



**ANNUAL REPORT
2018 | 2019**

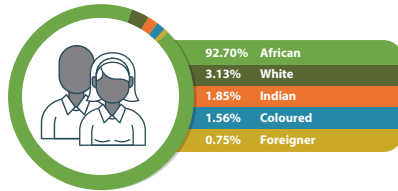
FPD



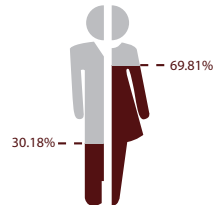
**Building a better society
through Education and Capacity
Development**

ANNUAL OVERVIEW

Employment Equity Results for 2018

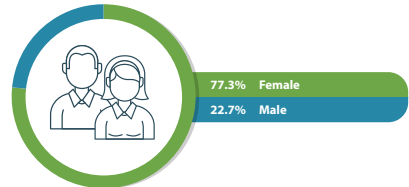


Male and Female Total



Student Demographics

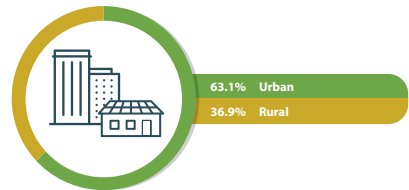
Gender



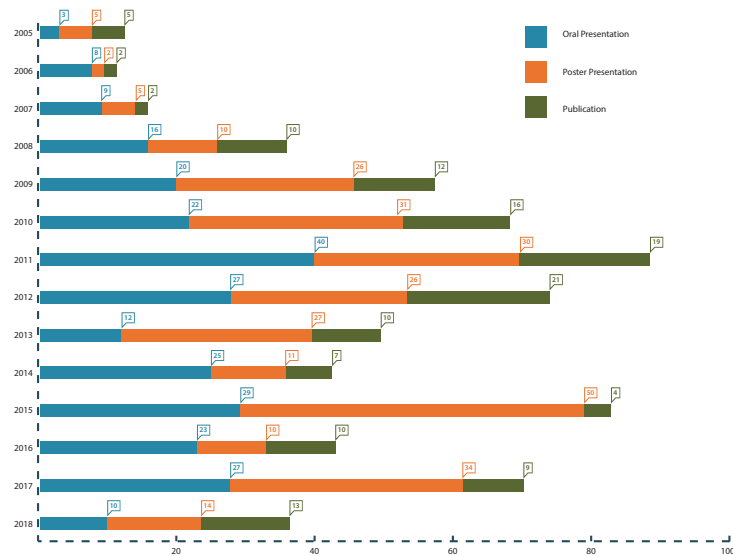
Racial



Urban / Rural



Research Output 2018



Conferences hosted in 2018



FPD ensured that more than
10 625 285
individuals received
free HIV testing



91 098
(62%) of individuals infected
with HIV were successfully
linked to treatment and care
in 5 years

To date, FPD has provided
R645 417 991
in educational grants

FPD has enrolled
417 193
students on its
courses (since 1998)



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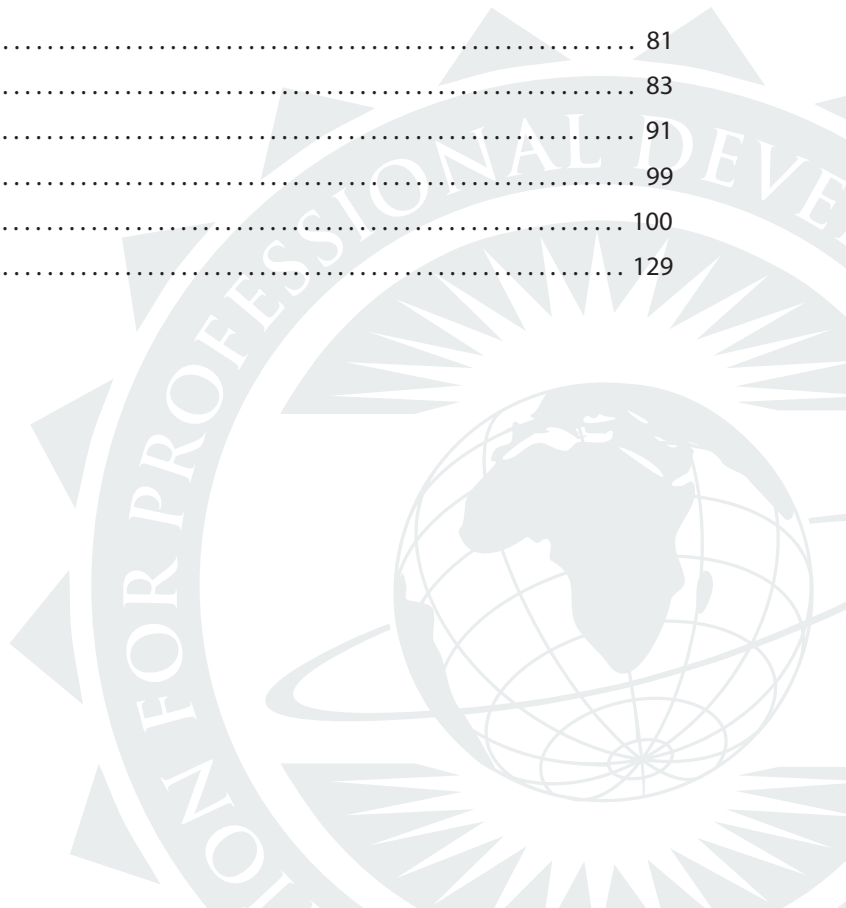
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OVERVIEW

Vision, Mission, Values and Strategic Direction

Message from the Managing Director

Background

Governance and Quality Assurance Structures

Organisational and Management Structure

Start of the Year Function 2019



VISION, MISSION, VALUES AND STRATEGIC DIRECTION

Building a better society through Education and Capacity Development.

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 that 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 effect positive change with a view of building a better society. This is achieved by aggressively embracing growth opportunities and committing ourselves to training leaders and 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 importantly, 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 is 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 FPD strategic direction focuses on rapidly expanding FPD's educational offering (both formal qualifications at under- and post-graduate level and professional development courses). This will involve expanding the number of FPD schools, curricular development and instructional design capacity and leveraging FPD Group ICT capacity to enter into strategic partnerships with international e-learning providers and expand FPD's offering of blended and e-learning courses. In designing curricula FPD will embrace a user-centric design and incorporate ethical decision making in curricular design during this strategic cycle. The massive shortage of healthcare professionals in Africa, has been highlighted respectively, by the World Health Organisation and the Academy of Sciences of South Africa's report on Reconceptualising Health Professional Education. The latter report on the potential role that the private sector could play in alleviating such shortages. FPD is responding to this challenge by entering the undergraduate health professional education market through its Nursing School. FPD will also counter weak local economic growth by exploring opportunities in the sub-Saharan Africa region by actively expanding FPD's products and services in the region.

Leveraging FPD's registration as a higher education institution is strategically important as there are substantial opportunities linked to the increasing emphasis government is placing on addressing youth unemployment, as well as middle class aspirations around formal qualifications as entry to the job market. In response to this opportunity FPD will expand the number of learnerships offered via the SHIPS Department and focus on registering higher certificate courses that could act as bridging programmes for entry to university for students who did not achieve "matric exemption".

FPD will actively compete for donor funded projects to support our systems strengthening and innovation-focused activities focusing on grants that allow piloting of innovative solutions and address neglected public health areas.

Under our Innovation focus we will explore opportunities to expand the Think Tank model that FPD has developed to support evidence-based strategy development and keep the organisation focused on innovation through: emphasising product leadership in education, leveraging the digital insights of Group Companies (Artificial intelligence, apps, digital systems and e-learning), implementing pilot

projects within the NHI domain, responding to an innovation grant funding opportunities, securing research grants from the National Institutes of Health and partnering with international universities.

A key component of the FPD strategy over the past year and continuing for the next two years is a focus on investing in future growth of the company rather than pursuing aggressive profit growth. As such FPD will have to be prudent in striking a balance between investing in new product development and containing costs to ensure that the company remains profitable.



MESSAGE FROM THE MANAGING DIRECTOR



In 2019, FPD will celebrate 22 years of unrelenting dedication to building a better society through education and development. According to Professor Richard Foster from Yale University, the average lifespan of a company listed in the S&P 500 index has decreased from 67 years in the 1920s to just 15 years today. From that perspective FPD can be viewed as a mature or even old organisation. However, reflecting on the past year I am struck, not by a sense of age, but rather by the vibrancy and purpose of the organisation and our staff. This vibrancy originates from our relentless focus on innovation and learning that drives a culture of continuous renewal, while our dedication to serving the greater good fosters a level of commitment and passion that you will not find in companies with a narrow focus on profit.

In my opinion, 2018 has been one of the most significant years in FPD's existence both from a growth and renewal perspective. Make no mistake. This was a challenging year and those who know me well know that I do not use the word challenge lightly. The year started with the disappointment of not securing a large follow-up system strengthening grant, despite the incredible commitment of the FPD staff who gave it their all in the pursuit of unachievable, externally imposed targets with inadequate financial resources. However, what really impressed me was the resilience shown by everyone at all levels of the organisation who were able to set aside this disappointment and focus on the goals for the year. This incredible team oversaw the responsible close out of large donor-funded grants, fast-tracked the implementation of new projects, secured new grants and by the end of the year had ensured that FPD achieved very ambitious growth targets set by our Board of Directors.

We have seen growth across all FPD focus areas. FPD's Academic Cluster launched two new schools namely the School for Information Technology and the School for Child Forensic Studies and actively expanded the number of formal qualifications that FPD can offer as a Private Institution of Higher Education. Our new Post Graduate Diploma in Health Professions Education was accredited by the Council for Higher Education (CHE). Five additional qualifications have been submitted for accreditation and a further seven are in development. Relationships with our international academic partners Manchester Business School and Yale University were renewed

and strengthened. Through FPD's shareholding in Skills Panda, a new majority black owned player in the Information Technology field, and our SHIPS Department, FPD bridged 3 793 school leavers from disadvantaged backgrounds into exciting new learnership programmes with opportunity for work experience, mentorship and professional networks for career development.

Conferences have always been an integral part of FPD's efforts to promote the development of new knowledge. In 2018 the Conference Department successfully organised the first of a new series of conferences namely the 1st National Communications for Change Conference, and conceptualised a Health Technology Expo that will take place in 2019 and will profile innovative technological advances that have the potential to reimagine service delivery and leapfrog current barriers and inefficiencies.

Our research and innovation focus strengthened considerably during the past year. The FPD Research Unit implemented four National Institutes Health (NIH) grants and submitted a further three grant applications to the NIH. Our peer reviewed publications output was the highest since 2013 with articles being accepted by world class international journals such as the Sexually Transmitted Diseases Journal where we published three articles, PLOS One – two articles, International Journal of Tuberculosis and Lung Disease (IJTLD), Infectious Disease in Obstetrics and Gynaecology, International Journal of STDs and AIDS and in Lancet Psychiatry.

In 2018, we closed out four system strengthening grants including three USAID/PEFAR funded grants leaving behind significant skills, capacity and ownership and an indelible mark in the local South African HIV, TB and SGBV response. We closed out our flagship Community Based Counselling and Testing (CBCT) project which pioneered in large-scale, techno-supported, combination implementation of community-based HTS and linkage services resulting in a total of 2.29 million people counselled and tested for HIV at or near where they live and work. We also closed down our Health Systems Strengthening grant which scaled up district DoH capacity to responsibly plan, finance, management and M&E the local AIDS response resulting in improved performance against 90-90-90 targets. Since 2005, through generous donor funding and strong partnership with DOH, civil society and other local stakeholders, FPD has made an enormous difference in the communities where we live and work. We are proud to have supported 10.6 million people get free HIV tests and 770 000 People Living with HIV (PLHIV) get access to lifesaving treatment.

We successfully concluded the Integrated Support to Survivors of Sexual Assault (ISSSA) project that supported the Thuthuzela Care Centres (TCCs) of the National Prosecution Authority. Over the five-year duration of this project, the project reached 11 421 adults through community dialogues and 8 000 children through children's clubs. The project created awareness of the TCC services through radio and television dramas that reached 7 000 000 people and public service announcements on local radio stations reaching 2 700 000 people. Additionally, the project built, staffed and equipped four new TCCs, trained 6 000 teachers, social workers and other outreach professionals on Gender-Based Violence and supported service delivery to 175 866 survivors of sexual assault. Finally, a four-year National Health Insurance pilot programme that tested a model of seconding private practitioners into public sector primary care clinics was also successfully concluded and handed over to Provincial Departments of Health.

While we closed down some projects, other innovations and systems strengthening initiatives scaled up rapidly. Through CDC/PEPFAR funding, we continued to provide community-based HIV Testing models and priority population prevention services and we significantly expanded peer-to-peer adherence support programmes and new adherence communication material. FPD, in partnership with our affiliate PPO Serve, designed and tested a multi-disciplinary service delivery model to augment the Ideal Clinic methodology and improved quality of care and equitable use of resources for managing complex, co-morbid patients at primary care level. FPD and PPO Serve also successfully piloted the GP Care Cell (GPCC), a National Health Insurance (NHI)-aligned innovation project, which aims to expand access to antiretroviral treatment (ART) for uninsured PLHIV by leveraging the capacity of private GPs to provide high quality HTS and ART in a controlled manner. The GPCC pilot demonstrated a viable model for 'purchasing' services from the private sector and is helping build the evidence that when properly organised and overseen, private GPs can play a vital role in the national HIV response, the future NHI and in support of universal health coverage. The National HIV Think Tank, funded by the Bill and Melinda Gates Foundation, launched a series of innovation challenges and organised a number of colloquiums to support public-private collaboration. The MSD for Mothers funded intervention that focuses on strengthening obstetric emergency medical services showed very promising results with regard to reduced maternal mortality rates in the districts where it was piloted. Finally, the Community Based Counselling and Testing project, funded by KfW, focused on developing capacity of Community Based Organisations (CBOs) to provide high quality community-based HIV testing and linkage services reaching a project total of just under 600 000 HIV tests (587 631). The Reading Support Project, a USAID funded project, undertook a major mid-project redesign to incorporate lessons learned from the pilot phase and to incorporate new research finding from DBE on the positive impact of coaching in improving on early grade reading.

Fundraising results exceeded the previous year and new funding was secured for six new system strengthening projects. The GPCC is set to expand to more districts and expand in clinical scope. Funding from

the Bill and Melinda Gates Foundation will fund the discovery phase for a project designed to professionalise health management in Africa. FPD, in partnership with UNICEF, are working with representatives from the Ministries of Health to define the programmatic approach for Kenya, Malawi, Tanzania and Uganda. I-Tech, an international consortium between the University of California and the University of Washington, will fund an extensive Community Health Workers (CHW) training programme. A CDC innovation grant will allow us to test an adherence support m-health project that uses an App to engage HIV-positive youth to improve ART adherence through gamification linked to incentives. Additional funding was also secured from CDC to start a harm reduction programme for people who inject drugs. FPD will also work in partnership with Genesis Analytics to implement the MCC Sustain technical assistance project, funded through the Bill and Melinda Gates Foundations, that will at a national and provincial level support the National Department of Health (NDoH) to improve performance against MMC targets, enhance quality, and strengthen government planning, budgeting, contracting and supervision of MMC service providers. Funding was also secured from AstraZeneca for a National Oncology Programme Technical Assistance Programme that will support the NDoH to launch a National Cancer Campaign. Over the last two years, public sector mental health services have dominated the news. In response to this need FPD has secured funding from two pharmaceutical companies, Sanofi and Janssen, to implement an ambitious system strengthening project address these needs.

As always, writing this reflection makes me realise how privileged I am working with such a group of dedicated and committed people. People who never falter in their dedication to changing the world, one intervention at a time. In the words of Joel Barker, "Vision without action is merely a dream. Action without vision just passes the time. Vision with action can change the world." To all of you and our Board Directors who support and guide our strategic vision, this annual report records your visions and your actions. 2018 shows that you are building a legacy.



**Vision without action is merely a dream.
Action without vision just passes the time.
Vision with action can change the world.
Joel Barker**

BACKGROUND

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).

FOCUS AREAS

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

Developing People

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 qualifications, postgraduate qualifications, short courses, in-house courses and conferences.

Innovation

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.

Strengthening Systems

FPD does not follow the narrower definition of community engagement that is solely focused 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 and education 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 organisations to increase the scope and reach of our programmes.

FORMAL QUALIFICATIONS

Higher Certificate in Risk Assessment and Management

HCert (Risk Assessment and Management)

Higher Certificate in Management

HCert (Management)

Higher Certificate in Practice Management

HCert (Practice Management)

Advanced Certificate in Management

AdvCert (Management)

Advanced Certificate in Health Management

AdvCert (Health Management)

Advanced Certificate in Monitoring and Evaluation

AdvCert (Monitoring and Evaluation)

Advanced Diploma in Aesthetic Medicine

AdvDip (Aesthetic Medicine)

Postgraduate Diploma in General Practice

PGDip (General Practice)

Postgraduate Diploma in Health Professions Education and Leadership

PGDip (Health Professions Education and Leadership)

Postgraduate Diploma in Distance Higher Education

PGDip (Distance Higher Education)

FPD also offers a variety of interactive, distance-based and e-learning short courses through our Business School, School of Health Sciences, School of Education and School of Information Technology. The majority of these programmes are targeted towards enabling continuing professional development and improving management competencies of our alumni.

The short courses offered slot into existing mechanisms of continuing professional development accreditation, such as the Health Professions Council of South Africa (HPCSA), the South African Council for Educators (SACE) and the South African Nursing Council (SANC).

AFFILIATIONS

- FPD is an institutional member of the South African Institute of Healthcare Managers (SAIHCM)
- FPD is a member of the Swiss South African Chamber of Commerce
- FPD is a member of the Consortium of Universities for Global Health

OWNERSHIP

The Foundation for Professional Development (FPD) was established in 1997 as a department in 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 non-profit company, has a 90% shareholding, while the remainder of the shares are employee-owned.

THE FPD GROUP

The FPD Group includes:



Foundation for Professional Development (Pty) Ltd
(Reg. No. 2000/002641/07)



FPD Property (Pty) Ltd
(Reg. No. 2005/014826/07)



Health Science Academy (Pty) Ltd
(Reg. No. 1994/006219/07)



Pioneer Solutions Studio (Pty) Ltd
(Reg. No. 2008/024971/07)



Africa Health Placement (Pty) Ltd
(Reg. No. 2011/128026/07)



Brighter Futures Tuition (Pty) Ltd
(Reg. No. 2014/235180/07)



Professional Provider Organisation Services (Pty) Ltd
(Reg. No. 2015/070045/07)



Glue Plus Africa (Pty) Ltd
(Reg. No. 2012/224654/07)



Maurice Kerrigan Africa (Pty) Ltd
(Reg. No. 2008/025706/07)



Skills Panda (Pty) Ltd
(Reg. No. 2018/261398/07)

FPD additionally manages the following NGOs:



Foundation for Professional Development Fund
(Reg. No. 2004/002765/08)



Dira Sengwe Conferences
(Reg. No. 2003/002398/08)



South African Institute of Healthcare Managers (SAIHCM)
(Reg. No. 2004/004290/08)

B-BBEE Status

FPD's commitment to transformation is reflected in its rating as a Level 1 Broad Based Black Economic Empowerment organisation.

FPD Academic code of conduct

FPD endorses the principles of non-racialism, nonsexism and non-discrimination. It believes that education should be accessible, affordable and relevant to the country or centre in which it occurs. 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. Currently the role of FPD's Board of Directors is modelled as closely as possible on the King IV Report and recommendations on corporate governance.

Independent Directors



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



Dr Angelique Coetzee
(from January 2019)
Non-Executive Director
B.MedSci, MBChB, CAHM,
H.Cert in Criminal Justice



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



Ms Ida Asia
Non-Executive Director
B.Cur (Hons),
MA (Nursing), MBL

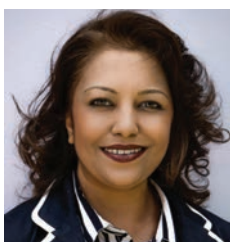
Executive Directors



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



Dr Mzukisi Grootboom
(until December 2018)
Non-Executive Director
MBChB(Natal), FCS(SA) Orth,
C.I.M.E (A.B.I.M.E), Cert. in
Accounting and Finance (UNISA)



Ms Veena Shaik
Academic Executive
MBA, PGCHE

Company Secretary



Sekretari (Pty) Ltd

PROGRAMME ADVISORY AND QUALITY ASSURANCE COMMITTEE 2016/2017

Academic Management Representatives

- Dr Gustaaf Wolvaardt
- Dr Elize Venter
- Ms Suzanne Mabaso
- Mr Anton la Grange
- Dr Grace Makgoka
- Ms Veena Shaik
- Mr Henk Reeder
- Mr Pie-Pacifique Kabalira-Uwase
- Ms Annatjie Peters
- Ms Alta Kruger
- Mr Dylan Newham

Industry Representatives

- Ms Gizella du Plessis
- Ms Lucia Huyser
- Mr Jan van Rooyen
- Mr Suleiman Shaik
- Dr Riekie Smit
- Dr Liz Wolvaardt
- Mr Werner Swanepoel
- Ms Serita Esselaar

Faculty Representatives

- Ms Welmoed Geekie
- Ms Sunette Jordaan
- Ms Regina Nkabinde
- Ms Sheila Zondo

Students and Alumni

- Ms Chantel Hira
- Ms Chantal Odendaal
- Ms Liezel Wolvaardt

Foundation for Professional Development Research Ethics Committee (FPDREC)

FPD's REC was audited during 2018 and after all the recommendations of the Audit Committee had been complied with, the National Health Research Ethics Council extended the registration of the FPDREC for another five years. The aim of the committee is to promote the conduct of ethical research and is guided by the relevant South African law, ethics guidelines, professional standards, international standards and guidelines and codes of practice. The committee meets once a month to assess research proposals, and during 2018 (January to November) the committee reviewed 13 research proposals of which 11 were approved and two referred back for clarification and corrections.

The following persons serve on the FPD REC committee:

Mr Braam Volschenk

Chair: Legal and Management
Private Sector

Dr Mitch Besser

Medical Education and Clinical Practice
mothers2mothers

Ms Zimasa Sobuza

Representative: Community
Foundation for Professional Development: HIV Think Tank

Prof Pieter du Toit

Education Specialist
University of Pretoria

Mr Dawie Olivier

Research and Epidemiology
Foundation for Professional Development

Dr Jude Igumbor

Research and Epidemiology
mother2mothers

Dr David Kalombo

Medical Coordinator: HIV
Foundation for Professional Development: IHSS

Dr Elize Venter

Educational Specialist/ Ethicist
Foundation for Professional Development

Ms Nzwakazi Sogaula

Researcher
Independent

Ms Faith Nxumalo

Lay member
Foundation for Professional Development

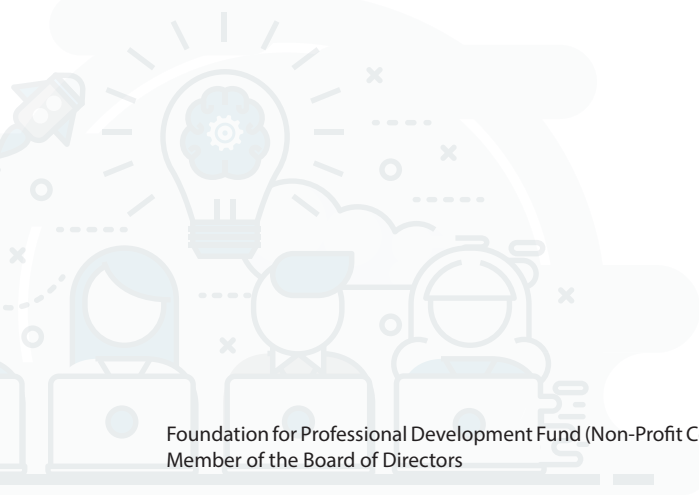
Participation of FPD Senior Managers In External Governance Structures

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

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

Brighter Futures Tuition (Pty) Ltd
Chairman of the Board of Directors

Health Sciences Academy (Pty) Ltd
Member of the Board of Directors

Health and Medical Publication Group (Pty) Ltd
Member of the Board of Directors – until December 2018

PPO Serve (Pty) Ltd
Chairman of the Board of Directors

Glue Plus Africa (Pty) Ltd
Member of the Board of Directors

Qode Health Solutions (Pty) Ltd
Member of the Board of Directors

Foundation for Sustainable Innovation (Pty) Ltd.
Member of the Board of Directors

Ms Veena Shaik
Executive 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

Pioneer Solutions Studio (Pty) Ltd
Member of the Board of Directors

Maurice Kerrigan Africa (Pty) Ltd
Member of the Board of Directors

Mr Henk Reeder
Chief Operations Officer

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

Brighter Futures Tuition (Pty)Ltd
Member of the Board of Directors

Participation of FPD Senior Managers In Advisory Structures

Dr Gustaaf Wolvaardt
Managing Director

Tshwane Mayoral AIDS Council (TMAC) 2009 to date
Co-Chairperson

National HIV Think Tank 2017 to date
Co-Chairperson

National Lancet Commission on High Quality Systems in the Sustainable Development Era
Commissioner 2017 -2018

Member of the consensus study panel for 'Reconceptualising Education and Training of an Appropriate Health Workforce for the Improved Health of the Nation'. Academy of Sciences of South Africa 2014 - 2018

