



PSYCHOLOGYNEWS

NEWSLETTER OF PROFESSIONAL BOARD FOR PSYCHOLOGY



Continuing Professional Development programme

In this issue



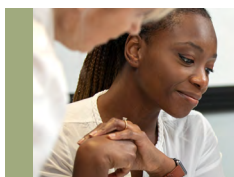
Continuing
Professional
Development
programme

02



The role of
the Regulations
4a Appeals
Committee

04



The importance of
using classified tests
in psychological
practice

05



Important
issues related
to internship
training

06



From the desk of the chairperson

Professor Justin Oswin August

As we are in our last month of our term as the Professional Board for Psychology, I am filled with both a sense of pride in what we have achieved together and a deep appreciation for the responsibilities that still lies ahead.

Our profession stands at a critical intersection. South Africa, like much of the world, continues to face mounting mental health challenges, rising stress levels, trauma, substance use, and widespread emotional distress have become daily realities for many of our citizens. This calls us, as professionals in psychology, to respond with empathy, courage, and action. We must remain committed to serving society with excellence, guided by the highest ethical standards and a genuine desire to promote psychological well-being.

As we reflect on the work we have done, it is also important to emphasise our collective responsibility to protect the integrity of our profession. Unregistered practice undermines public trust and can cause real harm to vulnerable individuals. We urge all psychologists to remain vigilant and report any instances of unregistered or unethical practice. Let us uphold the credibility of psychology by ensuring that only those properly

trained, registered, and bound by ethical guidelines are offering services to the public.

The Board remains committed to upholding public protection through the regulation of professional conduct, ethical standards, and ensuring that only those who are appropriately qualified and registered are allowed to practise. Public awareness and education about the importance of consulting registered professionals also remains a key focus.

A highlight of our recent efforts was the successful Psychology Stakeholder Roadshow held on 23 June 2025 in Sun City. It was a day rich with dialogue, shared vision, and professional unity. One of the key focus areas was the Developmental pathways for the profession, an essential conversation as we shape the future of psychological services in South Africa. The Board will continue to consult with stakeholders across sectors and conduct robust international benchmarking to ensure that our developmental framework are not only inclusive and future-focused

but also meet the highest standards of quality and professional integrity.

Regulating psychology for South Africa is no easy task, but it has been a fulfilling experience to be at the helm of the Professional Board. The role demands insight, balance, and unwavering commitment to the public interest, and I am deeply honoured to have served in this capacity.

As this term draws to a close, I wish to thank each of you, our practitioners, academics, interns, and students, for your dedication, resilience, and commitment to the people of South Africa. You are the heart of this profession. Let us continue to act with purpose, humility, and unity, always remembering that psychology is not just a profession, it is a calling to serve humanity.

In the words of Nelson Mandela, "There can be no keener revelation of a society's soul than the way in which it treats its children." Let us ensure that our work continues to build a society rooted in care, healing, and justice.



Continuing Professional Development Programme

Continuing Professional Development (CPD) programme is a programme that involves registered health practitioners in engaging and participating in learning experiences that helps to develop and improve professional practice. This can include building on professional strengths as well as developing capability where gaps are noted.

Compliance to the CPD programme is an obligation imposed on all health practitioners registered in terms of the Health Professions Act, 1974 (56 of 1974), in order to maintain registration with Council.¹ Essentially, the above means that if a health practitioner is not compliant with the minimum CPD requirements as determined, the Psychology Board (PSB) may deregister or suspend such a health practitioner.²

Several initiatives have been embarked upon to raise awareness regarding the importance of compliance with the CPD requirements. The common channels being utilised to communicate include the use of a Short Messaging Services (SMS); e-Bulletins etcetera. Since the awareness begun, the PSB has noted positive improvement in terms of CPD compliance. Despite this positive effect, the PSB is mindful that some health practitioners may still view CPD compliance from a punitive

lens in contrast to its actual purpose, especially from the antiregulation campaigners³; the real purpose of the CPD programme is to ensure that health practitioners are empowered with knowledge and experience in order to remain professionally relevant, to practise safely and engaged in relevant client's needs concerning healthcare.^{4,5} Unfortunately, some clients still do not receive healthcare that is informed by best evidence, and sometimes clients even receive inappropriate care.⁶ It goes without saying that the HPCSA would like to assure, and even to restore the public confidence, that all registered practitioners are up to date with new knowledge, skills and current national and international trends.

