



**FPD**

# Annual Report 2013/2014

Building a better society through education and development.





STRULAND  
OFFICE PARK



FPD

RECEPTION





**FPD**

**Annual Report  
2013/2014**



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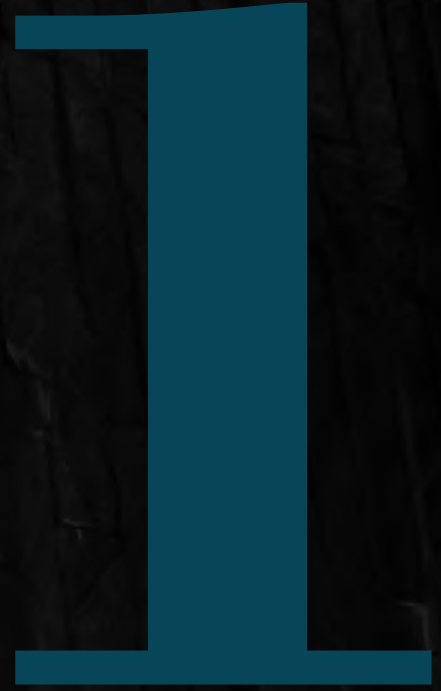
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# Overview

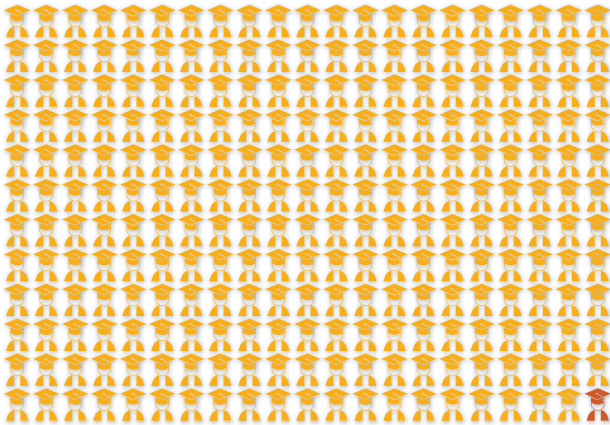




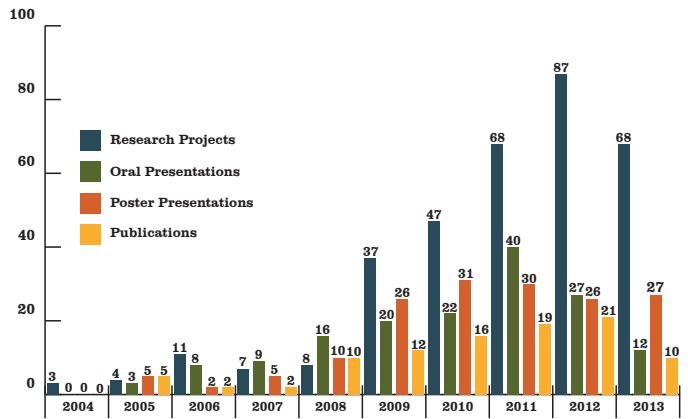
“Education is the most powerful weapon which you can use to change the world.”  
- Nelson Mandela

SINCE 1998 WE HAVE ENROLLED 251 290 STUDENTS ON FPD COURSES (1998 - 2013)

1000 students 290 students

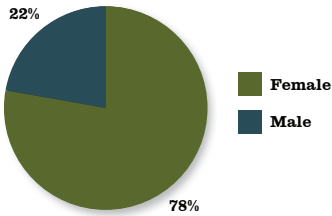


### RESEARCH OUTPUT

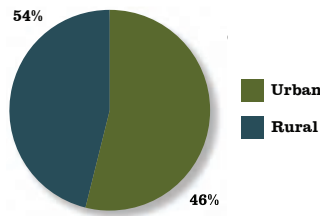


### STUDENT DEMOGRAPHICS

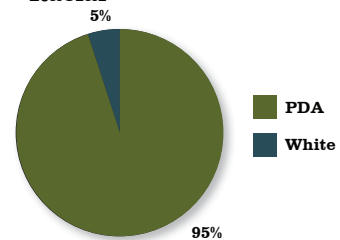
Student Breakdown 2013 Gender



Student Breakdown 2013 Urban/Rural



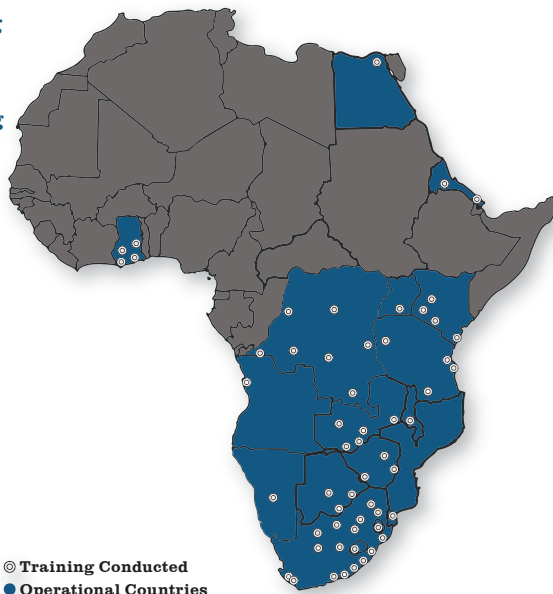
Student Breakdown 2013 Racial



FPD PROVIDES THE BIGGEST HEALTH MANAGEMENT DEVELOPMENT IN AFRICA.

FPD believes in bringing training as close to participants as possible. FPD courses have been provided in the following countries:

- Angola
- Botswana
- Canada
- DRC (all provinces)
- Egypt
- Eritrea
- Ghana
- Kenya
- Lesotho
- Mozambique
- Namibia
- South Africa
- Swaziland
- Tanzania
- Zambia
- Zimbabwe



EDUCATIONAL GRANTS TO A VALUE OF **R390 000 000** WERE PROVIDED TO FPD STUDENTS

WE INITIATED A TOTAL OF 390 333 PATIENTS ON ART

Men & Women



**368 690**

Children



**21 772**



# VISION, MISSION, VALUES AND STRATEGIC DIRECTION

## VISION

The **vision** of the Foundation for Professional Development (FPD) is to build a better society through education and capacity development.

## MISSION STATEMENT

FPD's **mission** is to catalyse social change through developing people, strengthening systems and providing innovative solutions.

## VALUES

All of FPD's activities are based on, and flow from, the following core values, which were developed by FPD staff through a consultative process.

**INNOVATION:** FPD strives to be an innovator in society by challenging the status quo and by actively identifying opportunities to affect positive change with a view of building a better society. This is achieved by aggressively embracing growth opportunities and committing ourselves to producing leadership.

**INTEGRITY:** FPD and its staff adhere to moral and ethical principles in all their activities. This is reflected in honest and professional conduct, personal accountability and a commitment to not abuse the resources of the organisation or its sponsors. Most of all, FPD will not compromise its institutional principles for the sake of political expedience.

**QUALITY:** FPD strives to guarantee the excellence of all its products and services. All such services are designed to meet the current needs of its clients. Underlying this commitment to quality is a continuous drive to achieve excellence and develop the systems to reward such achievements.

**FREEDOM TO CHALLENGE:** FPD encourages an environment where staff can voice their opinion without fear of victimisation. Constructive critique and creative debate between stakeholders and staff are encouraged.

**RESPECT:** Consideration for the rights of individuals and groups integral to FPD as an organisation. FPD honours the personal beliefs of its clients, its staff and its service beneficiaries.

**SERVICE TO SOCIETY:** All of FPD's activities are dedicated to serving the best interest of society. FPD's focus is underpinned by a strong sense of social responsibility.

## STRATEGIC DIRECTION

The strategic direction for 2014 is focused on developing FPD into an international self-funding university that can compete with world class institutions.

This will be achieved by a continuous focus on social entrepreneurship, high quality teaching and learning, research and community engagement. Inherent in this vision is a commitment to social responsibility and ensuring that all activities of the organisation will serve to improve society in the countries where FPD operates.

A major shift in strategic direction that will be pursued in 2014 is increasing FPD's ability to contribute to growing the professional work force in the region through undergraduate programmes and programmes that create work place exposure.

FPD will also continue to expand its ability to provide health system technical assistance, expand its electronic distance education platform and its cause driven work in gender based violence.

The 2014 strategic direction will continue efforts to ensure that FPD creates a working environment that will attract and retain people who want to make a difference and who are willing to subscribe to FPD's vision and values.

## PHILOSOPHY

"Education is the most powerful weapon which you can use to change the world." - Nelson Mandela

FPD fully subscribes to this view and has a strong commitment to being a force for positive change in the communities where we work.







# A MESSAGE FROM THE MANAGING DIRECTOR

FPD has been contributing to building a better society through educational and developmental activities for 16 years and 2013 has been one of the most interesting and successful to date. FPD's new mission statement, adopted during 2013, "to catalyse social change through developing people, strengthening systems and providing innovative solutions" reflects FPD's continuing evolution as a regional organisation working for the greater good.

During 2013 we successfully implemented the first year of a major five year health systems strengthening project that allows FPD, with USAID/PEPFAR funding, to work closely with nine District Health Management Teams improving public health services to 21% of the South African population. This project is discussed in more detail on page 38.

In recent years FPD has been actively expanding its activities focussing on violence as a public health priority with particular emphasis on gender based violence. In 2012 this focus received a major boost with FPD successfully competing for a USAID grant to increase services to survivors of sexual assault. This grant allows FPD to work closely with the National Prosecuting Authorities Sexual Offences and Community Affairs Unit (SOCA) to support its Thuthuzela Project that provides an integrated strategy for prevention, response and support for rape victims. The project completed four new Thuthuzela Care Centers in 2013 and the partnership with Soul City Institute, Sonke Gender Justice and the Medical Research Council (MRC) expanded beyond the requirements of the funder with substantial additional resources being leveraged by the respective partners. I believe that we are seeing the beginning of a coalition that will expand to become a powerful force in addressing the violence epidemic in South Africa.

2013 was again a record year for FPD's educational activities with just over 50 000 students enrolling, on our training programmes across the region. To date more than 250 000 students have enrolled on a FPD course making us the largest health sector training institution in Africa. As usual generous support from our donors and sponsors allowed the majority of students to study at low or no cost. FPD mobilised educational support for students of around R 91 million of which R16,5 million was for students outside of South Africa.

FPD has actively been expanding its use of digital platforms to reduce the cost of education to students and 2013 saw the launch of the first fully downloadable educational mobile phone app for South African health care professionals through a partnership with Clinical Care Options and the University of the Witwatersrand. This free, customised app, provides doctors and nurses with a comprehensive HIV/TB reference work, includes a number of CPD courses and a link to a toll free support line for treatment related queries. FPD also acquired a 50% share in Medical Practice Consulting (Pty) Ltd, a leading information technology design house and established partnerships with Mxit and Siyavula Education to further expand our ability of using innovative on-line education solutions.

FPD has continued its support of developing institutional capacity in South African Higher Education Institutions through funding projects

at a number of universities, apart from the mobile app project with the University of the Witwatersrand these also include projects such as the HIV Health Professionals Hotline at the University of Cape Town that currently fields around 500 calls per month, the info4africa AIDS service providers directory that is produced by the University of KwaZulu-Natal and support to the Infectious Diseases Unit at the University of Pretoria.

FPD is also increasing its focus on projects that help students transition from an educational environment into the work place, through using a combination of apprenticeship based programmes. In 2013 we supported 420 participants on various programmes that amongst others, supported newly qualified Masters Degree graduates to enter the HIV sector, helped school leavers and undergraduates to gain access to careers and employment through structured learnership and internship programmes in the health, IT and education sectors and created work place experience opportunities for people living with disabilities.

FPD continued with its capacity building activities in the basic education sector through beginning the planning for the 2nd South African Basic Education Conference that will take place in April 2014, through the Edu-Experience Project that places student teachers in well managed schools and a number of sponsored training programmes for educators on gender based violence in schools.

FPD in 2013 organised a number of international and national conferences, notable amongst these were the 2nd International HIV Social Sciences and Humanities Conference held in Paris, France and the 17th ICASA Regional AIDS Conference.

To ensure FPD continued expansion and ability to respond to the needs of our society FPD expanded its ability to generate proposals and respond to tenders. In 2013 the Proposal Unit coordinated the submission of 239 proposals and tenders which reflected a 66% increase in output on 2012 with a remarkable 45% success rate that translated in over R350 million secured future funding.

This annual report also creates an opportunity for me to express my appreciation to the more than 50 strategic partners of FPD, the sponsors and donors who have provided such generous support to FPD's students and projects and a Board of Directors who inspire and support FPD through their strategic vision.

But most of all I wish to extend my appreciation to my colleagues - they are the people who make the organisation what it is. Reflecting on this dedicated group of people brings to mind what Margaret Mead said: "Never doubt that a small group of thoughtful committed citizens can change the world. Indeed, it is the only thing that ever has." The FPD staff are the living embodiment of this view. Their positive attitude, energy and friendliness makes FPD a great place to work.

**Dr Gustaaf Wolvaardt**  
**Managing Director**  
MBCbB (Pret), MMed (Int) (Pret),  
FCP (SA), AMP (MBS), PGCHE (Pret).





# BACKGROUND

The Foundation for Professional Development (FPD) was established in 1997 by the South African Medical Association (SAMA). In 2000, FPD was registered as a separate legal entity (registration number 2000/002641/07). The South African Medical Association, a not-for-profit company, has a 90% shareholding while the remainder of the shares are employee owned.

## FOCUS AREAS

FPD prides itself on being one of the few private higher educational institutions that fully engages in the three scholarships of higher educational namely – teaching and learning, research, and community engagement. These areas of academic scholarship provide the three focus areas of our work:

### Teaching and Learning

FPD provides a comprehensive curriculum of courses in management and professional skills development that are customised to the needs of students in sectors such as management, health and education. Educational products are presented through formal postgraduate qualifications, short courses, in-house courses and conferences.

### Research

FPD's research priorities focus on promoting operational research and research on educational practice. FPD encourages and uses action research as a methodology for professional development and transformational practice.

### Community Engagement/ Capacity Development

FPD does not follow the narrower definition of community engagement that is solely focussed on the role of students in the community. We believe that as an institution that attracts highly skilled social entrepreneurs we are in a position to effect positive transformation in society. The work we do in, supporting NGOs, working with the public sector on health systems strengthening, gender based violence and learnerships speaks to this commitment.

FPD is based on a virtual business model that places a high premium on strategic alliances with national and international partners to increase the scope and reach of our programmes. Such partnerships have been established with a wide range of academic institutions, development agencies, government, technology partners, professional associations and special interest groups.

## ACCREDITATION AND REGISTRATION

FPD is registered as a private higher education institution in terms of Section 54(1)(c) of the Higher Education Act, 1997 (Act No. 101 of 1997), and Regulation 16(4)(a) of the Regulations for the Registration of Private Higher Education Institutions, 2002 (registration certificate number 2002/HE07/013), to offer the following qualifications:

- » Advanced Certificate in Management [Adv. Cert. (Management)]
- » Higher Certificate in Practice Management [(H.Cert (Practice Management)]
- » Advanced Certificate in Health Management [Adv. Cert (Health Management)]
- » Higher Certificate in Risk Assessment & Management [H.Cert (Risk Assessment and Management)]
- » Higher Certificate in Management [H. Cert. (Management)]
- » Postgraduate Diploma in General Practice [PG Dip. (General Practice)]
- » Advanced Diploma in Aesthetic Medicine [Adv. Dip. (Aesthetic Medicine)]

FPD also offer a variety of interactive, distance-based and e-learning short courses through our Business School, School of Health Sciences and School of Education. The majority of these programmes are targeted towards enabling continuing professional development and improving management competencies of our alumni. The courses offered, slot into existing mechanisms of continuing professional development accreditation, such as Health Professions Council of South Africa (HPCSA).

## BBBEE STATUS

FPD's commitment to transformation is reflected in its rating as a Level 2 Broad Based Black Economic Empowerment organisation.

## AFFILIATIONS

- » FPD is an institutional member of the South African Institute of Health Care Managers (SAIHCM)
- » FPD is a member of the Association of Private Providers of Education, Training and Development.
- » FPD is a member of the American Chamber of Commerce South Africa
- » FPD is a member of the Consortium of Universities for Global Health.

## THE FPD GROUP

### The FPD Group

#### Includes:

- » Foundation for Professional Development (Pty) Ltd (Reg. No. 2000/002641/07)
- » The FPD Property (Pty) Ltd (Reg. No. 2005/014826/07)
- » The Foundation for Professional Development Fund (Reg. No. 2004/002765/08)
- » Health Science Academy (Pty) Ltd (Reg. No. 1994/006219/07)
- » Medical Practice Consulting (Pty) Ltd (Reg No 2008/024971/07)
- » African Health Placement (Pty) Ltd (Reg No 2011/128026/07)



### FPD also manages the following NGO'S:

- » Dira Sengwe Conferences
- » South African Institute of Health Care Managers (SAIHCM)



## FPD ACADEMIC CODE OF CONDUCT

FPD endorses the principles of non-racialism, non-sexism and non-discrimination. It believes that education should be accessible, affordable and relevant to the country or origin where it takes place.

FPD students are expected to treat fellow students, faculty and administrative staff with dignity and respect. As FPD offers quality educational products, it believes that its students should act with integrity and honesty when participating in and completing programmes and courses. By registering for any FPD course or programme a student subscribes to this Code of Conduct.





# GOVERNANCE AND QUALITY ASSURANCE STRUCTURES

## FPD BOARD OF DIRECTORS

FPD governance structures are dictated by the relevant South African legislation that applies to registered legal entities and private institutions of higher education.

The role of FPD's Board of Directors is currently modelled as closely as possible to the King III Report and recommendations on corporate governance.

### Independent Directors



**Mr Douw van der Walt**  
*Chairperson*  
B.Com CAIB (SA) MBL, AEP (UNISA)



**Dr Mohammed Abbas**  
*Director*  
MBChB (UCT), FCFP (SA),  
Dip Palliative Medicine (UTC),  
C.I.M.E. (A.B.I.M.E.)



**Ms Ida Asia**  
*Director*  
B.Cur (Hons), MA (Nursing), MBL

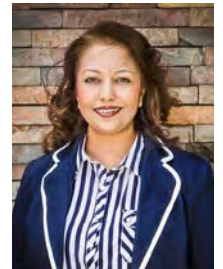


**Dr Gary Reubenson**  
*Director*  
MBBCh, DTM&H, FC Paed; DCH

### Executive Directors



**Dr Gustaaf Wolvaardt**  
*Managing Director*  
MBChB (Pret), M.Med (Int) (Pret),  
FCP (SA), AMP (MBS), PGCHE (Pret)



**Ms Veena Pillay**  
*Academic Executive*  
MBA, PGCHE (Pret)

### Company Secretary



**Ms Alet Bosman**  
B.Com (Fin Man), HED, B.Com  
Hons (ACC)

## Programme Advisory and Quality Assurance Committee 2013/2014

### ACADEMIC MANAGEMENT REPRESENTATIVES

- » Ms Suzanne Johnson
- » Ms Amor Gerber
- » Mr Anton la Grange
- » Ms Veena Pillay
- » Dr Gustaaf Wolvaardt

### INDUSTRY REPRESENTATIVES

- » Ms Gizella du Plessis
- » Ms Lucia Huyser
- » Mr Jan van Rooyen
- » Mr Brian Smith

### FACULTY REPRESENTATIVES

- » Ms Gail Andrews
- » Mr Bryan Carpenter
- » Ms Welmoed Geekie
- » Ms Gloria Mbokota
- » Mr Jefter Mxotshwa
- » Ms Regina Nkabinde
- » Ms Sheila Zondo

### STUDENTS AND ALUMNI

- » Ms Tyamazshe Shongwe
- » Ms Charity Tshivhengwa

## Research Ethics Committee (REC)

FPD's REC is registered with the National Health Research Ethics Council for reviewing low risk research projects (Level 1 Research). It meets once a month and during 2013 it reviewed 9 proposals, approved 6, referred 1 to SAMAREC (Level 2 Research) and referred 1 for expert assistance regarding its methodology. One proposal was withdrawn.

- » **Prof David Cameron**  
*Chairperson, Medical Education, Palliative Care,*  
Foundation for Professional Development/University of Pretoria
- » **Ms Alet Bosman**  
*Secretary, Programme Evaluation*  
Foundation for Professional Development
- » **Dr Monika dos Santos**  
*Psychology, Clinical Practice, Policy Development*  
Foundation for Professional Development/University of South Africa
- » **Dr Mitch Besser**  
*Medical Education, Clinical Practice*  
Mothers2Mothers
- » **Prof Julia Mekwa**  
*Ethics, Leadership, Education*  
Foundation for Professional Development
- » **Ms Lilian Barlow**  
*Metallurgy, Management*  
Anglo American

- » **Mr Braam Volschenk**  
*Legal, Management*  
thatsit
- » **Dr Fritz Kinkel**  
*Infectious Disease, M&E*  
Foundation for Professional Development/University of Pretoria
- » **Ms Ntombi Mtshweni**  
*Programme Evaluation*  
Futures Group
- » **Ms Esca Scheepers**  
*Qualitative Research*  
Mothers2Mothers

## Participation of FPD Staff in External Governance Structures

FPD encourages senior managers to participate in governance and advisory structures of other organisations that have a shared mission with FPD.

### Dr Gustaaf Wolvaardt

*Managing Director*

- » Foundation for Professional Development (Pty) Ltd  
*Member of the Board of Directors*
  - » FPD Property (Pty) Ltd.  
*Member of the Board of Directors*
  - » Foundation for Professional Development Fund (Non-Profit Company)  
*Member of the Board of Directors*
  - » Dira Sengwe Conferences (Non-Profit Company)  
*Member of the Board of Directors*
  - » Africa Health Placements (Pty) Ltd  
*Member of the Board of Directors*
  - » Africa Health Placements (Non-Profit Company)  
*Member of the Board of Directors*
  - » Tshwane Mayoral AIDS Council  
*Deputy Chairman*
  - » Tshwane Growth and Development Planning Commission  
*Commissioner*
  - » Health and Medical Publication Group (Pty) Ltd  
*Member of the Board of Directors*
- Ms Veena Pillay**  
*Academic Executive*
- » Foundation for Professional Development (Pty) Ltd  
*Member of the Board of Directors*
  - » FPD Property (Pty) Ltd  
*Member of the Board of Directors*



» Foundation for Professional Development Fund  
(Non-profit Company)  
*Member of the Board of Directors*

» South African Institute of Healthcare Managers  
(Non-Profit Company)  
*Member of the Board of Directors*

**Ms Joanne Brink**

*Head: Basic Education Project*

» African Leadership Academy Student Enterprise Board  
*Member of the Board of Directors*

**Mr Gert Steyn**

*Technical Advisor*

» Audit Committee and Investment  
Committee of Momentum Health  
*Board of Trustees's*

**Mr Henk Reeder**

*Chief Financial Officer*

» South African Institute of Healthcare Managers  
(Non-Profit Company)  
*Voluntary Chief Executive Officer*

**Prof David Cameron**

*Senior Consultant, Evaluation Unit*

» Essential Steps in Managing Obstetric Emergencies Programme  
*Advisory Board member*

» Sediba Hope Medical Centre (SHMC)  
*Board of Directors*

## FPD International Representative

FPD is fortunate to have an international representative (ambassador) who supports the development of FPD projects on a voluntary basis.