Dr Andrew Medina Marino
Head of Research

National TB Think Tank
Member

Dr Margot Uys
Head of Department: School of Health Sciences

National HIV Think Tank
Member

National TB Think Tank
Member

National TB Key Populations TWG
Member

National PMTCT TWG
Member

Ms Cordelia Mapempeni
Technical Lead MCH

National PMTCT TWG
Member

Mr Rick Stephen
Operations Manager Adh Clubs & IACT

Adherence Clubs TWG in Free State, Gauteng, Mpumalanga & Limpopo
Member

Mr Shaun Skidmore
Project Manager AC/IACT

Adherence Clubs TWG in Free State, Gauteng, Mpumalanga & Limpopo
Member

Mr Faith Dube

Project Manager Adherence Clubs GF

Adherence Clubs TWG in Free State, Gauteng & Limpopo
Member

Mr Barend Botha

Technical Advisor

CCMDD TWG at District, Province & National
Member

Dr Nkhensani Nkhwashu

Head of Department: Systems Strengthening

National HIV Self Testing TWG
Member

National HIV Think Tank
Member

National HIV prevention technical working group
Member

National HIV Nerve Centre
Member

Ms Thato Farirai

HTS Specialist

National HIV Self Testing TWG
Member

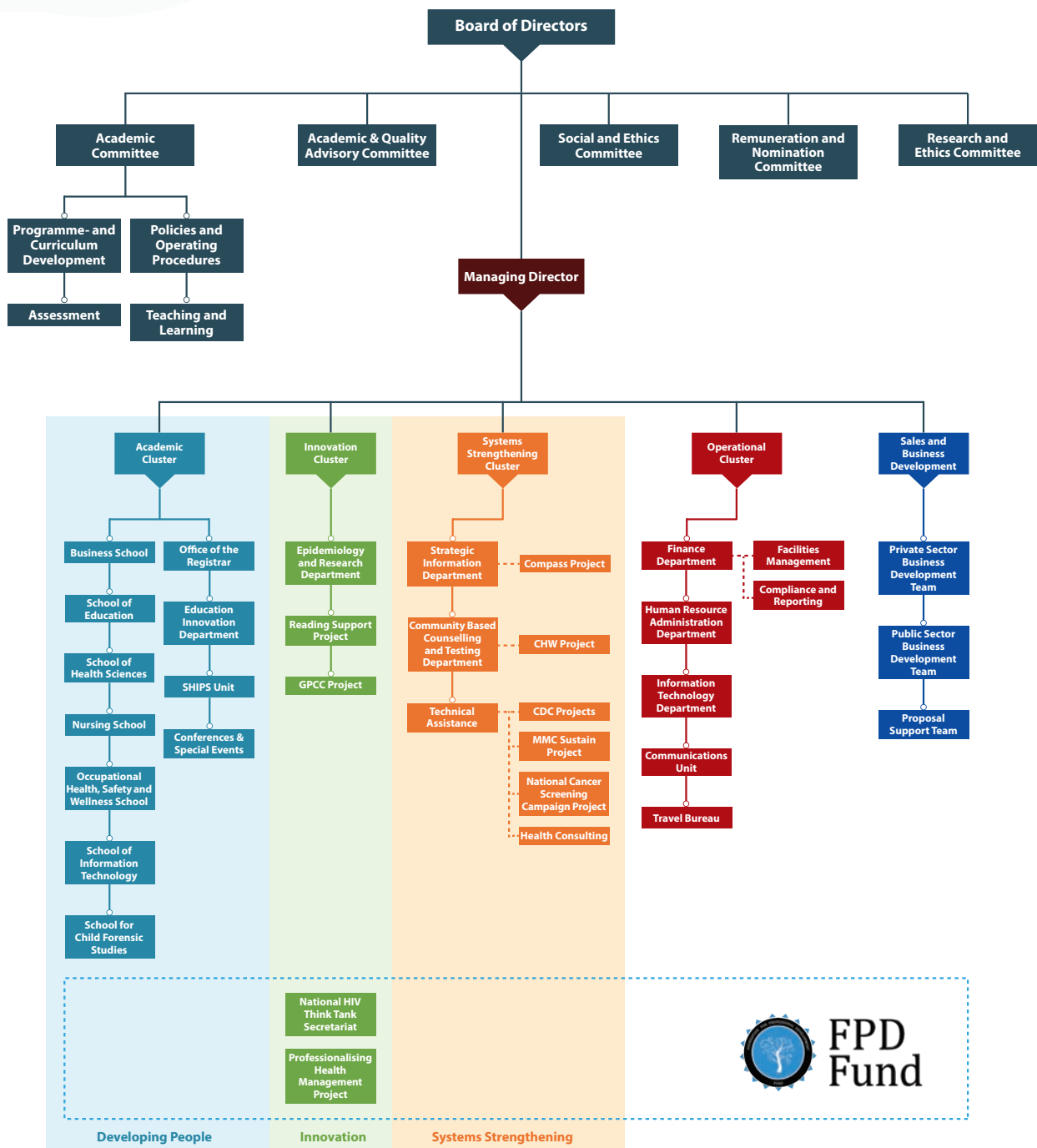
National HIV prevention technical working group
Member

National HIV Nerve Centre
Member



ORGANISATIONAL AND MANAGEMENT STRUCTURE

FPD consists of a number of functional departments organised into clusters. All departments report via their Head of Cluster to the Managing Director. The structure below will be applicable in 2019.



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 acts as Head of the Academic Cluster.

ACADEMIC CLUSTER

This Cluster houses FPD's educational activities and is made up of the following schools:

Business School

This school offers a wide range of management courses, including formal qualifications, short courses and in-house training programmes. The Business School has longstanding relationships with international academic partners such as Yale School of Public Health and Manchester Business School.

School of Education

This school offers a wide range of educational courses including short courses in the basic education context and a postgraduate qualification in the higher education context. The Postgraduate Diploma in Health Professions Education and Leadership has been accredited recently. This qualification was developed in partnership with SAFRI and the first student intake will commence in 2019.

School of Health Sciences

The FPD School of Health Sciences prides itself in being the leader in training healthcare professionals for many years. The portfolio of Health Sciences courses includes a wide range of clinical courses, including formal qualifications and short courses and is specifically designed to enhance the clinical skills of healthcare professionals. Most of our courses are accredited for CEU points by the Health Professions Council of South Africa. FPD is also an institutional member of the South African Institute of Healthcare and a member of the SAMA Group.

Nursing School

To address the challenges faced in nursing in South Africa, the FPD School of Nursing will offer the SANC accredited three-year Nursing Diploma and the four-year bachelor's degree in Nursing and Midwifery. FPD is also in the process of developing postgraduate courses for nurses. FPD also offer a range of short courses where nurses can obtain CPD points. The aim of the school is to ensure nurses meet the dynamic health needs of the South African community through developing clinical knowledge and practical skills. Through innovation, sound educational principles and evidence-based practice, FPD School of Nursing aims to positively impact the health environment of South Africa. The School is committed to ensure that the standard of nursing education and practice for nurses and midwives will result in knowledgeable, competent, safe and ethical nursing care.

Occupational Health, Safety & Wellness School

The Occupational Health Safety & Wellness School attains product leadership by focusing on developments in legislation and the economy. Focus is placed on e-learning and blended learning with a strong practical component to ensure competency. A modular format is followed to build career paths, working towards full qualifications in occupational health, safety and wellness. Development in Africa the mining sector and government departments will be targeted to ensure alignment with legislation and preparation for NHI.

School of Information Technology

The School of Information Technology has been established in partnership with the Foundation for Sustainable Innovation (FSI), a member of the FPD Group IT affiliate companies and is a certified Microsoft Training Academy that offers a wide range of Microsoft certified information technology courses.

School for Child Forensic Studies

The school will develop specialisation in the field of child forensics, in particular, cases of violence against children. This specialisation will translate into an improved response to cases of violence against children, thereby upholding the rights of children to protection from violence and abuse.

Office of the Registrar

The Office of the Registrar is a highly organised efficient team that provides quality, timely and courteous service to our stakeholders in academic success namely: our students, faculty, staff, alumni and the educational community. As we maintain student academic records and uphold academic policies, we strive to assist our customers in achieving their goals, thus making us an asset to those we serve.

The Education Innovation Department (EID):

The EID is a support department and delivers a comprehensive, coordinated and integrated academic development service. EID is tasked to create innovative, high quality educational programmes and to position FPD as a leading provider of higher education and training. The four critical performance areas for EID are:

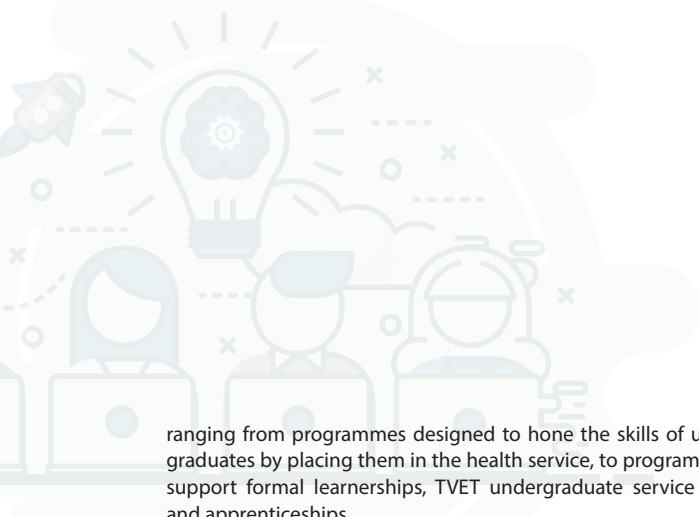
- Curriculum and course design
- Instructional design
- Evaluation and Research
- Professional Development of Academic Staff

Programme Evaluation Unit

The FPD Programme Evaluation Unit specialises in programme evaluations for public and private organisations across Southern Africa. The unit does not follow a "one size fits all" approach to evaluations, but rather offers evaluations that can be customised to its clients' needs and expectations.

SHIPS Unit

The SHIPS Unit houses a number of work-place 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 university graduates by placing them in the health service, to programmes that support formal learnerships, TVET undergraduate service learning and apprenticeships.

Conferences & Special Events Department

The Conferences & Special Events Department provide a macro meeting and events management service with skilled and experienced staff working on state-of-the-art project management systems. They offer their clients a solid partnership on all aspects of events and conference management, guaranteeing the successful roll-out of projects.

INNOVATION CLUSTER

The Innovation Cluster houses a number of FPD innovation projects and loosely functions as a health think tank with the ability to pilot, evaluate and create awareness around innovative ideas. These include:

Epidemiology and Research Department

The FPD Research Unit (FPD-RU) continues to build on previous years' experiences by increasing its research output, growing its national and international collaborations and implementing a number of large, cutting-edge research projects.

The FPD-RU has a diverse portfolio of evidence demonstrating its capacity to conduct rigorous research (observational and experimental; quantitative and qualitative) and programme evaluations. Although the research unit is only four years old, its senior researchers have already been awarded, as Primary Investigators, three U.S. NIH grants (two R21s and one R01), are co-investigators on a multi-country NIH U19 award, and are the primary South African site-investigators on a USAID-funded ASPIRES study. FPD's Research Unit is also the University of California Global Health Institute's NIH-Fogarty International Center's Collaborating Site in South Africa. In addition, The Unit has strong and on-going collaborations with researchers at Columbia University, University of California Los Angeles and Irvine, University of Washington, Vanderbilt University, and the Desmond Tutu HIV Centre at University of Cape Town. In 2019, the Research Unit will build upon these success to further increase its peer reviewed manuscripts, submit NIH research grants, and enhance its visibility at local and international conferences.

Reading Support Project

This project, funded by United States Agency for International Development in Southern Africa (USAID/SA), was launched on 1 November 2016 and focuses on improving language literacy skills at foundation phase level in South Africa's Limpopo and North West provinces. This system-strengthening project is being implemented

in partnership with a number of leading literacy organisations: The Molteno Language Institute (MOLTENO), the South African Institute for Distance Education (SAIDE), Oxford University Press of South Africa (OXFORD SA) and an international partner, Voluntary Services Overseas (VSO). The ultimate aim of this project is to improve Foundation Phase learners' reading skills in African Home Languages (AHLs) as well as in English as a First Additional Language (EFAL).

GP Care Cell (GPCC) Project

This project is a product of collaboration and co-design between National Department of Health (DoH), Gauteng Provincial DoH, FPD and PPO Serve and is co-funded by DoH and PEPFAR through USAID. Under the GPCC model FPD and PPO Serve contract, manage and quality assure general practitioners (GPs) within their private practices to provide HTS and to initiate and manage ART patients.

National HIV Think Tank Secretariat

The NHIV TT is funded by the Bill and Melinda Gates Foundation and provides a central place for all stakeholders (government, academia, NGOs, private sector, donors, community and implementers), under the chairmanship of the NDoH, to review epidemiological, routine monitoring and economic evidence related to the HIV epidemic, identify priority gaps, and establish consensus on appropriate next steps, including research projects and pilots of new programmes and policies.

Global Fund funded Adherence Clubs

FPD received funding from the Global Fund via Right to Care to implement ART adherence clubs (ACs) in five districts across three provinces. Funding started in April 2016 and is scheduled to come to an end in March 2019.

Bumb'Ingomso Gender-Based Violence Project

FPD is subcontracted by Masimanyane to provide Gender-based Violence training and to develop a case management application for community influencers. This three year project started in 2017.

Gender-Based Violence Project

This programme was a collaboration between FPD and a number of leading South Africa organisations, namely: the Soul City Institute, Sonke Gender Justice Network and the South African Medical Research Council. The aim is to enhance the role of Thuthuzela Care Centres of the National Prosecuting Authority (NPA) in tackling South Africa's epidemic of gender based violence and sexual assault. (closed down in 2018)

NHI Pilot Project

This project is implemented by a consortium of organisations, led by FPD, including: AHP, BroadReach, Wits Reproductive Health & HIV Institute (WRHI), Right to Care and Aurum Institute and is designed to test a model of seconding doctors to provide PHC services in selected clinics in the NHI Pilot districts. (closed down in 2018)

SYSTEMS STRENGTHENING CLUSTER

The Systems Strengthening 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:

Strategic Information Department

TASI 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. The aim is to foster a culture of evidence-based decision making from the facility to district management team level.

Community Based Counselling and Testing Department (CBCT)

CBCT implements community-based HIV prevention, counselling and testing programmes for reduced HIV incidence in high incidence communities in South Africa. The CBCT project under the KFW funding is a consortium of five partners with three implementing partners, namely KI, HPPSA and FPD) the other two partners namely SEAD and CCI provide technical assistance on quality assurance and BCC respectively. The CBCT department also implements HIV testing services targeting adolescent girls and young women in Tswane and Bojanala through funding from SCl. Lastly, through funding from USAID CBCT manages two sub-grantees (HPPSA and SFH) on the Communities Forward grant, to implement community based testing in six provinces covering 13 priority districts.

Technical Assistance

HSS provides facility-level training, coaching, mentorship, quality improvement, and where applicable, direct services support through a roving mentor team and programme champion model. The aim is to ensure improved service delivery and quality of care with key focus on: identifying HIV positive patients and initiating them on ARTs, retention, and ongoing care for People Living with HIV/AIDS (PLHIV); TB/HIV/STI integration; provider-initiated counselling and testing (PICT); maternal and child health and reproductive health; ensuring community linkages and establishing "ideal clinics". Additionally, HSS provides technical, clinical and programmatic expertise to the above priority health programmes through programme champions with the aim of promoting a cycle of total quality management and inculcation of best practice.

The (Integrated) Health Systems Strengthening (IHSS) department is providing comprehensive support to three districts, i.e. Tswane, Nkangala, Capricorn and, since October 2017, Buffalo City Metro has been added to the support mix. Comprehensive support reaches out to Primary Care Clinics and Health Centres through roving mentor teams consisting of a medical doctor mentor, a nurse mentor, programmatic nurse champions, a health information coordinator, and a pharmacy coordinator (pharmacist assistant). The lack of Department of Health (DoH) data capturers and HIV counsellors have

necessitated a large component of these two cadres of staff employed by FPD to support and enhance services at facility level. The support is further enhanced by programmatic experts at head office. ART Adherence Club activities, to support adherence to ART medication and care, is part of the service offering in the IHSS department. These adherence clubs operate at facility and community level. Furthermore, the decongestion of the clinics has been promoted and supported by FPD by the implementation of the Chronic Centralised Medicines Dispensing and Distribution (CCMDD) project.

CDC Funded Programmes

The CDC funded HIV Testing Services, Priority Population Prevention, Adherence communication Strategy and PHC modelling programmes form part of the Special Projects Cluster. Funding started in September 2016 and is implemented with support of the following sub award grantees: CareWorks, CCI, PPO Serve and OUT Wellness.

OPERATIONS CLUSTER

The Operations Cluster provides cross-cutting operational support to all FPD Departments and includes:

Finance Department

This 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.

Facilities Management

Facilities Management is responsible for ensuring a well maintained infrastructure as well as managing the FPD asset register and day-to-day office management.

HRA Administration Department

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

IT Department

This department facilitates and coordinates all functions related to information technology.

Communications Unit

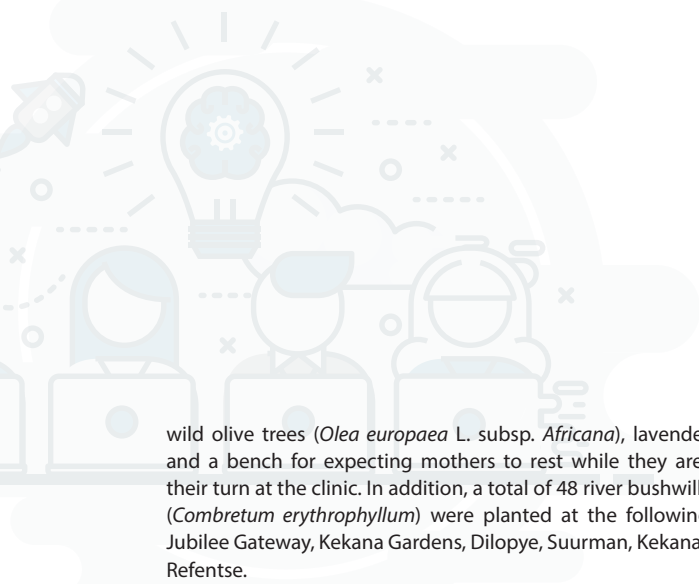
The Communications Department focuses on brand promotion and strategic communication mainly using social media and press releases.

Travel Bureau

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

FPD Tree-planting Project

The Tree-Planting Project was initiated to counter FPD's carbon footprint by greening some of the healthcare facilities that FPD has been supporting. The project was launched on 5 June 2018 to celebrate Worldkai Environmental day by planting a recreational garden at the KT Motubatse Clinic in Soshanguve consisting of five



wild olive trees (*Olea europaea* L. subsp. *Africana*), lavender shrubs and a bench for expecting mothers to rest while they are waiting their turn at the clinic. In addition, a total of 48 river bushwillow trees (*Combretum erythrophyllum*) were planted at the following clinics: Jubilee Gateway, Kekana Gardens, Dilopye, Suurman, Kekanastad and Refentse.

SALES AND NEW BUSINESS DEVELOPMENT

FPD has a sales team that provides customised training solutions to both government and corporate South Africa. Sales team members engage with various organisations on implementing training interventions utilising a wide range of training methodologies.

Proposal Support Team

The Proposal Team coordinates all new grant, proposal and tender opportunities to expand outreach and growth opportunities and ensure sustainability for the future of FPD.

FPD MANAGEMENT TEAM

Senior Management

Managing Director

Dr Gustaaf Wolvaardt
MBChB, M.Med (Int), FCP, AMP (MBS), PGCHE

Innovation Executive

Mrs Suzanne Mabaso
BSLA, MPH

Systems Strengthening Executive

Dr Nkhensani Nkhwashu
BSc, MSc, PhD, MBA

Chief Operations Officer

Mr Henk Reeder
BCompt

Sales Executive

Ms Veena Shaik
MBA, PGCHE

DEPARTMENT, PROGRAMME AND PROJECT HEADS

Academic Cluster

Business School

Mr. Pie-Pacifique Kabalira-Uwase
BSc Physics

Ms Lerisa Roberts (Senior Project Manager)
MBA

Health Sciences

Dr Grace Makgoka

(Until February 2019)
MBChB, Dip HIV Man (CMSA)

Dr Margot Uys
(From March 2019)
MB.BCh (Rand); BA(Mus) Hons(Afr); HED; AHMP

Nursing School

Mrs Annatjie Peters
BCur (UP); BACur (UNISA); MSocSc (UFS); Diploma in Clinical Nursing, Diagnosis, Treatment and Care (UFS). RN, RM, CHN, PN, NEd, NA

Occupational Health and Safety School

Ms Alta Kruger
BCur Ed et Adm, RN, RM, CHN, OHN

School of Information Technology

Dylan Newham
BSc IT Degree (Information & Knowledge systems); Microsoft Certified Educator - Microsoft Literacy for Educators (62-193); Microsoft Certified Educator - Microsoft Certified Educator in the 21st Century (2018) (62-193)

School for Child Forensic Studies

Dr Karen Muller
B.A. (Hons) LLB PhD

Office of the Registrar

Mr Anton la Grange
(Until April 2019)
BSc (Ed), BSc (HONS), CAHM, AMP (MBS), Adv.Cert (M&E)

Ms Alet Bosman

(From May 2019)
BCom (Fin Man), HED, BCom Hons (ACC), ACHM

Education Innovation Department

Dr Elize Venter
DEd (Didactics), MEd (Environmental Education), BSc, HED

SHIPS Unit

Mrs Tiyani Armstrong
LLB, HCM

Conferences and Special Events

Mrs Amor Gerber
BCom, DTE

Innovation Cluster

Epidemiology and Research Department

Dr Andrew Medina-Marino
BA, MS, PhD

Reading Support Project

Dr Mponana Seakamela
BA, H.Dip.ED, B Ed, M Ed, PhD

GP Care Cell Project

Mrs Suzanne Mabaso
BSLA, MPH

National HIV Think Tank Secretariat

Ms Karabo M. Born (Project Manager)
BSc Hons(WITS), PGDMM(UNISA), MPH(UP)

Masimanyane Gender Based Violence Project

Hanlie Kapp
BA, MS, PhD B Cur, CAHM, ACME

GP Tender Project

Prof Errol Holland
(Until March 2019)
MBChB (UCT), FCP (SA), PhD (UCT)

Systems Strengthening Cluster**Head of Cluster**

Dr Nkhensani Nkhwashu
BSc (Medical Science), MSc (Anatomy), PhD (Microbiology)

Strategic Information Department (SI)

Bontle Zuze Mogakane
BSc Maths & Stats, HCM and AHMP Masters in Public Health

Community Based Counselling and Testing Department (CBCT)

Thato Farirai
BSW, Hon.Soc.Sc

Health Systems Strengthening Support

Ernesha Webb Mazinyo
BS (Microbiology and Chemistry), MPH (Health Policy and Management)

CDC Projects

Mrs Hanlie Kapp
BCur, CAHM, ACME

Operations Cluster**Finance Department**

Mr Henk Reeder
BCompt

Human Resource Administration Department

Ms Maureen Fourie
BMil (Human Science)

Information Technology Department

Mr Keith Pullen
A+ N+

Communications Unit

Ms Helga Swart
ACHM, HCM

Travel Bureau

Ms L Rossouw
H. Cert (Management) (FPD), B.B.A (UNISA)



START OF THE YEAR FUNCTION 2019

THEME: THE GREATEST SHOWMAN





DEVELOPING PEOPLE

Academic Cluster

Educational Offerings

**Customised Organisation Specific
(In-house) Courses**

Programme Evaluation

SHIPS Unit

Conferences and Special Events

ACADEMIC CLUSTER

FPD's learning programmes are designed to be cutting edge and customised to meet the specific needs of our participants. Both formal qualifications and short course training offerings are developed within the regulatory requirements of the Department of Higher Education and Training (DHET), Council on Higher Education (CHE) and the South African Qualifications Authority (SAQA). In the case of training programmes for healthcare professionals, the relevant programmes adhere to the requirements of the Health Professions Council of South Africa (HPCSA).

EDUCATION INNOVATION DEPARTMENT

The following programme was accredited with the CHE during 2017 and registered on the National Qualifications Framework in 2018:

Post Graduate Diploma in Health Education and Leadership
[PG Dip. (Health Education and Leadership)]

The following new qualifications were submitted to DHET, CHE and SAQA for accreditation and registration during 2018:

Higher Certificate in Anaesthetic Technology
HCert (Anaesthetic Tecnology)

Higher Certificate in Early Childhood Care and Education
HCert (Early Childhood Care and Education)

Bachelor of Education (Intermediate Phase Teaching)
BEd (Intermediate Phase Teaching)

Diploma in Nursing
Dip (Nursing)

Bachelor of Nursing
B (Nursing)

Postgraduate Diploma in Distance Higher Education
PG Dip (Distance Higher Education)

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

Short Courses

- Short Course in Trauma Nursing Core Course
- Short Course in Major Incident Management in the Workplace
- Short Course in Contraception & Fertility Management
- FSI - Computer Literacy
- MOS - Microsoft Excel 2016
- MOS - Microsoft Excel Expert 2016

- MOS - Microsoft PowerPoint 2016
- MOS - Microsoft Word 2016
- MOS - Microsoft Word Expert 2016
- MTA - Cloud Fundamentals
- MTA - Database Fundamentals
- MTA - Mobility and Device Fundamentals
- MTA - Networking Fundamentals
- MTA - Operating System Fundamentals
- MTA - Security Fundamentals
- MTA - Software Development Fundamentals
- MTA - Windows Server Fundamentals

e-Learning Courses

FPD Launched its new e-learning platform with "Unlimited CPD training courses" for:

- Unlimited CPD package for Dieticians
- Unlimited CPD package for Audiologists
- Unlimited CPD package for Oral Healthcare Practitioners
- Management of Diabetes: Optimising Patient Outcomes
- Gastrointestinal Pathology - Masters of Pathology
- Breast Pathology - Masters of Pathology
- Motivational Interviewing - Principles and Practical Applications
- Orthopaedic Surgery Board Interview
- Neuro-Ophthalmology Clinical Review
- Pancreatobiliary Pathology - A Comprehensive Review
- Bone Pathology - A Comprehensive Review
- Advanced Thoracic Pathology

Blended Learning

- Management of Diabetes: Optimising Patient Outcomes
- Short course in Clinical Management of Mental Health
- Short course in General Practitioner Focused Ultrasound
- Short course in Basic Knee and Ankle Ultrasound

Highlights of 2018

- The Post Graduate Diploma in Health Education and Leadership was registered on the National Qualifications Framework.
- FPD trained 10 816 students in 2018.