CPD also has a broader impact in promoting like-minded health practitioners in becoming part of a community of practice and improving the identity of those practitioners.⁷

Health practitioners can choose any formal and/or informal training activities to update their knowledge and skills to remain lifelong contributors to the healthcare profession.⁸ Health practitioners are required to accumulate Continuing Education Units (CEUs) on an annual basis. Attendance and/or participating on the CPD recognised activity earns such CEUs; inclusive of professional practice, ethics, human rights and medical law.⁹ Each CEU is valid for 24 months from the date on which the activity took place. This means that the health practitioners should at all material times maintain a balance of two years' worth of CEUs, topping-up on an ongoing basis.¹⁰

There are ongoing developments relating to streamlining the CPD programme, mainly affecting the manner in which evidence of compliance are submitted to the HPCSA for recording purposes. The important changes for noting:

¹ Rules relating to Continuing Education and Training of registered practitioners, 2007.

² Health Professions Act, 1974

³ Horowitz R. (2018). Let the consumer beware: Maintenance of licensure and certification in the United States. In Professional Health Regulation in the Public Interest (pp. 161-180). Policy Press.

⁴ Merry L., Castiglione S., Rouleau G., Letourneau D., Larue C., Deschenes M.F., Gonsalves D., Ahmed L. (2023). Continuing Professional Development (CPD) system development, implementation, evaluation and sustainability for healthcare professionals in low- and lower-middle-income countries: a rapid scoping review. BMC Medical Education. 23:498.

⁵ Giri K., Frankel N., Tulenko K., Puckett A., Bailey R., Ross H. (2023). Keeping Up to Date: Continuing Professional Development for Health Workers in Developing Countries.

⁶ Singh S.A., Fish T.D. (2019). South African health practitioners' patterns of CPD practices-implications for maintenance of licensure. African Journal of Health Professions Education, 11(4), pp.123-128.

⁷ Allen L., Hay M., Armstrong E., Palermo C. (2020). Applying a Social Theory of Learning to Explain the Possible Impacts of Continuing Professional Development (CPD) Programs. Medical Teacher. 42(10):1140-1147.

⁸ Singh S.A., Fish T.D. (2019). South African health practitioners' patterns of CPD practices-implications for maintenance of licensure. African Journal of Health Professions Education, 11(4), pp.123-128.

⁹ Health Professions Council South Africa. (2017). Continuing Professional Development. Guidelines for the Health Care Professionals. Pretoria. <http://www.hpcs.co.za> (accessed 15 September 2024).

¹⁰ Ibid

- The process of random selection of health practitioners from the HPCSA's database to verify compliance has been discontinued. All registered health practitioners are now expected to comply with the set CPD requirements on a continuous basis.
 - The online self-service platform is available on the HPCSA's website for all registered health practitioners to submit enquiries and/or upload the required evidence of CPD compliance.
 - The HPCSA has approved that authorised facilitators and service providers of CPD programmes submit the attendance registers directly to the HPCSA in order to update the practitioner's CPD profile.
 - The issuance of CEUs certificates is no longer a mandatory requirement, as the information relating to CPD compliance will be provided directly to the HPCSA by the approved facilitators and providers of the CPD activities.
 - The online portal remains active in order to cater for the exceptions, that is the activities not accredited by local providers, but recognised for CPD purposes. For example, when submitting evidence of 'self-study' activity.
 - Registered health practitioner will receive a notification, at their nominated contact, of any update done on their CPD profile.
 - The actual annual number of CPD points required by the practitioner registered under Psychology Board is 30 CPD points per year split as 25 clinical and 5 ethical points.
 - Each CPD point is valid for 12 months from the date on which the activity took place. Thereby, making the 12 months cycle a rolling cycle that is dependent on practitioner's own timelines; no person determines the timeline for a health practitioner, provided that the minimum number of CPD points are maintained on the HPCSA's systems.
 - Practitioners are advised to update their CPD status (only for activities that are not preapproved by local CPD accreditors) by utilising the following link: <https://hpcsaonline.custhelp.com/>
- The current CPD compliance for PSB stands at 59% (that is 8785/14889 health practitioners). The PSB may, at any time, resolve to take action to all non-complying health practitioners, which may include suspending the health practitioner.¹¹ Non-compliant health practitioners are urged to be compliant as soon as possible to mitigate against penalties.