**Dr Anders Milton**

M.D., PHD

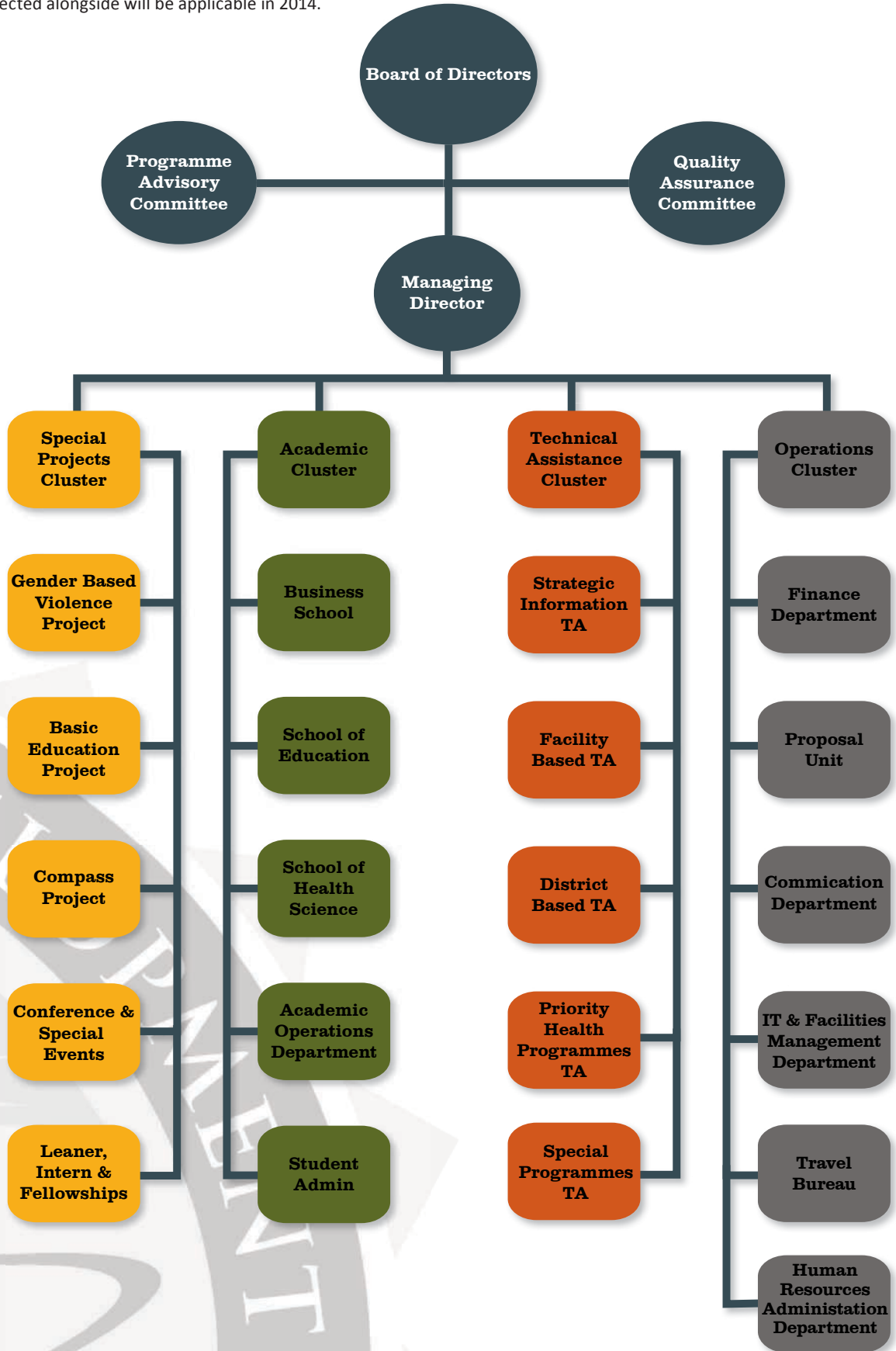
*Special Advisor for Europe*

Dr Milton is an internationally renowned healthcare leader who is the past Chairperson of the World Medical Association, past President of the Swedish Red Cross, past President of the European Red Cross and Crescent Societies Network against HIV and AIDS and TB and also President of the Face of AIDS Foundation. Dr Milton has also served on a number of advisory structures to the Swedish Government and Chairs the Boards of a number of companies. Dr Milton's commitment to the welfare of people has led him to join a number of humanitarian foundations such as Star for Life.



# ORGANISATION AND MANAGEMENT STRUCTURES

FPD is made up of a number of functional departments organised into clusters and departments reporting to the Managing Director. The structure reflected alongside will be applicable in 2014.







## Managing Director's Office

The Managing Director has the overall responsibility for managing FPD in accordance with the strategic direction provided by the FPD Board of Directors. Additionally the Managing Director also acts as Head of the Special Projects Cluster

## Academic Cluster

This Cluster houses FPD's educational archives and comprises the following schools:

### SCHOOL OF HEALTH SCIENCES

Offers a wide range of clinical courses, including formal qualifications and short courses.

### BUSINESS SCHOOL

Offers a wide range of management courses, including formal qualifications, short courses and in-company programmes.

### SCHOOL OF EDUCATION

Offers a number of short courses for educators.

### STUDENT ADMINISTRATION

Tasked with all aspects of delivery of educational programmes and student administration for courses

### ACADEMIC OPERATIONS DEPARTMENT

The Academic Operations Department supports the School of Health Science, Business School and School of Education with academic programme development, study material management, quality assurance and marketing.

## Technical Assistance Cluster

The Technical Assistance (TA) Cluster has a focus on strengthening South African Government (SAG) capacity for leadership, management and delivery of health services in the district health system. The following Departments form the cluster:

### FACILITY BASED TECHNICAL ASSISTANCE

Provides facility-level training, coaching, mentorship and support through a roving mentor team model with the aim to ensure improved service delivery and quality of care with key focus on retention, treat-

ment and care for People Living with HIV/AIDS (PLWHA), TB/HIV/STI integration, provider initiated counselling and testing (PICT) and maternal and child health and reproductive health. FPD also provides community- and work-based HIV counselling and testing services through six mobile HIV counselling and testing units.

### DISTRICT BASED TECHNICAL ASSISTANCE

Provides expert consultancy and technical support to District Management Teams with the aim to support translation of policy into District-appropriate strategies with district-owned operational plans, budgets, targets and management systems.

### SPECIAL PROGRAMMES TECHNICAL ASSISTANCE

Provides technical, clinical and programmatic expertise to priority health programmes (HIV, TB, MCH and Community Health) through programme champions with the aim to promote a cycle of total quality management and inculcation of best practice.

### PRIORITY HEALTH PROGRAMMES TECHNICAL ASSISTANCE (PHP)

Provides technical clinical and programmatic expertise to priority health programmes (HIV, TB, MCH, Mental Health and Community Health), as well as on pharmaceutical supply chain management through programme champions with the aim to promote a cycle of total quality management and inculcation of best practice

### STRATEGIC INFORMATION TECHNICAL ASSISTANCE

Provides technical support and expertise to District Health Information Management and other programmes to strengthen collection, collation, reporting and use of data from routine health information systems and other relevant sources with the aim to foster a culture of evidence based decision making from the facility to district management team level.

### PREVENTION DEPARTMENT

FPD was awarded USAID funding to implement the Communities Forward -Comprehensive Community-Based HIV Prevention, Counseling and Testing Program for Reduced HIV Incidence (Sector 3). FPD is the prime recipient with FHI360, SFH and Humana People to People contracted as sub recipients. This five year grant started on 10 January 2014 with the goal to expand and strengthen high quality Community-Based HIV Counselling and Testing (CBCT) models supported with effective and sustainable linkage and referral systems with an aim to increasing knowledge of HIV status, as well as access to appropriate and effective HIV and TB prevention, care and treatment services in high incident communities and key populations in 14 priority districts in South Africa

## Special Projects Cluster

The Special Projects Cluster encompasses a variety of independent community engagement projects and business units. These include:

### FPD COMPASS PROJECT

The Compass Project is an FPD initiative which assists communities to respond effectively to HIV/AIDS through identification of the need, mapping of service provision and capacity building activities to improve response through GIS maps, service directories and App based products. The Compass Project promotes the philosophy that an effective response to the HIV epidemic requires a coordinated mobilisation of all resources in a specific community.

### SHIPS PROGRAMME

FPD offers a number of service learning opportunities to allow participants to gain work based experience. These programmes accommodate students at various qualification levels ranging from programmes designed to hone the skills of postgraduate masters-level graduates by placing them in the AIDS service environment to programmes that support formal learnerships, undergraduate service learning and apprenticeships.

### GENDER BASED VIOLENCE PROJECT

This programme is a collaboration between FPD and a number of leading South Africa organizations (The Soul City Institute, Sonke Gender Justice Network and the South African Medical Research Council) aiming to enhance the role of Thuthuzela Care Centres of the National Prosecuting Authority in tackling South Africa's epidemic of gender-based violence and sexual assault.

### FPD BASIC EDUCATION PROJECT

Addresses some of the key challenges in the Basic Education sector where FPD's unique approach to training, capacity building and institutional strengthening is applied.

## Operations Cluster

The Operations Cluster provides cross cutting operational support to all FPD departments, both at Head Office and at sites throughout South Africa, and includes:

### FINANCE DEPARTMENT

Facilitates all financial functions for the FPD Group of Companies, and ensures compliance with International and Local Donor and Statutory requirements for both FPD and outsourced clients.

### IT DEPARTMENT

Facilitates and coordinates the functions related to information technology.

### HR ADMINISTRATION DEPARTMENT

The HR Administration Department facilitates and coordinates the functions related to human resource administration.

### TRAVEL BUREAU

FPD established a commercial Travel Bureau, that manages all travel arrangements for FPD staff, faculty, conference delegates and outside clients.

### PROPOSAL UNIT

FPD's proposal unit coordinates all new grant, proposal and tender opportunities to expand outreach and growth opportunities and ensure sustainability for future periods.

### COMMUNICATIONS DEPARTMENT

The Communications Department focuses on brand promotion and strategic communication using predominantly social media and press releases.

## FPD Management Team

### SENIOR MANAGEMENT

- » *Managing Director*  
**Dr Gustaaf Wolvaardt**  
MBChB (Pret), M.Med (Int) (Pret),  
FCP (SA),AMP (MBS), PGCHE (Pret)
- » *Academic Executive*  
**Ms Veena Pillay**  
MBA, PGCHE (Pret)
- » *Technical Assistance Executive*  
**Ms Suzanne Johnson**  
BSLA, MPH

## Department, Programme and Project Heads

### ACADEMIC CLUSTER

- » *Head: Clinical and Educational Training*  
**Ms Amor Gerber**  
B.Com, DTE, SLP
- » *Head: Quality Assurance, Academic Programme Development and Management Training*  
**Mr Anton la Grange**  
BSc (Ed), BSc (HONS), CAHM, AMP (MBS)
- » *Head: Health Sciences*  
**Dr Grace Makgoka**  
MBChB, Dip HIV Mang (CMSA)

### SPECIAL PROJECTS CLUSTER

- » *FPD Compass Project*  
**Mr Riyaadh Ebrahim**  
BCom (Economics, Business Management)
- » *FPD Basic Education Project*  
**Ms Joanne Brink**  
BComm Law, CA (SA), MBA
- » *SHIPS Programme*  
**Ms Slindo Shamase**  
BA, MAP
- » *Conferences and Special Events*  
**Mr Pieter Swart**  
CMM, CMP
- » *Gender Based Violence Project*  
**Ms Siziwe Ngcwabe**  
BA(SW) UNITRA, Diploma HR (Allenby),  
Cert. EAP (UP), CAHM (FPD)





## Annual Year Kick-off FPD Staff Function

### TECHNICAL ASSISTANCE CLUSTER

- » *Facility Based Technical Assistance*  
**Ms Hanlie van der Merwe**  
BCur, CAHM
- » *District Based Technical Assistance*  
**Dr Nkhensani Nkhwashu**  
BSc (Medical Science), MSc (Anatomy),  
PhD (Microbiology)
- » *Strategic Information Technical Assistance*  
**Mr Geoffrey Guloba**  
BSc (Statistics), MPH
- » *Priority Health Programmes*  
**Dr Margot Uys**  
MB.BCh (Rand) BA (Mus) Hons, HED, AHMP (FPD-Yale)

### OPERATIONS CLUSTER

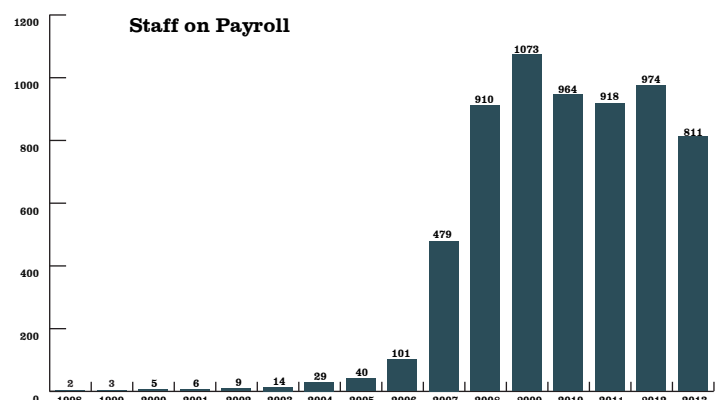
- » *Finance*  
**Mr Henk Reeder**  
BCompt
- » *Human Resource Administration*  
**Ms Maureen Fourie**  
BMil (Human Science)
- » *Information Technology*  
**Mr Kershen Naidoo**  
MCSE, MSDBA
- » *Communications*  
**Ms Helga Swart**  
HCM



## Staff

In 2013 the focus remained on ensuring FPD remains one of the best companies to work for. The success of this project is demonstrated by the active participation of FPD staff in the various events such as the Bollywood Themed start of the year function, which laid down new standards for functions at FPD. There was an increase of 60% attendance and all employees and their partners thoroughly enjoyed the evening. Monthly staff socials were also well attended and improved the *esprit de corps* among employees. The benefit was also seen in an improvement in staff turn-over figures which was less than 5% compared to the national turnover rate for 2013 of 8.6%.

Figure 1: Staff on payroll as on 31 December 2013







### FPD Head Office Monthly Themed Staff Functions



Foundation for Professional Devevelopment has a staff component of **811**.





**7 Registered Qualifications**



**154 Courses on Offer**



**50 000 Students per Year**

**R**

**R14 million worth of Scholarships per Year**



**FPD BUSINESS SCHOOL**



**FPD SCHOOL OF HEALTH SCIENCES**



**FPD SCHOOL OF EDUCATION**



**FPD CONFERENCES & SPECIAL EVENTS**



DERN  
STATISTICS  
SOFT® EXCEL

# Education

BOB MASH  
JULIA BLITZ-LINDEQUE  
EDITORS

Annual

JUSTICE  
M. Salojee

HARON  
AZIZ

A Handbook for Improving Health Services

HEAD

# 2



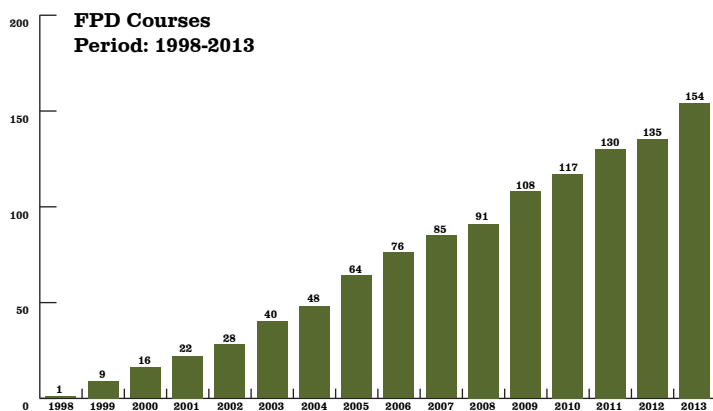
# TEACHING AND LEARNING FOCUS AREAS

FPD's learning programmes are designed to be cutting edge, customised to meet the specific needs of our participants. Both formal qualifications, as well as our short course training offerings are developed within the regulatory requirements of the Department of Education, Council of Higher Education, the South African Qualifications Authority and, in the case of training programmes for health care professionals, the relevant programmes adhere to the requirements of the Health Professions Council of South Africa.

## Curriculum Development

The number of separate courses offered by FPD increased from one in 1998 to over 154 by the end of 2013 as illustrated below.

Figure 2: Number of courses offered by FPD



During the past year the following new courses were developed, customised or updated:

Formal registered qualifications submitted to CHE, SAQA and DHET for accreditation and registration during 2012-2013:

- » Advanced Certificate in Monitoring and Evaluation [Adv. Cert. (Monitoring and Evaluation)] – was approved in 2013, waiting for DHET to add this qualification to the FPD registration certificate.
- » Advanced Certificate in Operating Department Assistance [Adv. Cert. (Operating Department Assistance)].
- » Higher Certificate in Pharmacy Technician [H. Cert. (Pharmacy Technician)].
- » Bachelors in Business Administration [BBA].

## COURSES FOR CLINICIANS

- » Breast Cancer for Health Care Practitioners in Ghana
- » Clinical Management of Respiratory Diseases Course
- » Pain Management Course
- » Disability Assessment Course
- » Dermatology Course

## MULTIDISCIPLINARY COURSES

- » Wellness Programme
- » Breast Cancer for Volunteers in Ghana
- » ICD 10 Coding
- » Infection Control
- » Short Course in Pharmaceutical Regulatory Affairs
- » Comprehensive Management of Sexual and Gender Based Violence

## COURSES FOR OTHER PROFESSIONALS AND MANAGERS

- » Advanced Certificate in Management (for Hospital Managers)
- » Higher Certificate in Management (for Laboratory Managers)

## E-LEARNING COURSES

- » Clinical Management of HIV and AIDS for Health Care Practitioners (10 Modules)
- » Medical Ethics – 3 different courses
- » Death Certificate Course
- » Clinical Management of Hypothyroidism
- » Fertility Management Course
- » Clinical Management of Breast Cancer

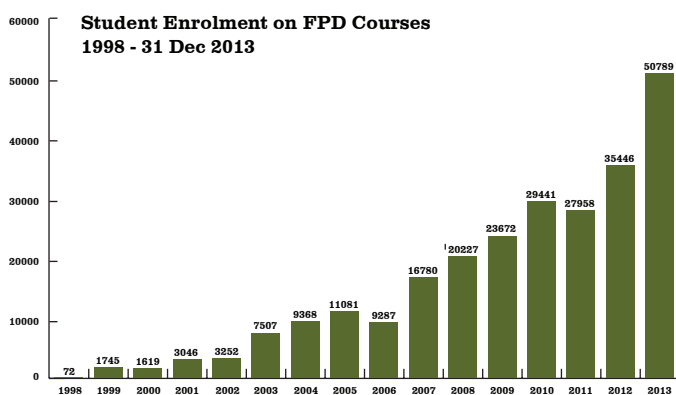
## Highlights of 2013

- » Highest number of students recorded for a single year in FPD's history. FPD trained 50 789 students in 2013
- » Launch of inPractice Africa: an online educational platform for updated reference and learning resources for South African clinicians, available both online and offline.
- » Western Cape Minister of Community Development, Min Dan Plato, attended FPD courses presented in Lutzville, Western Cape.
- » Trained 977 community health care workers in association with the National Department of Health bringing the total number trained to date 10 419.
- » Trained 2142 HCP in Africa on various clinical courses under the SIDA grant.
- » Trained 1585 Healthcare Professionals in South Africa on various clinical course under the SIDA grant.
- » Trained 1153 Educators in South Africa on GBV under the SIDA grant.
- » Trained 823 Healthcare Professionals in South Africa on GBV under the SIDA grant.
- » Trained 36 956 HCP and Counsellors on various clinical courses under USAID/ PEPFAR Grants.
- » Trained 1281 HCP on Voluntary Medical Male Circumcision in partnership with CHAPS under the USAID/ PEPFAR grant.
- » Provided scholarships to value of R91 million to students of which R16,5 million was awarded to students from the rest of Africa.

## Student Enrolment

FPD in 2013 enrolled the largest number of students to date with 50 789 students enrolments, bringing the total number of students who have studied with FPD since its launch in 1998 to 251 290.

Figure 3: Student enrolment by year and cumulative total to date



Since its inception, this Cluster has successfully broken down barriers that prevent students from obtaining opportunities to further their studies. These include sourcing valuable scholarships for disadvantaged groups, taking programmes to various towns and districts where the need is across Africa, and offering blended learning approaches which limits time away from work.

## Alumni Support Services

**Resource Centre:** FPD maintains a resource centre at its registered head office. Apart from literature associated with its programmes and courses, internet access is also provided. Students receive the support they require from faculty and may request additional assistance from FPD if needed.

**Online Support:** FPD has also established an internet based Student Interactive Portal (SIP) to support students to achieve their formal registered qualifications. This SIP is a server programme that allows invited users to collaborate on the website by editing and downloading content from the website from their own computer and in their own time. Visitors can view the web pages and interact with fellow students and facilitators. The SIP allows facilitators and assessors to mentor students online and allows students to form student support groups. FPD's website offers students assistance through the provision of assessment and assignment guidelines.

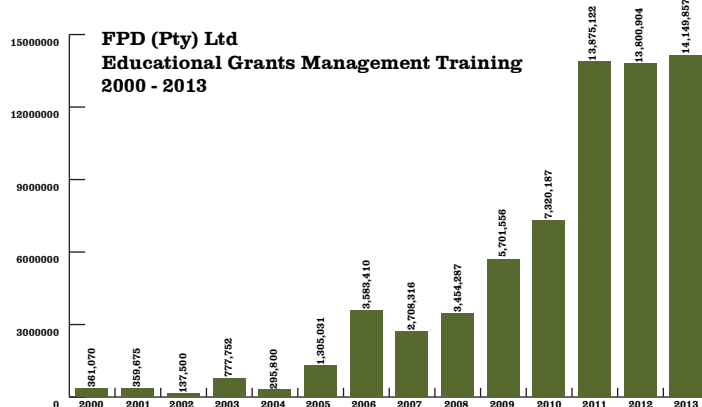
**Clinical Call Centre Support:** FPD also offers, in collaboration with the University of Cape Town's Medicine Information Centre, a toll free call centre that is geared towards handling any clinical treatment enquiries. This call centre is actively promoted to the FPD alumni. The number is 0800 212 506.

**Clinical Mentor Support:** FPD has developed a system of roving teams of mentors to provide comprehensive support for all the health clinics and hospitals in its allocated districts. The team consists of a doctor, nurse, social worker, information officer and data expert. Their task is to assist the health professionals and staff to improve the outcomes of key district health indicators such as the TB cure rate, maternal and infant mortality and mother-to-child-transmission rate.