Student Enrolment

In 2018, FPD enrolled 10 816 students, bringing the total number of students who have studied with FPD to 417 193.

Since its inception, the Academic Cluster has successfully overcome barriers that prevent students from accessing 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 that 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 at the centre. Students receive the support they require from faculty and may request additional assistance from FPD if needed.

Online Support

FPD has established an Internet-based Student Support Site (SSS) to support all its enrolled students to achieve formal registered qualifications. SSS is a server programme that allows invited users to collaborate on the website by editing and downloading content from the site from their own computer and in their own time. Visitors can view the web pages and interact with fellow students and facilitators. SSS allows facilitators and assessors to mentor students online and allows students to form student assistance through the provision of assessments 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 alliances with two professional associations. FPD's sponsorship of membership fees for alumni ensure access to a wide variety of mentorship and continuing educational products such as journals and newsletters. Currently, FPD has arrangements to provide this support with the Southern African HIV Clinicians Society (SAHIVS) and South African Institute of Healthcare Managers (SAIHCM).

Scholarships

During 2018, 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 enroll potential students.

This reduces costs as a barrier to education. During 2018, educational grants and sponsorships to the value of R9 385 016 million were received. The total monetary value of scholarships awarded since 1998 is R645 417 991 million.



To date, FPD has provided
R645 417 991
in educational grants

FPD has enrolled
417 193
students on its
courses (since 1998)

Faculty

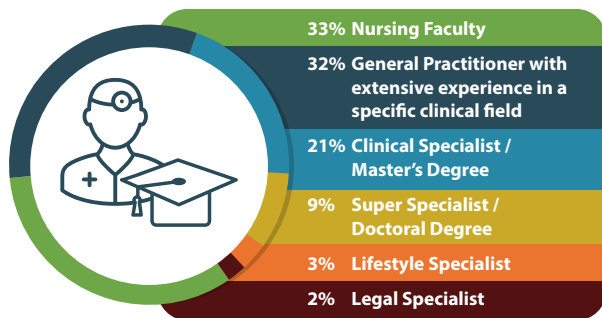
FPD employs a model of using a contracted faculty panel, which ensures access to the best faculty in the field. Most of the FPD Head of Departments also act as faculty. The following graphs provide an overview of the qualifications and expertise of FPD staff who taught on programmes in 2018.

Faculty Qualifications

Management Training



Clinical Training



Facts and Figures

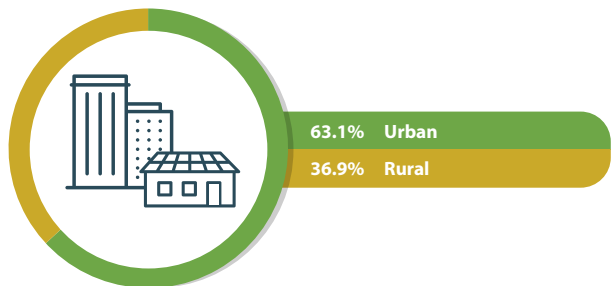
This section provides a graphic overview of the demographics of students who were enrolled on FPD courses in 2018.

Student Breakdown

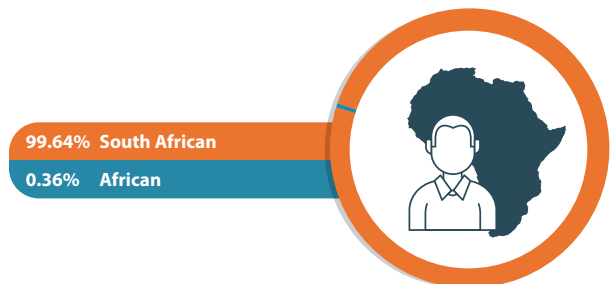
Course Enrolment



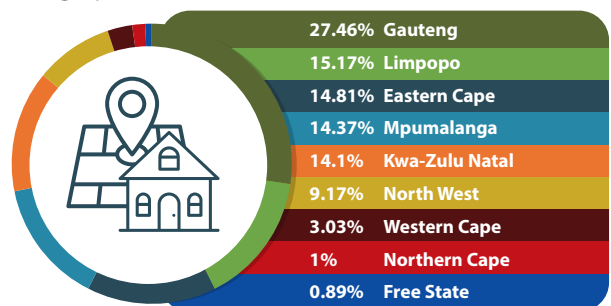
Urban / Rural



South African / African



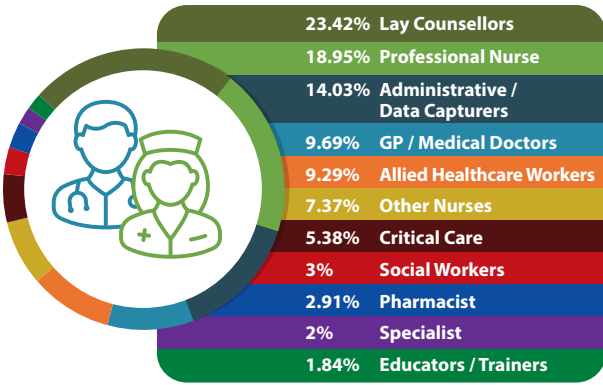
Geographical



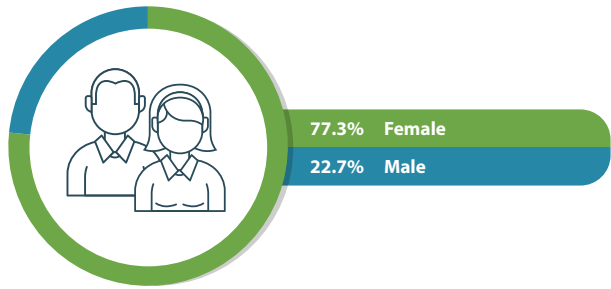
Racial



Professions



Gender



EDUCATIONAL OFFERINGS

FPD's educational model is designed to reduce barriers to quality education. The majority of our students are subsidised while a blended distance learning model provides contact sessions close to where students live and work, reducing geographical barriers and limiting time away from work.

BUSINESS SCHOOL



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 made up of formally 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 experts on faculty, our alumni support programmes and the integration of action research into our curricula.

CHE Accredited 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 qualified learners, namely: case managers, coordinators, 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 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 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, while also developing the knowledge and skills required to assess and have an increased understanding of themselves as individuals.

Advanced Certificate in Monitoring and Evaluation

The Advanced Certificate in Monitoring and Evaluation has been developed to address the need of a specific target population, such as managers and subject matter experts who have identified a need to further develop their monitoring and evaluation knowledge and skills. For example, a manager at middle management level whose job includes data management functions and oversight.

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.

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

Management Development Short Course

- Advanced Health Management Programme (AHMP)

Business Short Courses - Introductory Short Courses

- Short Course in Strategic Planning

Business Short Courses - Other Business Short Courses

- Short Course in Finance for Public Sector Managers
- Short Course in Practice Finance for Private Practitioners
- Short Course in Resources Mobilisation and Donor Relations
- Short Course in Case Management
- Short Course in Monitoring and Evaluation
- Short Course in Advanced Project Management
- Short Course in Primary Healthcare Toolkit
- Short Course in Strategic Planning

Distance Education Management Courses

- Advanced Certificate in Health Management (AdvCert Health Management)
- Higher Certificate in Management (HCert Management)
- Higher Certificate in Practice Management (HCert Practice Management)
- Short Course in Programme Evaluation for Management

e-Learning

- Short Course in Financial Management (Investec)
- Free Management courses for Registered Medical Students
- Higher Certificate in Management [HCert (Management)]
- Advanced Certificate in Health Management [AdvCert (Health Management)]
- Fraud Risk Management for Medical Doctors

SCHOOL OF EDUCATION



The FPD School of Education focuses on developing and supporting educators in the school and higher education environment.

Formal Postgraduate Qualifications:

Post Graduate Diploma in Health Professions Education and Leadership

The Postgraduate Diploma in Health Professions Education and Leadership aims to develop suitably qualified leaders in Health Professions Education (HPE) to meet the increasing complexity of HPE in a fast and continuously changing educational landscape. This qualification is in response to the increasing demand for individuals with specialised knowledge and leadership skills in order to best

educate 21st century health professionals and ensure the quality of healthcare in sub-Saharan Africa. The PGDip (Health Professions Education and Leadership) has been developed in partnership with sub-Saharan Africa-FAIMER Regional Institute (SAFRI).

Post Graduate Diploma in Distance Higher Education

The offering of the PGDip (Distance Higher Education) accords with a broad move towards online and distance learning at both public and private tertiary institutions in South Africa. Lecturers at distance education institutions need to acquaint themselves with the most recent developments in the field of distance education theory and practice. Furthermore, there is a broad tendency at residential institutions to supplement their face-to-face programme offerings with a range of distance and online teaching technologies. Thus, public and private tertiary institutions need to develop critical, reflective teaching practitioners and specialists in the higher education sector especially in distance and online teaching. Such lecturers will be able to contribute to the academic delivery of distance higher education in an innovative way. Against this background, the PGDip (Distance Higher Education) meets the need in the entire higher education sector in South Africa for the offering of postgraduate qualifications in the field of higher education studies with a specific focus on distance education theory and practice.

Short Courses

Contact Tuition

- Short Course in HIV, STIs, TB, Comprehensive Sexuality Education and Life Skills Co-Curricular Programme
- Short Course in Managing HIV and AIDS in Schools
- Short Course on the Best Evidence Practices in the Education and Training of Adults
- Short Course in the Integrated Management of Gender Based Violence
- Short Course in Gender Based Violence for University Campuses

e-Learning

- Short Course in In-service Training on Comprehensive Sexuality Education for Educators

Short courses: Blended learning (e-learning and workshop based)

- Introduction to School Management and Leadership Practice
- Cultivating the 21st Century School Leadership series:
 - All four of these Short Courses have been SACE endorsed with CPD points.
 - Managing leadership development through action research
 - Personal leadership – the prerequisite for school leadership
 - Managing curriculum leadership
 - Managing mentorship as leadership
- The responsibility of SMT's in reading literacy improvement:
 - These Short Courses are in development under the RSP project
 - The role of digital literacy in management and leadership
 - Reading literacy - the challenge for school leadership
 - Making school management and leadership teams work
 - Curriculum and instructional leadership for reading literacy
 - Creative school management and leadership in challenging times

SCHOOL OF HEALTH SCIENCES



The FPD School of Health Sciences has been the leader in training healthcare professionals for many years and takes pride in being recognised as pinnacle product leaders and innovators in the healthcare industry.

CHE Accredited Qualifications

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 continuous 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-aging 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 have 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 Healthcare Practitioners (Contact Tuition)

- Short Course in the Clinical Management of Allergies
- Short Course in the Clinical Management of Breast Cancer
- Short Course in Clinical Management of Cardiovascular Disease
- Short Course in the Clinical Management of Dermatology
- Short Course in Emergency Medicine
- Short Course in the Clinical Management of Malaria
- Short Course in the Clinical Management of Mental Health
- Short Course in the Clinical Management of Multi-drug-resistant Tuberculosis
- Short Course in the Clinical Management of Prostate Cancer
- Short Course in the Clinical Management of Paediatric HIV and AIDS
- Short Course in the Clinical Management of Rheumatology
- Short Course in the Clinical Management of HIV and AIDS for

Healthcare Professionals

- Short Course in the Clinical Management of HIV and AIDS for Oral Health Practitioners
- Short Course in the Clinical Management of Metabolic Syndrome
- Short Course in the Clinical Management of Asthma
- Clinical Forensic Medical Aspects of Gender Based Violence for Healthcare Professionals
- Short Course in HIV in the Workplace
- Short Course in the Integrated Management of Sexual and Gender Based Violence
- Short Course in Airborne Infection Control
- Short Course in Integrated Management of HIV/STI/TB
- Short Course in ICD Coding
- Short Course in Male Circumcision under Local Anaesthesia
- Short Course in Emergency Toxicology and Venemology
- Short Course in Rational use of Antibiotics
- Short Course Toolkit - Starting a Successful Private Specialist Practice
- Short Course in Good Clinical Practice (Clinical Trials)
- Short Course in Medical Ethics - Social Media Usage in Healthcare
- Short Course in Clinical Management of Sexually Transmitted Infections

Blended Learning Courses

- Short Course Obstetrics and Gynaecology Level 1
- Short Course in Basic Obstetrics and Gynaecology (Level 2)
- Short Course in 3D and 4D Obstetrics and Gynaecology Sonar
- Short Course in Diagnostic Abdominal, Pelvic and Obstetric Ultrasound
- Short Course in Basic Knee and Ankle Ultrasound
- Short Course in General Practitioner (GP) Focused Ultrasound
- Short Course in Management of Diabetes: Optimising Patient Outcomes

Distance Learning Courses

- Short Course in the Clinical Management of HIV/AIDS for Healthcare Professionals
- Short Course in ICD 10 Coding
- Short Course in Medical Ethics
- Short Course in the Clinical Management of Mental Health
- Short Course in Clinical Management of Tuberculosis for Healthcare Professionals
- Short Course in Dispensing for Doctors
- Short Course in the Clinical Management of Rheumatology
- Short Course in Ethics in Healthcare Funding and Resource Allocation
- Short Course in Ethics in the Healthcare Environment
- Short Course in the Ethics of Relationships in Healthcare
- Short Course in Policy, Governance and Ethics
- Short Course in Clinical Management of Asthma

e-Learning

- Short Course in Ethics in the Healthcare Environment
- Short Course in the Clinical Management of Sexually Transmitted Infections
- Short Course in the Clinical Management of Cardiovascular Disease
- Short Course in Management of Diabetes - Patient Outcomes
- Short Course in the Clinical Management of Tuberculosis for Healthcare Professionals
- Short Course in the Clinical Management of Mental Health

- Short Course in the Clinical Management of Asthma
- Short Course in the Clinical Management of HIV and AIDS for Healthcare Professionals
- Short Course in Death Certification
- Short Course in the Clinical Management of Hypertension
- Short Course in Practical Stress Management
- Short Course in Clinical Management of Fertility
- Short Course in Breast Cancer for Healthcare Professionals
- FPD Unlimited CPD package for Medical Practitioners
- FPD unlimited CPD Package for Community Service Medical Practitioners
- FPD Unlimited CPD package for Dieticians
- FPD Unlimited CPD Package for Oral Healthcare Practitioners
- FPD Unlimited CPD package for Audiologists
- Motivational Interviewing - Principles and Practical Applications
- Gastrointestinal Pathology - Masters of Pathology
- Breast Pathology - Masters of Pathology
- Orthopaedic Surgery Board Interview
- Neuro-Ophthalmology Clinical Review
- Pancreatobiliary Pathology - A Comprehensive Review
- Bone Pathology - A Comprehensive Review
- Advanced Thoracic Pathology

The School of Health Sciences also implements the following system strengthening projects that have predominantly an educational focus.

MSD FOR MOTHERS PROJECT

Strengthening South African public sector obstetric emergency medical services (EMS) systems



The Foundation for Professional Development (FPD), in partnership with the National Department of Health (NDoH) and MSD for Mothers is leading the MSD for Mothers: Strengthening South African Public Sector Obstetric Emergency Medical Services (EMS) Systems Project. The aim of this project is to improve maternal and infant survival by improving the quality of emergency care for pregnant mothers and/or new born babies during ambulance transit to health facilities. The three-year project commenced in April 2016 and was implemented in five health districts in South Africa, namely Amathole in the Eastern Cape, Capricorn in Limpopo, and Ehlanzeni, Gert Sibande and Nkangala in Mpumalanga.

FPD developed standardised EMS protocols, Standard Operating Procedures (SOPs) and monitoring data collection tools for all emergency call centres to ensure that obstetric emergencies are prioritised and correctly triaged during transit. In addition to this, FPD developed an online course for call centre staff which was made available to all call centre staff nationally (Short Course in EMS Call

Centre Communications - Obstetric Emergencies). To ensure that EMS personnel are adequately prepared for obstetric emergencies, FPD developed training material for Advanced Life Support (ALS), Intermediate Life Support (ILS) and Basic Life Support (BLS) personnel in identifying and managing obstetric emergencies in-transit. The training courses developed and implemented by FPD include the Essential Steps in Managing Obstetric Emergencies In-transit (ESMOE-IT) Master Training Course and the Short Course in the Management of Obstetric Emergencies in Transit - BLS Cadre. The training included interactive workshops that combined theoretical concepts and in-depth practical drills on managing such emergencies. As the project is drawing to a close in April 2019, an evaluation was conducted at the end of 2018 to determine if it had resulted in the indented objectives and outcomes.

As of December 2018, 692 people had been trained under the MSD programme. In total, 182 people were trained by FPD on the ESMOE-IT Master Training course, far exceeding the target of 100. In addition, FPD trained 50 other National Department of Health personnel, including doctors, nurses and midwives. They were included as a result of specific requests from the districts, to ensure that there is adequate understanding between all sectors on the realities of the EMS sector and the challenges they face. The ESMOE-IT Master Training Course was implemented with the main aim of ensuring that the delegates who attended the training be declared competent to cascade the training to their own districts, ensuring that the training intervention is sustainable. The cascaded training in Amathole district and the rest of the Eastern Cape was very successful, with 868 EMS personnel being trained by the master trainers. 332 BLS personnel were trained on the Short Course in the Management of Obstetric Emergencies in transit. A total of 101 Call Centre operators were trained on the Short Course in EMS Call Centre Communications, five times more than the target of 20. An additional 27 healthcare professionals completed this course online.

People trained under MSD programme:



232

ESMOE-IT Master Training course



332

Short Course in the Management of Obstetric Emergencies in transit - BLS Cadre



128

**Short Course in
EMS Call Centre
Communications**

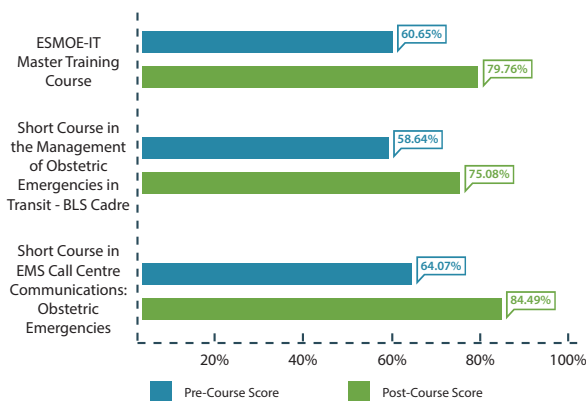


692

**people trained
in total**

Training participants were asked to complete a pre- and post-course questionnaire before and after they completed the courses to determine if the training was successful in transferring knowledge. From Figure 1 we can see that the post-course average scores increased by 16% to 20% in all three courses.

Figure 1: Pre- and post-course questionnaire average scores

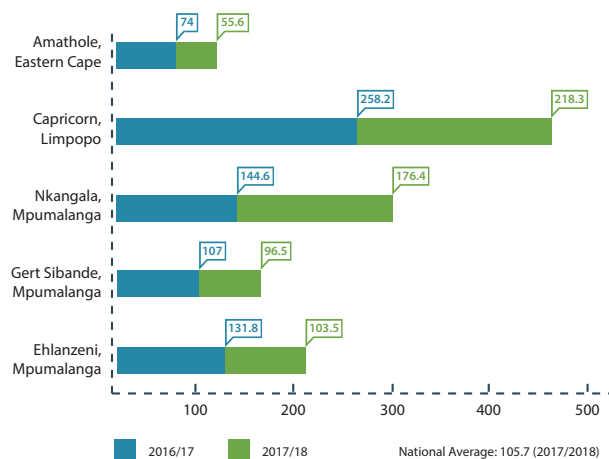


Participants who were trained found the training to be extremely valuable and said that it improved the care that they were able to provide to obstetrics patients. One of the major improvements was in the ability of EMS personnel to ask patients the right questions, obtain a full history and hand over the patient properly. It also gave them the knowledge and confidence to discuss the patients' treatment and care with the healthcare workers in the transferring and receiving facilities. Trainees highlighted that they now know more about obstetrics and the responsibilities of the various role-players during the transport of an obstetrics patient.

47 EMS facilities (in the five districts) were surveyed, 44 EMS Stations and four Communication Centres, an 88% response rate. The survey found that the EMS system is still faced with a number of challenges, including a shortage of obstetric ambulances, as well as essential and obstetrics equipment. There was a severe shortage of obstetric ambulances in the districts surveyed, with 74% of the EMS stations having no functioning obstetric ambulance. Obstetrics patients in these cases are transported in general ambulances, which do not have the equipment needed to respond to an obstetric emergency. A total of 80% of the EMS stations reported that their ambulances are not sufficiently equipped to respond to medical emergencies. Interview respondents reported that EMS personnel often bring their own equipment (e.g. blood pressure machines) to work in order to do their job.

Data from the District Health Barometer¹ show that the Maternal Mortality Rate decreased over the last three years in four of the five districts where the project was implemented (Figure 2). While this cannot be directly attributed to the project, it is an interesting observation. The national early neonatal mortality rate remained relatively stable between 2016/17 and 2017/18, at around 10 deaths per 1 000 live births.

Figure 2: South African Maternal Mortality Rate District level (deaths / 100 000 live births)



The evaluation of the MSD for Mothers Programme found that the programme did meet its objective to train communication centre and EMS personnel so that they can provide high-quality, standardised care and management of obstetric emergencies in-transit. The potential for this programme to have a significantly positive impact on maternal and infant mortality was highlighted by the beneficiaries and stakeholders, provided that the challenges still faced by the EMS system are also addressed. It was recommended that the National

¹ Health Systems Trust. 2019. District Health Barometer 2017/2018. Durban, South Africa; Health Systems Trust. 2017. District Health Barometer 2016/17. Durban, South Africa

Department of Health explore strategies to expand this training to all provinces in South Africa and provide EMS personnel with the equipment and resources they need to provide high-quality emergency medical services. The full evaluation report will be ready for dissemination in April 2019.

MENTAL HEALTH PROJECT TO IMPROVE MENTAL HEALTH SKILLS AMONG HEALTHCARE PRACTITIONERS



Mental Health services for uninsured South Africans are under severe pressure due to numerous factors including severe national shortages of psychiatrists and psychologists, maldistribution of services and lack of skilled professionals at the coalface to manage and treat common psychiatric disorders. FPD, in collaboration with the National and Provincial Departments of Health and various other private stakeholders (i.e. Sanofi, Janssen, Vula) have embarked on a project to improve the patient journey in accessing mental health services in the public sector. Over the next year, FPD will organise a series of workshops across all nine provinces of South Africa to train and mentor health care practitioners placed at primary care facilities. The curriculum will consist of a combination of teaching methods, facilitated by subject experts with years of experience in the field, i.e. online learning combined with face to face practical sessions and interactive role plays that will provide the necessary knowledge and skills to encourage and empower participants to manage mental health disorders effectively at the first level of health services contact.

FPD AND THE INTERNATIONAL TRAINING AND EDUCATION CENTRE FOR HEALTH (I-TECH): COMMUNITY HEALTHCARE WORKER TRAINING PROJECT



FPD, in collaboration with I-TECH funded through the CDC, will train an estimated 7000 Community Health Workers (CHWs) and 700 Outreach Team Leaders (OTLs) in two provinces namely Eastern Cape and Free State in several priority districts. In this skills development initiative to ensure that CHWs are trained and able to manage common conditions while surveying households, relevant and accessible knowledge and skills is a core requirement. The curriculum will cover the primary health care package, i.e. the basics of HIV and HIV prevention and treatment, Prevention of Mother-to-Child transmission (PMTCT), tuberculosis, adherence to treatment, antenatal care, pregnancy, the essence of child health, hypertension and diabetes.

The teaching approach is a cascade approach. Master Trainers from the Department of Health, will be trained and supported by project funded FPD Master Trainers and mentors during the lifespan of the project. This initiative will provide much needed support to the Department of Health in the various districts to ensure successful implementation of the Community Healthcare Programme, an essential building block in the primary care package. FPD and I-TECH will take responsibility for quality assurance and will conduct formative and summative assessments and evaluations to ensure that the integrated learning approach is effectively implemented. All trained CHWs will have to complete a skills assessment. The project has started in October 2018 and will be concluded after 12 months.

NURSING SCHOOL



FPD School of Nursing's overall aim is to prepare nurses to meet the dynamic health needs of the South African community through developing clinical knowledge and practical skills among nursing students and practitioners. Through innovation, sound educational principles and evidence-based practice, the FPD School of Nursing aims to positively impact the health environment of South Africa. The School is committed to professionalism, caring for the needs of people, improving the healthcare quality and patient safety.

Contact Tuition

- Short Course in Nurse Case Management
- Short Course for Airborne Infection Control
- Short Course in Nurse Initiated Management of Anti-Retroviral Therapy (NIMART)
- Short Course in Adherence Counselling
- Short Course in HIV Rapid Testing Quality Improvement Initiative (RTQII)
- Short Course in Integrated Management of HIV/STI/TB
- Short Course in the Clinical Management of Tuberculosis
- Short Course in the Integrated Management of Sexual and Gender Based Violence
- Clinical Forensic Medical Aspects of Gender Based Violence for Professional Nurses
- TB Clinicians Course
- Short Course in the Clinical Management of Prevention of Mother to Child Transmission
- Short Course in Integrated Management of Childhood Illness

Distance Courses

- Short Course in the Clinical Management of Tuberculosis
- Short Course in Adherence Counselling

e-Learning Courses

- Short Course in the Clinical Management of Tuberculosis

OCCUPATIONAL HEALTH, SAFETY & WELLNESS SCHOOL



The FPD Occupational Health, Safety and Wellness School courses are designed to prepare Healthcare Professionals to face the challenges of Occupational Health and Wellness in the workplace.

Occupational health and wellness aims to prevent and mitigate all occupational health risks to ensure healthy, motivated people; and employees who are productive at work and who have a sense of wellbeing.

This can only be achieved by focusing on the training of Healthcare Professionals to identify and manage the risks.

Our courses are designed to enhance the theoretical and clinical skills of healthcare professionals and are taught through e-learning, blended learning and facilitated workshops.