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- Allen L., Hay M., Armstrong E., Palermo C. (2020). Applying a Social Theory of Learning to Explain the Possible Impacts of Continuing Professional Development (CPD) Programs. *Medical Teacher*. 42(10):1140-1147.
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- Merry L., Castiglione S., Rouleau G., Letourneau D., Larue C., Deschenes M.F., Gonsalves D., Ahmed L. (2023). Continuing Professional Development (CPD) system development, implementation, evaluation and sustainability for healthcare professionals in low- and lower-middle-income countries: a rapid scoping review. *BMC Medical Education*. 23:498.
- Singh S.A., Fish T.D. (2019). South African health practitioners' patterns of CPD practices—implications for maintenance of licensure. *African Journal of Health Professions Education*, 11(4), pp.123-128.
- Rules relating to Continuing Education and Training of registered practitioners, 2007.

¹¹ Rules relating to Continuing Education and Training of registered practitioners, 2007.

IMPORTANT UPDATE RELATING TO THE CPD PROGRAMME

The Professional Board for Psychology would like to take this opportunity to thank practitioners who are CPD compliant. Those who are not yet CPD compliant, are encouraged to correct their compliance status. The following changes relate to the latest amendments made on the Rules Relating to the Continuing Development Programme (CPD):

- All community service practitioners are exempted from CPD obligations.
- The actual annual number of CPD points required to be compliant are listed on both the CPD Rules and CPD guidelines, indicating minimum requirements for both clinical and ethical points.
- Each CPD point is now valid for 12 months from the date on which the activity took place. This means that health practitioners should at all material times maintain the minimum balance of CPD points required for a year, topping-up on an ongoing basis.
- Non-clinical registered practitioners are also required to be CPD compliant in line with the set minimum requirements.

It is the role of HPCSA to amend the Rules Relating to the Continuing Development Programme and not the Board, these Rules apply to all practitioners registered with the HPCSA.

Practitioners are advised to view and update their CPD status by utilising the following link: <https://hpcsaonline.custhelp.com/>

The role of the Regulations 4A Appeals Committee

The Regulations Relating to the Conduct of Inquiries into Alleged Unprofessional Conduct under the Health Professions Act, 1974 were amended on 1 June 2023 to include Regulations 4A, which states that:

- 1 A complainant who is aggrieved by the decision of the Preliminary Committee of Inquiry may appeal to the appeals committee of the relevant professional board against such decision and must provide reasons for such an appeal.
- 2 Notice of appeal must be submitted within 30 days from the date on which such decision was made or from the date the complainant becomes aware of such decision.
- 3 The Registrar must after receiving an appeal from the complainant, notify the respondent of the appeal by forwarding a copy of the appeal to him or her and requesting a written response from him or her within 14 working days from the date of receipt of the notification by the respondent, or within such further period as the registrar may reasonably allow, failing which the registrar must submit the appeal to the Appeals Committee of relevant Professional Board without the respondent's written response" It must be noted from the above Regulations that each Professional Board must constitute a Prelim Appeals Committee.

Prior to the insertion of Regulation 4A, complainants who lodged complaints either had to accept the decision of the Preliminary Committee of Inquiry or use Section 20 of the Health Professions Act, to approach the High Courts for relief if they were aggrieved by a decision taken by the Preliminary Committee of Inquiry as appointed by the Professional Board.