**Continuing Education and Professional Support:** FPD compliments its own alumni services with strategic alliance with two professional associations. FPD's sponsorship of membership fees for alumni to these associations ensures access to a wide variety of mentorship and continuing educational products such as journals and newsletters. Currently FPD has arrangements to provide such support with the Southern African HIV Clinicians Society (SAHIVS) and South African Institute of Health Care Managers (SAIHCM).

## Scholarships

Figure 4: Rand value of scholarships provided





During 2013, FPD continued to support efforts to promote access to education through securing educational grants from sponsors and donors for all potential FPD students.

The funding from grants and sponsorships are utilised in the form of a subsidy to enrol potential students. This reduces cost as a barrier to education. During 2013, educational grants and sponsorships to the value of R91 million were awarded to FPD students. R 16,5 million of this was provided outside of South Africa to Southern and Eastern African citizens in line with FPD's goal of establishing a regional presence. The total monetary value of scholarships awarded since 1998 is R390 million.

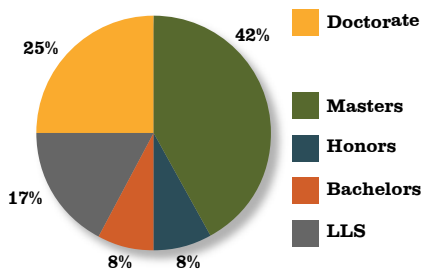
## Faculty

FPD employs a model, using a contracted faculty panel, which enables its access to the best faculty in the field. Most of the FPD Department Heads also act as faculty. The following graphs provide an overview of the qualifications and expertise of FPD staff who taught on programmes in 2013.

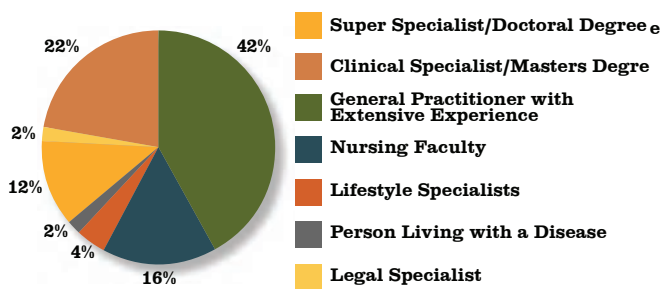
### QUALIFICATIONS FACULTY:

Figure 5 and 6: Faculty Qualifications

#### Qualifications of Faculty 2013 - 2014 Management Training



#### Qualifications of Faculty 2013 - 2014 Clinical Training



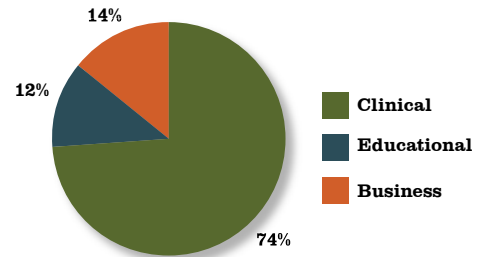
## Facts And Figures

This section provides an overview in graphic form of the demographics of students who were enrolled on FPD courses during 2013.

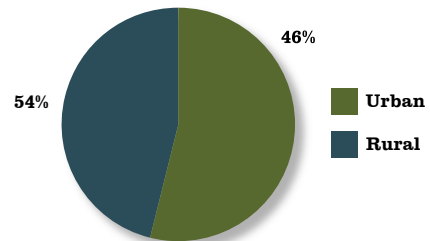
### STUDENT BREAKDOWN 2013:

Figures 7 to 13 Student Demographics

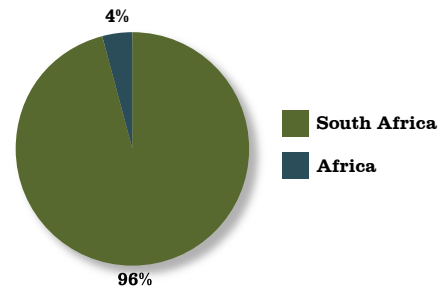
#### Student Breakdown 2013 Course Enrolment



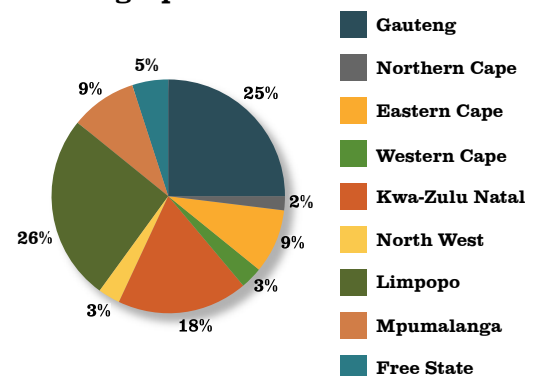
#### Student Breakdown 2013 Urban/Rural



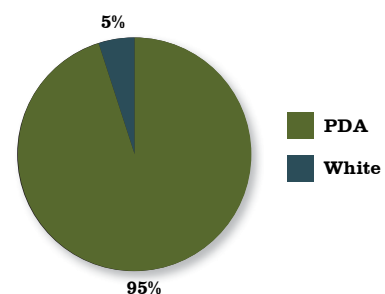
#### Student Breakdown 2013 South Africa/Africa



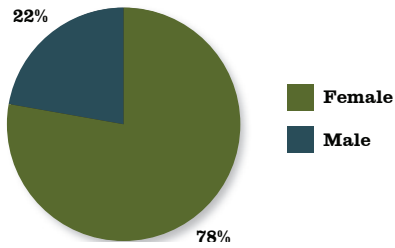
#### Student Breakdown 2013 Geographical



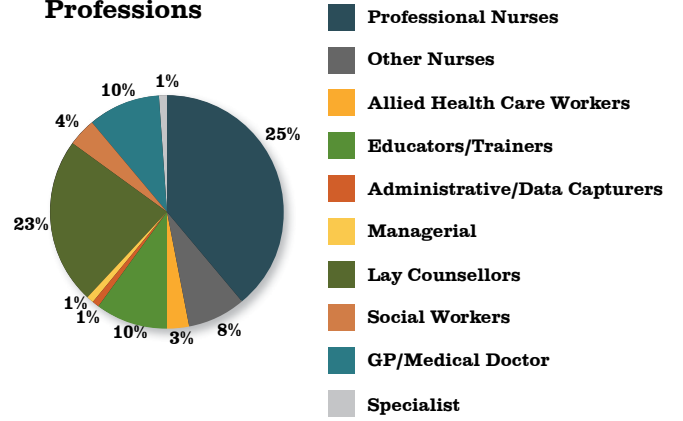
#### Student Breakdown 2013 Racial



### Student Breakdown 2013 Gender



### Student Breakdown 2013 Professions



## Graduation

In November 2013 FPD held its annual graduation. A total 304 students graduated from FPD courses.







# EDUCATIONAL OFFERING

## MANAGEMENT AND BUSINESS COURSES

Aligned to FPD's vision of building a better society through education and capacity development, the FPD Business School focuses on developing transformational leaders.

The FPD Business School has a wide selection of management and business courses comprising of formal registered qualifications, international short courses, short learning programmes and distance education. These management courses cater for all levels of students from entry level managers to highly experienced executive management. Our teaching methodologies are based on cutting edge educational methodologies and include facilitated contact sessions, case studies, group discussions, structured and unstructured group work and action research.

Our emphasis is on translating management theory into practical workplace skills. This is ensured through our educational approach, our panel of national and international subject expert faculty, our alumni support programmes and the integration of action research into our curricula.

### Formal Registered Qualifications

#### ADVANCED CERTIFICATE IN HEALTH MANAGEMENT

This course is an intensive management development programme, tailored to the needs of healthcare managers and professionals. This course has been specifically customised for the South African healthcare environment and focuses on developing in-depth strategic and functional management competencies.

#### HIGHER CERTIFICATE IN PRACTICE MANAGEMENT

This qualification is targeted predominantly at self-employed healthcare practitioners and practice managers. The programme has been designed to provide participants with the business and management skills that are essential for managers of private practices.

#### HIGHER CERTIFICATE IN RISK ASSESSMENT AND MANAGEMENT

The primary purpose of this qualification is to provide qualifying learners – namely, case managers, admin-co-ordinators, reception staff and credit controllers in private hospitals – with a set of basic core competencies within the assessment and management of risk. This programme is an entry-level qualification that will enable learners to assess and manage risks in the healthcare environment.

#### HIGHER CERTIFICATE IN MANAGEMENT

This qualification is targeted at addressing the management training needs of participants currently in junior management positions, to provide them with the knowledge and skills that will enable them to progress into middle management positions.

The Higher Certificate in Management is structured in such a way that it gives learners exposure to apply organisational management principles on an operational, functional and strategic level.

#### ADVANCED CERTIFICATE IN MANAGEMENT

The purpose of this qualification is to equip participants in managerial positions across various sectors with the knowledge and skills to adapt and prosper in the continuously changing management environment. It aims to develop participants' managerial capacity by broadening their view of their business, their specific industry and wider global forces that impact on the management environment. Managers are motivated to develop an increased appreciation of their role as a manager and a leader, whilst also developing the knowledge and skills required to assess and have an increased understanding of themselves as individuals.

### International Short Courses

#### MANCHESTER BUSINESS SCHOOL ADVANCED MANAGEMENT PROGRAMME (MBS AMP)

The MBS AMP is an international short course offered by FPD in collaboration with Manchester Business School and is aimed at developing the strategic management capabilities of participants. This intensive management programme is directed towards established managers who work in the private healthcare sector and who need to rapidly develop management competencies. This course is also available for managers working outside the healthcare sector.

#### THE FPD/YALE ADVANCED HEALTH MANAGEMENT PROGRAMME (AHMP)

This international short course has been developed by FPD in collaboration with the School for Epidemiology and Public Health at Yale. The course is aimed at public sector managers who need to develop or refresh their strategic and functional management competencies.

### Other Business Short Courses

#### ADVANCED PROJECT MANAGEMENT

This course is ideal for project managers who wish to improve their project management skills. This dynamic programme provides participants

with advanced skills and practical application on the processes, organisational structure and tools that assure that projects are successfully completed successfully.

#### **PRACTICE FINANCE FOR PRIVATE PRACTITIONERS**

This course has been designed to introduce non-financial managers to financial management principles, especially in the context of a private healthcare practice.

#### **FINANCE FOR PUBLIC SECTOR MANAGERS**

This course has been customised for public sector managers. It introduces them to financial management principles, especially in the context of public finances.

#### **MONITORING AND EVALUATION**

This course has been designed to introduce managers to monitoring and evaluation principles and techniques. This course is available as a basic and advanced course.

#### **LEGISLATIVE UPDATE SEMINARS**

These seminars are convened from time to time to address legislative changes that will impact on health service provision in the private sector.

#### **RESOURCE MOBILISATION AND DONOR RELATIONS**

This course introduces the participants to the world of grant making and grant writing.

#### **CORPORATE GOVERNANCE FOR NOT-FOR-PROFIT ORGANISATIONS**

This course introduces board members to their fiduciary duties, obligations and to the international best practices in not-for-profit corporate governance.

#### **B-BBEE**

This short course enables participants to interpret B-BBEE in a manner which enables participants to develop strategies on how to improve their company's scoreboard rating.

#### **DIVERSITY MANAGEMENT**

Participants to the workshop will get a new perception of diversity and diversity management. At the end of the workshop they will be able to develop strategies for implementing diversity management to grow the competitive advantage of their organisation and initiate institutional change.

#### **LABOUR LAW**

This short course focuses on equipping the manager with the necessary tools for managing human resources in the context of South African labour law. For example it covers employment, contracts, dismissal and terminating the services of an employee, the Basic Conditions of Employment Equity Act, the Skills Development Act and codes on dealing with HIV and AIDS and sexual harassment.

#### **THE ULTIMATE RESCUE PLAN FOR YOUR BUSINESS**

This unique short course equips business owners with the knowledge, skills and tools to overcome an economic recession. Business owners are taught practical strategies to cost savings and income generation.

#### **PROGRAMME EVALUATION**

This short course is aimed at individuals seeking both postgraduate training and practical experience in developing programme evaluation skills. Its focus is on meeting the needs of mid-level monitoring and evaluation professionals seeking to advance their knowledge on how to plan, design, manage and undertake evaluations.

## **CLINICAL COURSES**

### **Formal Postgraduate Qualification**

#### **POSTGRADUATE DIPLOMA IN GENERAL PRACTICE**

The Postgraduate Diploma in General Practice [PG Dip. (General Practice)] is designed to provide an easily accessible distance-education curriculum that will allow structured continuing professional development around a subject of direct relevance to doctors' practice environment. The clinical subjects address the more pressing public health issues while non-clinical subjects are designed to help general practitioners deal with a rapidly changing healthcare environment.

#### **ADVANCED DIPLOMA IN AESTHETIC MEDICINE**

The Advanced Diploma in Aesthetic Medicine (Adv. Dip Aesthetic Medicine) has been specifically developed for healthcare practitioners working in the aesthetic and anti-ageing medical field. The course is tailored to take into account the time and financial constraint of practitioners working full time in a private practice. The range of course modules has been designed to develop and expand the participants' extensive knowledge and advanced skills in this rapidly evolving and sophisticated field of medicine.

### **Clinical Short Courses**

These short courses are designed to enhance the clinical skills of healthcare professionals and are taught through a combination of assessed self-study, detailed study manuals, and workshops facilitated by leading national experts.

### **Courses for Clinicians**

- » Advanced HIV and AIDS Management Programme
- » Anaesthesiology Refresher
- » Clinical Management of Allergies
- » Clinical Management of Asthma
- » Clinical Management of Breast Cancer for Healthcare Professionals
- » Clinical Management of Cardiovascular Diseases
- » Clinical Management of Common Vascular Diseases
- » Clinical Management of Dermatology
- » Clinical Management of Diabetes Mellitus
- » Clinical Management of Epilepsy
- » Clinical Management of GORD
- » Clinical Management of HIV/AIDS



- » Clinical Management of Malaria
- » Clinical Management of Metabolic Syndrome
- » Clinical Management of Respiratory Diseases
- » Clinical Management of Rheumatology
- » Clinical Management of Severe Sepsis
- » Clinical Management of Tuberculosis
- » Clinical Management of Urinary Incontinence
- » Dermatology in HIV/AIDS
- » Destigmatisation
- » Disability Assessment Course
- » Diagnostic Ultrasound – Obstetrics/Gynecology
- » Doctors Orientation Programme
- » Emergency Medicine
- » Infection Control and IPT Course
- » Irritable Bowel Syndrome
- » Male Circumcision Under Local Anaesthesia
- » Management of Opioid Dependence and Abuse
- » Mental Health
- » Multidrug-Resistant Tuberculosis Course
- » Paediatric HIV/AIDS: Management Course
- » Palliative Care Nursing for Professional Nurses
- » Practice Pathology
- » Prevention of Mother to Child Transmission (PMTCT)
- » Rational Use of Antibiotics
- » Substance Abuse

## Courses for Registered Nurses

- » Case Management for Professional Nurse
- » Clinical Competency of ARV Treatment Programme - CCART
- » Clinical Management of Diabetes Mellitus for Professional Nurses
- » Clinical Management of HIV and AIDS for Professional Nurses
- » Clinical Management of Tuberculosis for Professional Nurses
- » Muscular Dystrophy
- » Nurse Initiated Management of Anti-Retroviral Therapy (NIMART)
- » Palliative Care Nursing for Professional Nurses

## Multidisciplinary Courses

- » ART Registers
- » Adherence Counselling for ART
- » Advanced Counselling and Testing
- » Clinical Management of Obesity
- » Clinical Trial Management (GCP)
- » Community Health Workers Phase 1 and Phase 2
- » Comprehensive Management of Sexual and Gender Based Violence
- » HIV in the Workplace
- » HIV Rapid Testing
- » HIV Refresher Seminar
- » Palliative Care
- » Provider Initiated Counselling and Testing (PICT)
- » Short Course in Pharmaceutical Regulatory Affairs

## Courses for Other Healthcare Workers

- » Anatomy for Non-Healthcare Professionals
- » Anti-Retroviral Drug and Compliance Workshop for Non-Medical Professional
- » Breast Cancer for Volunteers
- » Counselling Survivors of Intimate Partner Violence in the Context of HIV/AIDS Treatment Facilities
- » HIV/AIDS Counselling, Prevention and Education Programme for Community Workers
- » Management of HIV for Lay Counsellors
- » Management of HIV and TB for Lay Counsellors

## Clinical Practice Support Courses

Practice support courses address specific competencies required for successful self-employed practices not addressed in FPD business courses.

- » Coding Course (CPT and ICD 10)
- » How to Run an ARV Clinic
- » Medical Record Keeping
- » Medical Terminology
- » Seminar on Starting a Successful Private Specialist Practice
- » Storepersons Course

## Distance Education Clinical Courses

Distance education courses have been developed on clinical and practice-management subjects, especially with a view of meeting the learning needs of healthcare professionals working in rural settings.

- » Clinical Management of Epilepsy
- » Clinical Management of HIV and AIDS for Health Care Professionals
- » Clinical Management of Rheumatology
- » Clinical Management of Severe Sepsis
- » Clinical Management of Tuberculosis for Health Care Professionals
- » Dispensing
- » Dispensing Opticians
- » Ethics for Optometrists
- » ICD 10 Coding
- » Irritable Bowel Syndrome
- » Medical Ethics
- » Medical Terminology
- » Mental Health
- » Optometry Volume 1 and 2
- » Practice Pathology
- » Professional Drivers Permit Course
- » Urinary Incontinence Management

## E-Learning Courses

- » Certificate in Practice Management
- » Clinical Management of Asthma
- » Clinical Management of Breast Cancer
- » Clinical Management of Cardiovascular Disease
- » Clinical Management of Common Vascular Disease
- » Clinical Management of Diabetes for Healthcare Practitioners
- » Clinical Management of Epilepsy
- » Clinical Management of HIV and AIDS for Healthcare Practitioners
- » Clinical Management of Hypothyroidism
- » Clinical Management of Paediatric HIV and AIDS
- » Clinical Management of STI's

- » Clinical Management of TB for Healthcare Practitioners
- » Clinical Management of Urinary Incontinence
- » Fertility Management Course
- » HIV Counselling and Testing
- » Storepersons course
- » Mental Health Course
- » Medical Ethics – 4 different electives
- » Death Certificate Course

## FPD SCHOOL OF EDUCATION

### Courses for Educators

- » Managing HIV/AIDS in Schools
- » Managing Violence in Schools
- » Managing Violence in the Community

## CUSTOMISED ORGANISATION SPECIFIC (IN-HOUSE) COURSES

FPD has developed particular expertise in developing customised educational programmes for the staff of various organisations. Organisations marked with (\*) denotes 2013 clients.

To date FPD has provided customised in-house training programmes for staff of the following organisations:

### Public Sector Organisations

- » Departments of Health of neighboring countries\*
- » South African National Department of Health\*
- » Various South African Provincial Departments of Health\*
- » Statistics South Africa
- » South African Department of Correctional Services\*
- » South African National Parks
- » Rand Water
- » South African Defense Force\*



## International Organisations

- » Joint United Nations Programme on HIV/AIDS (UNAIDS)\*
- » World Health Organisation (WHO Afro)
- » Centers for Disease Control (CDC)
- » United Nations Children's Fund (UNICEF)\*
- » SIDA\*

## Industry

- » Anglo Gold
- » Anglo Gold Ashanti\*
- » Anglo Platinum
- » De Beers
- » Eskom\*
- » Kumba Resources
- » Microsoft
- » BMW
- » Royal Bafokeng Administration
- » Nedbank
- » NedHope\*
- » Oracle

## Medical Schemes/Administrators

- » Igolide Health Networks
- » Impilo Health
- » Medihelp
- » Medikredit
- » MXHealth
- » Umed Medical Scheme
- » Thebe Ya Bopele

## Hospital Groups

- » NetCare

## Networks

- » GP Net
- » Medicross\*

- » Spesnet
- » Prime Cure

## Pharmaceutical and Medical Equipment Industry

- » Abbot Laboratories
- » Adcoc Ingram
- » Alcon\*
- » Aspen Pharmacare
- » AstraZeneca\*
- » Bristol-Myers Squibb
- » Eli Lilly
- » Innovative Medicines South Africa (IMSA)
- » iNova\*
- » MSD
- » Novartis\*
- » PIASA
- » Quintiles
- » Reckitt Benckiser
- » Sanofi Aventis\*
- » Stryker South Africa
- » SSEM Mthembu Medical

## NGO's and Development Organisations

- » Red Cross
- » South African Catholic Bishops Conference (SACBC)\*
- » Lutheran World Relief
- » American International Health Alliance (AIHA)
- » International Planned Parenthood Federation (IPPF)
- » info4africa
- » Tshepang Trust
- » Community-Based Prevention and Empowerment Strategies in South Africa (COPES SA)
- » Broadreach Health Care
- » Medical Protection Society (MPS)

- » AFRICARE
- » Youth Care Givers
- » The Soul City Institute
- » Centre for Infectious Disease Research in Zambia (CIDRZ)
- » Save the Children UK
- » John Snow International
- » Right to Care\*
- » Aurum Health
- » St Mary's Hospital
- » Corridor Empowerment Project
- » Klerksdorp Hospital
- » Impilo Medical Equipment Suppliers
- » Ulysses Gogi Modise Wellness (UGM Wellness)\*
- » Marie Stopes\*
- » Health Systems Trust \*

## Contracted Training Provided on Behalf of Other Academic and Research Institutions

- » University of Pretoria
- » CIDRZ (Zambia)
- » Columbia University – ICAP\*
- » University Research Company (URC)
- » Regional Training Centre Eastern Cape
- » Regional Training Centre Mpumalanga
- » Regional Training Centre Limpopo
- » Medical Research Council (MRC)
- » Southern African Human Capacity Development (SAHCD)
- » University of KwaZulu Natal (UKZN)
- » Walter Sisulyu University
- » Tshwane University of Technology
- » Health Science Academy (HSA)

## CONFERENCES & SPECIAL EVENTS

Conferences play a key role in advancing local and international responses to challenges faced by local, regional and global societies. FPD's

involvement in conferences dates back to the XIIIth International AIDS Conference that took place in Durban in 2000 where the organisation was instrumental in managing the bid to host this conference and then in managing the organisation of the conference. This conference was a watershed event and catalysed the global movement to make AIDS treatment affordable. Today millions of people in developing countries are able to access this life saving treatment. This conference was also the first macro international conference hosted in South Africa. The success thereof launched South Africa into the international convention market. Building on this heritage, the FPD Conferences and Special Events Department annually organise a number of top level conferences on themes that resonate with the FPD vision of creating a better society. These conferences shape public perception on important health, economic and social issues.