Courses for Clinicians

- Short Course in Physical Examination & Health Assessment Skills
- Short Course in Physical Examination & Health Assessment Refresher
- Short Course in Evaluation for Professional Drivers
- Short course in Health Risk Assessment
- Short Course in HIV in the Workplace
- Short Course in HIV Testing Services for Nurses
- Short Course in Adherence Counselling for Nurses
- HIV Rapid Testing Quality Improvement Initiative (RTQII)
- Short Course in the Clinical Management of Tuberculosis for Nurses
- Short Course in Basic Epidemiology and Disease Surveillance
- Short course in Clinical Epidemiology
- Short Course in the Evaluation of Permanent Medical Impairing Rating (based on AMA – 6th edition)
- Short Course in Dispensing
- Short course in Dispensing Refresher

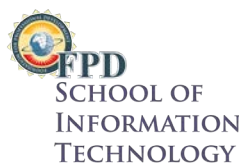
Multidisciplinary Courses

- Short Course in Audiometric Testing Techniques
- Short Course in Audiometry Refresher
- Short Course in Spirometry Testing Techniques
- Short Course in Spirometry Refresher
- Short Course in Vision Screening
- Short Course in the Adjudication of Permanent Medical Impairing Rating Claims (based on AMA – 6th edition)
- Short Course in Introduction to Occupational Health
- Short Course in Occupational Health Risk Assessment
- Short course in Anatomy and Physiology
- Short course in Ethics and Professionalism in Nursing
- Short course in HIV in the Workplace

Distance

- Short Course in the Medical Evaluation for Professional Drivers
- Short Course in Medical Terminology and Anatomy for Non-Healthcare Professionals

SCHOOL OF INFORMATION TECHNOLOGY



The FPD School of Information Technology has been established in partnership with the Foundation for Sustainable Innovation (FSI) and is an Education Technology company within the FPD Group that specialises in lecturing, interactive courseware, certifications, software licencing, and educator services in the Microsoft technology space.

The FPD/FSI School of Information Technology:

- Empowers students to achieve industry recognised skills and reach their career potential through high-quality training and certification.
- Provides a high quality, low cost and effective training solution that provides relevant programmes and skills to students to address skills gaps in the market.
- Helps students gain 21st Century skills and certifications that are globally recognised which position and differentiate them for great jobs in the future.

The FPD/FSI School of Information Technology offers the following Certifications:

- Microsoft Imagine Training Academy
- Microsoft Authorised Education Partner
- Microsoft Silver Cloud Partner

Courses:

- FSI - Computer Literacy
- MOS - Microsoft Excel 2016
- MOS - Microsoft Excel Expert 2016
- MOS - Microsoft PowerPoint 2016
- MOS - Microsoft Word 2016
- MOS - Microsoft Word Expert 2016
- MTA - Cloud Fundamentals
- MTA - Database Fundamentals
- MTA - Mobility and Device Fundamentals
- MTA - Networking Fundamentals
- MTA - Operating System Fundamentals
- MTA - Security Fundamentals
- MTA - Software Development Fundamentals
- MTA - Windows Server Fundamentals

SCHOOL FOR CHILD FORENSIC STUDIES



Violence against children has reached epidemic proportions globally. In many parts of the world, a history of conflict or civil war has left scars on the social fabric. In many households violence has become normalised as a way of dealing with conflict. The abuse of children is underpinned by various factors, chief amongst which are the unequal relations between men and women. Despite the plethora of international instruments, such as the Convention on the Rights of the Child, the child's right to be free from violence and abuse is violated in numerous ways, including in their interaction with legal systems. Research has shown that children who enter the legal system are further traumatised as a result of the treatment they receive in the system. A lack of specialisation on the part of legal system role-players contributes significantly to the manner in which children are treated. To address the gaps and challenges in statutory responses and the lack of specialisation in cases of violence against children, the FPD School for Child Forensic Studies will offer specialised short courses and qualifications to professionals working with child forensic cases, including those in the legal, medical and welfare response professions.

Specifically, the school will focus on the interface between the child and the law.

The short courses will be linked to relevant professional CPD point systems. The qualifications will be structured to respond to the expertise needs of each professional group involved with cases of violence against children, and will accommodate different admission requirements. The following role-players are listed as professionals to whom the courses and qualifications will apply:

- child and victim advocates and support persons
- child protection service practitioners
- child welfare agency staff
- prosecutors and where appropriate defence lawyers
- diplomatic and consular staff
- domestic violence programme staff
- judges
- court staff
- law enforcement officials
- medical and mental health professionals, and
- social workers.

The overarching aim of the school is to develop specialisation in the field of child forensics, in particular, cases of violence against children. This specialisation will translate into an improved response to cases of violence against children, thereby upholding the rights of children to protection from violence and abuse.

The FPD Business School has a wide selection of management and business courses that caters for all levels of students, from entry-level managers to highly-experienced executive management.

The FPD School of Education focuses on developing and supporting educators in the school and Higher Education environment.

The FPD School of Health Sciences has been the leader in training healthcare professionals for many years and takes pride in being recognised as pinnacle product leaders and innovators in the healthcare industry.

FPD School of Nursing's overall aim is to prepare nurses to meet the dynamic health needs of the South African community through the developing of clinical knowledge and practical skills of nursing students and practitioners.

The FPD Occupational Health, Safety and Wellness School courses are designed to prepare Healthcare Professionals to face the challenges of Occupational Health and Wellness in the workplace.

The FPD School of Information Technology, in partnership with the Foundation for Sustainable Innovation (FSI), specialises in lecturing, interactive courseware, certifications, software licencing, and educator services in the Microsoft technology space.

The FPD School for Child Forensic Studies will offer specialised short courses and qualifications to professionals working with child forensic cases, including those in the legal, medical and welfare response professions. Specifically, the school will focus on the interface between the child and the law.

CUSTOMISED ORGANISATION SPECIFIC (IN HOUSE) COURSE

FPD has developed particular expertise in developing customised educational programmes for the staff of various organisations.

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

Public Sector Organisations

- City of Cape Town Metropolitan Municipality
- Ministry of Health from neighbouring countries
- Gauteng Provincial Treasury
- Rand Water
- Rural Development Department
- South African Medical Research Council
- South African Department of Correctional Services
- South African Local Government Association
- South African National Defence Force
- South African National Space Agency
- Statistics South Africa
- The South African National Roads Agency
- Various South African Local Municipalities
- Various South African Provincial Departments of Health
- South African Department of Labour

Multilateral Organisations

- Joint United Nations Programme on HIV/AIDS (UNAIDS)
- United Nations Children's Fund (UNICEF)
- World Health Organisation (WHO African Region)

Industry

- Anglo Gold Ashanti
- Anglo Gold
- Anglo Platinum
- AVIS Fleet
- BMW
- Cell C
- Clicks Group
- De Beers
- Eskom
- Kumba Resources
- LifeLine
- Microsoft
- Oracle
- Rand Mutual
- Renaissance Capital
- Spar
- SASOL

Medical Schemes/Administrators

- Bestmed
- CareWorks
- Igolide Health Networks
- Impilo Health
- Medihelp
- Medikredit
- Medscheme
- MXHealth
- SASOL Med
- Thebe Ya Bophelo
- Umed Medical Scheme

Hospital Groups

- Netcare

Networks

- Environmental Assessment Practitioners Association of South Africa
- GP Net
- Medicross
- NACOSA
- Prime Cure
- Spesnet

Pharmaceutical and Medical Equipment Industry

- Abbott Laboratories
- Adcock Ingram
- Alcon
- Alere
- AMPATH
- Aspen Pharmacare
- AstraZeneca (South Africa)
- AstraZeneca (Middle Eastern Region)
- Bristol-Myers Squibb
- Eli Lilly
- Innovative Medicines South Africa (IMSA)
- iNova
- Mylan
- Novartis
- PIASA
- Quintiles
- Reckitt Benckiser
- SSEM Mthembu Medical
- Stryker South Africa

NGO's and Development Organisations

- Africa Centre (KZN)
- Africare
- American International Health Alliance (AIHA)
- Aurum Institute
- Broadreach Healthcare
- CHAPS
- Community-Based Prevention and Empowerment Strategies in South Africa (COPEs SA)
- Corridor Empowerment Project
- FHI360
- Health Systems Trust
- Impilo Medical Equipment Suppliers
- info4africa
- John Snow International
- LifeLine
- Lutheran World Relief
- Medical Protection Society (MPS)
- Red Cross
- Royal Bafokeng Administration
- Right to Care
- Save the Children UK
- Sizanani Outreach Center
- South African Catholic Bishops Conference (SACBC)

- St Mary's Hospital
- The Soul City Institute
- Thohoyandou Victim Empowerment Program
- Tshepang Trust
- Ulysses Gogi Modise Wellness (UGM Wellness)
- Youth Care Givers

- Medical Research Council (MRC)
- Regional Training Centre Eastern Cape
- Regional Training Centre Limpopo
- Regional Training Centre Mpumalanga
- Southern African Human Capacity Development (SAHCD)
- Tshwane University of Technology
- University of KwaZulu-Natal (UKZN)
- University of Pretoria
- University Research Company (URC)
- University of the Western Cape
- Walter Sisulu University

Contracted Training Provided on Behalf of Other Academic and Research Institutions

- Centre for Infectious Disease Research in Zambia (CIDRZ)
- Columbia University – ICAP
- Health Science Academy (HSA)



PROGRAMME EVALUATION

The Education Innovation Department (DEI) is responsible for the monitoring and evaluation of donor-funded and commercial academic programmes, including short learning programmes and qualifications. Evaluation forms part of the programme development and quality assurance processes of this Department.








Evaluation of academic programmes and training interventions is a systematic process of collecting information about the teaching and learning activities and materials, which can then be used for guiding decision making and for assessing the relevance and effectiveness of various educational components. Reasons for conducting evaluations on academic programmes and training interventions include:

- improving the programme for future participants
- confirming that you are getting the training right
- proving the programme is adding value or having the intended impact

Monitoring & Evaluation Services offered:

- M&E of academic programmes and training interventions (including short courses and qualifications)
- M&E of academic and training innovations
- M&E of educational interventions and campaigns
- Rapid assessments and gap analyses
- Training needs assessments and Skills Audits
- Customer and Employee Satisfaction Surveys

2018 / 2019 Projects

 GAUTENG PROVINCE EDUCATION REPUBLIC OF SOUTH AFRICA Gauteng Department of Basic Education	Type of programme: M&E Name of project: Evaluation of the HIV, STIs, TB, Comprehensive Sexuality Education and Life Skills Co-Curricular Programme.
 FPD Foundation for Professional Development	Type of programme: M&E Name of project: Evaluation of the Primary Healthcare Management Toolkit Course.
 South African National Defence Force	Type of programme: M&E Name of project: Evaluation of the Clinical Mentorship Course and Development of a Quality Management Tool.
 MSD	Type of programme: Programme Evaluation Name of project: Evaluation of the MSD for Mothers Programme to Strengthen Emergency Medical Services for Obstetric Emergencies.
 FPD Foundation for Professional Development	Type of programme: Programme Evaluation Name of project: Evaluation of FPD's Blended Learning Model.
 TRIPLE EIGHT CAMPAIGNS THAT MATTER Triple Eight	Type of programme: High School Sexual Health and Sexuality Education Intervention Name of project: Evaluation of the Connect-Ed Programme.
 Masimanyane Women's Rights International	Type of programme: Rapid Assessment and Gap Analysis Name of project: Rapid Assessment and Gap Analysis of Post-violence Care Services in Buffalo City, Eastern Cape.

SHIPS UNIT

The FPD SHIPS Unit was established in 2012 to draw from the expertise developed by FPD 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 school-leavers, graduate students and postgraduate students, to enhance their employability through workplace experience opportunities by placing them with public and private sector institutions. The purpose of these programmes is to bridge the gap between theoretical knowledge and workplace experience.

Current Projects

Learnership Programmes

Pharmacy Assistant

The Pharmacy Assistant Learnership Programme was established in 2009, to date this programme has supported over 2 849 learners at both basic and post basic level. Currently the post-learnership employment rate is at 75% for the Pharmacy Assistant programme, with demand for qualified students at Post-Basic level exceeding the number of trained students.

Business Administration

In 2017, SHIPS introduced a new Learnership for disabled learners in Business Administration. Various private sector partners fund this learnership that aims to alleviate poverty among our disabled youth, by improving their employability through learnership opportunities. To date we have successfully trained 481 learners, and currently have more than 64 learners enrolled in the business administration learnership.

Pharmacy Assistant Learnership Programme



Since established in 2009, this programme has supported over **2 849** learners at both basic and post basic level.

Post-learnership employment rate is at **75%**, with demand for qualified students at Post-Basic level exceeding the number of trained students.



Internship Programmes

- HWSETA University Graduate Internship
- HWSETA FET/TVET Graduate Internship

The SHIPS Unit also rolled out two Internship Programmes funded by the Health and Welfare SETA. The objective of these programmes is to help students to gain valuable work experience that is needed to complete their qualification and also to improve their chances of employment. In 2018 the placements for these two programmes were as follows:

- University Graduate Internship – 25 interns placed
- FET/TVET Graduate Internship – 31 interns placed

These two programmes aim to bridge the theoretical and practical aspects of newly qualified graduates, thus making the transition from classroom to workplace easier through supervised work environment exposure. These two programmes cater for youth candidates who have completed either a University degree or a registered FET/TVET qualification.

Business Administration Learnership

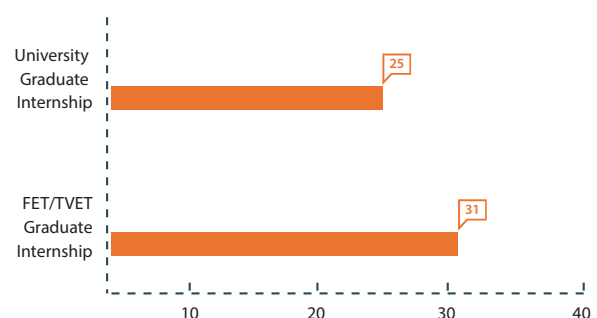


We have successfully trained **481** learners to date.

We currently have more than **64** learners enrolled in the business administration learnership



Total Placements 2018: Internship Programmes



CONFERENCES AND SPECIAL EVENTS

FPD Conferences and Special Events Department is a business unit supported by skilled people operating advanced information technology systems and database platforms.



Conferences & Special Events

Conferences play an essential role in the advancement of local and international responses to challenges faced by local, regional and global societies. They serve as a catalyst for education and professional development, motivation, behavioural changes and the conceptualisation and implementation of concrete actions. This is achieved through the establishment of numerous platforms, such as information sharing, training initiatives and development of business relationships to further the promotion of products as well as planning projects.

FPD's involvement in conferences dates back to the XIIIth International AIDS Conference, which took place in Durban in 2000. The organisation was instrumental in the management of the bid to host this conference and proceeded to organise the conference as the first macro international conference hosted in South Africa. 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. The success of the XIIIth International AIDS Conference launched South Africa into the international convention market.

Building on this heritage, the 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 service (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

The FPD Conference Service model differs substantially from traditional Professional Conference Organiser (PCO) services and is uniquely South African. We support clients in organising their conferences at various levels. This support is aimed at ensuring the success of the conference on a commercial and strategic level. All of this is performed in close collaboration with the governance committee of the conference.

FPD plays a major regional development role, as one of the premier private higher education institutions, which confers the Conference Department with a unique advantage providing access to a team of highly qualified strategic thinkers and entrepreneurs, the Conference Department is thus able to provide clients with strategic and business development advice. FPD is also in a position to underwrite new conferences through joint ventures and risk sharing models.

Outcomes and Highlights

To date, the Department has organised more than 60 major conferences and events, attended by over 190 000 people collectively. These events contributed in excess of R827 million to South Africa's economy and generated direct employment for 6 500 people.

In 2018 FPD Organised the Following Events:

5th SA TB Conference



The Conference theme: "STEP UP - Let's embrace all to end TB!" provided a unique opportunity to reflect on what was done across the entire spectrum of programmes in response to TB, what has been effective and what not, what must be done to find the missing cases in addition to giving attention to the structural and social determinants that fuel this epidemic.

1st National Communication for Change Conference



The first Southern African Communication for Change Conference organised by the Foundation for Professional Development. The conference will provide a platform for learning for a range of actors involved in SBCC to learn best practices, discover innovate ideas and share experiences and successes.

Conference Tracks

- Track 1: What works: Approaches and methodologies
- Track 2: Building evidence: Research for Communication
- Track 3: Being digital: Digital and mobile platforms
- Track 4: How the other half lives: What we can learn from the private sector
- Track 5: Mass media to Hyper local: building effective hyper-local campaigns

The theme of the 2 ½ day conference the theme was: "Communication for Impact". The conference was held at Destiny Hotel & Convention Centre.

Bonitas UP-Skilling Seminar for GPs

Bonitas

The theme of the two-day upskilling seminar was: To "Gain a Professional Edge". The objectives of these seminars were to support and update GPs on the latest advances in patient care, helping doctors to optimise the good health outcomes of patients and providing GPs with information on evidence-based guidelines and care pathways. The seminars took place in Durban, Rustenburg and Polokwane.

Up-and-Coming Conferences in 2019:

9th SA AIDS Conference



The 9th SA AIDS Conference will take place in June 2019 in Durban. The 9th AIDS conference will focus on the unprecedented scientific, social and digital innovations/technologies that could expand possibilities and opportunities towards controlling the HIV & AIDS epidemic. The conference will determine how contemporary explosive and disruptive technologies will contribute towards sustained HIV prevention efforts, HIV testing, ART uptake and adherence, trigger the development of new drugs, effectively utilise enormous volumes of data and improve communication and service delivery and eventually end the epidemic.

OSH AFRICA Conference



The recently established association OSHAfrica launched their maiden conference and exhibition to be held from 18 - 20 September 2019 in Johannesburg, South Africa. The theme of the conference is Occupational Health and Safety in Africa - Challenges and Actions. Going forward, our conferences will be held every three years and will be rotated amongst member countries. Employers need to embrace a safe and healthy workplace for their employees, which will lead to a more productive environment. By bringing together practitioners from all over Africa and beyond, we will be creating an excellent platform for achieving our ultimate goal – zero accidents, zero incidents and zero fatalities. We are all members of an important fraternity whose principal aim is to ensure that workers return home safely and in good health to their families every day. No matter which country we come from, our challenges are all the same.

Health Tech Expo 2019



The Health Tech Expo has been established to create an annual opportunity for the public, health providers, medical insurers, policy makers and other stakeholders to interact with each other, health tech entrepreneurs and suppliers. The Health Tech Expo will be a showcase of local and international technology. It will address all aspects of medical technology including software, wearables, consumables and lifestyle; with a specific focus on the consumer. This is a unique offering, where companies can gain access to the end consumer – something which does not happen at traditional medical or health conference, which are aimed at healthcare professionals. The Expo will take place from 30 Aug to 1 Sept 2019.

Bonitas Upskilling Seminars for GP's



2019 will see four more upskilling seminars for Doctors sponsored by Bonitas.

MWASA Conference



Medical Women Association of South Africa (MWASA) is planning an annual summit conference for 6 April 2019 in Gauteng with the theme "Step up - Be Bold for Change". The objective of the conference is to gather medical women from all nine provinces of South Africa and beyond under one roof to fulfil the following objectives aligned to those of the association:

To create a platform for medical women to consider issues pertaining to challenges facing women in the medical profession and to collectively identify ways of addressing these, to network across disciplines and specialities and to establish and sustain a formal platform for mentorship for female medical students both professional and overall mentorship. The conference also aims to provide recognition for medical women who have excelled within the field over the last decades to present.



A hand holding a glowing lightbulb against a blurred green background. The lightbulb is the central focus, with a soft glow emanating from it. The background is a soft-focus landscape of green hills under a bright sky. The overall mood is one of hope and innovation.

INNOVATION

Epidemiology and Research Department

Research Output 2018

Reading Support Project

GP Care Cell Project

National HIV Think Tank Secretariat

NHI Pilot Project

EPIDEMIOLOGY AND RESEARCH DEPARTMENT

FPD's Epidemiology and Research Department was established in 2014, and is tasked with applying rigorous, epidemiologic methods to study, advance, and inform public health programmes and policy development.

The Epidemiology and Research Department has a strategic focus on the following research areas:

- Prevention of Mother-To-Child Transmission of HIV (PMTCT)
- STI screening during pregnancy
- HIV prevention in adolescents
- TB case finding and the TB continuum of care
- Mental health
- Social determinants of health, with a specific focus on stigma

Our strategic goals are to:

- Develop and conduct rigorous scientific and epidemiologic research
- Advance evidence-based policy recommendations
- Develop local, regional and international partnerships that bring expertise to bear on issues of South African public health importance
- Cultivate current and next generation public health researchers and epidemiologists through training and mentorship
- Contribute to the global body of scientific knowledge that directly informs public

During 2018, FPD received funding from the US NIH and USAID to:

- Investigate STIs in HIV-positive pregnant women and the impact on MTCT of HIV
- Determine the acceptability and feasibility of home-based TB case finding and testing using the new GeneXpert Omni instrument
- Evaluating an intervention integrating economic strengthening and HIV prevention programmes for vulnerable youth
- Leverage community-based platforms to improve access and adherence to PrEP
- Validate TB stigma measures to assess the impact of stigma on TB outcomes
- Determine employment preferences of healthcare workers providing HIV treatment and care services in South Africa as part of the Human Resources for Health in 2030 assessment
- A phased implementation of a public health programme: cryptococcal antigen screening and treatment in South Africa
- The validation of a mental health screening tool to be used in Mozambique as part of the PRIDE SSA Project

Project Sponsors

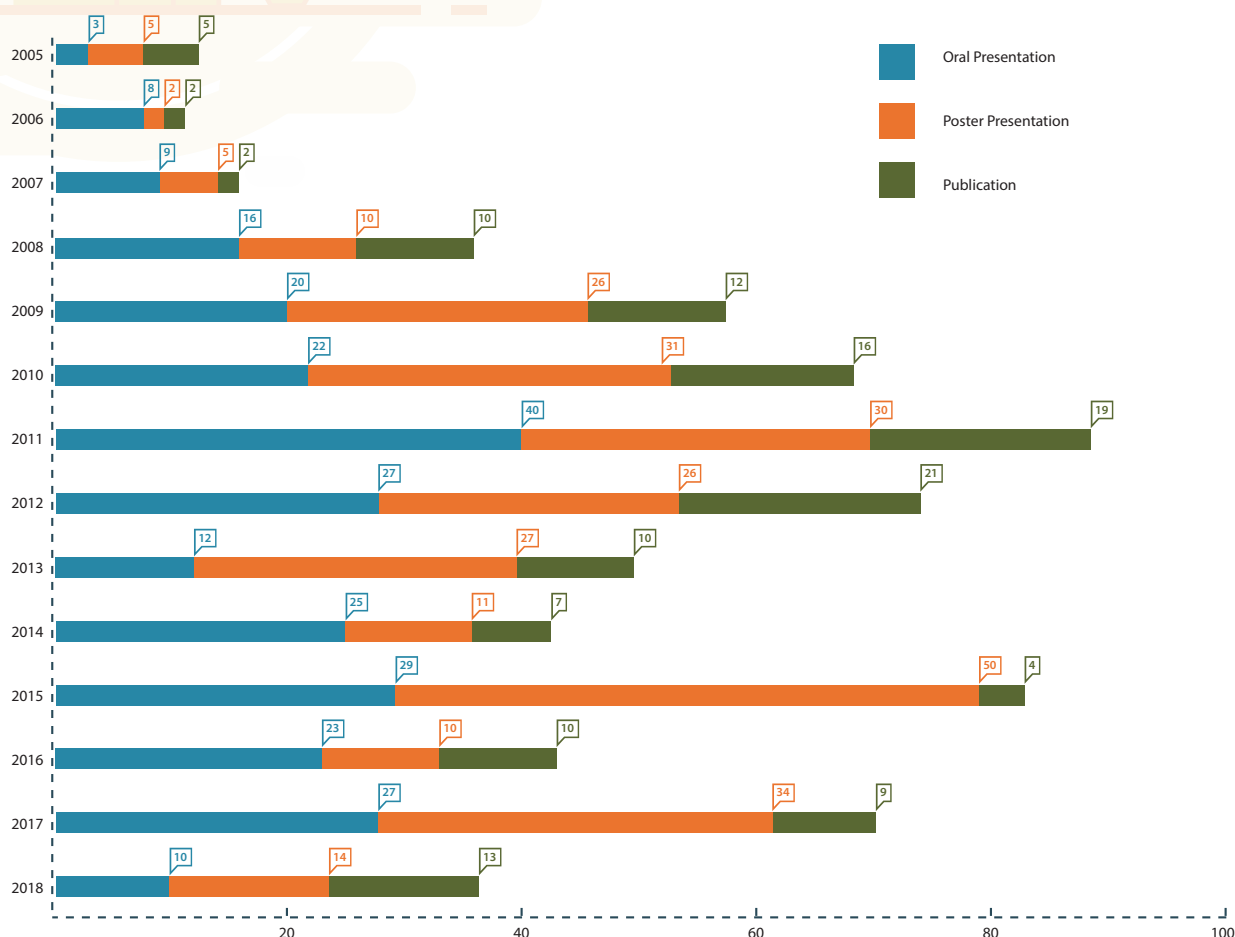


National Institutes of Health
Turning Discovery Into Health



RESEARCH OUTPUT 2018

Research Output 2018



Peer-reviewed Publications

- Aaron S Karat, Noriah Maraba, Mpho Tlali, Salome Charalambous, Violet N Chihota, Gavin J Churchyard, Katherine L Fielding, Hanifa, Suzanne Johnson, Kerrigan M McCarthy, Kathleen Kahn, Daniel Chandramohan, Alison D Grant. Performance of verbal autopsy methods in estimating HIV-associated mortality among adults in South Africa. *BMJ Glob Health* 2018;3:e000833. doi:10.1136/bmjgh-2018-000833
- Machisa M, Shamu S. Mental ill health and factors associated with men's use of intimate partner violence in Zimbabwe. *BMC Public Health*. 2018 Mar 20;18(1):376. doi: 10.1186/s12889-018-5272-5. PMID: 29558887
- Shamu S, Munjanja S, Zarowsky C, Shamu P, Temmerman M, Abrahams N. Intimate partner violence, forced first sex and adverse pregnancy outcomes in a sample of Zimbabwean women accessing maternal and child health care. *BMC Public Health*. 2018 May 3;18(1):595. doi: 10.1186/s12889-018-5464-z. PMID: 29724216
- Visser CA, Wolvaardt JE, Marincowitz GJO, Cameron D. Clinical mentoring to improve quality of care provided at three NIM-ART facilities: A mixed methods study *African Journal of Primary Health Care & Family Medicine*, 2018
- Lovero KL, Lammie SL, van Zyl A, Paul SN, Ngwepe P, Mootz JJ, Carlson C, Sweetland AC, Wainberg ML, Medina-Marino A*. Mixed methods evaluation of mental healthcare integration into tuberculosis and maternal-child care services across four South African districts. *BCM Health Serv. Res.* (Accepted; *Corresponding Author)
- Morikawa E, de Vos L, Mudau M, Olivier D, Davey-Jones D, Klausner JD, Medina-Marino A*. Acceptability and Feasibility of Integrating Point-of-Care Testing of Sexually Transmitted Infections into Antenatal Care Services in South Africa. *Infect Dis Obstet Gynecol*. 2018 May 9;2018:3946862. doi: 10.1155/2018/3946862.
- Rhyne JM, Alexandra Mumbauer A, Rheeder P, Hall MN, Genkinger J, Medina-Marino A*. The South African Rea Phela Health Study: A

randomised controlled trial of communication retention strategies. *PLoS One*. 2018 May 24;13(5):e0196900. doi: 10.1371/journal.pone.0196900.