The addition of Regulation 4A resulted in each Professional Board constituting a Regulations 4A Appeals Committee which will be responsible for considering and deliberating, on appeals received by the Professional Board. This committee is composed of the following:

- one member of the Board who shall be the chairperson.
- one person registered in the profession in which the respondent is registered and who is also registered

in the same discipline as the respondent; and

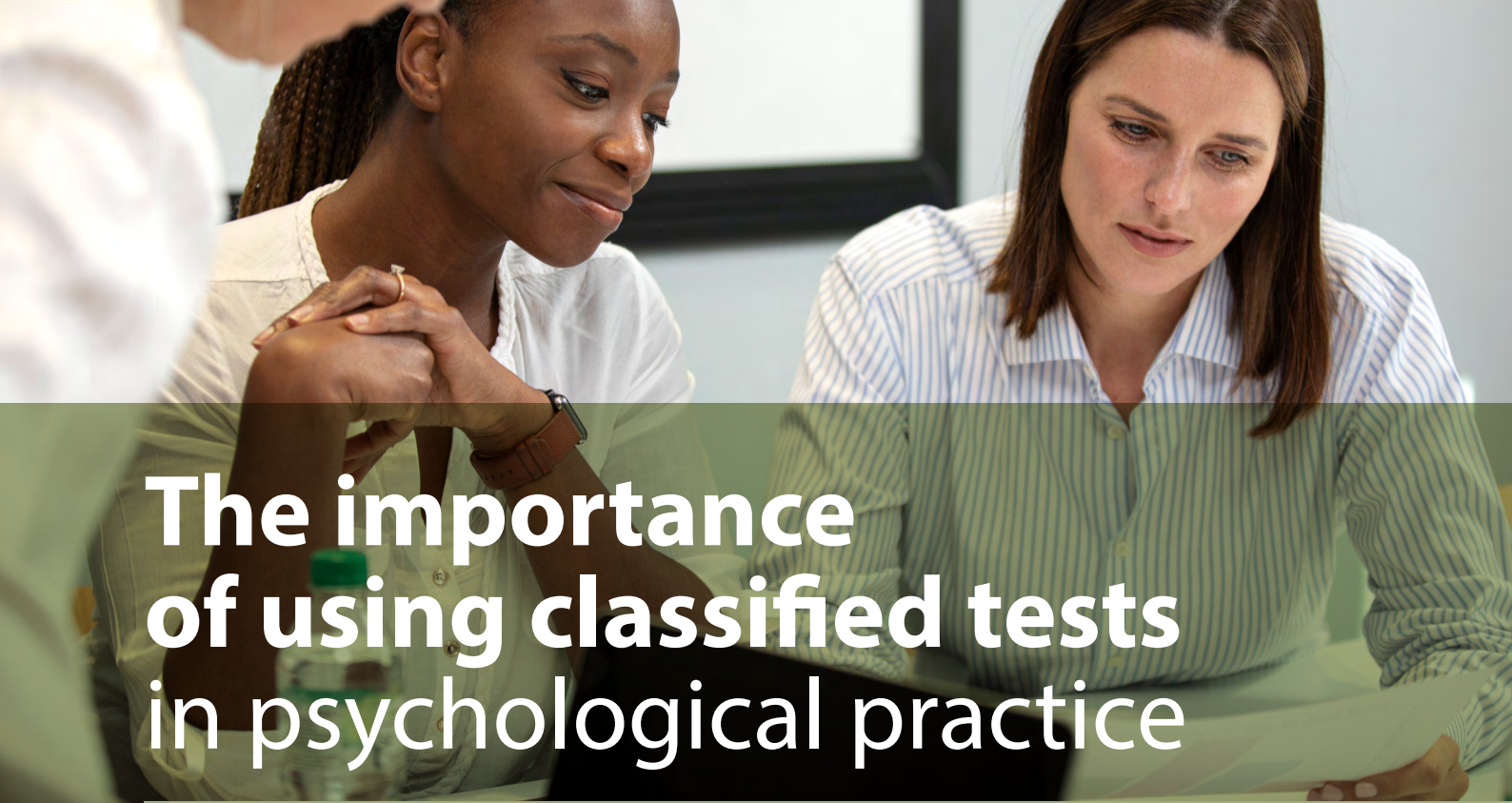
- one legal assessor.