## Core Capabilities

Our comprehensive range of local and international professional conference planning- and management services include:

- » Strategic Support Services
- » Strategic Conference Business Development
- » Conference Risk Analysis
- » International Conference Bid Production
- » Conference Secretariat Functions
- » Abstract-and-Speaker-Management Services
- » Conference Project Planning and Management Services
- » Delegate Administration Services (Including Registration)
- » Exhibition Management Services
- » Financial Management
- » Conference IT Support Services and Equipment
- » Event Monitoring and Evaluation
- » Protocol Services
- » Scholarship Management Services
- » Destination and Tour Management
- » Sponsorships Recruitment and Exhibition Sales

## The FPD Conference Organising Model

Being based in one of the premier private higher education institutions that plays a major regional development role, gives FPD Conferences a unique advantage. This provides FPD Conferences with access to a team of highly qualified strategic thinkers and entrepreneurs allowing us to provide clients with strategic and business development advice. FPD is also in a position to take financial risk and underwrite new conferences through joint ventures and risk sharing models. FPD also has a long standing relationship with Dira Sengwe Conference the NGO that is the custodian of the South African National AIDS Conference, to provide the conference secretariat to this NGO.



# OUTCOMES AND HIGHLIGHTS

To date, this Department organised more than 50 major conferences and events that were attended by 180,000 people. These events contributed in excess of R810m to South Africa's economy and generated employment for 5,800 people.

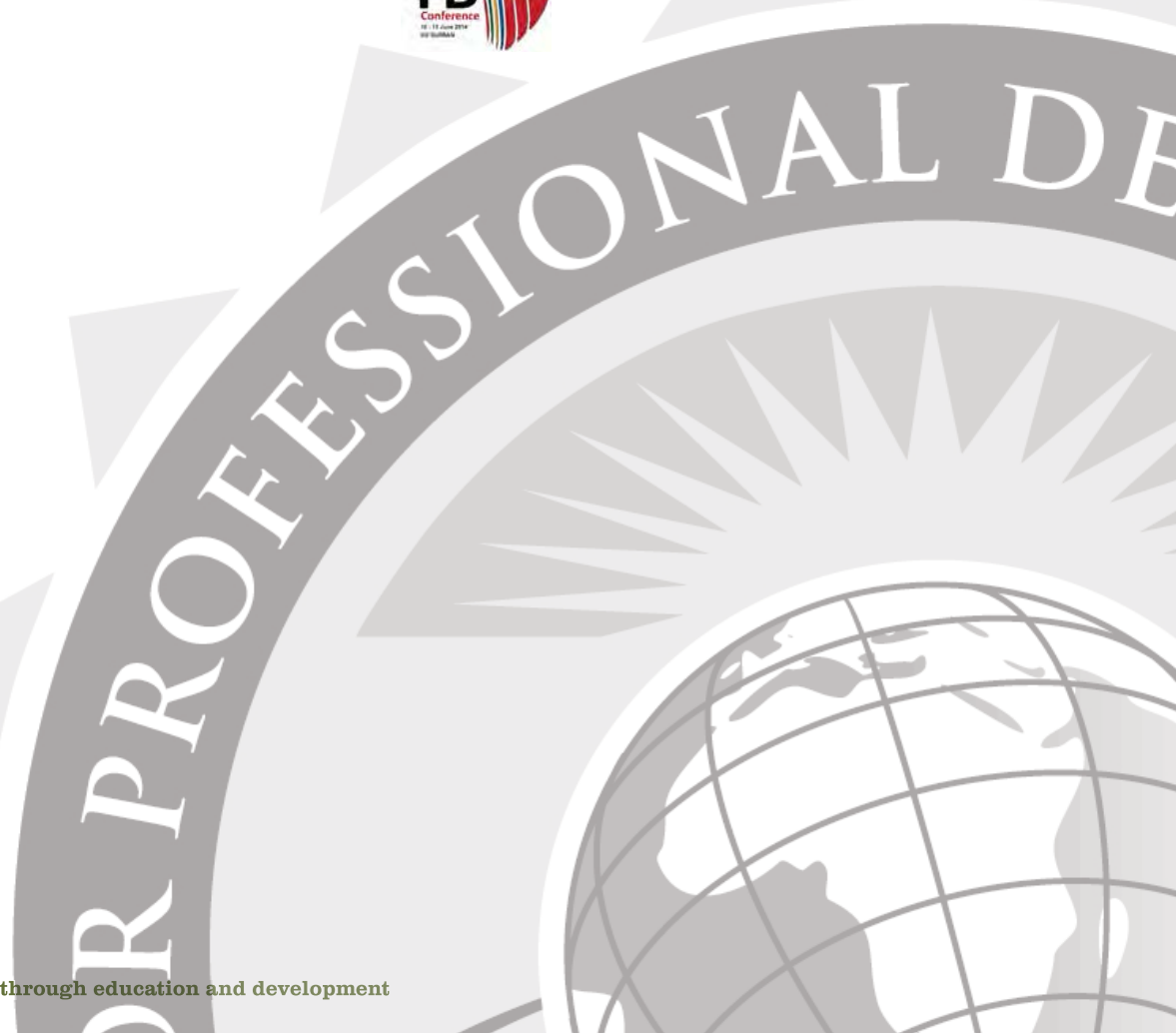
In 2013 FPD organised the following events:

- » 6th South African AIDS Conference
- » 2nd International HIV Social Sciences and Humanities Conference, which was held in Paris, France (in partnership with the Association for Social Sciences and Humanities in HIV). This was also the first time that FPD organised a conference in Europe.
- » 17th International Conference on AIDS and STI's in Africa (ICASA) which is Africa's premier AIDS Conference hosted for the first time in South Africa that focused on the challenges of sustaining commitment to the AIDS response in Africa.



Conferences coming up in 2014:

- » 2nd South African Basic Education Conference (SABEC)
- » South African Society of Anaesthesiology National Congress (SASA 2014)
- » 4th South African TB Conference
- » 3rd Maternal and Child Health Conference





17<sup>th</sup>  
ICASA

INTERNATIONAL CONFERENCE  
ON AIDS AND STI IN AFRICA

ICASA  
CONFERENCE

ICASA

ICASA  
CONFERENCE

17<sup>th</sup>  
ICASA  
CONFERENCE





**390 000 Patients  
active on ART**



**1 743 3011  
Clients received  
HCT**



**5850 calls on the  
National TB/HIV  
Hotline**



**Placed 2900  
Foreign-Qualified**



**FPD  
TECHNICAL  
ASSISTANCE**



**FPD  
COMPASS**



**FPD  
SHIPS**



# Capacity Development

3

MECHANICAL  
ASSISTANCE  
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LEVEL



# CAPACITY DEVELOPMENT

The educational white paper of 1997 emphasised the importance of integrating community engagement into higher education in South Africa. This white paper called on higher education institutions to demonstrate their commitment to social transformation by making available the expertise in these institutions to address the challenges faced by the community. FPD has interpreted this mandate through a focus on developing capacity in the broader South African community including government, academia and civil society and dedicates substantial funding and staff to these activities. The following departments and clusters focus their work predominantly on this goal.

## TECHNICAL ASSISTANCE CLUSTER

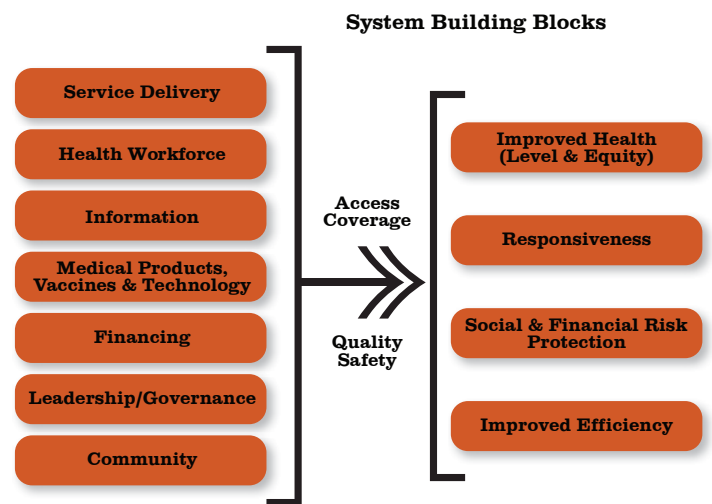
FPD's Technical Assistance Cluster is the evolution of FPD's Positive Life Project, a project initiated in 2005 in response to the urgent need to rapidly establish and scale up public sector antiretroviral treatment (ART) clinics in South Africa. In response to the changing HIV service environment, following the decentralization of ART services to primary health care clinics under the supervision of NIMART (Nurse Initiated and Managed Antiretroviral Treatment) nurses and the new PEPFAR Partnership Implementing Framework negotiated between the South African Government and the US Government, FPD's focus shifted from supporting direct service delivery to providing technical assistance (TA).

Starting October 2012, FPD received funding from PEPFAR through USAID to provide technical assistance (TA) to work in partnership with nine District Departments of Health to strengthen the health systems with an aim to improve HIV and TB health outcomes. FPD defines Technical Assistance as "a dynamic, capacity-building process for designing or improving the quality, effectiveness, and efficiency of specific programmes, research, services, products or systems." In line with the mandate from PEPFAR II, the focus of our TA activities is rooted in district ownership, district management and strengthening systems to sustain the response. Our TA activities are systematic, evidence-based and designed based on consultative needs assessment and prioritisation. Our end goal is to strengthen the district health systems to work FASTER, SMARTER and BETTER and attain UNAIDS's goal of triple zero: Zero New HIV and TB Infections; ZERO Stigma; ZERO HIV and TB-related deaths.

As a guide for the FPD TA strategy, FPD adopted an approach based on the World Health Organization's (WHO) Health Systems Framework and systems thinking for health systems strengthening (WHO, 2010).

This framework identifies six components of a healthcare delivery system namely: Leadership, Human Resource, Information, Finance, Service Delivery, Products and Technology. In addition to the six building blocks, FPD has adopted Community as a seventh building block.

Figure 14: Health systems strengthening model



In partnership with the South African Government, FPD's technical assistance approach aims to develop and inform strategies to help Districts: realize the National Strategic Plan on HIV/AIDS and PHC Re-Engineering Strategy; support District and facility management to draft, implement and monitor progress against District Health Plans and related work plans; and build capacity of districts to achieve and maintain targeted levels of performance for PEPFAR's priority areas. Although FPD's focus area remains strengthening HIV/TB related prevention, care and treatment services, our approach is rooted in a comprehensive health systems strengthening approach encompassing the District Management Team to the facilities' service delivery.

FPD provides technical assistance through four complementary work streams that are needs-driven and sustainable within the structures of the Department of Health:

- » Targeted Educational Programmes delivered in partnership with Regional Training Centres and aligned to the District Health Plan, skills needs assessments and key priority areas.
- » Facility Based Technical Assistance delivered through roving mentor teams and programme champions aligned to facility needs, the District Health Plan and priority programme areas and supported through Quality Improvement cycles using Lean and Action Research.



- » District Management-Based Technical Assistance delivered through District Management Team (DMT) TA advisors, in-house and short-term consultants and technical experts aligned to the building blocks (including focus on strategic and operations management, HR management systems, finance, community mobilization, supply chain management, laboratory systems, infrastructure, pharmaceutical supply chain management and strategic information including M&E and Health Information Systems, etc.)
- » Sustainability and Resource Mobilization delivered through the Cluster's management structures with the aim to secure and/or leverage additional funding in support of the district health system and improved health outcomes.

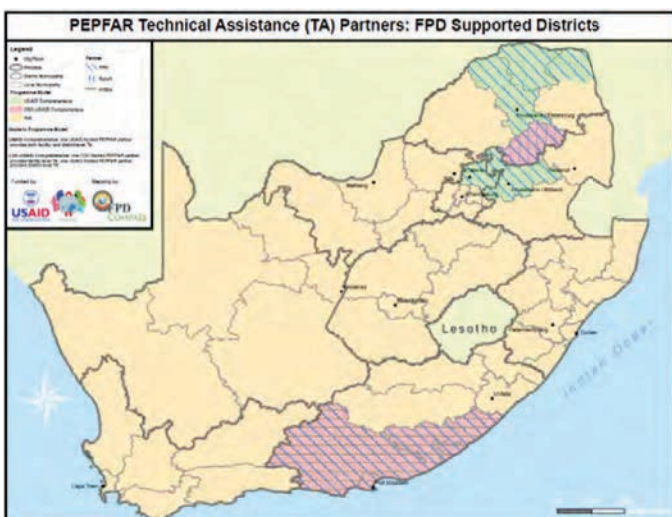
Picture of participants from FPD's District Executive Conference with representatives from nine district management teams, hosted in Pretoria on 6-7 May, 2013. Topic: What it means to prepare for NHI



## Highlights of 2013

During 2013, FPD launched two new PEPFAR grants through USAID to support comprehensive technical assistance in four districts (Tshwane/Metsweding GP, Vhembe LP, Capricorn LP, and Nkangala MP) and district level technical assistance in five districts (Greater Sekhukhune LP, Amatole EC, Buffalo City EC, Nelson Mandela Bay Metro EC, and Cacadu EC). For year one of TA, FPD focussed on establishing a baseline, drafting tailored strategies, developing strong working relationships and coordinated management structures with our Department of Health counterparts, as well as integrating our TA strategy with our CDC-funded partners, Aurum Institute and IYDSA (Beyond Zero), in the five hybrid funded districts.

Figure 15: Health district supported by FPD through TA activity



In accordance with donor requirements, the Technical Assistance Cluster operates on the PEPFAR budgeting cycle that runs from October to September. All indicators reported below measure project output during the most recent PEPFAR year: October 2012 to September 2013.

Table 1: Performance against expanded (stretch) targets

COP indicators	Q1 (Oct-Dec'12)	Q2 (Jan-Mar '13)	Q3 (Apr-Jun'13)	Q4 (Jul-Sep'13)	To date total	Annual Target	% target achieved
ART start	23 889	24 016	28 768	26 286	102 959	117 983	87%
ART start Adult	23 047	22 206	27 552	25 213	98 018	110 023	89%
ART start Child	1 145	1 374	1 207	1 073	4 799	7 960	60%
ANC HAART start	2 175	2 094	5 413	6 711	16 393	8 800	186%
Current on ART	315 076	353 335	373 035	390 333	390 333	428 015	91%
Current on ART Adult	317 909	332 273	350 944	368 690	368 690	402 515	92%
Current on ART Child	21 294	21 110	21 916	21 772	21 772	25 500	85%
ANC known HIV status	55 418	61 323	51 756	45 895	214 392	194 000	111%
HCT (excl ANC & baby)	342 559	356 863	432 828	354 941	1 487 191	2 071 000	72%
PCR	10 172	10 435	10 283	10 828	41 718	34 495	121%
PCR+	320	319	318	332	1 289	3%	3%
HIV+ screened TB	35 504	39 407	31 811	42 063	148 785	165 680	90%
PEP	1 282	1 253	1 482	1 597	5 614	3 420	164%
TB/HIV co-infected patients registered	3 010	4 618	4 744	6 148			
HCT (incl ANC & baby)	408 149	428 621	494 867	411 664	1 743 301	2 071 000	84%

## FACILITY BASED TECHNICAL ASSISTANCE

The Facility Based Technical Assistance Department focuses on strengthening South African Government capacity for management and delivery of health services at the sub-district and facility levels. FPD's roving mentor teams are the facility based extension of FPD's TA strategy and are the conduit through which FPD is able to support the successful implementation of NDOH's policies, the District Management Teams' priority areas and District Health Plans. Through a process of baseline and needs assessment, consultation and negotiation and a combination of teaching, coaching and mentoring, FPD's roving mentor teams help build the sustainable capacity of facility-level clinical and management staff to effectively and efficiently provide quality health services based on client needs.

During 2013, FPD deployed 34 roving mentor teams in four districts (Tshwane/Metsweding, Capricorn, Vhembe and Nkangala) to provide Facility Based TA at a total of 401 health facilities and ten farms and provided structured mentoring based on the "Green Book" to a total of 1,192 NIMART-trained nurses. The Focus of FPD's clinical mentoring was on HIV, TB and STIs, consultation and physical examination, communication, counseling and negotiation skills, ART clinic registers and clinical pharmacology.

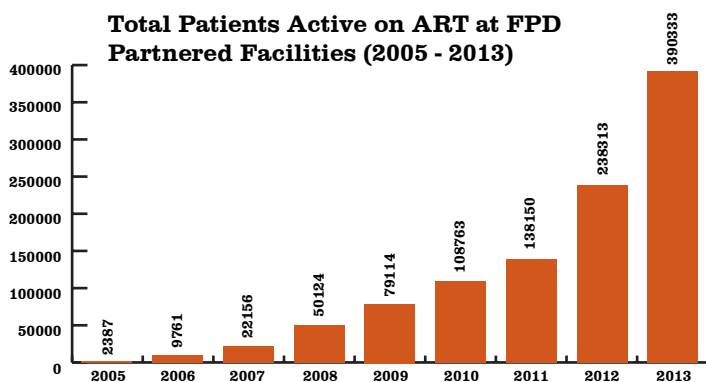
On average, each sub-district is allocated one roving mentor team comprising of a Clinical Mentor (a doctor), a Prevention Mentor (a professional nurse), a Health Information Systems Mentor (HISM), and a Data Capturer Mentor. These teams are supported by a PMTCT Champion, a TB Champion, a Community Champion and a Supply Chain Management champion (see Priority Health Programmes). Facilities are assessed and mentored based off of a facility standards matrix and are intended to "graduate" once prerequisite criteria are attained.

Through the Roving Mentor Team, FPD has noted a rapid increase in Nurse Initiated and Managed ART (NIMART) in its partnered districts with 97% of the facilities in the partnered districts initiating adults and

85% of the facilities initiating children. Mentoring also improves stock management of dispensaries, improve data quality of patient registers and the District Health Information Systems (DHIS), improves patient record keeping and file management and increases compliance with policies.

As the facility staff's HIV/TB-related clinical skills are built, FPD is finding that its roving mentor teams transition to integral roles in strengthening facility and community level systems including service integration, quality improvement initiatives in support of programmes and National Core Standards, establishing support groups, improving referral networks between the facilities and community-based organizations as well as within the health system, support to clinic committees, support with mobilization and awareness campaigns, health talks and outreach activities with the aim to increase patient access of PHC services.

Figure 16: Cumulative patients still active on AIDS treatment



Three additional project run along-side FPD's roving mentor teams as part of this department.

## First Things First Campaign

FPD provided continued project management and technical assistance to Higher Education AIDS (HEAIDs) a body of the National Department of Higher Education in support of the national First Things First (FTF) campaign. The primary objective of First Things First is to mobilize a mass HIV Counseling and Testing (HCT) campaign at tertiary institutions across South Africa. This initiative aims to develop a culture amongst students whereby regular testing and knowing one's status becomes a normal part of student life; creating an environment whereby stigma attached to HIV testing is substantially reduced or eliminated; and promote sustainability of HCT programmes and referral networks at Universities and Further Education Training Colleges by providing HCT training to campus staff to increase their capacity to administer HCT and manage student referrals.

## Highlights of 2013

- » Formal handover of FTF project management to HEAIDS
- » National launch event in Durban Mangosuthu University of Technology on 7 March 2013.
- » Minister of Health Dr Aaron Motsoaledi did an HIV rapid finger prick test at the FTF launch.
- » FPD mobile units tested 14,255 clients for HIV (roughly 33% of total tests done during the campaign on tertiary education campus campaigns).

Picture of Minister of Health, Dr Aaron Motsoaledi being tested and signing Pledge wall during FTF national campaign launch 07 March 2013



Example of Pledge Wall



## IACT

The Integrated Access to Care and Treatment (IACT), originally known as the Basic Care Package (BCP) grew directly out of needs identified by People Living with HIV and AIDS (PLHIV) for more meaningful support immediately after diagnosis. Too many PLHIV are lost to the healthcare system between the time of diagnosis and the commencement of ART. While healthy at the time of their diagnosis, their CD4 count is too often very low when they return to the facility. The key objective of IACT (BCP) is to promote early recruitment and retention of newly diagnosed people living with HIV and AIDS in care and support programmes.

FPD became an IACT Implementing Partner in 2010 and is one of several partners at a provincial level.

During 2013, FPD conducted 16 IACT training workshops and trained 357 support group facilitators on IACT. Based on reported data in FPD-partnered districts, trained IACT facilitators facilitated 109 closed groups with a total of 1058 participants. Preliminary evaluations of IACT support groups indicate that 49% of participants have completed the six-session IACT curriculum, an increase from 37% in 2012.

## National TB/HIV Hotline For Health Care Professionals

FPD supports a toll-free telephonic advice service based at the Medicines Information Centre (MIC) at University of Cape Town. The MIC is the largest, and only clinically-based, medicine information centre in South Africa and is staffed by specially-trained drug information pharmacists.



The call centre forms an additional layer to FPD's mentorship strategy in that it offers free expert technical advice to healthcare professionals across all nine provinces on HIV/TB related issues.

The call centre currently fields about 500 calls per month with an all time record of 617 calls in October 2013. Doctors made up 62% of the callers while 31% came from nurses, 5% from pharmacists and 2% from

miscellaneous callers. During 2013, the top queries related to: Adverse drug reactions (12%); Initiating ART (11%); Switching ARTs (10%) and patients with TB (8%).

Figure 17: National HIV/TB Hotline utilization

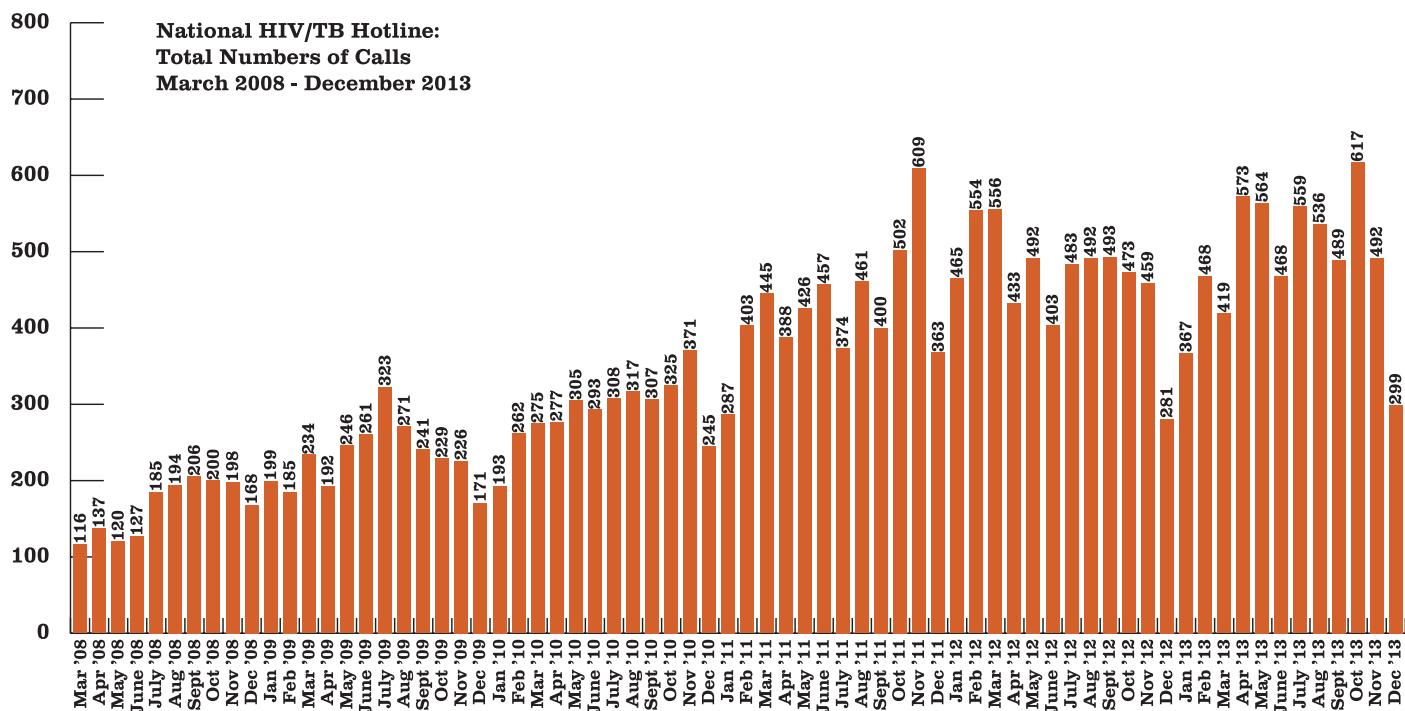


Figure 18: An article analysing the calls received from primary care nurses was published in the December issue of the Journal of HIV Medicine.