- Price CM, Peters RPH, Mudau M, Olivier D, De Vos L, Morikawa E, Kock MM, Medina-Marino A, Klausner JD. Prevalence and Detection of *Trichomonas Vaginalis* in Human Immunodeficiency Virus-Infected Pregnant Women. *Sex Transm Dis*. 2018 May; 45(5):332-336. doi: 10.1097/OLQ.0000000000000756. PMID: 29465686
- Davey DJ, Peters RPH, Kojima N, Mudau M, De Vos L, Olivier D, McIntyre JA, Klausner JD, Medina-Marino A. Sexual behaviors of HIV-infected pregnant women and factors associated with sexual transmitted infection in South Africa. *Sex Transm Dis*. 2018 Apr 5. doi: 10.1097/OLQ.0000000000000847. [Epub ahead of print] PMID: 29624560
- Shannon CL, Bristow CC, Hoff N, Wynn A, Nguyen M, Medina-Marino A, Klausner JD. Acceptability of Rapid Chlamydial, Gonococcal, and Trichomonal Screening and Treatment in Pregnant Women in Six Low-to-Middle Income Countries. *Sex Transm Dis*. 2018 Mar 9. doi: 10.1097/OLQ.0000000000000832
- Mudau M, Remco Peters P, De Vos L, Olivier D, Joseph Davey D, Mkhwanazi E, McIntyre JA, Klausner JD, Medina-Marino A*. High prevalence of asymptomatic sexually transmitted infections among Human Immunodeficiency Virus (HIV)-Infected pregnant women in a low-income South African community. *Int J STD AIDS* 2018 Mar;29(4):324-333. doi: 10.1177/0956462417724908
- Ebonwu J, Mumbauer A, Uys M, Wainberg ML, Medina-Marino A*. Determinants of late antenatal care presentation in rural and peri-urban communities in South Africa: a representative, cross-sectional study. *PLoS One*. 2018 Mar 8;13(3):e0191903. doi: 10.1371/journal.pone.0191903. eCollection 2018
- Kweza PF, van Schalkwyk C, Abraham N, Uys M, Claassens MM, Medina-Marino A*. Estimating the magnitude of missed pulmonary tuberculosis patients by primary health facilities, South Africa. *Int J Tuberc Lung Dis* 2018 Mar 1;22(3):264-272. doi: 10.5588/ijtld.17.0491.

Oral Presentations

- AC Peters. Infection control in MDR decentralised sites in South Africa. The 49th Union World Conference on Lung Health, 2018
- E.V Venter and L. Wolvaardt. A Framework for programme development and instructional design of Health Professions Learning Programmes offered through a blended learning approach. South African Association of Health Educationalists Conference, 2018
- G. Wolvaardt, S. Jordaan, F. Slaven, D. De Bruyn, V. Vannevel. Cascade training can work – what we learned from training EMS personnel. South African Association of Health Educationalists Conference, 2018
- Hanlie Kapp, Dorian Smith, Rachael Rawlinson, Marina Rifkin. Strategies for and Implication of Implementing Workplace HIV

Testing Programs to Reach Men. Filling the Gap in Best Practices and Innovations for HIV Programming Meeting, 2018

- M. Mudau, N. Kojima, W.S. Comulada, U.D. Feucht, R.P. Peters, L. De Vos, D. Olivier, J.A. McIntyre, J.D. Klausner, A. Medina-Marino. Clearance of sexually transmitted infections prior to birth is associated with a reduction in adverse birth outcomes in a cohort of HIV-infected women in South Africa. International Union for STIs World and European Congress. Dublin, Ireland (2018)
- L. De Vos, M. Mudau, D. Olivier, JD. Klausner, A. Medina-Marino. The Effect of HIV Diagnosis on STI Treatment Outcomes among Pregnant Women in Pretoria, South Africa. International Union for STIs World and European Congress. Dublin, Ireland (2018)
- Remco P.H. Peters, Liteboho Maduna, Maanda Mudau, James A. McIntyre, Marleen M. Kock, Jeffrey D Klausner, Andrew Medina-Marino. Single-dose Azithromycin may be effective for genital Chlamydia trachomatis Biovar-L infection in South African women. International Union for STIs World and European Congress. Dublin, Ireland (2018)
- Bresenham D, Kipp A, Medina-Marino A. Validation of the EMIC TB Stigma Scales for use with TB patients, TB presumptives, and community members in South Africa. 4th South African TB Conference. Durban, South Africa (2018)
- Bresenham D, Kipp A, Medina-Marino A. Validation of the Van Rie TB Stigma Scales for use with TB patients, TB presumptives, and community members in South Africa 4th South African TB Conference. Durban, South Africa (2018)
- Medina-Marino A. Integrating Mental Health within the Primary Health Care Setting – Research and Practice: The South African Context. Global Mental Health Conference. Pretoria, South Africa (2018)

Poster Presentations

- Peters. Infection control in decentralised MDR TB sites in South Africa, 5th South African TB Conference, 2018
- E. Venter, F. Slaven and L Wolvaardt. Towards a framework for evaluating blended learning health profession programmes. South African Association of Health Educationalists Conference, 2018
- G. Makgoka. Evaluation of TB and HIV Clinical Training for Health Care Professionals and Community Health Workers in Primary Health Care facilities. 5th South African TB Conference, 2018
- Simukai Shamu, Locadiah Mlambo, Thato Farirai, Nkhensani Nkhwashu. Rates of and factors associated with Tuberculosis (TB) knowledge and testing among young men and women in two provinces in South Africa 5th South African TB Conference, 2018
- Bosman, R. Schoeman, F. Slaven, Y. Erasmus, S. Jordaan. Conducting a rapid assessment and gap analysis to reduce HIV infections and to strengthen post-violence care services in South Africa. Community Empowerment of Health, Network: TUFH Annual Meeting, 2018



- Bosman, N. Nkhwashu, J. Slabbert. Using different Community-based HIV Testing modalities in 13 districts in South Africa Community Empowerment of Health, Network: TUFH Annual Meeting, 2018
- Bosman, E. Holland. Exploring the experiences of general practitioners employed on a National Health Insurance pilot project in South Africa Community Empowerment of Health, Network: TUFH Annual Meeting, 2018
- Mayana ZM, Mgulwa MD & Wongama FP. TB Can Be Cured: Impact of health system strengthening, monitoring and evaluation. 5th South African TB Conference, 2018
- Mabela, S. and Kgopong, N. How to tighten monitoring to reduce double counting of newly diagnosed HIV+ clients as a lesson learnt for TB case finding and case holding. 5th South African TB Conference, 2018
- Rasekgotoma MS, Mabela SR, Botha BB, Kgopong NM Use of SVS has improved medicines and supplies availability in Capricorn District. 5th South African TB Conference, 2018
- Maanda Mudau, Jolein Laumen, James McIntyre, Jeffrey Klausner, Andrew Medina-Marino, Remco Peters. The burden of mycoplasma genitalium at first antenatal care visit in a cohort of pregnant women infected with human immunodeficiency virus in South Africa. International Union for Sexually Transmitted Infections, 2018
- A Jansen, E Mkwanazi, C Bezuidenhout, J Bezuidenhout, P Ngwepe, KE Kodi, RM Mawarire, S Shamu, A Medina-Marino, K Murry, H Burke. The impact of implementing Monitoring and Control Systems on data quality and the Triple Bottom Line: Finances, Human Resources and Society. 5th South African TB Conference, 2018
- L. de Vos, D. Olivier, M. Mudau, C. Bezuidenhout, J. Klausner, K. Lovero, M. Wainberg, A. Medina-Marino. Is the PHQ-8 an efficient screening tool for depression among HIV positive pregnant women attending antenatal and postnatal care? 22nd International AIDS Society Conference, 2018
- L. de Vos, D. Olivier, M. Mudau, C. Bezuidenhout, J. Klausner, K. Lovero, A. Medina-Marino. Perinatal HIV Diagnosis and STI Treatment Outcomes among HIV Positive Women in Pretoria, South Africa. 22nd International AIDS Society Conference, 2018

READING SUPPORT PROJECT

(Oct 2016 - Sept 2020)

This four-year project funded by United States Agency for International Development in Southern Africa (USAID/SA) was launched on 1 November 2016 and focuses on improving language literacy skills at foundation phase level in South Africa's Limpopo and North West provinces.

This four-year project funded by the United States Agency for International Development in Southern Africa (USAID/SA) was launched on 1 November 2016 and focuses on improving language literacy skills at foundation phase level in South Africa's Limpopo and North West provinces. This system-strengthening project is being implemented in partnership with a number of leading literacy organisations: the Molteno Language Institute (MOLTENO), the South African Institute for Distance Education (SAIDE), Oxford University Press of South Africa (OXFORD SA) and an international partner, Voluntary Services Overseas (VSO). The ultimate aim of this project is to improve Foundation Phase learners' reading skills in African Home Languages (AHLs) as well as in English as a First Additional Language (EFAL). The first phase of implementation entailed a pilot study in North West's Ruth Mompati District. This pilot was concluded in June 2018 and the handover to the district was on 16 August 2018.

Concurrent with the implementation of the pilot, ongoing collaboration efforts were undertaken with the Department of Basic Education with a view to finding better alignment with their strategic goals particularly in the two districts that were earmarked for scaling up. Since DBE was also involved in a study aimed at improving reading (Early Grade Reading Study - EGRS), the synergy between the two projects became obvious and this led to the revision of the RSP to take to scale the benefits of coaching as demonstrated in the EGRS.

The Revised RSP is designed around the following focus areas:

1. The professional development of curriculum advisors
2. The development of the leadership capacity of principals/deputies and HODs to promote a culture of reading in their schools
3. Quarterly 'just in time' training for teachers on the implementations of Curriculum and Assessment Policy Statement (CAPS) and lesson plans
4. The provision of coaches to 165 schools to offer classroom-based support to teachers
5. The provision of Learning and teaching Support Materials (LTSM) packages to schools

Activities in 2018 focused on:

- Ongoing consultations with DBE and the funders - USAID regarding the nature and extent of the collaboration between EGRS and the RSP.
- Redesigning the RSP to incorporate the coaching component and other EGRS related activities
- Securing approval for the revised RSP from both the funder and DBE
- Engaging in key preparatory activities to implement the new design in the two EGRS districts (Ngaka Modiri Molema and Dr Kenneth Kaunda)

- Recruitment and appointment of staff to implement the new RSP design

The role of FPD in the revised design has become more prominent through the creation of a strengthened provincial office and the appointment of coaches. It is envisaged that the provincial office will be the hub of RSP activities to better support the coaches and their schools. The roles of consortium partners have also been revised to achieve greater synergy and coherence in the project.

The leadership and management development component of the project has been revised and merged with the programme that was designed for HOD's in the pilot phase. This was done to achieve greater synergy in the promotion of a reading culture at school level. One of the lessons learnt from the pilot was that overall, curriculum delivery at school level was hindered because the principal/deputy did not involve the HOD optimally. Merging the two programmes will afford both the principals and the HODs the opportunity for working closely together to improve the reading levels of their learners. It is further envisaged that participation in the PLCs will go a long way in enhancing planning at school level. Sharing of best practice during PLCs will invariably encourage other participants to improve for their operations in their respective schools.

The provision of a comprehensive Learner Teacher Support Material (LTSM) package is the responsibility of the South African Institute for Distance Education (SAIDE) which has worked on preparing the ground for the acquisition of Learning and Teaching Support Material (LTSM) for all the foundation phase classes in the pilot district. They have worked closely with Molteno to audit available LTSM in schools to ensure that they print the right quantities and avoid duplication. SAIDE, together with Molteno and Oxford will provide the necessary LTSM to support the EFAL and Setswana lesson plans that will be progressively developed and implemented by the coaches during the 'just in time' training sessions.

Voluntary Service Overseas (VSO) contributes to this project through the recruitment and placement of volunteers to manage Professional Learning Communities (PLCs) for the SMT programme. The role of the volunteers has been revised to better utilise their skills in this project. Among others, they will be expected to provide training on IT to SMT participants; ensure that all participants are registered online on the FPD platform as well as provide ongoing support to principals and HODs that are registered on the programme.

In addition to developing lesson plans, Molteno and Oxford will provide initial training to coaches, provide for their ongoing professional development and also develop and implement the

training programme for curriculum advisors. Curriculum advisors will have a dual responsibility in this project: firstly, as participants to develop their professional skills through participation in the PLCs and secondly as reference group members to quality assure the development of lesson plans.

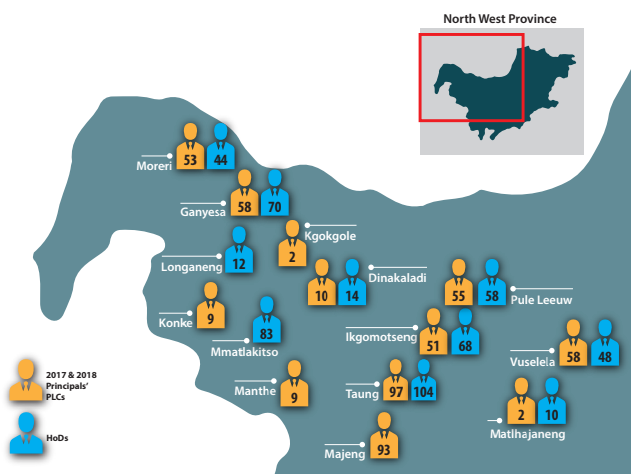
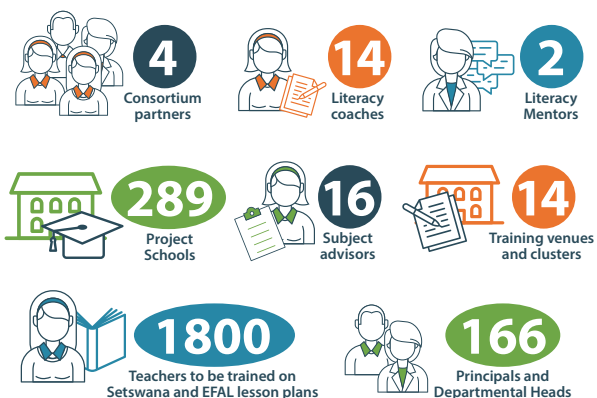
Project statistics at a glance:

- Four consortium partners
- 14 Literacy coaches and two Literacy Mentors

- 289 Project Schools
- 16 Subject Advisors
- 14 Training venues and clusters
- 1800 Teachers to be trained on Setswana and EFAL lesson plans
- 166 Principals and Departmental Heads

Planning from 2018 onwards will incorporate the lessons learnt from the pilot, collaboration arrangement with current interventions in targeted districts and some modifications to the project plan.

Project Statistics at a Glance



Project Sponsors



Project Partners



GP CARE CELL PROJECT

(Initiated 2015 - Ongoing)

The GP Care Cell (GPCC) is an innovative idea first conceptualised under the National HIV Think Tank in 2015 and then piloted in Tshwane District in 2018.

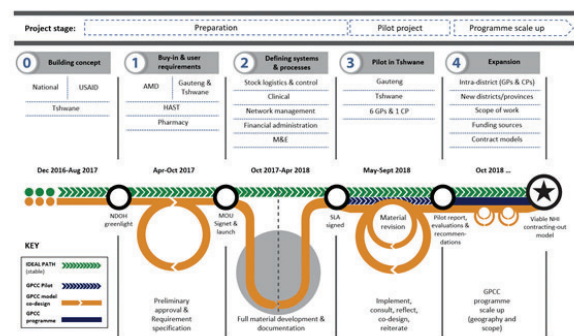
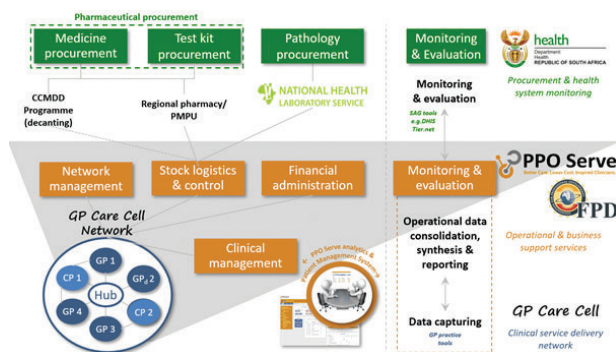
The GP Care Cell (GPCC) is an innovative idea first conceptualised under the National HIV Think Tank in 2015 and then piloted in Tshwane District in 2018. The GP Care Cell aims to expand access to antiretroviral treatment (ART) for uninsured People Living with HIV (PLHIV) by leveraging the capacity of private general practitioners (GPs) to create high quality HIV Testing Services (HTS) and ART capacity outside of public sector health facilities in a controlled manner. The GP Care Cell is a product of collaboration and co-design between National Department of Health (DoH), Gauteng Provincial DoH, FPD and PPO Serve and is co-funded by DoH and PEPFAR through USAID.

Under the GPCC model FPD and PPO Serve contract, manage and quality assure general practitioners (GPs) within their private practices to provide HTS and to initiate and manage ART patients. The GPCC model organises contracted GPs — with and without dispensing licences — and community pharmacies (CPs) into networks, i.e. care cells. The model creates the structure and processes to deliver the clinical service offering, provides robust clinical governance and quality assurance and facilitates seamless District Health System (DHS) integration through integration and reporting. In terms of the supply chain management of medicines, the model makes provision for the compliance with Auditor General (AG) and Public Finance Management Act (PFMA) and government stock control requirements.

The GPCC operating model has five major components comprising: clinical management; network management; stock logistics and control; financial administration; and monitoring and evaluation (M&E). Each component has defined processes, people, technology and governance that underpin operational implementation. Under the model, government provides access to state-funded medicines, HIV test kits and related sundries, laboratory services and laboratory commodities. Donor funding is used to fund all components under the operating model for the overall project including network management and quality assurance activities at the GP practice level, stock warehousing, distribution and related activities. The donor funding also covers the HTS, the clinical services on a capitation basis and dispensing fees for the contracted service providers.

The goal of the GPCC pilot project was to test the model and its capacity to create high quality HTS and ART initiation, management and retention capacity outside of public sector health facilities in a controlled manner. The project was piloted in 2018 with the following objectives: (1) test and co-design the GPCC processes, systems, tools, and controls in line with government requirements; (2) develop a mechanism by which data relating to the HIV management of patients within the private sector could be shared with public sector data systems (tier, DHIS and Visual Analytics Network (VAN)); and (3) gather data to assess the model's appropriateness and natural demand, as well as to inform its viability for replication and scale. The long-term goal of the GPCC model is to organise and support networks of private GPs to play a substantive role in the national HIV and TB response and enable the district health system to more rapidly find, retain and virologically suppress HIV positive patients who otherwise cannot be reached and/or maintain treatment compliance through standard public sector PHC delivery models.

The pilot ran for four and half months (May-September 2018) in Tshwane District, Gauteng Province, and included six (6) GP's and one (1) Community Pharmacy (CP). Although the GPCC pilot focussed primarily on testing and co-designing processes, systems and tools, the GPCC pilot project demonstrated significant natural demand for the GPCC by PLHIV. During the pilot at six sites the model tested 1,076 clients for HIV, diagnosed 269 patients positive (of which 267 were eligible for the model based on age) and initiated 244 patients on ART. The pilot results showed high initiation rates (91%) despite moderate same day initiation rates (58%), as well as good patient retention (97% Total Remaining on ART). In terms of population profile, the pilot results showed high uptake by men (45%), youth aged <35 years (42%) and asymptomatic PLHIV (median CD4 at baseline was 346 (mm³) with an interquartile range of 164-550; <1% Crag test positive). The pilot results align with the target audience and highlight the value of leveraging private sector service delivery models to reach HIV positive populations who experience higher access related-barriers at public sector primary health care (PHC) clinics.



The GPC pilot project succeeded in proof of concept and enabled significant co-design of GPC components, achieved the desired level of State systems integration and proved ability to manage State-funded stock effectively in the private sector.

The pilot resulted in GDoH endorsement for continuation and expansion of the GP Care Cell pilot project as a programme within the Province. The GPC pilot demonstrated that State bodies have

appetite for and are beginning a learning process in how to 'purchase' services from the private sector. The pilot confirmed patient demand and private sector (GP and community pharmacy) appetite for the model and providing subsidised clinical services to uninsured patients. When properly organised and overseen, private GPs can play a vital role in the national HIV and TB response, the future National Health Insurance and in support of universal health coverage. The program is now expanding in Tshwane and Ekurhuleni Health Districts.

GP Care Cell programme statistics:



Pilot included
6 GPs and
1 Community Pharmacy



1 076
clients were tested
for HIV (at 6 sites)



269
patients positive
(267 eligible for model
based on age)



244
patients initiated
on ART



High initiation
rates
91%



Good patient
retention:
97%
total remaining
on ART

Project Sponsors



health
Department:
Health
REPUBLIC OF SOUTH AFRICA

Project Partners



GAUTENG PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA



NATIONAL HIV THINK TANK SECRETARIAT

(Feb 2017 - Feb 2020)

The objective of this programme is to improve service provision and community awareness of services for survivors of sexual assault in South Africa, which struggles with one of the highest rates of gender-based violence in the world.

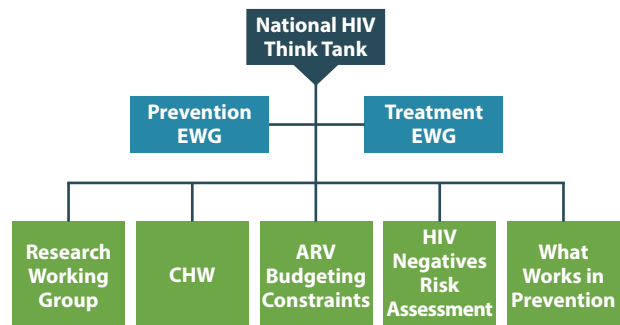
National HIV Think Tank Secretariat

Strong political commitment to achieving TB and HIV targets and supportive national policies are demonstrating results in the national HIV and TB response. However, epidemiological models and investment case analyses show that South Africa (SA) is not on track to achieve the 90:90:90 targets by 2020, and that more rapid scale-up of high quality, evidence-based prevention, care and treatment programmes are needed in order to avert new infections, secure long-term cost benefit from medium-term scale-up, and achieve and sustained epidemic control. Over the past two years, the National HIV Think Tank (NHIV TT) has become a popular and credible platform where multisectoral stakeholders willingly and enthusiastically participate to present their work, brainstorm new ideas and approaches, test innovative models and shape policy discussion in support of National Department of Health's improved performance against its 2020 goal.

The investment by the Bill & Melinda Gates Foundation (BMGF) has been used to fund the establishment and management of a Secretariat for the South African National HIV Think Tank (NHIV TT) for a three-year period and is in year two of the implementation. The NHIV TT provides a central place for all stakeholders (government, academia, NGOs, private sector, donors, community and implementers), under the chairmanship of the NDoH to review epidemiological, routine monitoring and economic evidence related to the HIV epidemic, identify priority gaps, and establish consensus on appropriate next steps, including research projects and pilots of new programmes and policies. The establishment of the NHIV TT has also increased political buy-in and engagement where NDoH senior managers appreciate the inputs of TT members and are comfortable in tabling various matters for resolution. Furthermore, the NHIV TT has established an environment where donors are comfortable in engaging and sharing the access to donor funds and has created a platform to strengthen more strategic engagement with the private sector in support of the national AIDS response.

The NHIV TT meetings take place quarterly and the private sector membership was extended in Q3. NHIV TT is supported by two Expert Working Groups (Prevention and Treatment), a Research Working Group and four thematic groups. The tasks from the NHIV TT and NDoH are cascaded down to the EWG for further synthesis, then appropriate Thematic Groups are formed to explore and conclude the task. The Research Working Group was convened by the NHIV TT to think proactively about what evidence needs to be created and what pilot projects need to be implemented to respond to questions likely to arise three to five years in the future. The Expert Working Groups (EWGs) and Thematic Groups meet on a bimonthly basis or as per need. The NHIV TT structures are detailed in the following figure.

The discussions that have come out of these groups have been valuable and various tasks are underway, including a compendium



of good practices for Community Health Workers (CHW)s and piloting the HIV negative risk assessment tool, but to name a few. A great collaborative relationship has been maintained with the TB Think Tank and various activities have been achieved such as cross membership and co-hosting the HIV/TB Integration Colloquium.