On receipt and after consideration of the appeal, the Regulations 4A Appeals Committee may:

- dismiss the appeal and uphold the decision of the Preliminary Committee of Inquiry
- vary the sanction imposed by the Preliminary Committee of Inquiry
- refer the matter to the Professional Conduct Committee for inquiry

The committee's decision remains in force unless set aside by a competent court. Members of this committee may not form part of the Professional Conduct Committee should the matter be referred for a formal Inquiry.





The importance of using classified tests in psychological practice

This communication serves to emphasise the critical need for all psychology practitioners to adhere strictly to the use of classified tests as approved by the HPCSA's Professional Board for Psychology (<https://www.hpcsa.co.za/board/psychology/guidelines>).

Understanding Classified versus Non-Classified Tests

The Regulations Defining the Scope of the Profession of Psychology (Government Gazette, No. 31433, 16 September 2008, Section 2(f)), oblige the Professional Board for Psychology to publish a list of tests classified for use by psychology professionals annually.

The process of test classification involves determining whether a test is psychological in nature or not. More specifically, the Board is mandated to:

- a. classify any device, instrument, questionnaire, apparatus, method, technique or test aimed at the evaluation of emotional, behavioural and cognitive processes or adjustment of personality of individuals or groups of persons, or for the determination of intellectual abilities;
- b. psychopathology, personality, aptitude or interest by the usage and interpretation of questionnaires, test projections or other techniques or any apparatus, whether of South African origin or imported.

Although the psychological tests contained in the List of Classified Test have been classified, the onus still rests on psychology professionals to

ensure that they use the tests fairly and ethically. Annexure 12 of the Ethical Rules of Conduct indicate that ethical assessment practice includes ensuring that the tests used are appropriate for the purpose for which they are applied; are psychometrically sound; and that their content, construct coverage, and norms are both appropriate for the target population and are up to date (i.e., the tests are not obsolete). This will ensure accurate diagnoses, and treatment/intervention planning, and hence ethical responsibility to clients. The use of non-classified tests may potentially lead to inaccurate conclusions, harm to clients, and are a violation of professional conduct guidelines.

Consequences of Using Non-Classified Tests

The Committee of Preliminary Enquiry has come across multiple cases where psychology practitioners have been sanctioned due to the use of non-classified tests.

Some notable instances include:

- A practitioner who misdiagnosed a client using an unreliable cognitive assessment tool, resulting in inappropriate case management. This caused distress, not only for the client, but also for the family.

- In another example, a psychologist used an unclassified personality test in a forensic assessment, which led to legal issues for all concerned.
- In a third instance, a practitioner provided reports based on online non-classified projective tests.

Call to Action

To maintain the highest ethical and professional standards, we thus urge all practitioners to:

- Verify the classification status of any test before administration.
- Seek supervision or consultation when uncertain about the validity of an assessment tool.
- Ensure continuous professional development within the domain of psychological assessments.

The Professional Board of Psychology relies on rigorous standards to uphold credibility and safeguard the well-being of clients. We appreciate all psychology practitioners' commitment to ethical practice and encourage them to remain vigilant in their assessment choices.



Important issues related to internship training

The role of the Professional Board for Psychology

The Board controls the education and training of psychologists in terms of Section 16 of the Health Professions Act, 56 of 1974. In the case of internship training, the role of the Board is to ensure that interns are adequately trained and sufficiently competent on completion of their internship programmes. This will ensure that newly qualified practitioners are adequately prepared to practise when applying to the Board for registration as psychologists.

Purpose and nature of internship

The term internship refers to the prescribed minimum period of 12 months of full-time practical training in a specific registration category of psychology. The primary purpose of an internship is to integrate, apply and refine student psychologists' attitudes, competencies and skills that are necessary for independent functioning as a psychologist in a variety of settings.

Internship categories

The Board recognises psychology internship training in the following registration categories:

- a. Educational Psychologist
- b. Clinical Psychologist
- c. Counselling Psychologist
- d. Industrial Psychologist
- e. Research Psychologist
- f. Neuropsychology

The Board only recognises its approved tailor-made internship programmes for internship training in all psychology registration categories, excluding Clinical Psychology.