**SAJHIVMED** The Southern African Journal of HIV Medicine

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**Original articles**

**Analysis of queries from nurses to the South African National HIV & TB Health Care Worker Hotline**  
Annoesjka Maria Swart, Briony Sue Chisholm, Karen Cohen, Lesley Jean Workman, David Cameron, Marc Blockman

**Abstract**

**Background.** Since 2008, the Medicines Information Centre (MIC) has run the South African National HIV & TB Health Care Worker Hotline which provides free information on patient treatment to all healthcare workers in South Africa. With the introduction of nurse-initiated management of antiretroviral therapy (NIMART) in the public sector, the need for easy access to HIV and tuberculosis (TB) information has increased, especially among nurses. The hotline aims to provide this, most importantly to nurses in rural areas, where clinical staff often have little access to peer review.

**Objective.** To describe the queries received from nurses by the hotline between 1 March and 31 May 2012 and identify problem areas and knowledge gaps where nurses may require further training.

**Methods.** All queries received from nurses during the study period were analysed. An experienced information pharmacist reviewed all queries to identify knowledge gaps.

**Results.** During the study period, the hotline received a total of 1 479 HIV- and TB-related queries from healthcare workers. Of these, 386 were received from nurses, of which 254 (66%) were NIMART-trained. The most common query subtopic was initiating antiretroviral therapy (ART) (20%), followed by [adverse drug reactions](#) (18%). The most common knowledge gap identified was the ability to interpret laboratory results before initiating ART (10%).

**Discussion.** We conclude that the hotline is providing clinical help to an increasing number of nurses on the topic of treating HIV and TB throughout [South Africa](#). In addition, queries directed to the hotline may assist in identifying knowledge gaps for the further training of nurses.

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### National TB/HIV Hotline for Healthcare Professionals

Contact Number 080 021 2506

SMS or "Please call me" 071 840 1572



## Community Orientated Primary Care (COPC)

Since 2010 FPD has been providing technical assistance to the Gauteng Department of Health (GPDH), Tshwane District, in re-engineering the primary healthcare sector. In 2010, Tshwane District adopted the concept of Community Oriented Patient Care (COPC) for Ward Based Outreach Teams (WBOTs). In the first phase, supported by FPD and the University of Pretoria's Department of Family Medicine, nine WBOTs were established by the GPDH in Tshwane. During 2013, the City of Tshwane started the implementation of 25 WBOT in communities with a low socio-economic standard (the "high priority" communities). The 25 City of Tshwane WBOTs are expected to start community work during the first quarter of 2014. This process is also supported and technically assisted by FPD and the University of Pretoria's Department of Family Medicine.

## Sediba Hope Medical Centre (SHMC)

The Sediba Hope Medical Centre was initiated as a joint project of PEN, FPD, USAID and PEPFAR in 2012 to develop a self sustaining healthcare model that provides affordable healthcare to people living and working in the inner city of Tshwane. It uses a cross subsidizing model where profits from those who can pay are used to subsidise those who are unable to do so. During 2013 SHMC continued to provide medical care to 700 patients on antiretroviral tablets. The funding for ARVs for these patients is being gradually being incorporated into this new arrangement and this process will be complete by September 2014.

The Nurofen 1000 Day Project; an innovative new project, was started in January 2013 to reduce mother-to-child transmission of HIV during pregnancy and to encourage exclusive breast feeding after delivery. This was made possible through funding from a pharmaceutical company, Rickett-Benckiser, as well as assistance from the Department of Family Medicine at Pretoria University and POP-UP, a FBO. The project is focused on pregnant women living in "Baghdad City", an informal settlement near the Bosman Street Station. Deliveries take place at the Tshwane District Hospital with follow-up home visits by community health workers within 48 hours of delivery. During 2013, 101 women attended care at SHMC, 17 were found to be HIV+ (19% compared to the national average of 29%). ARVs were arranged for all of them. Sixty two women have delivered and all of the babies whose mothers were HIV positive, tested negative at the six week check-up at SHMC. This repre-

sents an estimated annual saving for the Department of Health of R24 000 just for ARVs and joy inexpressible for 17 babies and their families.

### SEDIBA HOPE MEDICAL CENTRE

Contact Person Ms Vanessa Hechter  
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Email Vanessa@pen.org.za

## PRIORITY HEALTH PROGRAMMES TA

PHP in the newest Department in the Cluster and was formed towards the end of the year in 2012. It focuses on programmes that run vertically and cross cutting between district management and facility level such as TB/HIV, Maternal and Child Health, Mental Health and Community Health, as well as technical assistance in the areas of laboratory and pharmaceutical supply chain support.

The PHP Department provided valuable expertise and support through district-based facilitation of workshops linked to the first integrated WHO PMTCT/TB/HIV programmatic review that took place nationally in October 2013 nationally. Priority issues in all programmatic areas were identified and action plans developed that are incorporated in District level work plans and activities. These action plans have become the backbone for FPD's quality improvement initiatives in 2014.

## Maternal and Child Health Programme (MCH)

In the **Maternal and Child Health Programme (MCH)** priority focus was given to improving PMTCT targets, increasing access of infants and children to testing and treatment and decreasing maternal mortality rates. Focussed mentoring was provided by Maternal and Child Health Champions qualified to identify areas requiring support and giving direction to the FPD Roving Mentor Teams. Linkages with the District Specialist Teams ensured morbidity and mortality reviews were in place and sound labour practices adhered to. Paediatric enrolment was enhanced by outreach activities to known hotspots and informal settlement areas with limited access to services. A need for paediatric consent was identified and workshopped with required legal expertise to provide the required legal framework for successful implementation.

Picture of the Technical Assistance Cluster



## TB and HIV

In the **TB and HIV** field, support was provided focussing on policy-driven recording and reporting practices throughout the supported districts to improve adherence to guidelines and National Directives. Furthermore the champion expertise support was directed at the integration of TB and HIV services at clinic level, to ensure improved access to care and treatment, successful implementation of FDC for clients eligible for enrolment on ART's and a focus on retention in care and adherence to treatment. This has contributed to the successful implementation of the FDC roll-out programme nationally.

In the **Community-Linked FPD Support** activities were directed towards the establishment of functional Ward-Based Outreach Teams (WBOTs) through Community Champion support and outreach activities to increase awareness of the Department of Health's Primary Healthcare Re-Engineering Initiatives. This has led to functional WBOTs in the two NHI supported districts, Vhembe and Tshwane. Focussed outreach activities to involve males, special groups, and adolescents further improved counselling and testing activities linked to other FPD departments, e.g. First Things First campaign and mobile testing units.

## Laboratory

In-clinic **Laboratory services** constitute the second largest facility-level financial expenditure after human resource payroll. Repeat testing due to poor specimen quality, incorrect specimen collection or lost test results contribute to excess expenditures. **Laboratory** technical support is being provided to identify priority areas that will ultimately improve service delivery and decrease costs.

In 2013, FPD developed and carried out an in-depth assessment tool to identify gaps in in-clinic laboratory services. This is the first time that such an assessment was undertaken by either government or any partner in any of FPD's comprehensive districts. The results of this assessment will inform the development of future interventions and strategies to improve in-clinic laboratory services, thus leading to improved service delivery and decreased service cost expenditures. In addition to the in-clinic laboratory gap assessment, FPD Lab Technical Assistance has also solidified relations with the National Institute for Communicable Diseases (NICD). In particular, FPD and NICD have jointly developed a protocol and proposal to conduct lab-based surveillance of STIs in adolescents in Vhembe District.

## Pharmacy

**Pharmacy** TA services were provided to district offices and public healthcare facilities to ensure compliance with the Good Pharmacy Practice Guidelines of the South African Pharmacy Council (SAPC) and to meet the National Core Standards as applicable. FPD's Pharmaceutical Advisors and Coordinators work in close collaboration with the Pharmaceutical Service Managers at provincial and district level and have been performing facility assessments of pharmaceutical services based on the South African Pharmacy Council inspection questionnaires. The focus of the FPD support was to:

- » Ensure compliance related to licensing, registration and accreditation of facilities in line with the National Core Standards;
- » Train pharmacist assistants to be deployed at primary healthcare level to provide quality dispensing, procurement and stock control services;
- » Ensure compliance with Good Pharmacy Practice Guidelines;
- » Improve procurement and stock control of drugs.

FPD's partnership in the Limpopo Province has been essential to im-

prove and stabilize service delivery at the Limpopo Pharmaceutical Depot and support the transition to the DDV Systems. The short term employment of experienced IT and Operations Consultants, as well as twenty Warehouse Assistants, resulted in effective stock flow, implementation of standard operating processes and the development and capacity building of management and staff at all levels. In 2013, the FPD Pharmaceutical Services Team identified accredited facilities and tutors (pharmacists) and recruited 232 pharmacist assistant learners.

## Tuberculosis, HIV, AIDS Treatment Support and Integrated Therapy (that'sit)

The that'sit project established in 2005, at the time in partnership with the MRC and now in partnership with AURUM Health, is a comprehensive TB and HIV Project, which has developed a model of care that provides holistic integrated medical care to patients. Its activities encompass counselling and testing, regular TB screening to HIV positive patients, mentoring in clinical care, early introduction of ARTs, adherence support and patient tracing, recording and reporting activities, technical support to the TB programme, monitoring and evaluation and research activities to ensure that best-practices are adhered to.

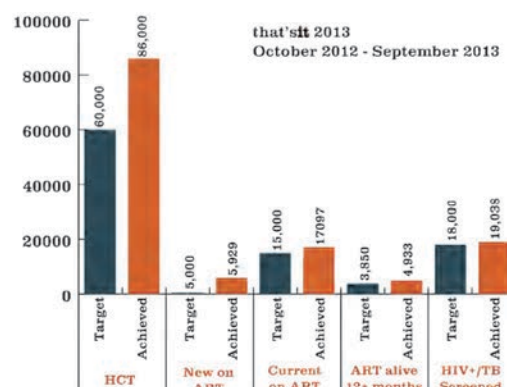
It targets communities, including school children, to increase awareness and decrease stigmatisation, and it provides Healthcare Worker training in all aspects of TB and HIV care, including PMTCT, breastfeeding, and nutritional assessments. It provides overall systems support by the analysis of patient flow systems adherence to infection control principles and the introduction of a systematic approach to recording and reporting. It has also embarked on a programme of creative therapies directed towards work-related stress debriefing for healthcare workers in order to minimise burn-out and provide the required emotional support to the workforce.

## Highlights of 2013

Following a drastic decrease in funding the current support base of the programme covers 87 primary care clinics in Eden District in the Western Cape and Potchefstroom and Molopo in North West Province. More than 38 000 patients have been enrolled in ART care since 2006 and approximately 60 000 patients received counselling and testing through this programme. More than 35 000 TB patients have been enrolled in comprehensive integrated TB and HIV care.

The that'sit project has a proven track record with a tangible impact on the National TB Control Programme (NTCP). In the Molopo Sub-District in the North West province treatment outcomes have increased with more than 30% since 2007 and in other supported sites the treatment outcomes have increased with at least 10%. The results are that the National target of 85% for treatment outcomes is now within reach of all supported districts. Defaulter rates have decreased across all supported districts and all TB/HIV collaborative activities have increased to above 80%.

Figure 19: that'sit performance against targets





# DISTRICT MANAGEMENT FOCUSED TECHNICAL ASSISTANCE

Technical assistance to the district Departments of Health is seen as an empowering model that invests the districts own systems and ensures sustainability of services by focusing on minimising over-dependence on the diminishing PEPFAR support.

The District TA Team consists of Advisors in Public Health, Governance, Leadership and Management, Infrastructure, Strategic and Operations Management, Finance, HR Management and Action Research. FPD's in-house and external TA Consultants work closely with the district Management Teams, as well as through National and Provincial Teams, to ensure that quality, equitable services are provided that are based on evidence-based interventions and implemented with maximal efficiency in line with the partner's district mandate. The technical assistance services are determined by gap analysis and the needs expressed by the partnered districts and involve a combination of training, mentoring and provision of consultancy-like services to the district health management teams.

Providing technical assistance and systems strengthening to partner districts cuts across various FPD Departments, and therefore the team uses a matrix organisational design to implement technical assistance. This comprehensive approach utilises assistance from other FPD resources and Departments, e.g. FPD's Academic Cluster and Compass Project and ensures progress towards total Health Systems Strengthening.

## Highlights of 2013

### » Leadership and Governance

Supporting the compilation of nine District Health Plans (DHP), and eight District Strategic Plans; facilitating and supporting aspects of strategic plans (e.g. Communication Strategy) related to the National Health Insurance (NHI) and streams of PHC Re-Engineering Strategy; facilitating change management workshops to strengthen team coordination and functioning; providing individualized and group sessions for District Managers doing Action Research as a component of management courses; facilitating collaboration between different Health Authorities within districts and provinces to ensure more integrated, resource planning.

*Pictures from five year strategic planning exercise with members of the District Management Team at Greater Sekhukune.*



### » Service Delivery

Designing and conceptualizing a collaborative Ward Based Outreach Team implementation strategy, which involves all stakeholders (Department of Social Development, Department of Health and Civil Society Organizations) and aligns community health workers around one job description.

### » Strategy Development

Developing a comprehensive mental health strategy that encompasses training to mental health practitioners on HIV and HIV practitioners on mental health; support group facilitation; creating awareness of mental health for vulnerable groups such as those that are HIV-infected and improving mental health literacy amongst communities through the hosting of a satellite session at the SA AIDS conference in Durban and the launch the mental health awareness DVD, "Hope".

### » Health Workforce

The placement of HR Fellows through the Fellowship Programme in each of the districts has contributed to a variety of HR deliverables at district level, including developing HR plans (e.g. HR planning, costing and transition of ranks); updating job descriptions and district management organograms; describing levels of delegation in the district; establishing vacancy gaps; designing performance management plans, Human Resource development plans, orientation and induction programmes, communication tool to assist staff in understanding different types of leaves and the implications of each as per the DPSA requirement; conducting employee satisfaction surveys and supporting implementation aspects of doctors induction programme; support defining strategies which contribute to retention of staff within the healthcare system. During 2013, FPD also embarked on a workforce planning exercise to support districts to prioritise recruitment for critical posts.

### » Information

Encouraging the use of data to support strategic planning as well as promoting the use of dashboards. Support the use of programme specific tools that assist in collection of information and support programme management and planning (e.g. PHC supervision manual and DISCA tool). Coaching and mentoring groups or individual district managers in interpretation and analysis of programme data.

### » Infrastructure

Support development of district infrastructure plan; support development and profiling of health care facilities; describing the facility maintenance requirements in line with the catchment area. Support development of safety checklist to ensure safety of the patients and healthcare service providers.



» **Financing**

Supporting the process of district health expenditure reviews; identifying managers at district and facility levels to receive further financial management training. Support district managers in analysis, costing and target-setting in relation to their programme plans.

## STRATEGIC INFORMATION

Technical Assistance with respect to Health Information Management and Monitoring and Evaluation (M&E) activities focus on strengthening the South African government's data management systems (3 Tier, DHIS, etr.net, etc.), implementation of DHIMS policy and the use of quality epidemiological and programme information to inform planning, policy, and decision-making; improving SI management and use, appropriateness of M&E frameworks, quality of data and its collection, analysis and dissemination for decision-making. It is a cross-cutting department that engages with the District Management Team (through District TA) and facilities (through the roving mentor teams). M&E and Health Information advisors are responsible for supporting the District Health Information and M&E offices to strengthen availability and access to quality health information from the District Management Team to the facility level for both South African government and FPD. They provide focused technical assistance to DoH and FPD alike to ensure appropriate M&E is linked to all major activities.

## Highlights from 2013

» **DHIMS policy and SOP and NIDS 2013**

In response to the NDOH's release of the District Health Management Information Systems (DHMIS) policy, SOPs and National Indicator Data Set (NIDS) 2013, FPD supported the orientation and integration of the DHMIS policy into FPD partnered district facilities and performance portfolios. The main objectives was to familiarise district staff with the DHMIS SOPs for facility level, to gain more insight into the role of SOPs in improving data quality, use of information and to discuss the responsibilities and procedures for specific staff at facility level regarding routine health information. To date, FPD has supported the roll-out of the NIDS and DHMIS to all nine districts supported by FPD. Additionally FPD has trained 999 healthcare professionals consisting of Operational Managers, Nurses, Information Officers and Data Capturers. The M&E advisors and the District Information Officers are working together to make sure that everyone is trained on DHIMS and NIDS and the roving teams and are overseeing the implementation thereof.

» **DDC and Pre-submission**

Each year the Auditor General (AG) evaluates the Department of Health (DoH) performance by comparing data found in source documents with data in DHIS at NDOH. AG findings has resulted in Qualified Audits at the districts FPD supports. Working in collaboration with HISP, FPD supported the roll-out of the DHIS Daily Data Capturing (DDC) and the pre-submission exercises with an aim to reduce the multiplicity and non-standardisation of data collection tools, mitigate the inability to collate data correctly from data sources to monthly input forms and to reduce capturing errors. All FPD M&E advisors and HISMs were trained on DDC and rolled out the DDC in their piloted sites with the support of the district information officers during 2013. Pre-submission exercises were also introduced to the FPD staff and were shown how to run quality checks pre-submitting their data. All 36 piloted-sites have proven that capturing on a daily basis and running pre-submission reports before submitting the data to the next level strengthens the quality of data, mitigates capturing errors and also minimises late reports. FPD will be working towards rolling out the DDC to all the facilities with the correct infrastructure in 2014.

» **NDOH's 3 Tier strategy**

In 2010/2011, the National Health Council (NHC) and National Health Information Systems of SA (NHISA) developed a three-tiered strategy to strengthen routine and clinical monitoring of ART data. The 3-Tier ART Strategy comprises of a paper-based (Tier 1), non-networked (Tier 2) and networked-system (Tier 3) for patient monitoring in line with the WHO's 3-Tiered ART M&E strategy. This strategy was selected for implementation to standardise ART monitoring nationally with a system that best suits the varied needs of facilities, sub-districts, districts and provinces, as well as the resources available to manage the systems. During 2013, FPD was one of the primary trainers on the Tier systems and trained 355 individuals on how to implement and use the paper register (Tier One). Additionally 649 individuals were trained on Tier.net (Tier Two). To date, FPD has supported the four comprehensive districts to implement Tier.net at 267 sites with a total of 124 facilities signed off at Phase 6. FPD is also part of the technical working group to prepare SmARTer (Tier Three) for implementation and seconded five consultants (a User Guide Writer, a Business Analyst, a Solutions Architect, and two Software Developers) to UCT to support the finalisation and "shrink-wrapping" of SmARTer for implementation in a pilot district in 2014.

» **Technical support and advice to data capturers**

*Picture – Screenshot of some of the dialogues*



To provide additional training and mentorship to data personnel in FPD-partnered districts, FPD identified the need for a forum for data capturers to discuss queries and provide area specific support, advice and camaraderie. FPD established a closed-group Health Information group on facebook. Health Information group

URL <https://www.facebook.com/groups/420887491301112/>.

Currently the group has 276 users and daily activity. Mostly, the forum provides an opportunity for data capturers to ask questions about inclusion/exclusion criteria, data sources and validation rules and to discuss programmatic policy guidelines as they are implemented in their facilities. It also provides a forum for FPD and Districts to provide feedback on a larger scale regarding data quality concerns, data gaps and/or verification exercises.

» **Mobile computer labs**

FPD deploys three mobile computer labs to strengthen health information management and to improve the quality and availability of information within the district for decision making. The mobile computer labs operated in four provinces (Mpumalanga, Gauteng, Limpopo and Eastern Cape) during 2013. Currently, the mobile computer labs provide a forum for training on systems like DHIS, tier.net, etr.net and basic computer literacy and a platform for tier.net back capture, data cleaning and validation exercises. During 2013, FPD's primary focus was on training staff on the DHMIS policy and data verification, DHIS pivot basics, DHIS and tier.net. To date the mobile computer lab has

trained more than 1245 people and has operated every week day since its launch.

*Pictures of mobile IT training labs*



## EVALUATION AND RESEARCH

The unit is working on operational research areas to evaluate the support provided and the strategies that are implemented. Detailed evaluation and research activities are reported under the research section of this report.

The unit produced 27 evaluation reports (16 internal and 11 external) on the following topics:

- » FPD Management Training;
- » Market Survey for a pharmaceutical company;
- » Quality Improvement;
- » Focus Group discussion for Global Health Students;
- » Client Satisfaction Surveys (Department of Health);
- » Staff Satisfaction Surveys;
- » Gender Based Violence Training;
- » The benefit of Conference Scholarships;
- » Conference Satisfaction Survey of TA Cluster;
- » Advanced Driving Course for FPD staff;

- » Cost effectiveness of mobile data capturing devices;
- » FPD Clinical Facilitators;
- » Internal Awards;
- » Wellness office training;
- » Reviews of District Quarterly Reports;
- » TB case finding in COPC;
- » TB case management in COPC;
- » Health assessment by ward based outreach teams;
- » Nurofen 1000 day baby project x4;
- » Cryptococcal infection and
- » District Management Process.

## AFRICA HEALTH PLACEMENTS

Where there are no health workers, there is no healthcare delivery.

The shortage of qualified medical staff is a massive challenge in the provision of healthcare worldwide. Rural areas bear the brunt of these shortages – approximately half of South Africa’s population lives in rural areas, but only 12% of the country’s doctors work in rural health-care facilities. This severely hinders the quality of care provided to rural communities.