The NHIV TT is also working on translating the work and recommendations of the EWGs and thematic groups into policy briefs. Planned policy briefs include: (1) looking at the inclusion of palliative care in the CHW scope of work; (2) inclusion of the HIV Negatives Risk Assessment tool in the national HTS protocol; (3) recommended criteria for consideration for contracting private sector service providers for HIV and TB service delivery and (4) lessons learnt from behavioral economics pushes that show an increase in MMC service uptake and their application to other HIV/TB programmes.

The NHIVTT launched its first Private Sector Colloquium in May 2018, with great success and diverse attendance. Private sector delegates from Associations, Medical Aid Schemes, Private practitioners, Employee wellness programmes providers, pharmaceutical and diagnostic companies participated and have committed to the colloquium being an annual event. The NHIV TT Secretariat has invited private sector representatives to participate on the various NHIV TT structures to maintain continuous engagement with the private sector.



At the SA TB Conference in June 2018 the HIV and TB TTs planned a combined satellite session to discuss how best private and public sector can collaborate on integrating HIV and TB service delivery. A follow up HIV/TB Colloquium was hosted in August 2018 through a partnership with the TB TT. An engagement framework reflecting on commitments and elements was highlighted through all three colloquia.



75% of the funding that the NHIV TT receive is reserved to undertake research and/or fund and evaluate innovative pilot projects to test ideas and inform South African Government (SAG) policy in support of the UNAIDS's 90-90-90 goal. The NHIV TT currently funds various pilot projects. During Q3, the NHIV TT launched its first Innovation Challenge to source "wild Ideas" from non-conventional stakeholders. The Challenge received 18 applications and following a rigorous review process by the panel, four concepts were selected for contracting starting in Q4. These pilot projects will work in support of NDoH priorities and include projects to: (1) scale community PrEP targeting adolescent girls and young women, (2) optimise HTS counsellor training and resources, (3) expand the role of the private sector in viral load monitoring, and (4) increase access to HIV screening and identification of previously unknown PLHIV through partnering with traditional healers. These pilot projects can be summarised as follows:



The Community PrEP Study

The project will use a mixed methods approach to address the following study objectives:

- 1) assess young women's uptake of PrEP in CBCT programmes,
- 2) evaluate community-based scalable interventions to achieve prevention-effective adherence to PrEP among young women,
- 3) measure differences in risk profiles of PrEP acceptors, non-acceptors and delayed initiators, and
- 4) develop community advisory boards (CABs) to inform and optimise community-based delivery platforms for HIV prevention services.

PrEP will be offered to young women (age 16 – 24) who test negative for HIV during HIV counselling and testing in a community-based counselling and testing programme. A 1:1:1 randomised controlled trial design will be employed to evaluate the effectiveness of three types of community-based interventions aimed at adherence support. These interventions will include 1) Group-based counselling in community health clubs, 2) Individual one-on-one counselling, and a control intervention

3) Community-based dispensary of PrEP refills. Young women will be followed up for a maximum of 24 months and will be periodically tested for HIV, STI and TFV-DP blood levels to assess adherence.

The goal of the project is to leverage existing community-based HIV counselling and testing platforms to enrol a total of 480 Adolescent Girls and Young Women (AGYW) and to evaluate a community-based PrEP adherence program for young women whilst optimising the PrEP cascade. Using community-based counselling and testing programs, this proposal will deliver PrEP as part of a population-level combination prevention program, which is necessary to substantially reduce HIV incidence.



Enabling innovation in counselling delivery by creating and disseminating an HIV counselling syllabus for digital and mobile-first interventions.

Counselling and testing remain key components of HIV/AIDS management as they provide an entry point into prevention, care, treatment and support services. The current HIV counselling model in South Africa is however outdated and reliant on counsellors who often have varying levels of education thereby making the counselling non-standardised and sometimes low quality. To address the issue of out-dated counselling modules and low human capacity for counselling, we are proposing an open-sourced, digitised HIV counselling syllabus produced specifically with patients in mind and contextualised for various populations / scenarios. This content would be used throughout HIV Testing Services, from pre-test through to ARV initiation and will also include modules on prevention. Using a human-centred approach, we will focus on creating content that can be easily consumed via mobile phone and housed on various multimedia platforms.

Engaging with the NDoH and stakeholders, we ensure that this content becomes available to multiple providers in order to make it easier for them to design, implement and deliver counselling services that use digital tools to improve the standardisation and quality of the intervention.

We will look to achieve the following goals:

- Create a comprehensive HIV counselling syllabus which can be contextualised to different field settings by HTS providers and that includes the inputs of multiple stakeholders (users, NDoH, Technical experts); and
- Develop a strategy for the implementation and dissemination of the open-source content to ensure uptake across multiple channels.

Success will be having created engaging and informative content and having partners using the content in their programs. To ensure that HIV education guidelines are adhered to and that the intervention is appropriately scaled, we will involve the NDOH in the design and roll-out of the intervention.



Improved HIV linkage to care proposal utilising new novel sample collection devices and improved HIV VL monitoring using smartphone app with focus on lost positive males.

The project propose an alternative model of access to monitoring and treatment by using a novel sample collecting device, the Plasma Separation Card (PSC), in combination with the use of cell phone result application, including utilisation of urban clinics in consumer health shops like Dischem, Clicks, PnP, Shoprite etc.

The stakeholders and their contributions in this project will be the following:

Roche:

- 1) Supplying the novel Plasma Separation Card technology
- 2) Supplying the novel iThemba Patient Result Application in collaboration with their partners iLead and DOH
- 3) Supplier of the HIV Viral Load monitoring kits through NHLS
- 4) Facilitate and manage the usage of the iThemba Application
- 5) Create hotspots at the service point to ensure seamless registration and usability of app
- 6) Training staff at the facilities to perform the collection of the PSC cards
- 7) Provide a facility/site to host monthly check-in sessions for service providers to address challenges and maintain focus

NDoh/NHLS:

- 1) Funding the testing at NHLS through the HIV monitoring program
- 2) Establish the model of fee for service to pay for usage of clinics for purposes of collecting PSC samples
- 3) Monitor the usage of clinics and stats to indicate the impact according to set KPIs
- 4) Establishment of guidance document/framework for use of novel technology to integrate into current standard of care

Suppliers of clinic facilities:

- 1) Suppliers of the clinic facilities to public, taking PSC samples and counselling patients for adherence to testing and monitoring
- 2) Possibly extend office hours to have services available at convenient times for day workers.

Project Sponsor

BILL & MELINDA
GATES foundation

Project Partner



- 3) Patient Awareness campaigns to drive usage in collaboration with Roche and DoH
- 4) Maintain records of patient enrolment and enrol to monthly feedback sessions at Roche, (this can be done on the Tier.net service if the Clinic is allowed access)



Partnering with traditional healers and community health workers to increase HIV screening and identification of previously unknown PLHIV in areas with low access to healthcare resources.

The project aims to utilise established and trusted community-based healthcare providers, specifically community health workers (CHW) and traditional healthcare practitioners (THP), in high HIV burden wards within the Amahlathi sub-district in Amathole to 1) increase HIV case-finding through primary and secondary distribution of HIVSS and assisted HIV self-screening, and to 2) actively link screen-positive individuals to facilities for confirmatory testing and ART initiation. Undiagnosed, high risk and test-averse PLHIV, specifically adolescent girls and young women (AGYW) and high-risk men will be targeted.

The *specific objectives* are to, by project completion, to:

- 1) Upskill 20 traditional healthcare practitioners (THP) in high burden wards in Amahlathi sub-district around HIV, STI and TB prevention, screening, diagnosis and management, and the provision of HIV self-screening;
- 2) Support upskilled THP to distribute 3000 HIVSS tests in Amahlathi sub-district;
- 3) Document HIVSS test outcomes for 76%* of kits distributed within 48 hours of kit distribution;
- 4) Successfully link 95% of identified HIVSS positive individuals to confirmatory facility- or community-based testing and ART initiation within 14 days of kit distribution;
- 5) Referral to comprehensive HIV prevention services for 100% of identified HIVSS negative individuals; and
- 6) Assess the feasibility and applicability of providing community based HIVSS using THP to increase HIV case finding

NHI PILOT PROJECT

(Oct 2014 - March 2018)

The National Health Insurance (NHI) White Paper, launched in 2015, aims for all South Africans to have access to a defined comprehensive package of healthcare services.¹

Introduction

One of the major objectives of NHI is to strengthen the under-resourced and strained public sector to improve health systems performance.² The NHI GP Contracting Pilot project supports the National Department of Health (NDoH) to ensure that every Primary Healthcare (PHC) clinic has a doctor on site on either a full time or part time basis. The project focuses on a model in which PEPFAR District Support Partners (DSPs), who currently work in eight NHI pilot districts, collaborate as a consortium to provide the required services to the NDoH. The consortium comprises the FPD who acts as the lead agency, Broad Reach, Aurum, Right to Care, the Wits Reproductive Health & HIV institute (WRHI) and African Health Placements (AHP), the latter responsible for recruitment. The pilot programme, launched in October 2014 came to an end in March 2018.

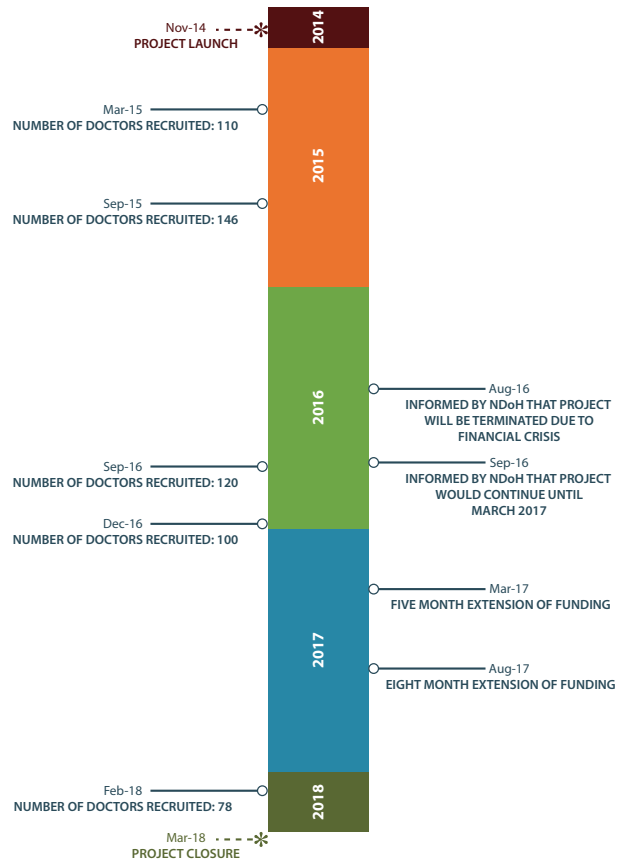
NHI District	Province	PEPFAR District Support Partner
Dr Kenneth Kaunda	North West Province	WHRI
Gert Sibande	Mpumalanga	BroadReach
OR Tambo	Eastern Cape	Aurum
Thabo Mofutsanyana	Free State	Right to Care
Tshwane	Gauteng	FPD
UMgungundlovu	KwaZulu-Natal	Aurum
UMzinyathi	KwaZulu-Natal	Aurum
Vhembe	Limpopo	FPD

The doctors' role within the clinics included quality control, checking laboratory results, conducting patient consultations, clinical governance and mentoring and training.

Project timeline

The total number of doctors recruited during the Project fluctuated, rising rapidly to 110 in March 2015 from the launch of the programme in November 2014, peaking at 146 in September 2015. In August 2016 FPD management were informed by the NDoH that the project was to be terminated due to a financial crisis. The GPs whose contracts were due to expire at the end of September were formally retrenched and those with open contracts were informed that their contracts would be reviewed on a month-to-month basis, up to the end of 2016. This ushered in flood of highly emotive communications between involved parties. Those doctors who were retrenched were given a month to find alternative employment, which caused them great consternation.

The FPD management went to great lengths to arrange alternative placements within the structures of the consortium partners, with partial success. Shortly after the retrenchment of just over 20 doctors in August 2016, it was announced that there was a misinterpretation of the NDoH directives and the decision was reversed. Doctors were ensured of their employment to the end of March 2017. It was made clear that the engagement of health professionals to serve in the districts remained an integral part of the plans for the health services in the country and they will continue their services in the districts under the new tender. Those doctors who were retrenched were invited to return and the contracts of those who accepted this offer were reinstated. Following the uncertainty described above, the numbers decreased gradually to a plateau just above 120 up to September 2016, after which there was a rapid drop to the level just above 100 by December 2016. By February 2018 there were 78 doctors participating in the project.



¹ Still L. Health Care in South Africa 2017/2018. Profile Media, Johannesburg

² Matsoso M, Fryatt R. National Health Insurance: The first 16 months. South African Medical Journal 2013; 103(3):156-158. DOI:10.7196/SAMJ.6601

Project evaluation

To determine the extent to which the objectives of the Project were achieved, an evaluation was conducted between April and August 2018. Further objectives of the evaluation were to understand the experiences of the GPs who were delivering services under the project, assess patients' satisfaction with the services provided by the GPs, and to provide recommendations to NDoH around contracting health professionals.

GP performance

GP performance data was collected by FPD over a period of six months from July to December 2016. The results of the analysis show:

- Doctors saw an average of 12.3 patients per day.
- 3 884 emergencies were managed across all institutions, with an average of 23.71 per institution over the 6-month period.
- A total number of 9 596 patients were referred to hospitals from the PHC facilities across all districts in the six months under review, with an average of 44.61 referrals per PHC institution.
- 159 844 patients across all districts were referred to the Central Chronic Medicine Dispensing and Distribution (CCMDD) programme over the 6-month period of the review. This programme has proved to be effective in decreasing the numbers of patients with stable chronic conditions visiting institutions just to receive a repeat supply of their medicines. This is not only more convenient and less costly for the patient, but it also decreases congestion at PHC institutions.
- The number of male medical circumcisions conducted was relatively low at 219 procedures for the 6-month period.
- As part of their quality control function, the doctors conducted an average of 7.6 file audits per day.
- 7 437 mentoring and in-service training events took place in this time period, an average of 35.17 per PHC facility.
- 273 Quality of Care Projects were conducted by the doctors with the intention to improve the quality of services rendered at the PHC facilities.



Doctors saw an average of **12.3** patients per day



9 596 patients were referred to hospitals from the PHC facilities across all districts in the six months



159 844 patients across all districts referred to CCMDD programme

GP feedback

- 39% of the doctors reported that they experienced persistent drug stock-outs during their placements, the most common being ARVs.
- 22% of the doctors indicated that they received a response when they reported a structural problem at their facility, 24% indicated that they received no response.
- 45.6% of the respondents reported that they experienced frequent or persistent problems with staff that impeded the functioning of the clinic. Examples of problems included shortages of essential staff, high nurse turn-over rates, unfilled vacancies, and a lack of leadership, among others.
- Almost 60% of the respondents reported that regularly checking laboratory results improved the management of patients and that conducting regular file audits resulted in identifying important issues to follow-up.
- The doctors were asked to provide five challenges that they had experienced in delivering services to patients. The most common challenges reported include: the amount of time it takes to receive blood test results; ambulance delays; lack of internet connectivity; lack of resources and equipment and security concerns.
- The doctors reported that providing nurses with in-service training and mentorship increased nurses confidence in their skills and ability.

Patient satisfaction

- The majority of patients (64%) reported waiting less than two hours at the clinic.
- 88.8% of the respondents indicated that the nursing staff treated them with respect.
- 82.4% of respondents reported that the doctor listened to all of their health concerns, 93.5% reported that the doctor examined them properly, 78.5% of respondents reported that the doctor explained their health status to them, and 87.5% reported that the doctor explained how they would be treated, in a way that they understood.
- In response to the question "do you feel that the doctor provides a valuable service to the community", the majority (89.8%) of respondents indicated that they do.
- 78.16% of the respondents rated the quality of services they received as 'very good' or 'good'.



Facility Manager Interviews

The results of the interviews showed that overall, the Facility Managers felt that GPs made a positive contribution to the facilities they were placed in. According to the Facility Managers, GPs improved care for chronic patients, supported nursing staff and decreased their workload, decreased patient waiting times and decreased the number of referrals made to hospitals. There were some challenges experienced by the Facility Managers which included the language barrier between doctors and nurses, as well as doctors and patients.

Conclusion and recommendations

The results of the evaluation show that the presence of GPs in PHCs has a positive effect on the services delivered to patients and the quality of care provided. The findings of the evaluation resulted in recommendations being made to the NDoH on optimising the engagement of health professionals in future. The recommendations include the utilisation of a specialised recruitment agency, clarifying the role of the GP and the facility manager, ensuring sufficient resource provision, the implementation of a booking system and whistle blowing line, and the importance of planning for impact assessments.

Project Funder

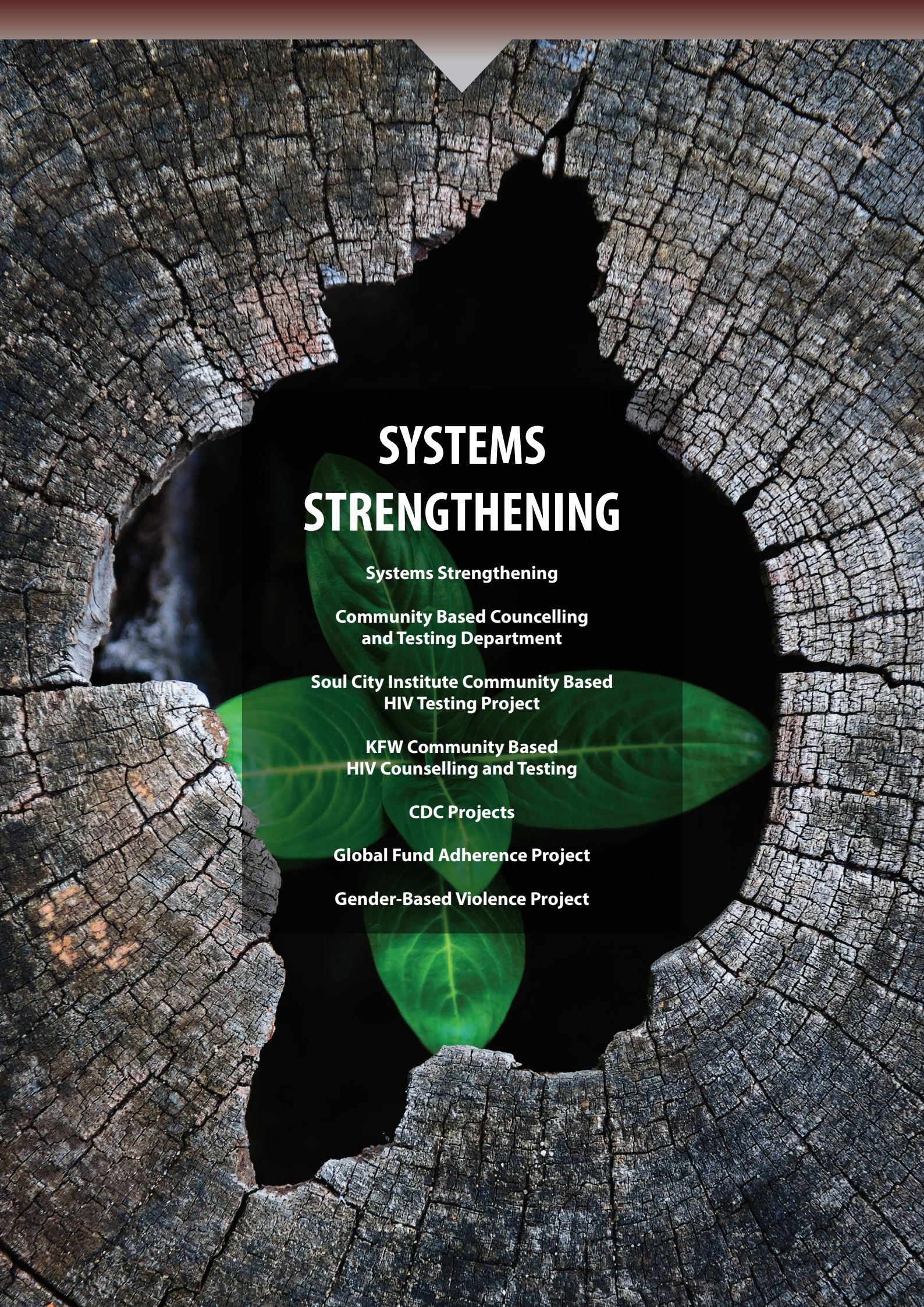


health

Department:
Health
REPUBLIC OF SOUTH AFRICA

Project Partners





SYSTEMS STRENGTHENING

Systems Strengthening

**Community Based Counselling
and Testing Department**

**Soul City Institute Community Based
HIV Testing Project**

**KFW Community Based
HIV Counselling and Testing**

CDC Projects

Global Fund Adherence Project

Gender-Based Violence Project

SYSTEMS STRENGTHENING

The District Health System is the fundamental unit for South Africa's health system since 1995 and is the main mechanism for delivering a comprehensive package of primary health care services.

Systems Strengthening for Better HIV/TB Patient Outcomes

FPD, as one of the major PEPFAR grant-beneficiaries over the last ten years, received the Systems Strengthening for Better HIV/TB Patient Outcomes grant, for comprehensive support in four districts, i.e. Tshwane, Nkangala, Vhembe and Capricorn, for the period October 2012 - September 2017. Vhembe was excluded from further support after September 2015 as it was not classified as a high HIV burden district in the country (27 districts were prioritised for support). The grant was modified and extended to cover the period October 2017 - September 2018 and one additional district, Buffalo City Metro, was added to the FPD supported districts in July 2017.

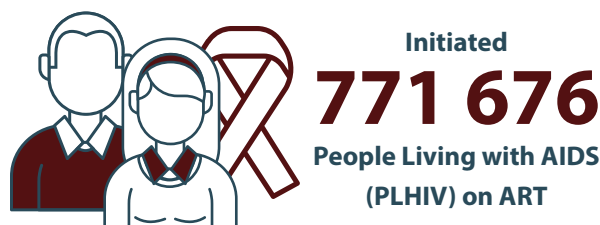
The main purpose of the project was to ensure better HIV/TB Patient Outcomes through system strengthening and all proposed activities are designed to support a health systems strengthening (HSS) strategy and approach aimed at developing capacity of SAG managers and health care providers. Activities were designed to achieve three primary objectives namely:

- To improve HIV-related patient outcomes by strengthening health and patient management systems at facility, sub-district, and district level where proposed activities include providing TA in support of i) reengineering of PHC projects such as a) NIMART, b) CHW project and c) District based specialist ii) Improving adult and paediatric HIV care activities through activities focusing on: integrated HIV and TB, elimination of MTCT transmission, early identification of HIV and TB cases, early initiation of treatment, promoting paediatric treatment in PHC settings, provision of PEP, promotion of PICT, improved infection control, quality improvement programmes, provision of mental health services for PLWHAs, early detection of cryptococcal meningitis, screening for cervix carcinoma and improving detection of gender-based violence, implementation of tracking and tracing systems linked to the ward based CHW programme. iii) improving prevention by ensuring the availability of a full range of prevention services including MCC and treatment as prevention, iv) ensuring adequate infrastructure and equipment by supporting effective budgeting and planning between the Health and Public Works Department based on an annual survey by facility managers to determine maintenance and equipment needs for budget and planning purposes.
- Build capacity of facility, sub-district, and district management systems in coordination with provinces to strengthen health systems in support of HIV services through: i) building managerial abilities in all required competencies in support of HIV and related services (viz. budgeting, strategic and operational planning, human resource management and financial management etc) through TA, mentoring and offering management courses on all management competencies based on a skills audit conducted in partnership with the DMTs. ii) improving strategic information quality by supporting

the implementation of the SAG three-tiered ART M&E strategy as well as strengthening of the DHIS, through onsite mentorship and data management systems strengthening at all levels. Activities will also include developing and entrenching systems to ensure that the use of strategic information is part of SAG management practice iii) improving quality of care through supporting districts to implement National Core Standards (NCS)

- Provide support for development and successful implementation of SAG policies, guidelines, and standards for HIV-related interventions through: Supporting implementation of NSP and NDOH policies by participating in consultative forums, providing expert technical advisors and through training programmes and supporting national strategic information activities such as the HIV Hotline for healthcare professionals (in partnership with University of Cape Town) and the National AIDS Service Directories.

The main achievements reached through this grant can be demonstrated as follows:



District Health Management Conferences

Annually, FPD invited the senior district managers for an FPD District Health Management Conference. FPD hosted this conference as a key part of a leadership strengthening strategy with the aim of building district health managers' capacity to plan for systems strengthening for better HIV and TB patient outcomes. This conference brought together the PEPFAR/USAID funded FPD supported District management teams that included Department of Health District Executive Managers, Planners, HIV/AIDS and TB managers, Pharmacists and Hospital Managers to share health system strengthening

best practices and develop strategies to address leadership and management gaps and opportunities to improve district health outcomes. The conference programme consisted of plenary/keynote lectures, facilitated by various speakers, and delegates had working sessions to discuss challenges, develop innovative solutions around District Health Plans (DHP) and surge Facility Implementation Plans (FIP). In the last district conference, with the slogan 'Surge for Success', all avenues to augment targeted ART initiations for improved performance indicators were explored.



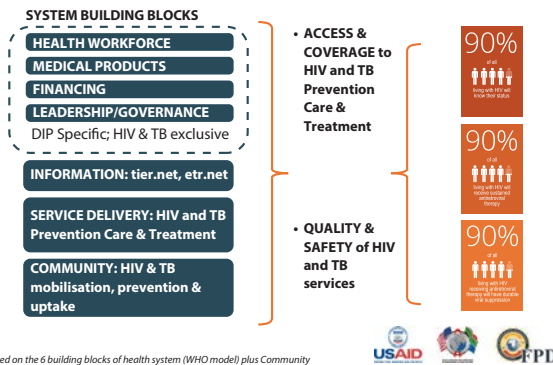
Change in Strategy:

In 2015, following the IAS conference in Australia, the NDoH and PEPFAR strategy changed to 90-90-90 linked to the District Implementation Plan. The WHO Building Blocks as inception strategy was adapted to incorporate the 90-90-90 strategy.

