +  
Community  
Service  
3 years



Specialist  
Training  
4 years



Subspecialist  
training 2  
years



# Training a Cardiologist

## NATIONAL INITIATIVES

The recent Legislative Framework, particularly the National Health Act (Act 61 of 2003) under Regulations relating to HR in Chapter 7 empowers the Minister to:

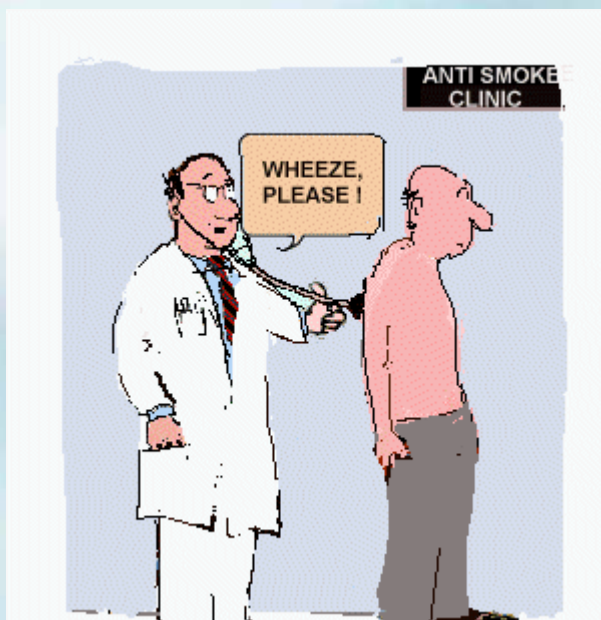
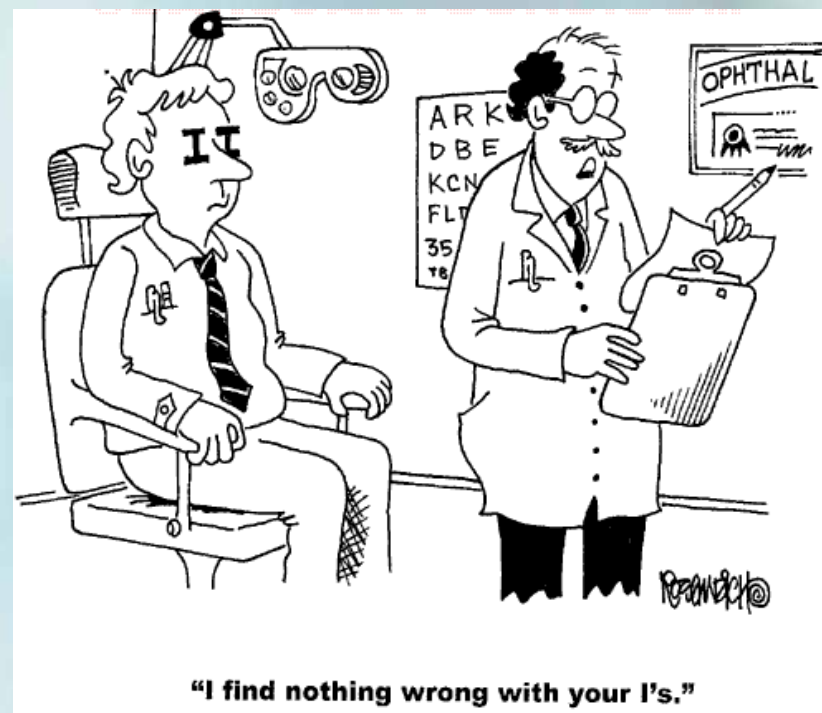
- s 52(c) – create new categories of health care personnel to be educated/trained;
- s 52(d) – identify shortages of key skills, expertise and competencies within the National Health System (NHS) and to prescribe strategies that are not in conflict with the Higher Education Act (101 of 1997), for the –
- (ii) Education and training of Health care providers or health workers in the Republic, to make up the deficit of scarce skills, expertise and competencies .....

This initiative had implications for the development of qualifications that fit into our NQF.

- The Joint Policy Statement by the Ministers of Education and Labour: **ENHANCING THE EFFICACY AND EFFICIENCY OF THE NQF** is in sync with the developments in the national health system and the initiative of the HPCSA in designing qualifications that are directed at occupations of health workers.
- However the challenges for the implementation of the Policy are daunting for the HPCSA and other players in the sector.