Africa Health Placements (AHP) is a human resources solutions and services organisation that has been changing the face of public health in South Africa, creating new outcomes for facilities that might otherwise be defunct by now. We define ourselves as social profit because our work, while mostly donor-funded, delivers profit in terms of improved healthcare and social indicators. AHP works with the Department of Health and other stakeholders to implement pragmatic solutions to help plan for, find and keep the workforce needed to ensure all South Africans have access to quality healthcare.

### Expertise and Services

#### » Health Workforce Planning

Developing health workforce plans, tools and systems to ensure accurate Human Resources for Health (HRH) information is available so that healthcare workers are placed where they are needed the most.

In an environment where clinical skills are scarce, it becomes critical to understand where health workers of particular skills can make the greatest impact in delivering health services – both in terms of distribution of existing skills and targeting recruitment and training of new skills. As a leader in HRH, AHP has developed a Rational Workforce Planning Model that includes quantitative and qualitative assessment tools for providing support for such decisions. AHP collects necessary facility health service information using a baseline assessment tool through facility visits and interviews with management.

#### » Recruitment

Recruiting management, clinical professionals and support staff for rural and underserved government and NGO facilities, facilitating the

registration of foreign-qualified doctors and nurses, and orientating foreign-qualified doctors.

Since 2005, AHP has assisted with the placement of more than 2 900 local and foreign-qualified healthcare professionals and support staff in Southern Africa. AHP's staffing model starts by making sure management can effectively handle the recruitment process, and then moves on to seeding health teams with foreign-qualified skills. Once in place, local health workers and junior doctors are recruited. Finally, facility management is supported towards self-sustainability.

#### » Retention

HR capacity building and health worker support, with a focus on rural areas.

AHP's Retention Programme is aligned with government policies and activities include capacity building and transferring skills to district management teams with a focus on human resource management elements. This includes developing and implementing retention interventions through building HR management capacity that targets improved employee engagement. Support is offered to doctors, dentists, pharmacists, clinical associates and community service officers. Factors that affect retention are addressed, including HR processes, professional relationships and isolation.

#### » HRH Systems Consulting

Extensive monitoring and evaluation, as well as research.

This allows AHP to advise on policies to address HRH needs and draft and implement plans to execute policies around HRH. AHP also assesses and improves recruitment and registration systems.

## Highlights of 2013

In 2013, AHP completed workforce planning data collection for all hospitals, community health centres and primary healthcare clinics in two districts: Nelson Mandela Bay in the Eastern Cape and Frances Baard in the Northern Cape. The uninsured populations of the two districts represent 3.1% of the uninsured population of South Africa. The human resource recommendations developed from this data will hence constitute a workforce plan for 3.1% of the uninsured population. In addition, AHP completed workforce planning assessments and made human resource recommendations for selected facilities across the districts in which it works. AHP's total workforce planning activities in 2013 covered 18.2% of the uninsured population of South Africa.

In 2013, AHP also assisted with the placement of more than 400 healthcare professionals and support staff, including 234 doctors, in rural and underserved public healthcare facilities in South Africa.

AHP's Retention Programme was expanded in 2013 with on-the-ground Retention Officers working in nine districts and one sub-district in seven provinces. The programme now has a more strategic focus with an emphasis on systems strengthening and technical support. As part of the Retention Programme, AHP adapted a retention survey to the South African public health environment. The survey is conducted with health workers in rural districts and is used to identify which area of HR management is the weakest and has the biggest impact on poor retention. This survey, which was launched in August 2013, ensures that AHP's retention efforts are informed by the real needs as experienced by health workers currently working in rural districts.

In 2013, AHP codified its culture because it wanted to be deliberate in creating a positive experience for the people of AHP and build, deliver and sustain one consistent AHP experience in every interaction internally and externally. AHP codified how it will serve its customers in a

culture framework which comprises of its purpose, values, mindset and behaviours. Articulating AHP's culture enables the organisation to live out its mission of helping to plan for, find and keep the workforce needed to deliver health for all.

## COMPASS PROJECT

The Compass project is predominantly a mapping and data dissemination project that aims to:

- » Equip Southern Africans with the necessary tools to access healthcare services easily;
- » Help organisations and decision makers better understand the needs of the communities that they serve; and
- » Provide innovative, unique, needs-driven strategic mapping solutions where necessary.

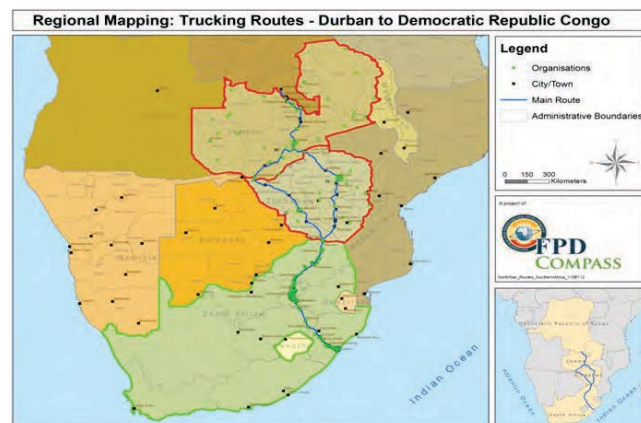
The current service offering of FPD Compass consists of the following:

### SADC Mapping

In 2012, FPD Compass began to create medical services referral networks in the SADC region for the North-Star Alliance who run mobile wellness centres along the major trucking corridors of Africa. This project continued into 2013. There was a fundamental change in the *modus operandi* of data collection in the SADC region in 2013, as it was found that FPD Compass was unable to do desktop research owing to a lack of a proper database in many of the SADC countries as well as a lack of telephone infrastructure. As a result, FPD Compass began doing physical mapping in the region. Thus far, FPD Compass has physically mapped most of the medical services along Zambia's major routes as well as all of Zimbabwe and Botswana. As of January 2014, FPD Compass is in the process of sending out teams into Namibia, Tanzania, Mozambique, Lesotho and Swaziland.

Accompanying the physical mapping FPD Compass is currently undertaking desktop data collection to create a more robust database. Currently it is decoding and collating data from Zambia, Zimbabwe, Namibia and Tanzania. Included in this is the info-4-africa database of South Africa. In terms of medical service directories. This is arguably the most robust database in the SADC region, if not across the region. FPD Compass is also in the process of developing a comprehensive telephone directory of medical services in Namibia for the Ministry of Health in Namibia (no such database exists in Namibia at present).

Figure 20: GIS mapping of healthcare service along trucking routes

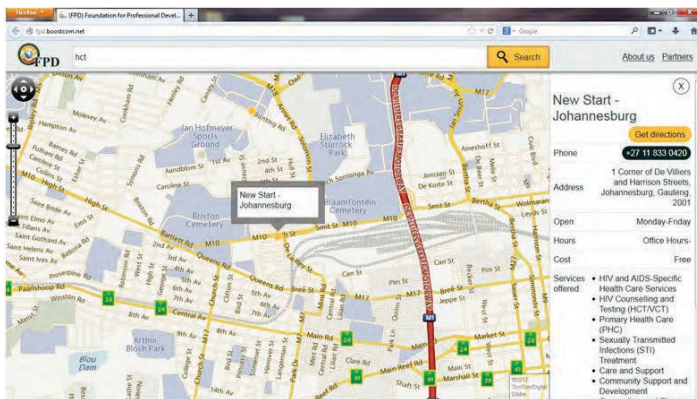




## Mesedi.com

Mesedi.com (medical services directory) is a free SADC based web-app, developed by FPD Compass as part of the funding agreement with the North-Star Alliance, designed to be used by any user in the SADC region to find medical services within close proximity to them. The app works by accessing the geo-location of the user's device (it can be accessed on a computer as well as any smart or feature phone) and when the user enters a search (from a list of pre-determined search options), the app finds the nearest of those services to the user and displays it on an interactive map. The user is easily able to find directions to the facility, the services offered at the facility, the operating hours as well as a "click-to-call" button allowing a user on a mobile device to call the facility directly. This app, due to its complex design and extremely large database is arguably the first of its kind in South Africa and definitely the first of its kind in the region.

Figure 21: Screenshot of mesedi.com web app



## info-4-africa directories

The info-4-africa directory series (previously HIV911) is a comprehensive medical service database collation and directory production project. Through PEPFAR funding via FPD Compass, 20000 copies are disseminated annually across South Africa.

Figure 22: Hardcopy AIDS service directory



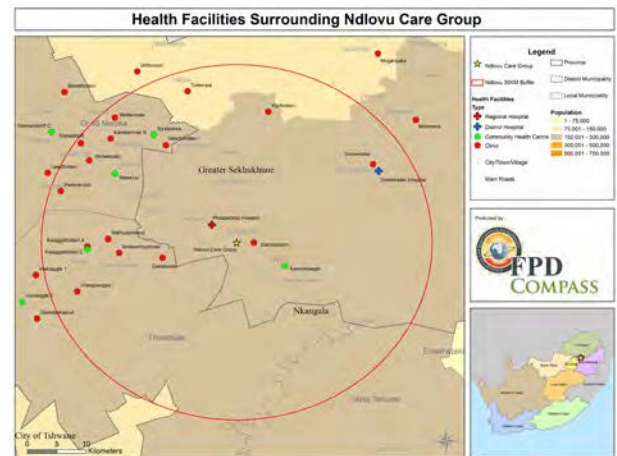
## Demographic Reports

Using CENSUS, DHIS and other data, FPD Compass continues to produce comprehensive demographic reports that often delve right down to ward level. This is a commercial product and has the greatest uptake amongst consulting companies seeking to gain a better understanding of areas that they work in. This business will continue into 2014, but FPD Compass is attempting to begin producing reports in other SADC countries and not have this product limited to South Africa.

## Map and directory production

Another well-established business of FPD Compass is the production of maps and directories. This will continue as normal, again; as with the demographic reports, there is a concerted effort to move this business further into the SADC region.

Figure 23: Examples of a health service map



## FPD SHIPS

The FPD SHIPS Department was established in 2012 to draw from the expertise developed by FDP through the PEPFAR Fellowship Programme in successfully transitioning students from academia to the workplace. The department has designed a number of programmes designed to hone the skills of postgraduate students, graduate students as well as school leavers to enhance their employability through workplace experience opportunities by placing them with FPD, PEPFAR partners and the public and private sector institutions.

## Current Projects

- » **Learnership**
  - Pharmacy Assistant
  - Social Auxiliary Workers
  - Work Experience Programme for people with disabilities
- » **Internships**
  - Edu Experience
  - Information Technology
- » **Fellowship**
  - PEPFAR Fellowship
  - Global Health for Social Change – Overseas exchange programme

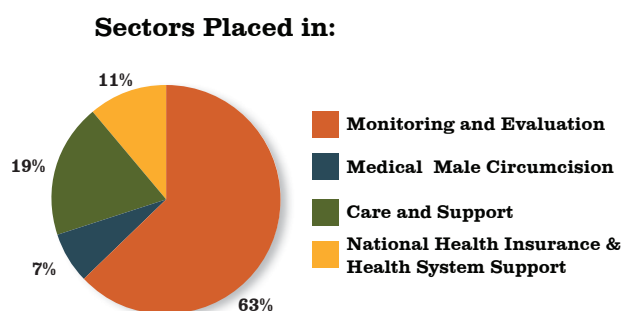
## Highlights of 2013

The **PEPFAR Fellowship Programme** that was started in 2006 places newly qualified masters degree graduates in an AIDS service environment. To date (February 2014), this programme has placed 274 Fellows.

Table 2: Summary of number of Fellows and host organizations

	2007	2008	2009	2010	2011	2012	2013	Total
Fellows	25	31	41	41	27	38	42	245
Hosts	18	24	33	29	18	23	15	108

Figure 24: Placement of Fellows by sector



We also launched a Global Health for Social change Internship (GHS-CI) that saw 3 international university students being placed in an NGO for 8 weeks getting appropriate work experience and contributing immensely to the running of their programmes. The focus was on programmes affecting social change and public health in South Africa. Students performed field-based work and also experienced a different cultural dimension by living with local host families.

*Katie Allan from Colby College in the United States, 2013 GHSC Intern, hard at work at Munna Ndi Nnyi.*



The **Internship Programme**, started in 2012, trained and placed 35 interns (both in the education and information technology sector). In partnership with NetHope Academy and USAID, 36 IT Interns were placed in 2013 at various public health facilities to strengthen IT capacity. Five IT Interns were placed in the retail sector, realising a need for our Interns to be trained and properly inducted into the workplace. Eight Edu-Experience Interns were placed and trained in soft-skills courses such as classroom management and incorporating IT into teaching. Through our Internship Programmes FPD ventured for the first time into workplace experience projects. We successfully placed IT individuals with disabilities in our head office and partners. Additionally, FPD places 58 FET graduates in one year workplace experience programmes. The ob-

jective of these is to assist students to gain valuable work experience to improve their chances of employment.

The **Learnership Programme** (established in 2009) initially placed 48 learners. This number increased to 318 learners in 2013, resulting in a total of 634 learners supported to date. Post learnership employment rate is at 100% for the Pharmacy assistant programme, with demand for qualified students at Post-Basic level exceeding the number of trained students.

## FPD PROPOSAL UNIT

Critical to FPD's success and sustainability, is its ability to diversify its revenue schemes. Currently FPD's strength lies in its ability to write funding proposals (as evident by FPD successfully securing two large cooperative agreements with USAID in 2012). However, this progress needed to be formalised, thus, the Proposal Unit was established in 2012. Its purpose was to enhance the efficiency and effectiveness of FPD to compete for donor funding.

The Proposal Unit currently has the following products and services:

- » Identification of funding opportunities
- » Administrative support
- » Tracking of funding opportunities

The Proposal Unit add value by:

- » Providing administrative support
- » Reducing workload of stressed-out proposal writers
- » Managing timelines and busy schedules of the proposal writing team

The Proposal Unit thrived in 2013 with the submission of nearly 240 proposals by the end of December. Furthermore, FPD's proposal output was increased by 66% in 2013 compared to 2012. The Proposal Unit closed the year off with a bang having a success rate of 45% of proposals accepted based on the number of submissions approved.

## Highlights of Successful Proposals in 2013

- » USAID/PEPFAR proposal worth \$35million for the next five years in partnership with FHI360, Society for Family Health (SFH) and Humana People to People South Africa.
- » Right to Care sub-recipient grant of funds from The Global Fund to Fight HIV and AIDS to the value of R19million over the next two years.

Figure 25: Number of proposals submitted per cluster

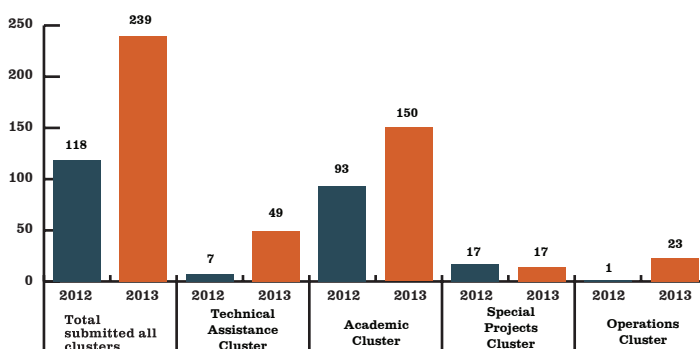
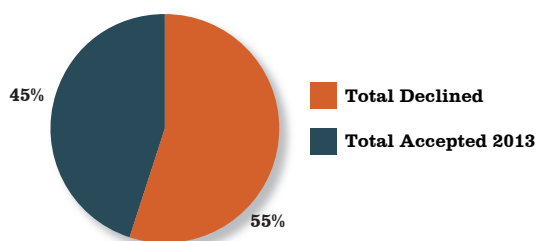


Figure 26: Success rate



## FPD BASIC EDUCATION PROJECT

The FPD Basic Education Project was started in 2010 to address some of the key challenges in the Basic Education (i.e. schools) sector where FPD's unique approach to training and capacity-building in the public health sector would prove valuable. Many of the internal challenges in the basic education sector are similar to that of the health sector – lack of management, leadership, skills and operational systems. External factors such as poverty, violence and HIV affect learners and teachers alike and contribute to low morale and retention amongst staff and poor learner outcomes. FPD Basic Education aims to build skills and management capacity in the Basic Education sector to ensure that districts and schools are functioning well and providing quality services as organisations and that they are provided with the necessary support to deal with many of the external factors affecting schools.

### Organisational Capacity Development

The project supports capacity development in the public basic education sector through: organisational needs assessment, management training, coaching and mentoring for schools and districts and consulting and TA for Districts.

### Development Of Professional Development Programmes and Short Courses

The Basic Education Project supports the FPD School of Education to develop customised professional development programmes for teachers, heads of departments, deputies, principals and district officials. Courses are customised, minimise time away from work through a blended distance education approach and are delivered close to where participants live and work to minimise costs and travel time.

### Practical Placement Experience for Student Teachers

Working with the FPD SHIPS Department, the Basic Education Project has developed the Edu-Experience Internship Programme that provides practical experience through full-time student teacher placements for B.Ed and PGCE distance-education students in well operating schools.

### Building Platforms for Collaboration

Hosting of a large scale, multi-stakeholder conference to facilitate collaboration and highlight best practices in the basic education sector.

## GENDER BASED VIOLENCE PROJECT

The Increasing Services for Survivors of Sexual Assault in South Africa (ISSASA) programme funded by USAID is a collaboration of leading South Africa organisations – Foundation for Professional Development, The Soul City Institute, Sonke Gender Justice Network and the South African Medical Research Council – aiming to enhance the role of Thuthuzela Care Centres in tackling South Africa's epidemic of gender-based violence and sexual assault. Our approach aims to fulfil two main objectives: raising public awareness around Thuthuzela Care Centres, and expanding and improving the services of TCCs. To meet the second objective (expanding and improving services at Thuthuzela Care Centres), the following activities will be undertaken: the first of these revolves around creating greater public awareness of the centres and increasing the uptake of TCC services, within a wider approach to raising awareness and prevention.

### Highlights of 2013

The programme was launch on 28 March 2013 in KZN Phoenix TCC. Minister of Justice and Constitutional Development, Mr Jeffrey "Jeff" Radebe was the keynote speaker and he signed the pledge against Gender Based Violence.

Picture on Minister Radebe signing the Pledge



### Soul City Institute Project Activity

Conducted qualitative formative research on the knowledge, attitudes and behaviours relating to reporting sexual assault and the use of Thuthuzela Care Centres Based on this research a series of posters in the 11 official languages have been produced. They have also developed community dialogue guidelines that will be used for facilitating dialogues at community level. Information packages have also been developed for use at Soul Buddyz Club as an intervention aimed at 7 – 14 year olds. which reaches 4% of children across South Africa. Public Service Advertisements (PSAs) have been developed based on the formative research for broadcasting on SABC TV and community radio stations. The PSAs will endeavour to decrease stigmatizing norms in the public and to stimulate demand for the TCCs.



## Sonke Gender Justice Network Project Activity

Sonke has been developing relationship with radio stations and CSO's, formalised with MOU's. Radio show guides were developed for stations that include a focus on the connections between gender and HIV. Training was conducted for both Community Radio Stations and Civil society organisation in 5 provinces, namely: Gauteng, Mpumalanga, Free State, North West and Limpopo. Training on gender using OMC methodology was conducted for Johannesburg SANAC Men's sector by Sonke. The purpose of the workshop was to engage men on issues of gender and the role that SANAC's Men's Sector can play in this campaign. Short radio dramas on sexual violence experienced by refugees and migrants and services were produced by Sonke that include promotion of services available in the TCCs. In the Limpopo province, 5 taxis with messages on prevention of sexual and domestic violence and information on the TCCs in the province were launched in November. The taxis are an effective way to disseminate messages, as they promote discussion when they are stationed at the taxi ranks and are also seen by thousands of people on the road.

Picture of a "wrapped" taxi



## FPD Project Activity

FPD constructed four new Thuthuzela Care Centres in consultation with the National Prosecuting Authority (NPA) in Madadeni (KZN), King Williams Town (EC), Atlantis (WC), Groblersdal (LP). New TCCs, their staff, NGO partners and catchment areas will be prioritised for public awareness, networking and training activities described in the programme plan.

Example of a new TCC



## MRC Project Activity

The MRC has started research on a national assessment of sexual assault case withdrawals. FPD and all the partners agreed to leverage on other grants that they have to enhance this programme.

## Additional Activity

The partners also support the ISSSA project through leveraging additional resource for activities such as:

- » 20 fee waiver scholarship were granted to the NPA to attend the 6th SA AIDS Conference 18-21 June 2013
- » Hosted a gender-based violence satellite session at the 6th SA AIDS Conference
- » Hosted a scholar based violence satellite session at the 17th ICASA Conference on 09 December 2013 in Cape Town. The session was a success with 220 delegates attending and participating.
- » Mentoring by FPD roving teams of TCC managers in Gauteng (Mamelodi and Laudium TCCs), Mpumalanga (Emalaheni TCC) and Limpopo (Seshego, Musina, Nkhensani, Tshilidzini, Mankweng TCCs).
- » Management scholarships were offered to five managers and NPA senior managers.
- » Eight new GBV episodes were developed for inclusion in the upcoming Soul City drama in 2014.
- » FPD has developed a university GBV programme designed for students at tertiary institutes.



MODERN BUSINESS STATISTICS WITH MICROSOFT EXCEL

### SUPPLEMENTARY EXERCISES

53. A *Wall Street Journal*/NBC News survey of 1,000 business executives in the United States asked them to indicate their level of satisfaction with their career advancement opportunities for career advancement. The results are as follows: 3% indicated they were not satisfied; 3% indicated they were somewhat satisfied; 18% indicated they were very satisfied; and 76% indicated they were extremely satisfied. Let  $x$  = the level of satisfaction, where  $x = 1$  for not satisfied,  $x = 2$  for somewhat satisfied,  $x = 3$  for very satisfied, and  $x = 4$  for extremely satisfied.
- Use the preceding information to compute the expected level of satisfaction with career advancement opportunities. What is the expected level of satisfaction?
  - Compute the variance of the level of satisfaction with career advancement opportunities. What is the variance of the level of satisfaction?