Project Sponsors

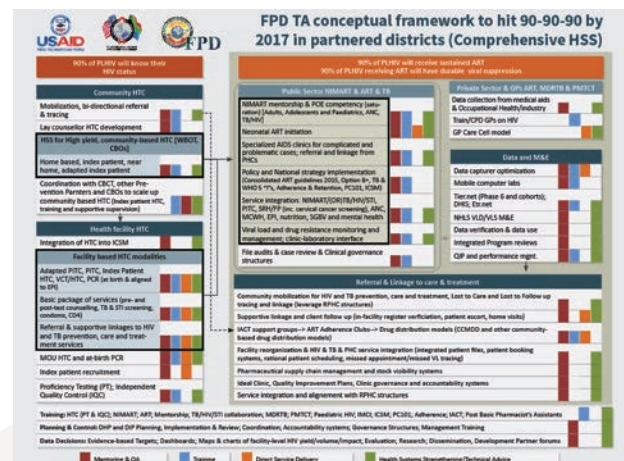


WHO's model for health system strengthening through the 90-90-90 lenses



Based on the 6 building blocks of health system (WHO model) plus Community

An implementation activity framework was developed to embrace all activities within this framework. Considerable attention was given to link other FPD funded programmes (e.g. CBCT) to the HSS programme with bidirectional referrals, index patient recruitment and trailing, proficiency testing, the focus on NIMART training and competency, implementation of option B+ for pregnant women and service integration through the Ideal Clinic realisation, training in and data verification for TIER.net and DHIS data consolidation, quality improvement, viral load monitoring and advanced clinical care support, collectively to ensure continuity of care and retention of patients from initial diagnosis to care maintenance, evolution in and graduation to enrolment in the CCMDD chronic care and Adherence Club programme for stable and non-complicated patients.





UNICEF

During 2016, FPD continued to work on a tender to assist UNICEF with providing support to provinces, districts, and facilities to close gaps in the Prevention of Mother-to-Child Transmission of HIV (PMTCT) continuum of care to contribute to the Last Mile Reach for Elimination of Mother-to-Child Transmission of HIV (EMTCT). The tender, allocated in April 2015, ended in March 2016 but was extended until December 2017. Through this work, FPD supported the Technical Working Group (TWG) meeting, supported the PMTCT symposium at the SA AIDS conference in Durban in June, submitted monthly data for action reports, provided monitoring and evaluation support, and facilitated yearly stock-take workshops in each of the provinces, with a focus on those with the highest PMTCT rate. The stocktake workshops started in Limpopo and KZN in November and December 2016 and were continued at the beginning of 2017 with the last conducted in the Free State in February 2017.

MMC Sustain Project

The Foundation for Professional Development and Genesis Analytics have been contracted by the Bill & Melinda Gates Foundation to support the National Department of Health to scale-up Medical Male Circumcision (MMC) and to ensure that the programme is sustainable. This work will be carried out through the MMC SUSTAIN (Medical Male Circumcision Scale Up and Sustainability to Avert New HIV Infections) programme from October 2018 until December 2021. MMC SUSTAIN will support both national and sub-national levels to achieve the following results:

- Improved performance against negotiated MMC targets
- Increased capacity of systems users at all levels to plan, manage and execute MMC services efficiently, effectively and at scale;

- Better planned, resourced, integrated and locally-tailored MMC programmes
- Strengthened oversight and coordination of the MMC programme in line with the NSP, APPs, DHPs and DIPs
- Strengthened ownership, coordination and communication between the three health system layers and with other key in support of an integrated MMC response
- Strengthened domestic resource planning and absorption capacity, including enhanced RT35 contracting models;
- Improved quality of MMC service delivery and more efficient compliance monitoring structures
- Strengthened MMC information management, M&E, analytics and data use
- More resilient local systems that are better prepared for donor transition; and
- Increased evidence-base and dissemination of best practices and lessons learned.

National Cancer Screening Campaign Project

FPD has been contracted by Astra Zeneca to support the NDoH to launch a National Cancer Campaign (NCC) aimed at creating greater awareness about cancer and strengthen pathways of care. The campaign aims to create awareness and educate the public, patients at risk, patients diagnosed and their families, healthcare workers, traditional healers, and civil society about cancer, its causes, services available and support during survivorship. This project commenced in October 2018 and implementation of the NCC requires collective action across government departments and sectors, including NGOs and the private sector. FPD assists in the implementation of the NCC in terms of project management as well as communications and event management expertise. This project will end in 2021.

COMMUNITY BASED COUNSELLING AND TESTING DEPARTMENT

(Jan 2014 - Dec 2018)

COMMUNITY BASED HIV COUNSELLING AND TESTING (CBCT)

Through funding from USAID, FPD implemented a community-based HIV counselling and testing project. The overarching goal of the programme was to implement high yield, community-based HIV counselling and testing (CBCT) services with an aim to identify People Living with HIV (PLHIV) and to effectively link them into HIV and TB care and treatment programmes. By implementing CBCT modalities in high incidence communities near where people live and work, CBCT complemented facility-based HIV Testing Services (HTS) and reached HIV positive community members who may not access HTS in the health facility setting. The community-based HIV counselling and testing programme (CBCT) offered HIV testing in six provinces within 13 selected districts (Tshwane, Bojanala, COJ, Sedibeng, Capricorn, Mopani, Ehlanzeni, Gert Sibande, eThekweni, Ugu, King Cetswhayo, Zululand, Buffalo City) covering 33 sub districts working with SUB partners: SFH and HPPSA.

Building on a concept described by *Chang et al.* CBCT is implemented using a “combination implementation” approach. Combination implementation in the context of CBCT is defined as the pragmatic, localised application of a coordinated package of evidence-based HTS modalities delivered at community level using optimised implementation and operational strategies to achieve high yield.

The identified high yield HTS modalities for CBCT include targeted home-based HTS, index patient trailing HTS, mobile HTS (including near-home, workplace and twilight implementation models). The CBCT combination implementation approach layers three to four complementary, high yield HTS modalities within a single sub-district with an aim to reach a maximum number of PLHIV and rapidly facilitate their entry into facility-based HIV care and treatment programmes; the programme also aimed to identify HIV negative individuals at high risk of HIV infection and rapidly facilitate their entry into combination prevention programmes (MMC, PrEP, SRH/ FP, SGBV, and NCD). This project ended in 31 December 2018.

FPD HTS Social Franchise Model

Under the umbrella of CBCT, FPD designed an innovative system of delivering HTS through the social franchise HTS (SFHTS) model which organises local entrepreneurs to deliver standards-based HTS services (inclusive of a basic package of care and linkage services) under a common brand.

The SFHTS model was implemented as a pilot in Tshwane district where a district-based franchisor (FPD) is based. FPD systematise and prescribe standards for HTS, proficiency, counselling, health education, referral and linkage as well as manage and oversee the quality assurance of social-franchisees (SFs).



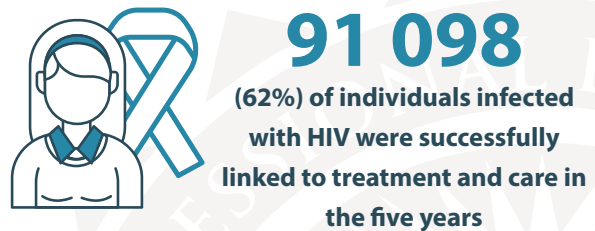
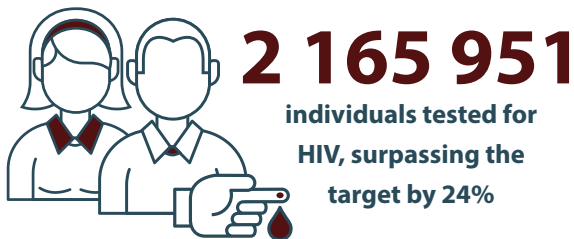
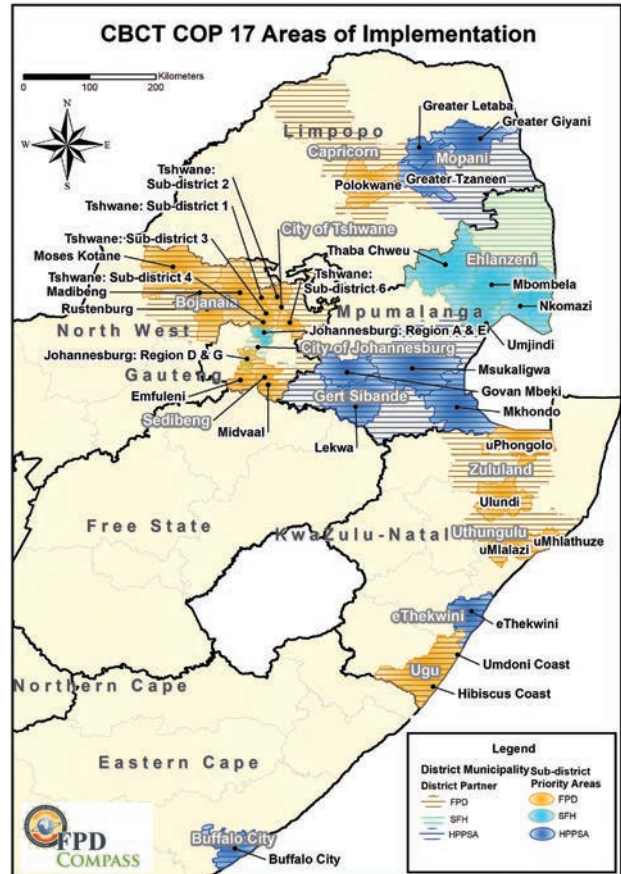
Possible benefits of HTS Social Franchise model are:

- Whether giving a supplier (franchisee) incentives increases uptake/ new outcomes of HCT, especially the first time testers, compared those care workers receiving a constant salary
- Easily learned, and scalable (duplicable)
- Contracting those suppliers in the community working at convenient times (for the client)
- Increases access to first time testers and those that have defaulted treatment
- Increased effort in reaching key populations and getting the positive clients
- Focused support to clients, by franchisees, increases number of clients linked to care
- A CBCT mobile data management system can be used to improve monitoring and evaluation system

Key results from FPD’s USAID/PEPFAR CBCT programme (October 2013 – September 2018) include:

The USAID funded project closed-out officially in December 2018 after implementation of five years with successful results indicated below:

- Overall 2 165 951 individuals were tested for HIV surpassing the target by 24%
- Over 146 000 individuals infected with HIV were identified
- Overall project positivity rate of 6.9%
- A successful implementation of index client trailing modality with 109 573 tested through index modality and a 12.7% positivity rate through this modality.
- A total of 91 098 (62%) of individuals infected with HIV were successfully linked to treatment and care in the five years.



Project Sponsors



Project Partners



SOUL CITY INSTITUTE COMMUNITY BASED HIV TESTING PROJECT

(April 2016 - March 2019)

Through funding from Global Fund, Soul City Institute (SCI) funded FPD to implement a community-based HIV testing project. The project was implemented in two provinces namely Gauteng and North West covering two districts (Tshwane and Bojanala). The goal of the project is to implement community-based counselling and testing services including reproductive health services, STI and TB screening, condom distribution and linkage, targeting young boys between the age of 10-14 years and young girls and young women between the age of 15-24 years. Under this programme, HTS services are accompanied by mobile-unit based clinical SRH services, SRH information and advice sessions, as well as psycho-social support, counselling and referral services. Clinical SRH services may include provision of contraceptive pill, injection, intrauterine device (IUD) implant, and/or emergency contraception pill, or as negotiated and agreed with the local Department of Health. Referral and linkage in

the context of this project encompasses: both HIV yield (HIV positive clients) and prevention yield (HIV negative client at risk of HIV) referrals; referrals to and between bio-medical, psycho-social, social services and behavioural intervention programmes; as well as into health facility and others. This is a three year project which started in 2016 and is scheduled to end in March 2019.

Key results from FPD's SCI/GF programme (April 2016 – December 2018) include:

- 31 499 clients tested for HIV
- 200 PLHIV diagnosed with HIV
- Aggregate positivity rate of 0.6%. District HIV positivity rates ranged from 0.57% to 0.7%
- 122 (61%) clients linked to treatment and care

Key results from FPD's SCI/GF programme (April 2016 – December 2018) include:



Project Sponsors



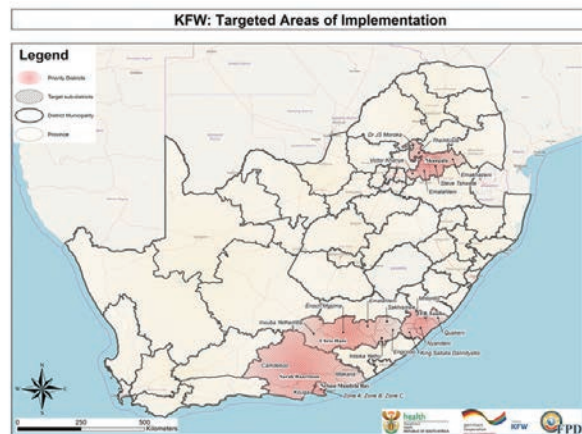
KFW COMMUNITY BASED HIV COUNSELLING AND TESTING (Oct 2016 - Sept 2019)

FOUNDATION FOR PROFESSIONAL DEVELOPMENT (FPD) AND NATIONAL DEPARTMENT OF HEALTH (NDOH)

Through funding from a German development bank, KFW, the National Department of Health is funding FPD to implement community based HIV counselling and testing (Services Contract to Provide HIV Counselling and Testing services in Eastern Cape and Mpumalanga Provinces- KFW HIV Prevention- Component HCT 2010 65 994/2012). The overarching goal of the project is to implement high yield, community-based HIV counselling and testing (CB-HCT) services with an aim to identify PLHIV and to effectively link them into HIV and TB care and treatment programmes, and identify HIV negative individuals at risk of HIV infection and to effectively link them into evidence-based HIV prevention programmes. The project is implemented in two provinces covering five districts namely Nkangala (Mpumalanga), OR Tambo, Nelson Mandela, Chris Hani and Sara Baartman (Eastern Cape). The project strategy is implemented by FPD and well-established, local South African Organisations with strong local track record, best practice models for CB-HCT, and significant existing capacity at district level to rapidly scale and implement high-volume, high quality CB-HCT services (Humana People to People South Africa (HPPSA), Keth'Impilo (KI), SEAD and CCI).

Also, 21 local grassroots NGOs/CBOs/FBOs have been identified and selected for small grant contracts to implement CB-HCT services and they received a full package of organisation development support services using a "twinning approach". The organisations are contracted to increase reach to hard-to-reach areas. Basic Package of HCT services offered includes; pre-test counselling; TB, STI & NCD symptom screening & referral; male & female condom distribution; HTS as per algorithm; post-test counselling & risk reduction; referral; linkage planning and support. In collaboration with SAG stakeholders and as part of the referral SOPs

and protocols, CBCT partners have developed and implemented a multi-tiered approach to facilitate and document success linkage and to verify service uptake. A major focus of the post-test counselling process is to underline the importance of timely linkage to HIV and TB prevention, care and treatment services, as well as to solicit consent for client follow up and tracing. This project will end on 30 September 2019.



Key results from FPD's NDOH/KFW programme (October 2016 – December 2018) include:

- 586 972 clients tested for HIV
- 26 579 PLHIV diagnosed with HIV
- Aggregate positivity rate of 4.5%.
- 74% clients linked to treatment and care

Key results from FPD's NDOH/KFW programme (October 2016 - December 2018) include:



586 972

clients tested for HIV



26 579

PLHIV diagnosed with HIV



74%

clients linked to treatment and care

Project Sponsors



Project Partners



CDC PROJECTS

(Sept 2016 - Oct 2021)

Programmatic implementation and TA for HIV/AIDS and TB Prevention, Care and Treatment Services (CDC): HIV Testing Services, Priority Population Prevention and below-the-line adherence communication strategy in support of 90-90-90; seven districts (Bojanala, NMM, Emalaheni, Gert Sibande, Nkangala and Waterberg) working with sub award grantees: Careworks, CCI, FPD acquired funding to develop a model for delivering of equitable and effective core PHC services to South African district populations in the NHI framework, with the assistance of PPO Serve in addition to the above.

US Centres for Disease Control and Prevention (CDC)

Programmatic implementation and Technical Assistance (TA) for HIV/AIDS and Tuberculosis (TB) Prevention, Care and Treatment Services throughout the Health System in South Africa under the President's Emergency Plan for AIDS Relief (PEPFAR).

FPD secured funding on 29 September 2016 from CDC to implement this comprehensive programme over a period of five years. FPD is the prime recipient with CareWorks and Centre for Communication Impact (CCI), PPO Serve and OUT Wellness as sub recipients. FPD successfully applied for innovation funding, developed an android mobile phone application, and started implementation in October 2018. FPD secured funding to manage sub award grantee OUT Wellness, who implements a People Who Inject Drugs (PWID) programme in Tshwane and Ehlanzeni from October 2018.

The programme aims to implement priority population prevention (PP_Prev) and community-based HIV Testing Services (HTS) with an aim to identify People Living with HIV (PLHIV) and effectively link them into HIV and TB care and treatment programmes and link Prevention Yield into prevention programmes. The second goal is to develop and test a scalable below-the-line communication strategy to promote ART patient adherence and retention in support of the 90-90-90. The third goal is to explore the optimal path to an effective and efficient model for delivering core PHC services to district populations. The fourth goal is to provide comprehensive services to PWID.

FPD and CareWorks provide HTS and PP_Prev services in ten sub-districts (seven districts) of three provinces while CCI works with National Department of Health in close collaboration with the PHILA national communication strategic team to develop the adherence communication strategy for people who live with HIV and healthcare workers.

PPO Serve developed and tested a comprehensive model for improved PHC service delivery. OUT Wellness PWID programme implementation started in Tshwane and Ehlanzeni.

Key statistics from CDC's HTS and PP_Prev programmes include:

- 81 494 clients tested for HIV
- 3 613 PLHIV diagnosed with HIV at an aggregate positivity rate of 4.4%
- Sub-district HIV positivity rates ranged from 2.9% to 9.8%
- 2 424 (67%) of the PLHIV identified were successfully linked to care and treatment

- 1 356 (38%) of the PLHIV identified started on ART within 14 days
- 28 057 clients reached through prevention programmes



FPD, with the assistance of CCI, created the #Zenzele (The Future Is Ours) brand under which they developed eight adherence pamphlets and ten adherence-related videos. Messaging is distributed via social media platforms as well as a dedicated website (www.thefutureisours.co.za). Two murals were designed and placed in Nkangala and Ekurhuleni as part of community engagement on Zenzele programme. The adherence mentorship programme developed in 2017, was changed to an interpersonal psychosocial support program in March 2018. FPD implemented the peer to peer support programme in 12 facilities in Nkangala (five) and Ekurhuleni (seven).



Key statistics from Zenzele peer support program:

- 5 485 clients enrolled into the Peer Support programme between July and December 2018
- 351 of these clients had already graduated from the intensive phase to the light touch phase during that period

Key Statistics Innovation grant (Adolescent Adherence App)

- App development was completed in 2018 for roll out in January 2019 in seven facilities in the Ekurhuleni district.

Key statistics PWID program:

- 105 PWID clients tested for HIV between October and December 2018
- 25 PLHIV diagnosed with HIV at an aggregate positivity rate of 23.8% between October and December 2018
- Five (20%) of the PLHIV identified were successfully linked to care and treatment between October and December 2018
- One (4%) of the PLHIV identified started on ART within 14 days between October and December 2018
- 15 HIV+ PWID started on ARV treatment between October and December 2018
- 844 clients reached through key population prevention programmes between October and December 2018

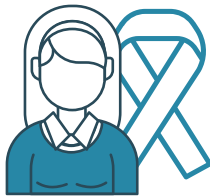
Key statistics from CDC's HTS and PP_Prev programmes include:



81 494
clients tested for HIV



3 613
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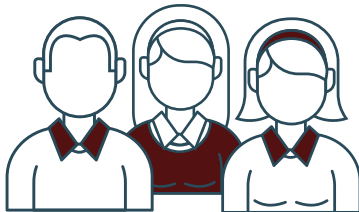


2 424
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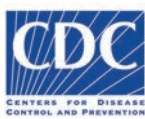
28 057
clients reached through
prevention programmes

Key statistics from Zenzele peer support programme:



5 485
clients enrolled into the
Peer Support programme
between July and December 2018

Project Sponsors



Project Partners



GLOBAL FUND ADHERENCE PROJECT

(Apr 2016 - March 2019)

FPD received funding from the Global Fund to implement ART adherence clubs (ACs) in five districts across three provinces. The ART ACs assisted to decongest crowded facilities, streamline ART patients' access to treatment and screening services and maintain overall high adherence and retention rates. ACs clubs have extended their operational activities to include some community based ACs. The decongestion of facilities has been further supported by the introduction of the CCMDD project and this has manifested in fast lane collection of medicines in the facilities, the

distribution of medicines via ACs and the registration of private pick up points (PUPs). A total of 51 999 patients are receiving care and support in the five supported Districts as of December 2018 at Facility level.

Key statistics Adherence clubs; January 2018 – December 2018

Number of patients recruited for Adherence Clubs: 20 786

Number of patients remaining in adherence care: 51 999

Average viral load suppression for adherence Club members: 94.5%

Key statistics Adherence clubs: January 2018 - December 2018



Number of patients recruited for Adherence Clubs

20 786



Average viral load suppression for adherence club members

94.5%



Number of patients remaining in adherence care

51 999

Project Sponsors



GENDER-BASED VIOLENCE PROJECT

(Oct 2012 - June 2018)

The objective of this programme is to improve service provision and community awareness of services for survivors of sexual assault in South Africa, which struggles with one of the highest rates of gender-based violence in the world.

The Increasing Services for Survivors of Sexual Assault in South Africa (ISSSASA) Project funded by USAID, PEPFAR and MACAIDS is a collaboration of leading South African organisations – Foundation for Professional Development, The Soul City Institute, Sonke Gender Justice Network and the South African Medical Research Council. The objective of this project is to improve service provision and community awareness of services for survivors of sexual assault in South Africa, which struggles with one of the highest rates of gender-based violence in the world. The government of South Africa's fight against sexual and gender-based violence is spearheaded by the Sexual Offences and Community Affairs (SOCA) unit of the National Prosecuting Authority

(NPA) within South Africa's Department of Justice and Constitutional Development. USAID has worked with the NPA/SOCA since 1999 to establish the Thuthuzela Care Centre (TCC) model. TCCs provide a comprehensive portfolio of services to survivors of GBV, including emergency medical care, psychosocial counselling, post-exposure prophylaxis (PEP), HIV testing and counselling, and assistance with case reporting and court preparation in an integrated and victim-friendly manner. The TCC model seeks to streamline the care process for GBV survivors by establishing effective linkages between various service providers and government stakeholders, and to improve legal services by reducing time-to-court and increasing the conviction rate.



PROGRAM OBJECTIVES



Improve service provision



Community awareness of services for survivors of sexual assault in South Africa



WHAT HAS BEEN ACHIEVED

11 421 people reached

COMMUNITY DIALOGUES

4 285 7 136

CHILDREN'S CLUBS

- Support to children
- Information on GBV
- Workshops on GBV

8 000

children ages 7-14 every district in SA

RADIO AND TELEVISION

- Radio drama + talk show
- 31 radio stations
- Public Service Announcements in 11 official languages



on GBV

7 million people reached

on young women and GBV

2.9 million people reached



THUTHUZELA CARE CENTRES



55 TCCs managed by NPA

4 NEW



175 866

survivors of sexual assault

Project Sponsors



Project Partners



Bumb'Ingomso Project (Buffalo City Metro GBV Project)

FPD is partnering with Masimanyane Women Support Centre in a three-year project to provide training to medical doctors, nurses, and other health and social care practitioners in the public sector on gender-based violence and forensic medicine in Buffalo City Metro. In order to identify where post-violence care services are available in Buffalo City, identify what is/is not working, identify available structures, and assess services against a comprehensive package of post-violence care services FPD developed and conducted a rapid assessment and gap analysis: Post-violence care services at public health facilities and NGOs in Buffalo City Metropolitan.

The rapid assessment has been approved by the inhouse FPD Research Ethics Committee, as well as the NHRD and the provincial and district Departments of Health. These rapid assessments and gap analysis results will contribute to improving GBV service delivery at facilities. It will contribute to better informed decision-making about the functioning of healthcare facilities, foster an environment of excellence at service delivery level and promote greater accountability for performance of facilities.

The final report has been presented to the NDoH, Masimanyane and the development partner. A major finding was that some facilities referred cases to institutions that do not provide post-violence services, resulting in further referrals. The NDoH and Masimanyane committed to rectify the situation.

FPD trained eight doctors, 69 nurses and 39 lay counsellors in GBV and forensic medicine during the year.

Further responses must strengthen support systems for women and girls at multiple contact points such as individual, family, community, school and health facilities; expand opportunities for education regarding sexuality and HIV risk reduction; and promote healthy decision-making. Because GBV results in harmful physical, emotional and social consequences that often require information and care from

multiple service providers, information management has become an important part of the response to GBV in communities. GBV information management is a structured method for providing help to a survivor. It involves an organisation, usually a psychosocial support or social services actor, such as Masimanyane, taking responsibility for making sure that survivors are informed of all the options available to them and that issues and problems facing a survivor and her/his family are identified and followed up in a coordinated way, and providing the survivor with emotional support throughout the process. The implementation of an information management system will foster a survivor-centred approach to GBV information management in response to violence against women and children in Buffalo City Metro by harnessing the Community Influencers' project in the pilot sites.