A specially tailored internship programme

Applications for specially tailored internship programmes need to be submitted to the Board for approval at least three (3) months prior to the date of commencement of the internship. The tailor-made internship must not begin until the intern has a written approval from the Board. Internship time commenced before the date on the written approval will not be considered.

- a. Letter from the supervisor of the Department of Psychology, of the collaborating university, agreeing to act as such for the duration of the internship;

- b. Letter from the supervisor from the intern site consenting to supervise the candidate for the duration of the internship;
- c. Letter from internship site consenting to accommodate the candidate as an intern for the duration of the internship;
- d. The tailored internship programme;
- e. Signed checklist.

Approval of tailored internship programmes

Once the above is received, students should e-mail their proposed individual tailored internship programmes to the Board for approval by the Education and Training Committee at their next scheduled meeting. Once approved by the Board, an approval letter will be issued to the intern to allow them to proceed and complete registration Form 26 PSIN and apply to register as an intern psychologist and to commence with internship. Students should ensure that they are registered as interns with a PSIN number.

Interns may not commence with the internship or apply for registration before the tailored programme is approved by the Education, Training and Registration Committee of the Board.

PROCESSES FOR APPLYING FOR EXTENSION OF INTERNSHIP

Although a maximum of two years registration as an intern is permitted, internship training may not be extended beyond the 12-month training period without prior approval of the Board.

Internship extensions are usually only granted for training purposes, e.g. where an intern needs further experience and instruction in a specific domain or activity. A limitation of six months on the extension of an internship exists.

In the event of unsatisfactory performance of an intern, a written report should be prepared by the training institution and the supervising university. The report should be submitted to the Education Committee of the Board with recommendations for:

- a. the termination of the internship at a given date; or
- b. the extension of the internship with clearly specified objectives; such an application for an extension is to be submitted no later than the date of submission of the second quarterly progress report or during the sixth month of the internship, but preferably earlier.

Applications for approval to extend an internship should be submitted to the Board for approval prior to an extension with reasons for wanting to extend or terminate.

The submission should be accompanied by quarterly reports and co-signed by all the parties.

TIME FRAMES FOR THE COMPLETION OF INTERNSHIP TRAINING AND REGISTRATION

Interns who:

- A** are not in a position to register as psychologists by three (3) years from date of registration as an intern have to complete a further approved and uninterrupted internship of three (3) months' duration;
 - B** exceed the timeframe for registration beyond three (3) years, but less than four (4) years, have to complete a further approved and uninterrupted internship of six (6) months duration;
 - C** exceed the timeframe for registration beyond four (4) years, but less than five (5) years have to complete a further approved and uninterrupted internship of twelve (12) months duration;
- In all of cases a, b and c above, the university at which the candidate was enrolled for their master's degree, needs to verify, in writing, that the candidate's theoretical knowledge and applied competence is still adequately relevant for purposes of registration as an intern, and provide proof that such relevance had been ensured through a formal additional assessment.**
- D** exceed the timeframe for registration by five (5) years to seven (7) years and eleven (11) months need to formally apply to the Board for permission to obtain placement as an intern or have a programme approved. Should approval be granted by the Board, the internship will be of twelve (12) month duration. The Board will then recommend the nature of a special Board examination to be completed.
 - E** exceed the timeframe for registration by eight (8) years or more, will NOT be eligible for registration as a professional psychologist.



GENERAL INFORMATION

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

Tel: 012 338 9300/01

Where to find us

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Working Hours

Monday – Friday : 08:00 – 16:30
Weekends and public holidays: Closed

**Certified Extracts from the register,
Certificates of Status, Verification of Licensure:**

Email: hpcsacgs@hpcs.co.za

Scope, ethical, practice related and CPD queries

Email: Professionalpractice@hpcs.co.za

Service Delivery

Email: servicedelivery@hpcs.co.za

Tel: 012 3389301

Lodging of complaints against registered practitioners

Email: legalmed@hpcs.co.za

Statistical Information and databases

Email: yvetted@hpcs.co.za

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