# Research

# 4

- You need to consider all **diagnoses**, including the length, severity and impact of the combination of impairments.
- Your consistent findings on examination of what has been reported in history taking. As the patient may be seeking secondary financial benefits, your example observing the patient in the waiting room, on entering the examination room, on undressing and dressing, adds valuable information. For example observe the range of movement of his joint as well as his ability to walk heel-to-toe, crouch. Side-room and special state examination, peak flow, blood levels, are required only if this will change the outcome and management of the patient.
- The patient's **treatment and adherence** needs to be optimal. Ascertain if adherence is possible. Subnormal intellectual or cognitive functioning, poor support infrastructure, side-effects from

and standard  
2009 adults was conducted  
(29, 1997). Table 5.8 shows  
the stock market's valuation  
distribution in Table 5.8 and  
and variance of the probability distribution  
the stock market is overvalued.  
College resulted in expense forecasts for  
\$13. Because the actual expenses  
assigned: .3, .2, .25, .05, and  
forecast.  
the coming year?  
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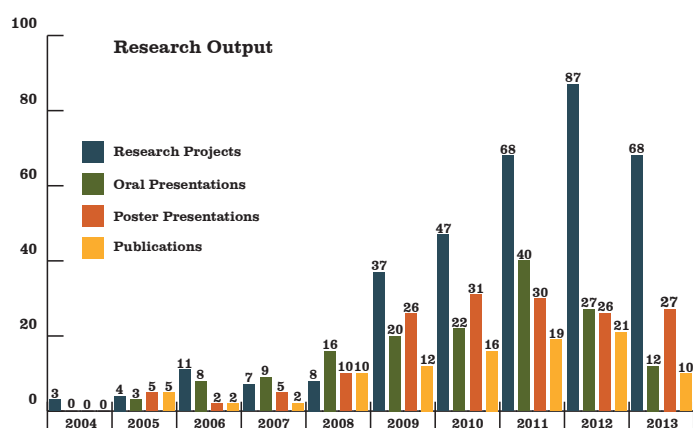


# RESEARCH

## RESEARCH FOCUS AREA 2013

FPD, as a registered institution of highest education is expected to contribute to the generation of new knowledge through research and academic activities.

Figure 25: Research Output



## Published Articles

### TECHNICAL ASSISTANCE CLUSTER

#### Special Programmes Technical Assistance

Bam N, Marcus T, Hugo J, Kinkel H-F. **'Conceptualizing Community Oriented Primary Care (COPC) – the Tshwane, South Africa, health post model.'** African Journal of Primary Health Care

H-F Kinkel. **'COPC in Tshwane District, South Africa: Assessing the first phase of implementation.'** African Journal of Primary Health Care & Family Medicine.

Fernandez L, Rossouw T, Marcus T, Reinbrech-Schutte A, Smit N, Kinkel HF, et al. **Factors Associated with Patients' Understanding of their Management Plan in Tshwane Clinics.** Afr J Prm Health Care Fam Med.

AM Swart, BS Chisholm, K Cohen, L Workman, DA Cameron, M Blockman. **Analysis of queries from nurses to the South African National HIV & TB Health Care Worker Hotline.** SAJHIVMED 2013; 14(4)

DA Cameron. **Immunising – as important as ever.** Editorial, Nursing Practice; 1st Quarter 2013.

DA Cameron. **A tribute to nurses working in intensive care.** Editorial, Nursing Practice; 2nd Quarter 2013.

DA Cameron. **Is nursing in South Africa in crisis?** Editorial, Nursing Practice; 3rd Quarter 2013.

DA Cameron. **A story of courage and determination.** Nursing Practice; 4th Quarter 2013.

#### Priority Health Programmes

S Auld, L Kim, E Webb, L Podewils & M Uys. **'Completeness and concordance of TB and HIV surveillance systems for TB/HIV coinfected patients in South Africa.'** The International Journal of Tuberculosis and Lung Disease.

SC Auld, L Kim, EK Webb, M Uys. **Completeness and concordance of TB and HIV surveillance systems for TB-HIV co-infected patients in South Africa.** Int J of Tuberculosis & Lung Diseases 2013; 17(2)

## Conference Participations - Oral Presentations

### MANAGING DIRECTOR'S OFFICE

GG Wolvaardt. **'Initiating and managing donor relations in the current global health context.'** SANNAM Conference 3-4 April 2013, Pretoria: South Africa.

GG Wolvaardt. **Were we Effective ? – Were we Efficient ? Experience from a national implementer - the Foundation for Professional Development experience.** Consultation in South Africa with stakeholders on national AIDS programmes Effectiveness and Efficiency (E2) – trying to find an inclusive model. 6 December 2013 at Hilton hotel City Centre

GG Wolvaardt. **Gender Based Violence a Public Health Priority.** SAMA Conference 15-17 August 2013, Birchwood , JHB

### TECHNICAL ASSISTANCE CLUSTER

#### Special Programmes Technical Support

M dos Santos. **Drug abuse research, treatment and practice (key note address).** Drug, alcohol & substance abuse and wellness symposium, 13-15 March, Convention Dynamics Conference Centre, Kempton Park

M Dos Santos & DL Wilson. **Reflections on the Masks and Mirrors of Madness.** 6th Global Conference – Madness: Probing the Boundaries. Mansfield College, Oxford, United Kingdom.

#### Strategic Information

M dos Santos, V Ganesan, D Wilson. **'Integrating mental health in South African initiatives for HIV/AIDS.'** 6th SA AIDS Conference, 18 - 21 June 2013, International Convention Centre in Durban: South Africa.

M dos Santos, D Wilson. **'Reflections on the masks and mirrors of madness.'** 6th Global Conference – Madness: probing the boundaries, 19th - 21st September 2013, Mansfield College, Oxford, United Kingdom

M dos Santos, F Trautmann. **'Rapid Assessment Response (RAR) Study: drug use and health risk: Emthonjeni Correctional Centre, Pretoria, South Africa. Towards policy advocacy and advancement within the prison sector.'** 6th SA AIDS Conference, 18 - 21 June 2013, International Convention Centre in Durban: South Africa.

#### Priority Health Programmes

M Uys. **'The positive impact of a TB/HIV integrated approach in rural North West Province South Africa 2006-2012.'** 44th World Union TB Conference.

M Uys. **The positive impact of a TB/HIV integrated approach in rural North West Province South Africa 2006-2012.** Oral Presentation at the 44th World Union TB Conference Paris, Nov 2013

M Uys. **Integration, Initiation, IPT and Infection control - The positive impact of a TB/HIV integrated approach (the 5 I's) in a deep rural, resource limited border-setting in the North West Province in South Africa during 2006-2012.**

#### SPECIAL PROJECTS CLUSTER

##### Basic Education Project

J Brink, R Pillay. **'The gaps in pre-service teacher training as indicated by newly qualified teachers and student teachers.'** 7th Annual African Education Week Convention & Learning Expo 2013, Sandton Convention Centre: South Africa.

## Conference Participations - Poster Presentations

#### TECHNICAL ASSISTANCE CLUSTER

##### Facility Based and District Based Technical Support

R Stephens **Challenges Of Implementing A Curriculum-based HIV Support Group Model Designed To Retain HIV+ Patients In Care & Support Programmes In Tshwane, Limpopo, Mpumalanga & Eastern Cape.** 6th SA AIDS Conference, 18 - 21 June 2013, International Convention Centre in Durban.

H van der Merwe **Sustainable Human Resource Planning In A Changing Funding Environment: Challenges And Lessons.** 6th SA AIDS Conference, 18 - 21 June 2013, International Convention Centre in Durban.

R Stephens **Challenges Of Implementing A Curriculum-based HIV Support Group Model Designed To Retain HIV+ Patients In Care & Support Programmes In Tshwane, Limpopo, Mpumalanga & Eastern Cape.** 8th International Conference on HIV Treatment and Prevention Adherence.

#### Special Programmes Technical Support

M dos Santos **The Rorschach Inkblot Test and CIDI as Measure of Psychodynamics and Psychological Co-Morbidity in People Living with HIV.**

HF Kinkel **Nurse Initiated Management Of ART (NIMART) Providing Primary Care Facilities In Tshwane District, South Africa: A Retrospective Cohort Study.** 6th SA AIDS Conference, 18 - 21 June 2013, International Convention Centre in Durban.

M dos Santos **Psychological Co-morbidity In People Living With HIV** 6th SA AIDS Conference, 18 - 21 June 2013, International Convention Centre in Durban.

M dos Santos **Rapid Assessment Response (RAR) Study: drug use and health risk: Emthonjeni Correctional Centre, Pretoria, South Africa.** 6th SA AIDS Conference, 18 - 21 June 2013, International Convention Centre in Durban.

M Vincenz, F Senkubuge, HF Kinkel **Pre-ART patient loss to care (PALC) in primary care facilities using nurse initiated management of ART (NIMART) in Tshwane district, South Africa: a retrospective cohort study** 6th SA AIDS Conference, 18 - 21 June 2013, International Convention Centre in Durban.

HF Kinkel, S Memon, S Johnson **Early Warning Indicators (EWIs) To Manage Prevention Of Emerging HIV Drug Resistance In Antiretroviral Treatment (ART) Services In Tshwane District, South Africa** 6th SA AIDS Conference, 18 - 21 June 2013, International Convention Centre in Durban.

M Vincenz, F Senkubuge, HF Kinkel **Pre-ART patient loss to care (PALC) in primary care facilities using nurse initiated management of ART (NIMART) in Tshwane district, South Africa: a retrospective cohort study** 7th IAS Conference on HIV Pathogenesis, Treatment and Prevention, Kuala Lumpur, Malaysia, 30 June - 3 July 2013.

HF Kinkel, S Memon, S Johnson **Early Warning Indicators (EWIs) To Manage Prevention Of Emerging HIV Drug Resistance In Antiretroviral Treatment (ART) Services In Tshwane District, South Africa** 7th IAS Conference on HIV Pathogenesis, Treatment and Prevention, Kuala Lumpur, Malaysia, 30 June - 3 July 2013.

A Bosman. **Learnerships as a strategy to strengthen public integrated healthcare services and reduce unemployment in South Africa.** 6th SA AIDS Conference, Durban June 2013.

HF Kinkel, S Memon, T Marcus, S Johnson. **Assessing HIV drug resistance early warning indicators (EWIs) at facilities providing antiretroviral treatment (ART) in Tshwane, South Africa: What are the implications for ART programme management?** IAS Conference June 2013, Kuala Lumpur, Malaysia

DA Cameron, D Olivier & R Wentzel. **Cryptococcal Meningitis Screening: Acceptance and Costing of Onsite Workplace Training.** 6th SA AIDS Conference, Durban June 2013.

M dos Santos **Mental health co morbidity in people living with HIV in South Africa: Steps towards a synthesis of interventions and policy advancement.** 3rd International Conference on Simulation and Modeling Methodologies, Technologies and Applications. Reykjavik, Iceland - 29-31 July.

P Lentsoane, JC Meyer, N Schellack, DA Cameron. **Challenges to Effective Palliative Pain Management at Five Resource-Limited Hospice Settings in the Vicinity of Medunsa Campus, Pretoria.** Hospice Palliative Care Association Annual Conference, Johannesburg, September 2013.

A Karat & S Johnson. **Investigation for TB delays start of antiretroviral therapy in South African primary care clinics.** 44th Union World Conference on Lung Health Nov 2013, Paris, France

#### Strategic Information

N Mangale, NS Mashau, GB Kraai, LO Amusa, H Akinsola **Missing opportunities through Prevention of Mother-to-Child Transmission intervention in Mafikeng sub-district clinics in North West province South Africa** 6th SA AIDS Conference, 18 - 21 June 2013, International Convention Centre in Durban.

R Wentzel, D Olivier **What's missing from traditional training evaluation and is a new evaluation hybrid required?** International Conference on AIDS and STIs in Africa.

#### Priority Health Programmes

M Maritz, M Uys. **Determining motivation of people seeking HIV counselling and testing on "THAT'SIT" supported mobile clinics in Eden District, South Africa** STI & AIDS World Congress 2013 (Joint Meeting of the 20th ISSTD and 14th IUSTI Meeting), July 14-17, 2013, Vienna, Austria.

S Johnson, C Mapempeni. **FPD's PMTCT barometer: lessons learned from turning data into information to improve monitoring, data quality and ultimately program performance of the South African PMTCT program.** International Conference on AIDS and STIs in Africa.

S Johnson, G Jacobs, H van der Merwe **Self Reported HIV testing preference of South African FET students** International Conference on AIDS and STIs in Africa.

M Maritz, N Abraham, E Webb-Mazinyo, B Volschenk, M Uys. **Knowledge, Attitude and Perceptions of People seeking HIV counselling and testing at Mobile Clinics in Eden District, Western Cape** 5th FIDSSA Conference .

M Uys, E Webb-Mazinyo **That'sit: TB, HIV/AIDS Treatment, Support and Integrated Therapy** 6th SA AIDS Conference.

E Wilkinson, N Abraham, E Webb-Mazinyo, B Volschenk, M Uys. **CASE STUDY: Nutritional Assessment of Children 6-14 years receiving ARVs in the Eden District, Western Cape,** 6th SA AIDS Conference.

N Abraham, E Webb-Mazinyo, B Volschenk, M Uys **Patient Folder Management Assessment in Primary Care Facilities in Eden District, Western Cape Department of Health** A Departmental commissioned investigation and presentation.

M Maritz, N Abraham, E Webb-Mazinyo, B Volschenk, M Uys **Knowledge, Attitude and Perceptions of People seeking HIV counselling and testing at Mobile Clinics in Eden District, Western Cape** 6th SA AIDS Conference, 18 - 21 June 2013, International Convention Centre in Durban.





PERRO FERRISSIO







# About EPD





# ABOUT FPD

## AWARDS

In 2013, FPD again acknowledged individuals and FPD staff, through a series of awards, who have contributed substantially to FPD's work

### FPD STAFF AWARDS

#### AWARD FOR EXCELLENCE IN TEACHING



Dr Jacobus (Tromp) Els – Clinical

FPD's Award for Excellence in Teaching is awarded annually to FPD faculty who have taught at least five times during the year. The award is based on the combined ratings given to the faculty member by the students who attended their classes. Faculty are evaluated against a number of criteria and receive a rating out of 5. Dr Jacobus (Tromp) Els is a facilitator on our clinical programme called "Gender Based Violence Approach to Forensic Medicine" and his total average rating was 4.83 out of 5.



Mrs Lucia Huyser - Management

Mrs Lucia Huyser is a facilitator on the Finance module of our Certificate in Advanced Health Management and the FPD/Yale Advanced Health Management Programme and her total average rating was 4.78 out of 5. The teaching days differ for each type of programme. FPD has primary, secondary and tertiary faculty on each programme and they have a specific percentage that they are allowed to teach. Another criteria for this award was that they had to teach more than 5 times on a specific programme during the course of the year.

#### AWARD FOR RESEARCH EXCELLENCE



Dr Fritz Kinkel

As an academic institution, we are committed to contributing to new knowledge through research. In 2013, FPD research outputs equated 68 research projects, 3 publications and 30 conferences presentations. The FPD award for excellence in research is awarded based on an external evaluation by leading South Africa scientist. All research outputs in 2013 were reviewed and the best output was selected. For a second time, the award for research excellence was awarded to Dr Fritz Kinkel.

#### AWARD FOR EXCELLENCE IN COMMUNITY ENGAGEMENT

The FPD Award for Excellence in Community Engagement is awarded annually to the staff member who has made the most significant contribution towards FPD's community engagement. Candidates are nominated by the staff and the winner is identified through staff voting from a list of nominees.



Ms Nkhensani Nkuna

#### VALUES AWARD

FPD Values Award is presented annually to the employee who in the opinion of their peers was the best example of someone who lives by the FPD values. Candidates are nominated by the staff and the winner is identified through staff voting from a list of nominees.



Mrs Leonie Pullen

## Staff Development

FPD has always been an organisation that places high emphasis on promoting a performance-driven culture. This has been achieved by actively recruiting highly talented individuals and building job descriptions around their unique skills and strengths. Internal promotion based on staff development has always been part of this culture.

Support has ranged from supporting formal postgraduate studies at Masters level to conference participation and short course attendants.

In total 431 staff members participated in educational activities in 2013. Emphasis was placed on developing managerial competence and 43 staff members were enrolled on management development programmes. Staff participation in educational activities stretched from senior management to support staff. Of the staff supported by FPD, 94% were from disadvantaged groups.

During 2013, FPD enrolled 285 staff members on pharmacy assistant learnerships and 35 on the auxiliary social worker learnerships.

## FPD Plus

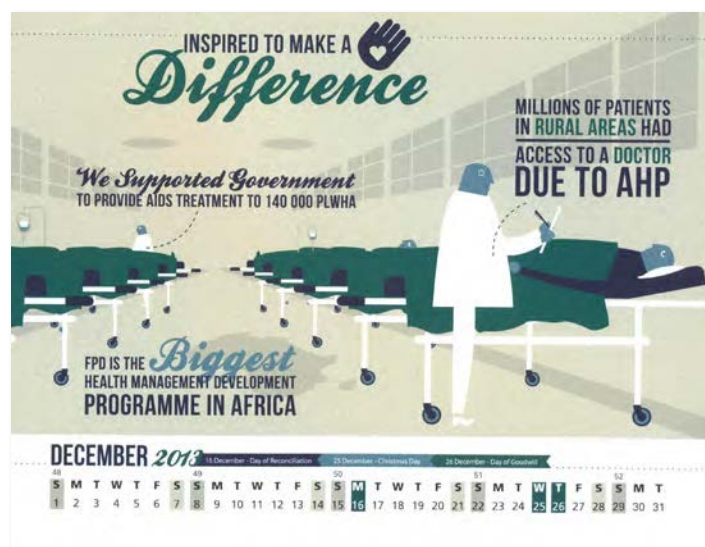
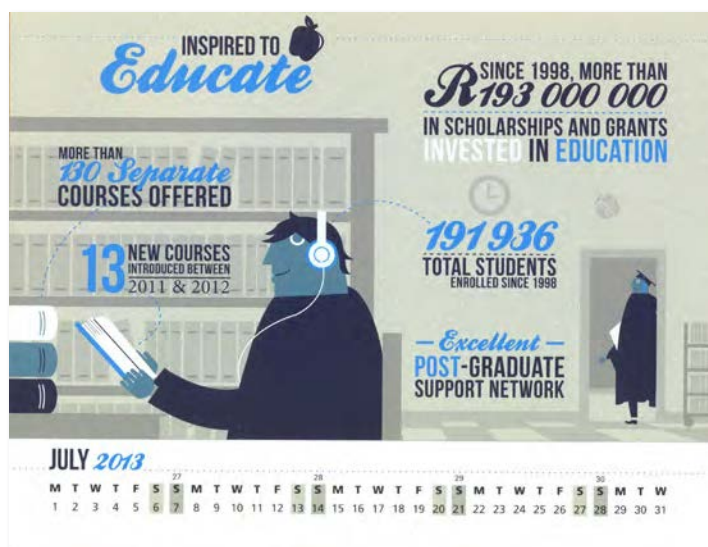
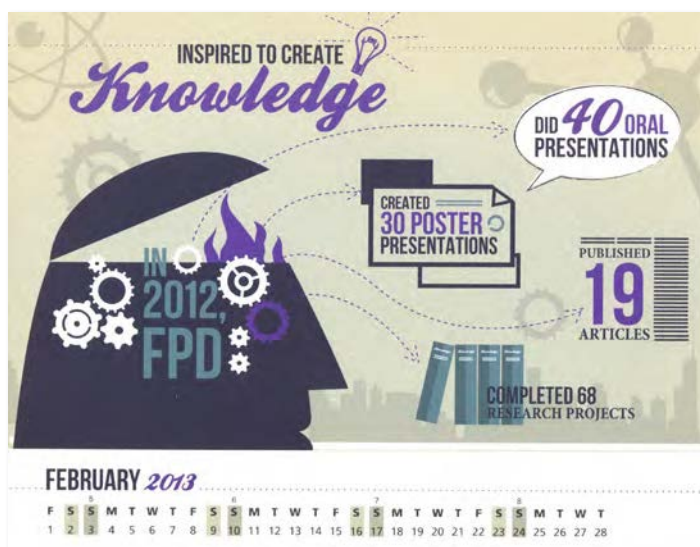
FPD Plus is an initiative of the FPD Technical Assistance Cluster that has been established to provide a safe “space” and forum for staff living with HIV, or affected by HIV. FPD Plus provides a platform to discuss issues that are relevant to HIV diagnosis, discuss issues related to the place of work and share strategies of dealing with HIV.



A confidential e-mail address (fpdplus@foundations.co.za), moderated by a staff member living with HIV, has been created for communication and information sharing. FPD Plus also authors a “Positive Voices” section in the organisational newsletter.

In 2009, FPD Plus initiated the “I AM” Campaign in support of World AIDS Day. This Campaign has resulted in the annual production of desk calendars and posters being distributed to partners, donors, staff and clinics in the hope that stigma around HIV and AIDS is reduced and an environment of acceptance is created.

The FPD Plus initiative has to date been a highly visible and successful Campaign. The thoughts, visions and opinions which shape the courageous people that are HIV positive and work at the organization have contributed to the success of the Campaign.





# STRATEGIC PARTNERSHIPS

FPD has over the years developed a number of strategic partnerships with world-class academic and health development institutions.

These partnerships include:

## INTERNATIONAL

### AMERICAN INTERNATIONAL HEALTH ALLIANCES (AIHA) – TWINNING PROJECT



The Health Management Programme is an entry level management programme that successfully develops

the skills of new managers, supervisors and team leaders within the HIV and AIDS environment. Students who enroll in this programme are exposed to the complexity of management and are challenged to think differently through self-assessment and reflection. Through examining a range of management concepts, students develop techniques that improve their ability to manage in an ever changing environment. The most relevant management subjects have been weaved together to form a solid educational foundation for the operational level manager. FPD's approach is to blend theory, personal experience and facilitation by expert faculty resulting in a management development programme that is both inspiring and practical. A generous grant from the Twinning Centre funds scholarships which covers all the tuition costs, including study material and workshop costs. The course is offered using participatory methods and building on the shared knowledge of the participants. The course is skills-based and allows participants the opportunity to find solutions to problems they may identify.

### ASSOCIATION OF SOCIAL SCIENCES AND HUMANITIES IN HIV (ASSHH)



ASSHH is an international membership organization that promotes and supports critically informed and theoretically engaged social

science and humanities research on HIV/AIDS. ASSHH is committed to generating, supporting and distributing social science and humanities scholarship, promoting dialogue and networking within social science disciplines and between them and the larger scientific community and training emerging social science and humanities scholars in academic and non-academic settings. FPD partnered with ASSHH in 2010 to establish an International HIV/AIDS Social Sciences Conference. The first conference was held in 2011 and the second took place in July 2013 in Paris, France.

### CLINICAL CARE OPTIONS (CCO)



### CLINICAL CARE OPTIONS®

CCO is a leading provider of HIV professional education worldwide, with an active and growing membership of over 29,000 physicians and over 66,000 total members globally. By producing the highest-quality interactive medical education programmes for over 20 years, CCO has become the trusted brand among HIV treaters around the world.

In addition to a world-class advisory board, long-term relationships with internationally renowned faculty and a sophisticated, specialized editorial and writing staff, CCO has its own unique models, proprietary technology, websites and well established alliances with key HIV organisations, including a longstanding partnership with the International AIDS Society. FPD, CCO and the University of the Witwatersrand have a joint project to develop the first South African mobile phone application based educational resource for HIV and TB medicine.

### DOCTORS WITHOUT BORDERS



Doctors Without Borders/Médecins Sans Frontières (MSF) is an international medical humanitarian organisation created by doctors and journalists in France in 1971. Today, MSF provides aid in nearly 60 countries to people whose survival is threatened by violence, neglect or catastrophe, primarily due to armed conflict, epidemics, malnutrition, exclusion from healthcare or natural disasters. MSF provides independent, impartial assistance to those most in need. MSF reserves the right to speak out to bring attention to neglected crises, to challenge inadequacies or abuse of the aid system and to advocate for improved medical treatments and protocols. FPD and MSF jointly manage a mobile AIDS treatment unit that provides care for farm workers in the Mussina area.