## THE ROLE OF THE HPCSA

- Vision: **“Quality Health Care Standards for all”**
- Mandated to protect the public, all consumers of health care services and to provide guidance on educational, professional and ethical issues to practitioners in our registers.





Open wide – imagine you're Mick Jagger!

# PROFESSIONAL BOARDS OF THE HPCSA

- Dental Therapy and Oral Hygiene
  - Emergency Care Practitioners
  - Psychology
  - Speech Language and Hearing Professions
  - Optometry and Dispensing Opticians
  - Environmental Health Practitioners
  - Medical and Dental Professions
  - Physiotherapy, Podiatry and Biokinetics
  - Occupational Therapy, Medical Orthotics and Prosthetics and Arts Therapy
  - Medical Technology
  - Dietetics
  - Radiography and Clinical Technology
- Professional Boards determine and uphold standards of education and training, professional practice and conduct
- Professional Boards function as SGBs; develop professional practice framework; perform evaluation/accreditation of programmes and facilities in Clinical practice; etc.

## **OCCUPATIONALLY-DIRECTED QUALIFICATIONS**

- Ordinarily professional training leads to occupations/jobs/careers in collaboration with employers (public/private practice)
- Normally the duration is at least 4 years (or more) at undergraduate level for professional qualifications.

## **THE INTRODUCTION OF THE MID-LEVEL WORKER CONCEPT IN HEALTH FEATURES:**

- Premised on the Primary Health Care (PHC) approach, facilitating quality health care for the whole population.
- To increase access into quality health care for all.
- To be introduced across all health professional groupings.
- To bridge the gap between the urban and rural divide; the adequately-resourced and under-serviced areas.
- The training period is envisaged to be shorter than the mainstream professional qualification.

- **MLW categories should possess basic literacy and numeracy as part of the entry requirements.**

## **Process**

**In order to determine the need for the MLW category/occupationally-directed qualifications, and before applications are directed to SAQA/DOE/HEQC the following guidelines are observed:**

- **The HPCSA and NDOH must be in agreement to establish such a category.**
- **The scope of practice must be well defined and regulated – where there is overlap with the existing cadre, there must be demonstrable utility for allowing the overlap.**
- **Clear career paths must be identified, including articulation possibilities with the existing health professional careers.**
- **A thorough strategic review must be undertaken with an indication of specific utility and roles within the public and private sectors – such review is documented and kept by the HPCSA.**

# EDUCATION AND TRAINING OF MLW

**Duration:** minimum of 2 years for a basic course, and additional 1 year for post-basic course

**Content:** determined by the relevant professional board which must also accredit/evaluate the training programme

**Location of training:** largely in higher education – some colleges at FET level also exist for training but there are capacity challenges at this stage.

**Training: determined i.t.o.**

- skills shortages
- cost containment
- quality improvement
- newer technologies/new health interventions
- emerging health programmes requiring certain types of skills

## **THE VIEW OF THE HPCSA ON OCCUPATIONALLY-DIRECTED QUALIFICATIONS**

- they are universally embraced by the Boards
- numerous categories have been developed (and submitted to SAQA)

e.g. \* Emergency care: Emergency Care Technician (ECT)

\* Oral Health Professions: Dental Assisting (DA)

\* Medicine : Clinical Associates programme (CA)

\* Occupational Therapy : Occupational Therapy Technicians (OTT)

\* Physiotherapy : Physiotherapy Technicians

and numerous others .....

# CONCLUSION

- The HPCSA supports the recent developments in education, training and skills development within the Legal Framework governing the HPCSA as an independent Statutory Council.
- There are many roleplayers and Stakeholders in this transformational approach to education, training and skills development and although we cooperate with all players, our guiding principles are provided for by

## Section 16 of the HPCSA Act 56 of 1974 as Amended

“ ..... no person, educational institution [excluding a university or university of technology] or training facility, may offer or provide any education or training having as its object to qualify any person for the practicing of any health profession to which the provisions of this Act apply or for the performance of any other activity directed to the mental or physical examining of any person or to the diagnosis, treatment or prevention of any mental or physical defect, illness or deficiency in humankind, unless such education and training has been accredited by the professional board concerned as being appropriate education and training for such purposes.”

THANK YOU



"I think I know what's causing that gnawing feeling in your gut."