### FHI 360



FHI 360 works to improve reproductive health, increase family planning options, help prevent the spread of HIV, and promote educational opportunities for South African youth. Their projects support the Government of South Africa in key human development priorities, including implementing HIV/AIDS interventions, preventing mother-to-child transmission of HIV, increasing access to reproductive health services, improving nutrition, building capacity among local organizations and government entities, developing policies and guidelines that promote health and well-being, and expanding access to education.

FPD and FHI360 entered into a very successful partnership on the submission of USAID proposals. To date the collaboration has been successful on the “Comprehensive Community Based HIV Prevention, Counselling and Testing” project.

#### HUMANA



**HUMANA**  
People to People

The organisation established its operation in South Africa in 1995 and works with disadvantaged communities to secure the improvement of their economic situation, education and health and social well-being. All the programmes involve the target communities in contributing towards their own development by establishing local structures, training and empowering them to be self-reliant and self-deciding bodies.

FPD and HPPSA entered into a very successful partnership on the submission of USAID proposals. To date the collaboration has been successful on the “Comprehensive Community Based HIV Prevention, Counselling and Testing” project.

#### IMMUNE SYSTEM REGULATION AB (ISR)



ITH | Immune Therapy Holdings

Immune System Regulations AB (ISR) is an innovation driven Research Company within the area of immunotherapy, based at the Karolinska Institute in Stockholm, Sweden. ISR and FPD are currently partnering in groundbreaking HIV related Phase I/II Clinical Trials taking place in Pretoria, South Africa. FPD is also a shareholder of ISR.

#### ISTITUTO SUPERIORE DI SANITA (ISS) THROUGH FUNDING FROM THE ITALIAN CORPORATION (DGCS)



Istituto Superiore di Sanità

The Istituto Superiore di Sanità (ISS – Italian National Institute of Health) is the leading technical and scientific public body of the Italian National Health Service. Its activities include research, surveillance and control, training and consultation in the interest of public health protection.

In the frame of the Bilateral Co-Operation Programme to support the Ministry of Health of South Africa in the implementation of a National Programme of Global Response to HIV and AIDS between the Italian Government (Ministry of Foreign Affairs) and the South African Department of Health, ISS has been appointed as the Italian implementer and the overall Coordinator of the Programme.

ISS partners with FPD in areas such as Human Resources, Health Professionals Skills Developments and Capacity Building.

#### LONDON SCHOOL OF TROPICAL MEDICINE



The team completed the pilot and began enrolling study participants in January 2013.

In partnership with London School of Hygiene and Tropical Medicine and Aurum Institute, FPD began the TB Fast Track Study. The study, which uses easy, simple and inexpensive tests to look for the TB germ, will be conducted at a mixture of 20 Primary Health Clinics and Community Health Clinics in both urban and rural settings and is expected to run for two and a half years. The research

#### MANCHESTER BUSINESS SCHOOL (MBS)



With an international reputation for top-rated teaching and research, Manchester Business School is firmly positioned at the leading edge of dynamic business performance. Dedicated to developing effective managers for every sector and discipline, MBS invests in today's management the ideas and experience that will equip its graduates to become collaborating since 1998 in offering an international management short course for health managers in South Africa.

#### MOTHERS 2 MOTHERS



mothers2mothers is an NGO based in Cape Town, South Africa that helps to prevent mother-to-child-transmission of HIV and keep mothers healthy. mothers2mothers trains, employs and pays nearly 1 500 new mothers living with HIV in seven African countries to provide education and support to women just like themselves. These 'Mentor Mothers' become professional members

of health delivery teams - working alongside doctors and nurses to serve the needs of HIV-positive pregnant women and new mothers and to help fill the gaps in critically understaffed health systems. mothers2mothers currently reaches 20 percent of the pregnant women living with HIV in the world. FPD and mothers2mothers partnered in 2010 to form the Foundation for Professional Development Research Ethics Committee (FPDREC).

#### NETHOPE



NetHope Academy ([www.nethope-academy.org](http://www.nethope-academy.org)) contributes towards decreasing unemployment and IT skills shortages in developing countries by nurturing savvy, competent

IT professionals to increase their post qualification job prospects and employability. FPD has partnered with NetHope Academy to launch the NetHope IT Internship Programme in South Africa. The Programme aims to address the scarcity of IT workplace skills across South Africa by training and developing young IT graduates and placing them in an IT Internship Programme. IT graduates will be provided further technical skills (over 350 hours of training) and practical experience whilst being supported by FPD and supervised by a mentor.

#### UPPSALA UNIVERSITY – NATIONAL CENTRE FOR KNOWLEDGE ON MEN'S VIOLENCE AGAINST WOMAN



Uppsala University is more than 500 years old and maintains a purposeful and long-term view to always offer the best conditions for educational and research activities. The university

is one of the highest ranked seats of learning in Northern Europe with their campuses combining traditional settings and state-of-the-art research facilities.

National Centre for Knowledge of Men's Violence Against Women (NCK) works by order of the Swedish Government with education, research, development, information and compilation of research findings in the area. Women subject to violence are treated at the Centre's Outpatient Clinic at Uppsala University Hospital. The Centre also runs a national telephone helpline for women subjected to violence.



FPD has partnered with NCK to present a Gender Based Violence Capacity Building Project. The overall objectives of this project are: through training to improve the knowledge, skills and attitudes of healthcare and educational professionals on violence in general; to improve service delivery for victims of violence through building referral linkages between public sector facilities such as schools and hospitals and organizations that provide support services to victims of violence; and to increase awareness amongst key opinion makers of violence as a priority public issue.

#### YALE SCHOOL OF EPIDEMIOLOGY AND PUBLIC HEALTH

# Yale

Founded in 1915, Yale's School of Public Health is one of the oldest accredited schools of public health. In the 1960's it was decided to merge the Department of Public Health with the Section of Epidemiology and Preventive Medicine, a Unit within the Department of Internal Medicine. The Department of Epidemiology and Public Health (EPH) was the result of this merger.

Today, faculty and students at the Yale School of Public Health continue to strive toward Winslow's goal of: "Preventing disease, prolonging life and promoting physical and mental health and well-being through organised community effort... and developing the social machinery to assure everyone enjoys a standard living adequate for the maintenance or improvement of health".

FPD and Yale offer a jointly certified international management short course aimed at public sector managers.

## NATIONAL

#### AESTHETIC AND ANTI-AGING MEDICINE SOCIETY OF SOUTH AFRICA (AAMSSA)



AAMSSA is a scientific non-promotional society to regulate the scientific and legitimate practice of Aesthetic and Anti-Aging Medicine.

They provide medico-legal support in conjunction with medico legal societies and provide mutual support amongst members and improve relationships amongst the members and professional bodies. The AAMSSA strives to advance the growth, respectability and knowledge development in these fields of medicine in South Africa.

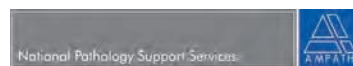
The FPD and AAMSSA partnership is in the process of developing a postgraduate qualification in Aesthetic Medicine. This Programme is designed to give participants advanced comprehension and skills so that they can manage and treat various pathological and non-pathological indications pertaining to aesthetics at a high level of competency and confidence.

#### AFRICA HEALTH PLACEMENTS (AHP)



AHP originally a FPD and Rural Health Initiative joint venture was established as separate not for profit legal entity in 2012. AHP(NPC) and FPD continues to collaborate closely on recruitment and retention of highly skilled healthcare workers.

#### AMPATH



Ampath provides pathology related services to healthcare professional and their patients.

The cooperation between FPD and Ampath was established in 2004. Ampath supports the Infectious Diseases Unit as its pathology partner, complementing and strengthening the Unit by bringing in a financial component, a national network of laboratories and microbiological experts.

#### THE CENTRE FOR HIV/AIDS PREVENTION STUDIES (CHAPS)



The Centre for HIV/AIDS Prevention Studies (CHAPS) seeks to perform and support innovative and safe medical male circumcision procedures as part of a minimum HIV prevention package. Anova is the main funding partner of CHAPS. This partnership is vital in assisting the National Department of Health and the Provinces of South Africa to expand access to high quality HIV-related prevention, treatment and support services throughout the country. FPD and CHAPS are working together to train healthcare professionals on how to perform safe medical male circumcisions.

#### CITY OF TSHWANE METROPOLITAN MUNICIPALITY (CTMM)



The City of Tshwane AIDS Unit is the driving force of the City's response to HIV and AIDS. The Unit co-ordinates HIV and AIDS programmes and initiates of the different sectors. FPD collaborates with the City of Tshwane to enable the community of Tshwane to access HIV and AIDS services through the development of service-mapping activities and through providing the secretariat for the Tshwane Mayoral AIDS Committee.

#### DEMOCRATIC NURSING ORGANISATION OF SOUTH AFRICA (DENOSA)



In addition to its advocacy role of promoting the cause of nursing in South Africa, DENOSA has established the DENOSA Professional Institute to extend the training and professional development of nurses. Over the past three years FPD has been working with DENOSA in running training courses in collaboration with the National TB Programme and the International Council of Nurses to train nurse trainers on TB and MDR-TB.

#### DEPARTMENT OF HEALTH EASTERN CAPE



FPD closely cooperates with the Eastern Cape Provisional Department of Health in supporting ARV roll-out and TB/HIV care through the

that'sit Project and the Technical Assistance Cluster. The that'sit Project strengthens the provincial HIV/TB response in nine TB Hospitals and surrounding feeder clinics by ensuring compliance with accreditation criteria for ART at all supported hospitals, supporting counselling and testing for TB patients, TB screening for HIV positive patients, a focus on infection control practices, clinical care community and patient education.

During 2012, FPD's Technical Assistance Cluster expanded its district based technical assistance support and now closely collaborates with the following districts: Cacadu, Nelson Mandela Bay Metropolitan Municipality, Amatole and Buffalo City.

**DEPARTMENT OF HEALTH GAUTENG**



FPD has a long-standing relationship with the Gauteng Provincial Department of Health on developing provincial capacity through technical assistance and training. FPD is the comprehensive technical assistance partner for Tshwane/Metsweding Districts

**DEPARTMENT OF HEALTH LIMPOPO**



FPD has a long-standing relationship with the Limpopo Provincial Department of Health on developing provincial capacity through technical assistance and training. FPD is the comprehensive technical assistance partner for Vhembe and Capricorn Districts and the district support partner for Greater Sekhukhune District.

**DEPARTMENT OF HEALTH MPUMALANGA**



FPD has a long-standing relationship with the Mpumalanga Provincial Department of Health on developing provincial capacity through technical assistance and training. FPD is the comprehensive technical assistance partner for the Nkangala District.

**DEPARTMENT OF HEALTH WESTERN CAPE**



FPD closely operates with the Western Cape Provincial Department of Health with regard to developing provincial capacity through providing scholarships for both management and clinical training to provincial staff, supporting TB/HIV care. The that'sit Project is the district technical assistance support partner in Eden District.

**DIRA SENGWE CONFERENCES**



This is one of FPD's oldest partnerships that has led to the very successful series of bi-annual national AIDS Conferences that has become one of the largest, if not the largest, National AIDS Conferences in the world attracting over 5 000 attendees. FPD provides the Conference Secretariat for these conferences.

**THE FOUNDATION FOR PROFESSIONAL DEVELOPMENT FUND**



The Foundation for Professional Development Fund is a non-profit entity whose focus area is allied to activities relating to HIV and AIDS, but it is not limited to this area. The FPD Fund's main activities are to promote community interests by the provision of healthcare, education, the prevention of HIV infection and to develop communities through capacity building projects.

**HEALTH AND WELFARE SECTOR EDUCATION AND TRAINING AUTHORITY (HWSETA)**



FPD has for a number of years been working with the SETA around Pharmacy Assistance and Social Auxiliary Work Learnerships and other Workplace Experience Programmes.

**HEALTH SCIENCE ACADEMY (HSA)**



HSA is an accredited provider of education and training in the South African health sector, with the purpose of providing a comprehensive range of educational products and research that are tailor made to the needs of the pharmaceutical sector. HSA has extensive experience in the private training and education market and focuses on Adult Education and Training. FPD and HSA jointly offer a dispensing course for healthcare professionals.

**Health and Medical Publishing Group (HMPG)**



HMPG journals reach the majority of active, practicing medical professionals in South Africa. Over 16 000 SAMA members receive either SAMJ (South African Medical Journal) or CME (Continuing Medical Education) or both. HMPG also publishes the official journals for specialist societies and associations in South Africa. In 2013 FPD became the sponsor of the African Health Professions Education Journal.

**HIGHER EDUCATION HIV/AIDS PROGRAMME (HEAIDS)**



The HEAIDS programme was first launched in 2000/2001 as a partnership between the Department of Education (DoE), the South African Universities Vice-Chancellors Association (SAUVCA) and the Committee of Technikon Principals (CTP). This comprehensive higher education response to HIV and AIDS comprises of two dimensions. The first dimension is directed at maintaining the institution's ability to continue functioning thereby preventing HIV and AIDS from undermining its potential to operate and deliver mandated services. The second dimension is the institutions core functions of teaching, training, research, community engagement and service. Since 2010 FPD and HEAIDS have been collaborating on the award winning First Things First Campaign that promotes HIV testing at Universities.

**MEDICAL RESEARCH COUNCIL (MRC)**



The Medical Research Council is a South African statutory body with the mission to improve the Nation's health and quality of life through promoting and conducting relevant and responsive health research.

FPD and the MRC has been collaborating over a number of years in training and treatment related to TB, especially through the that'sit Project. In 2012 this collaboration was expanded to gender based violence with the MRC becoming a partner on a US-AID funded project in support of the National Prosecuting Authorities Thuthuzela Project.



## PHAKAMISA (AN ASTRAZENECA INITIATIVE)



AstraZeneca launched Project Phakamisa with the goal of creating cancer awareness amongst the public. This is done via partnerships with cancer organisations as well as training of public sector healthcare professionals in a bid to improve volunteering, screening, testing and diagnoses of cancer. AstraZeneca supports the Breast Cancer for Health Professionals Course as part of their Phakamisa Project. It is designed to make a meaningful impact in the public sector. The aim is to support and guide health care professionals in addressing the needs of breast cancer patients.

## MEDICAL PRACTICE CONSULTING (MPC)



Medical Practice Consulting (Pty) Ltd (MPC) was incorporated during 2009, offering the healthcare industry the first online, independent PMA and EDI systems comparison tool. With a vision of identifying and

addressing the needs of healthcare professionals, MPC developed the first online Continuing Professional Development (CPD) management tool, whereby healthcare professionals could store CPD certificates in a secure, electronic format and submit their Individual Activity Records electronically to the Health Professions Council of South Africa (HPCSA).

This system was approved by the South African Medical Association (SAMA) and is currently the most used SAMA member benefit. This led to MPC being able to offer medical associations a solution to issuing and managing CPD certificates for physical CPD events. In order to provide healthcare professionals a complete solution, MPC developed an online training system, giving healthcare professionals one platform where they can complete online CPD training and manage all their CPD certificates and requirements. During 2012 MPC partnered with the Foundation for Professional Development (FPD) School of Health Sciences to supply online CPD training based on FPD content and became the only online training platform used by the FPD.

## NATIONAL PROSECUTING AUTHORITY (NPA)



FPD through a USAID grant supports the Thuthuzela Project of the NPA. Thuthuzela Care Centres are one-stop facilities that have been introduced as a critical part of South Africa's anti-rape strategy, aiming to reduce secondary trauma for the victim, improve conviction rates and reduce the cycle time for finalising cases. The Thuthuzela Project is led by the NPA's Sexual Offences and Community Affairs Unit (SOCA), in partnership with various donors as a response to the urgent need for an integrated strategy for prevention, response and support for rape victims.

## PEN



PEN is a non-profitable non-denominational Faith Based Organisation. PEN works in close relation with local churches in and around Tshwane and in the inner city, as well as other organisations working with people in need. PEN operates the Sediba Hope Clinic which serves the community of the inner city. FPD decided to formalise the partnership between FPD and PEN by contracting PEN to run and implement an HIV Wellness Programme. The partnership aims to improve the

quality of life of people visiting Sediba Hope by strengthening services in the following areas: medical health services, physical health of PLHIV, provision of psycho-social support and positive prevention activities of PLHV.

## SOCIETY FOR FAMILY HEALTH



SFH is South Africa's leading non-profit, non-governmental provider of health products, services and communications and South Africa's leading social marketing organization. Social marketing is the non-profit use of commercial marketing techniques to address public health issues. SFH was founded in 1992 as a condom social marketing organization and since that date has distributed 1 009 300 619 condoms.

Also since that time, SFH has greatly expanded the portfolio of products and services it provides to include male condoms, female condoms, lubricant, HIV counselling and testing, CD4 counts, TB diagnosis and medical male circumcision. All of these programmes are supported by SFH behaviour change communications, marketing and training. SFH is the South African affiliate of Population Services International, the world's leading network of social marketing organizations, with affiliates in 69 countries around the world.

FPD and HPPSA entered into a very successful partnership on the submission of USAID proposals. To date the collaboration has been successful on the "Comprehensive Community Based HIV Prevention, Counselling and Testing" project.

## SONKE GENDER JUSTICE



Sonke Gender Justice Network is a non-partisan, non-profit organisation established in 2006. Today, Sonke has established a growing

presence on the African continent and plays an active role internationally. Sonke works to create the change necessary for men, women, young people and children to enjoy equitable, healthy and happy relationships that contribute to the development of just and democratic societies. FPD and Sonke partner on a USAID funded project in support of the National Prosecuting Authorities Thuthuzela Project.

## SOUTH AFRICAN MEDICAL ASSOCIATION



The South African Medical Association (SAMA) is a non-statutory, professional association for public and private sector medical practitioners. Registered as an independent, non-profit Section 21 company SAMA acts as a trade union for its public sector members and as a champion for doctors and patients. The strategic relationship between FPD and SAMA extends beyond pure ownership of FPD.

The organisations collaborate on a number of projects including gender-based violence and a number of educational projects aimed at SAMA members.

## SOUTHERN AFRICAN HIV CLINICIANS SOCIETY (SAHIVCS)



The South African HIV Clinicians Society is a special interest group of the South African Medical Association with more than 12 000 members drawn from clinicians and medical scientists dedicated to responding to the challenge of HIV and AIDS. The strategic alliance between FPD and SAHIVCS dates from

2001, when the two organisations introduced the HIV Clinical Management Course. FPD also enrolls students as SAHIVCS members as part of the FPD Alumni Programme. SAHIVCS also organises skill building programmes at a number of conferences that FPD organises.

#### SOUTH AFRICAN INSTITUTE OF HEALTH CARE MANAGERS (SAIHCM)



**SAIHCM**  
SOUTH AFRICAN INSTITUTE OF  
HEALTH CARE MANAGERS

For a number of years, health managers working in both the public and the private sectors have determined that South Africa has an urgent need for an institute of healthcare managers. The structure of the institute is based on best practice, as identified in older of international models, but has been adopted to meet South Africa's specific needs in the field. The Institute aims to be a centre of excellence to advocate for the interest of consumers of health services in South Africa and for its members. The commitment will be demonstrated through the efforts to enhance the status and qualifications of healthcare managers within the framework of the SA Qualification Framework.

FPD and SAIHCM collaborate on providing an alumni support service for graduates of FPD management training programmes. Since 2010, FPD has hosted the SAIHCM Secretariat.

## EDUCATIONAL COLLABORATIONS

#### University of Pretoria (UP)



UNIVERSITEIT VAN PRETORIA  
UNIVERSITY OF PRETORIA  
YUNIBESITHI YA PRETORIA

The University of Pretoria was established as an independent university in 1930. With approximately 40 000 enrolled students, the university is a leader in higher education and is recognised internationally for academic excellence and a focus on quality. Collaboration between FPD and the Health Sciences Faculty at UP takes place around the Infectious Diseases Unit, ART clinics at two of the University's teaching hospitals (Steve Biko Academic Hospital and Kalafong Hospital) and the Department of Family Medicine.

FPD also collaborates with the Centre for the Study of AIDS (CSA) at UP.

FPD also collaborates with the Centre for the Study of AIDS (CSA) at UP.

#### Joint supervision project postgraduate students

FPD and UP jointly supervise Master of Public Health (MPH) students. Some of the projects were directly linked to the SOZO data project and included the following:

- » An evaluation of the quality of care provided at three NIMART facilities in the Greater Tzaneen Municipal Area: An action research project.
- » Antiretroviral therapy programme outcomes in Tshwane District: a five year retrospective study.
- » Pre-antiretroviral therapy patient loss to care in three South African public health facilities: Implications for pretreatment care.
- » Characteristics of adult patients who are lost to follow-up in antiretroviral roll out clinics in Gauteng, South Africa.

#### Public health electives for medical students



The students had a wide variety of 'entry' points to construct meaning of the experience so this suggests that the elective should continue to include a wide variety of experiences (as the trigger for interest seems to be highly personal).

New in this year was the talk by an American medical student who shared why he is interested in public health, the outbreak investigations discussion, the trip to CHAPS, a community screening day, the Swedish Embassy's AIDS Day and the zoonosis exercise in the zoo. The activities that were a repeat of 2012 were the PEN activities, the Sediba Hope Clinic and the visit to OUT.

#### University of Cape Town (UCT)

#### NATIONAL TB/HIV Hotline for Health Care Professionals



FPD supports a toll-free telephonic advice service based at the Medicines Information Centre (MIC) at the University of Cape Town. The MIC is the largest and only clinically-based medicine information centre in South Africa and is staffed by specially-trained drug information pharmacists.

The call centre currently fields about 500 calls per month with an all time record of 617 calls in October 2013. Doctors make up 62% of the callers, while 31% come from nurses, 5% from pharmacists and 2% from miscellaneous callers.

#### University of KwaZulu Natal (UKZN)

#### info-4-africa



info-4-africa is a programme within HIVAN which specialises in maintaining and expanding a database of over 6 000 HIV-related services providers throughout the country.

Through info-4-africa, information can be obtained on HIV-related service and support in any area of the country. info-4-africa and FPD are developing an HIV-related service database and producing annual provincial printed directories of all HIV service providers captured.

#### African Journal of Health Professions Education

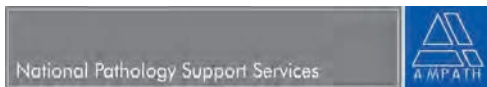
The high quality open access journal is the only accredited academic journal focusing on the development of educational skills amongst health education. In 2013 FPD expressed its support to the initiative through becoming the sponsor of the journal.

#### Screenshot of the AJHPE website





# SPONSORS & DONORS





# PEOPLE AT FPD

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Ms EF Machoga



Mr SK Magagane



Mr KT Mahasela



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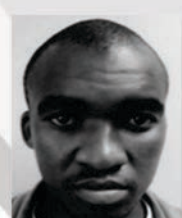
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