Referral Pathways

Facility referred to:	# of facilities that refer	%	Type of PVC provision
Cecilia Makiwane Hospital (Mdantsane TCC)	23	33.33%	Provides PVC: full package of care
Grey Hospital (Grey TCC)	19	27.54%	Provides PVC: full package of care
Stutterheim Hospital	1	1.45%	Not part of the research, but reported that the hospital provides full package of PVC
Bisho Hospital	11	15.94%	Refers to Grey Hospital TCC*
Frere Hospital	7	10.14%	Refers to Cecilia Makiwane Hospital (Mdantsane TCC)**
Empilweni CHC	8	11.59%	Refers to Cecilia Makiwane Hospital (Mdantsane TCC)***
S.S Gida Hospital	4	5.80%	Not part of the research
Police	2	2.90%	Will refer victim to TCC
Masimanyane	3	4.35%	Refers to Grey Hospital TCC and Cecilia Makiwane Hospital (Mdantsane TCC)

* Only provides trauma counselling after victim has received other services at Grey Hospital (TCC)
 ** Frere Hospital will only conduct medical forensic examinations if a trauma patient presents who is in need of surgery and has been sexually assaulted. Once the patient has been stabilised after surgery, they will contact the police to bring the Evidence Collection Kit (SAECK) and conduct the medical forensic exam. All other victims who present are referred to Mdantsane TCC.
 *** Empilweni CHC only provides PEP, HIV testing and treatment

Project Sponsor





FPD SUPPORT SERVICES

Finance Department

Human Resources Administration Department

IT Department

Communications Unit

Travel Bureau

Tree Planting Project

Proposal Support Team

FINANCE DEPARTMENT

FPD's finance department supports and manages the financial resources of the company and various partners. We ensure compliance with both international standards and large donor requirements including, but not limited to, PEPFAR, USAID, CDC, NIH, Global Fund and the KFW Development Bank.

2018 was challenging with the close-out of large donor funded projects, which necessitated a strategic shift in thought and the allocation of resources. FPD has successfully diversified revenue streams in 2018 with a 50% increase in its funders.

The strength of the finance department is proven by unqualified audit reports since inception and clean donor audit reports. FPD's finance department offers consulting, full financial management and pay-roll services to selected outsourced clients.

Full scope of financial and pay-roll services provided to:



**FPD
Fund**



Pay-roll administration services



HUMAN RESOURCES ADMINISTRATION DEPARTMENT

HRA maintained excellent employment equity results during 2018.

In 2018 FPD had 2 421 employees of whom 96% were from previously disadvantaged groups.

A total of 52 employees received long service awards.

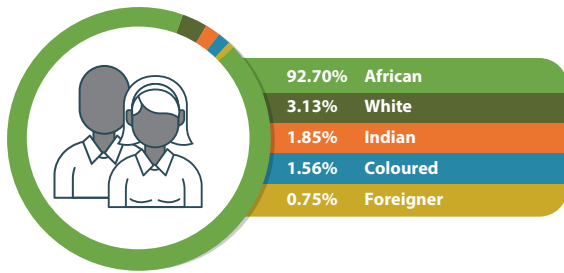
A total of 891 performance bonuses were paid out with an average performance rating of 66.4%. 41 employees forfeited their bonuses

due to disciplinary action that was taken against them.

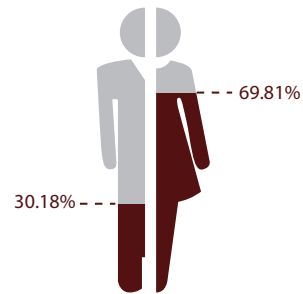
FPD was involved in five CCMA conciliation cases.

38 Head Office employees participated in the Wellness Day on 20 April 2018. Sixty-seven units of blood were donated during the year.

Employment Equity Results for 2018



Male and Female Total



Male and Female African



Male and Female Coloured



Male and Female Indian



Male and Female White



Male and Female Foreigner



IT DEPARTMENT

The IT Department is instrumental providing FPD Business with service excellence in all areas of Information Technologies.



FPD INFORMATION TECHNOLOGY

The FPD IT Department is responsible for the establishment of Information Technology (IT) policy and planning, for IT procurement and contracts, and for providing the computing and telecommunications infrastructure for all information systems technologies associated with FPD. FPD Management has tasked the IT Department with providing services that facilitate cost effective information technology and telecommunication solutions that can be shared with all FPD branches.

It is the vision of the Department to deliver an excellent service that is in line with the FPD core business, vision and values.

IT Department Core Values

- We are unified in our purpose and vision for success: to collaborate with other departments to use information technology to achieve FPD business goals.
- Our goals and objectives are clearly defined organisationally and in concert with our departments. Moreover, our roles and responsibilities are clearly defined whether within and between work teams.
- We select relevant metrics to monitor progress and ensure accountability. We communicate clearly and often with other internal departments, all other stakeholders, and external branches.
- We are disciplined, consistent, and progressive in maximising and optimising IT solutions that we provide or facilitate.
- We work with external institutions to explore emerging technologies and to set policies, standards, and guidelines.



2 153 480

sheets of paper printed



188

different viruses
detected and cleaned



184 385

emails received



70 852

outbound emails



79 609

internal emails

COMMUNICATIONS UNIT



FPD COMMUNICATIONS

The Unit provides the following services to FPD and the FPD Group:

- Design and desktop publishing of all visual materials within FPD.
- Media liaison during conferences.
- Web administration for all conferences.
- Management and distribution of press releases.

Conference Support

During 2018, the Communications Department was responsible for media liaison and media coverage during two conferences that took place during the year. We, collectively, had over 60 media representatives attending these conferences and were able to secure television and radio interviews with various broadcasting networks to cover these events. Print and electronic media also provided substantial conference cover.



FPD was once again recognised by the Cambridge University Student's Union, in their 2018 publication *Innovation 800*, a publication that tells the story of eight centuries of innovative thinking.

Featuring contributions from industry pioneers and commentators, as well as informative features, engaging insights and expert advice for students and alumni, *Innovation 800* connects students, innovators, educators, recruiters and the wider world of business.

Social Media Statistics

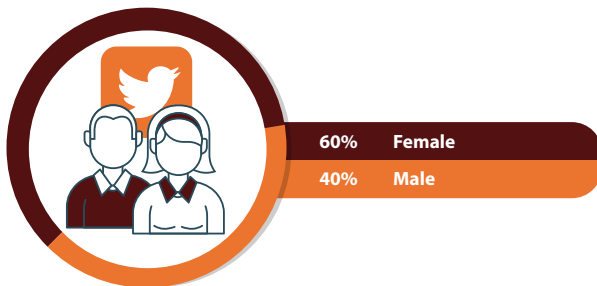


1 March 2018
9 827
 likes on our pages

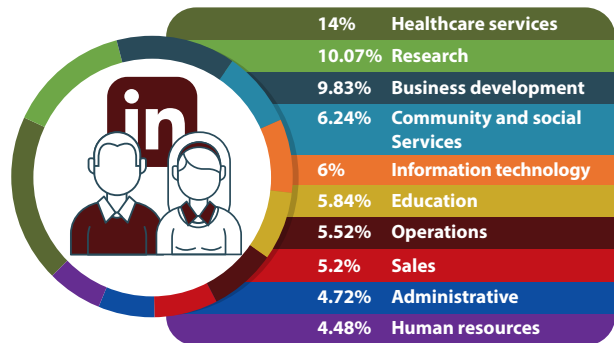


28 February 2019
10 748
 likes on our pages

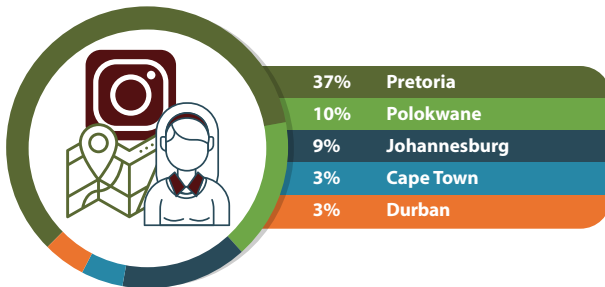
Twitter followers



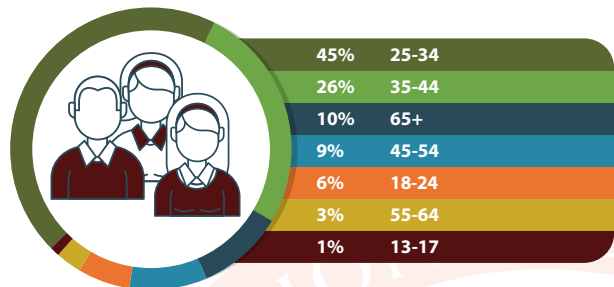
LinkedIn visitor demographics



Instagram followers locations



Instagram followers age range



TRAVEL BUREAU

The Travel Bureau operates as a joint venture partner with XL Turners Travel, and is a self-funding business unit with the purpose of assisting FPD as well as external clients with travel management services.



The Travel Bureau specialises in corporate travel management and conference destination management solutions and is dedicated to ensuring our client's business gets the maximum value for their corporate travel budget. In collaboration with XL Turners Travel's powerful position in the industry, we are able to ensure that we offer the most competitive rates from air-lines, car rental companies and hotels whilst remaining independent enough to pay personal attention to our client's travelers.

The Travel Bureau offers the following services to FPD and external clients:

- Marine Travel
- Leisure Travel
- Travel Consultation and Advice
- Airline Reservations and Ticket Issue
- Hotel Reservations
- Car Rental Bookings
- Cruise Reservations
- Rail Reservations
- Coach Reservations
- Passport Assistance
- Obtaining Visas
- International Driving Permits
- Travel Insurance
- Foreign Exchange
- Preparation of Itineraries
- Frequent Flyer Management
- Incentives
- Group Travel

- Conferences
- After-Hour Services
- Document deliveries via courier service
- Travel Policy
- ISO 9001 Quality Control
- Management Reports
- Sales Support Service
- Individual Profile Management
- Supplier Corporate Agreements
- Theatre Reservations

A highlight of 2018 was providing in-house travel management for the following conferences:

- x3 Bonitas Workshops, 2018
- 1st Communication for Change Conference, 2018
- 5th SA TB Conference, 2018

In the year 2018, the Travel Bureau processed a total of 1 572 orders and realised a total of R32 019 634.57 in sales.

**FPD staff members flew 2 302 213 miles=
92.5 times around the world**



TREE PLANTING PROJECT

The FPD Tree Planting Project is an initiative to reduce FPD's carbon footprint.

During the last few years, FPD's carbon footprint in the form of paper use, fuel and electricity consumption has become a growing concern. When, in early 2018, it was reported that FPD's monthly paper use was equivalent to about 25 trees, the decision was made to start a tree planting project. The project is led by the Tree Team, a group of passionate volunteers who are willing to give their time and energy to the project.

The project was launched on 5 June 2018 to coincide with World Environmental day by planting a recreational garden consisting of *Olea europaea* subsp. *africana* (wild olive) trees and lavender bushes at the KT Motubatse Clinic in the Tshwane District. A 6-seater bench

was also erected for pregnant women waiting their turn at the clinic. During 2018, the Tree Team focused on greening clinics in the Tshwane district. A total of 48 *Combretum erythrophyllum* (river bush willow) trees were planted at the Jubilee Gateway, Kekana Gardens, Dilopye, Suurman, Kekans Stad and Refentse clinics.

The wild olive and river bush willow tree species are both water wise indigenous trees. The FPD Tree Team believes in a sustainable solution for greening, for this reason when planting trees in public areas such as clinics, only 2m trees or bigger were planted. The Tree Team only plants trees that are already established and can handle a harsh environment, thereby ensuring a living legacy.

"The best time to plant a tree was twenty years ago. The next best time is now." - Chinese proverb



PROPOSAL SUPPORT TEAM

FPD SUPPORT SERVICE: It is extremely important for any organisation to have good support services to succeed in their business. At FPD our support services play a critical part in maintaining our operations and allow the organisation to deliver the highest quality service to our clients.

As part of FPD's continued ability to identify opportunities, the Proposal Unit serves to identify, co-ordinate and submit tenders and proposals to various agencies, government entities and donors, both local and international. This allows FPD to diversify its sources of revenue and work flow ensuring sustainability and continuous growth.

The Unit provides the following services to FPD:

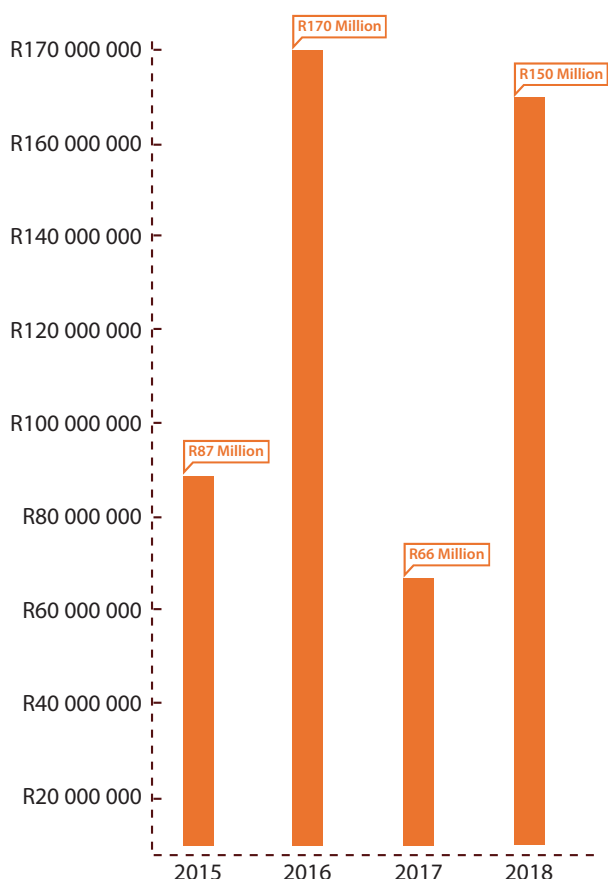
- Overall project management of the proposal development process
- Administrative support during the proposal writing process
- Reducing the workload of staff by assisting with research, proof reading and editing

- Providing templates and examples of well-written proposals
- Submitting the final, professionally-presented proposals on behalf of the proposal development team

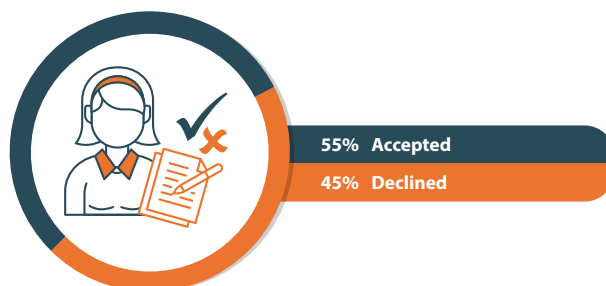
Despite a increasingly competitive donor environment, the Proposal Unit has shown a steady increase in income, boasting with an overall increase of 126% in total income received through submitted proposals and tenders from 2017.

The 2017-2018 Strategic direction for the Proposal Unit aimed to improve the quality of submissions and the ability to produce high-quality proposals, which is shown by the improvement of the Unit's success rate and the ability to secure more non-USAID funds in comparison to previous years.

Income from Successful Proposals



Proposal Success Rate



The Proposal Support Unit submitted a total of

118

proposals in 2018



ABOUT FPD

FPD Staff Awards 2018

FPD Affiliates

Strategic Partnership

Sponsors and Donors

People at FPD

Enquiries

FPD STAFF AWARDS 2018

In 2018, FPD again acknowledged individuals and FPD staff, through a series of awards, who have contributed substantially to FPD's work .

Award for Excellence In Teaching

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 five.

FPD has primary, secondary and tertiary faculty on each programme and they have a specific percentage that the faculty member are allowed to teach. Another criteria for this award was that had to have taught more than five times on a specific programme during the course of the year.



Patricia Maswanganyi

Patricia taught on various education short courses and achieved an overall average rating of 4.95 out of five.



Mr Anton la Grange

Anton taught on various clinical short courses which included FPD's range of Counselling courses. He achieved an overall average rating of 4.87 out of five.



Dr Liz Wolvaardt

Liz facilitated on various management courses during 2018 and her overall average rating was 4.97 out of five.

FPD Emerging Researcher Award



Mr Dawie Olivier

As an academic institution, FPD is committed to contributing to new knowledge through research.

During 2018, Mr Dawie Olivier and Ms Lindsey de Vos shared the FPD emerging researcher award. Both were involved in seven research studies with output ranging from poster or oral presentations at conferences to peer reviewed publications. The FPD Award for Emerging Researchers is awarded based on an external evaluation by leading South Africa scientists.



Ms Lindsey de Vos

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.



Mr Barend Botha

Barend was the technical lead on conceptualising the stock logistics and control component of the GPCC. He worked tirelessly to co-design a stock logistics and control model that complies with Auditor General (AG) and Public Finance Management Act (PFMA) and government stock control requirements, allows for 100% visibility of stock and ensures compliance with Good Pharmacy Practice.

It is due to Barend's innovation, commitment to quality and service to society that we finally received permission to access and use State-funded medicines and lab services. The GPCC has shown that private GPs can play an important role in the national HIV response. Barend has been a trail-blazer in designing the processes and controls whereby the State can make available State-funded medicines under the future National Health Insurance.

Values Award

The FPD Values Award is presented annually to the employee who, in the opinion of their peers, is the embodiment of FPD's values. Candidates are nominated by the staff and the winner is identified through staff voting from a list of nominees.



Mr Victor Marumo

Victor has been FPD's gardener for the past four years and is always friendly and greets everybody that goes past him. He respects his job, he always goes out of his way to help others, he is kind, he is always willing to help, whether a task is big or small and he is consistent in the way that he functions and always delivers high quality work. He has a lot of Ubuntu in him.

Innovation Award

FPD group companies, departments, teams and individuals are invited to submit nominations for innovative projects or products implemented within the FPD group over the past year.



Ms Annatjie Peters

Annatjie has shown real passion for making FPD a pleasant work environment, conducive to productivity, good health and mutual understanding. Moreover, Annatjie has shown a knack for understanding the need for marketing from the point of view of our customers, proposing major changes to make our website user-friendly and the idea of

unique websites for different schools to appeal to their market profiles. Out of five ideas she has proposed, four were approved, while the fifth reignited resumption of an existing practice.

Staff Development

FPD has always been an organisation that places strong 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.

FPD AFFILIATES



Africa Health Placements (AHP) 2018

The Problem

Lack of doctors and poorly functioning hospitals result in poor health outcomes.

The Solution

AHP continues to work to get doctors into hospitals – its primary focus of the past 12 years that has seen over 4 200 health workers placed. However, as of 2018, the organisation did not just place and replace doctors, but will also offer a “global health experience” support programme to equip these doctors and their colleagues to improve the functioning and culture of health facilities.

The Model: AHP Global Health Experiences

AHP’s global health experience offers three tracks:

- improving clinical competencies for practicing in underserved environments
- supporting doctors to act as agents of change from within the system; and
- networking and lifestyle opportunities to strengthen the resilience and the experience of doctors who serve the underserved.

This support platform makes the services of a number of expert organisations in this field available to doctors – such as FPD’s clinical short courses, the Rural Doctor Association of Southern Africa’s annual conference, and more. AHP has also packaged its own proprietary material on leading a patient-centric culture and managing health teams for the benefit of participating doctors.

Going forward, facilities receiving AHP doctors should see improved clinical outcomes, higher functioning systems and improved retention of higher functioning teams.

Participating doctors will receive an “AHP Global Health Fellowship” certificate, a transcript of all work completed in all three of the aforementioned tracks, as well as a reference letter to assist with their future careers.

AHP’s new approach also positions the organisation to charge doctors a fee for the experience provided. Combined with the philanthropic support that it already receives for its work, the organisation is well positioned to scale in the coming years.

Replication and then Scale

In 2017, AHP grew the number of countries in which it has made placements to six across Africa: South Africa, Swaziland, Lesotho, Malawi, Kenya and Tanzania. AHP is in discussion with partners in

Zimbabwe, Zambia and Uganda to do the same in 2018. An African expansion strategy is central to the organisation’s expansion plans.

Within South Africa, AHP is exploring how it can take the same platform offered to its placements and adapt it to the needs of other doctors transitioning into practicing in underserved environments. This includes Community Service Officers, as well as South Africans who have studied medicine abroad and are returning home. Furthermore, AHP is exploring establishing joint ventures and subsidiaries in wealthier markets (such as in the US) to do the same. AHP is also taking one element of its offering – how to create a patient-centric culture - and, as part of the PEPFAR programme, working to implement this across all Ideal Clinics in South Africa.

Key Results and Impact

Since 2006, AHP has placed over 4 200 health workers (mostly doctors) in six countries. Each doctor has been employed and salaried by a local health provider and has had an average length of service of over two years. These doctors have conducted over 34 million consultations with patients in underserved (mostly rural) settings.

However, doctors are more than clinicians. Although they are trained as technical experts, they are expected to lead the facilities in which they work, coordinating teams of people, resources, equipment and systems. AHP doctors are no different. For example, an AHP doctor working in a paediatric ward in a rural KZN hospital implemented an observation chart for early detection of the deterioration of patients. This reduced paediatric mortality in the ward by 75% over six months.

AHP is capturing the essence of such interventions in its global health experience support.



Brighter Futures Tuition

In South Africa only 33% of matrics wrote maths in 2017 (down from 44% in 2016) and of those, the average result was a dismal 30.8%.

Yet we have a chronic shortage of skills such as engineers and technicians and a 25-30% unemployment rate, 70% of whom are youth. This mismatch of demand and supply attests to some of the problems we face in the education system.

Diagnostic tests conducted by Brighter Futures for ~10 000 Grade 8-9 learners highlighted where some of these learning gaps in maths are coming from. Grade 8-9s tested scored an average of 31% on fractions at a Grade 4-6 level and performed at a similar level on mental maths and order of operations. These learning gaps that begin in the early years of schooling compound into larger learning deficits as learners progress through the system.

“We’ve had Grade 9 learners who cannot multiply 3 x 4 without drawing dots and then counting them. This is a Grade 3 concept. More than half the Grade 8s and 9s don’t even know what a fraction is or how to draw it. It’s the basics that are missing, but high school maths teachers are not equipped and don’t have enough time in the curriculum calendar to catch-up,” says CEO Joanne Brink.

But unless these gaps are addressed as early as possible, learners will not be able to master key maths (or other) skills, which then means that many learners are forced to drop to maths literacy and unable to access decent career opportunities.

Brighter Futures aim to change this by providing an affordable (~R330/month), technology-driven extra maths programme - to improve learners’ maths (and in future other subjects) results so that they can access better tertiary and career opportunities. Gr 8-12 learners attend our classes to get support from our tutors and practice extra maths questions on our Everythingmaths website, which they can access for free at home as well. Parents get regular feedback on their child’s progress via sms or email.

Brighter Futures partner directly with low-to-middle income schools so that we can work closely with the maths department to target the key maths gaps that we and the schools are identifying.

Brighter Futures tuition sessions are conducted in a small group setting of ten learners. Learners bring or borrow a mobile device to their session to practice maths exercises using “Intelligent Practice©” technology which enables each learner to work at their own pace and level of understanding. The technology’s ability to adapt the level of difficulty of each question for each learner is unique and helps to build learners’ confidence and motivation. Our young dynamic tutors, mostly third year engineering, actuarial, teaching and business students, are on hand during the session to target their support where learners need it most.

Brighter Futures in brief



2018 Highlights

- We opened five new centres, operating within our partner schools: Boksburg High, Sacred Heart College, Sutherland High, The Way and Roosevelt High.
- We have achieved over 30% average growth over all 16 centres in 2018, with over 1000 customers in total by end of the year.
- We launched 3 new programmes - Gr12 programme, Gr11 programme and Physics classes. As well as running over 3 new targeted bootcamps in Term three and four that addressed gaps identified jointly with the schools.
- We ran a Grade 8 Bridging Bootcamp over two days for Mcauley House. Principal Davis says “only 1 Gr8 learner failed this year versus 13 who failed in 2017”, highlighting the impact of the programme. We’re rolling this out across five other schools in 2019.
- We have provided indirect support through diagnostic maths assessments to over 5 000 learners across Gauteng
- Those learners who have practiced regularly on our programme (25+ exercises per week) have improved by over 24% over Feb to October

Some feedback from our customers directly:

Lesego Shoai - Athlone - Gr8

“Her result has gone up big time - she got 84% in term three exams! She understands her tutor when he teaches and she is free to ask questions. I am overwhelmed about the Brighter Futures and will tell other parents about it.”

Simphiwe (Gr8) from Boksburg High - hear how he enjoyed our October holiday maths Bootcamp:

“My tutor showed me so many tips and tricks for the exams - it really helped me increase my understanding”. Simphiwe got support on the topics where he was failing, and strongly believes that he will improve in the Nov exams. We have seen so many times how this self-belief and confidence is key for learners when it comes to excelling in exams.

Lubabalo Matiwane from Curro - Gr9

After starting with Brighter Futures Lubabalo wrote our diagnostic test which helped him figure out where his gaps were, making it easy to help him move past the 50% mark to 60% in one term. Mrs Matiwane was so happy to see this change that she continued encouraging him to attend even though he didn’t need much encouragement. Lubabalo grew to love our classes and he sees the changes in his results, he is now getting 60%-70% which he is very happy about and so is his mother, who had this to say: “ever since he joined Brighter Futures his love for maths has grown and he is always working on the Everythingmaths website”

Our plans for 2019

- To open another ~10 centres in middle income schools in Gauteng.
- To launch three new bootcamps - a Grade 10 Bridging Bootcamp, Grade 10 and 11 Trig & Functions bootcamp as well as additional exam-preparation focused bootcamps.
- To roll out Physics for Grade 10 across all centres and run a pilot for Microsoft Programming in a few schools.



Glue Plus Africa (GPA)

For GluePlus Africa (Pty) Ltd (GPA), 2017 is highlighted as a year of strategic alignment with technology and innovation projects within the greater FPD Group. GPA's corporate strategy and course was set as that of a boutique investment house in health and social innovations, with a primary focus on technology-driven solutions. Strategic investments were made in association with Pioneering Solutions Studio (Pty) Ltd (PSS) (a sister company of GPA), through the incorporation of group companies to ensure the long-term sustainability of software and innovation projects in the larger FPD Group.

Highlights for 2017



Qode Health Solutions (Pty) Ltd

GPA and PSS partnered with Right to Care NPO (RTC) to bring developing countries a turnkey solution in clinical and health management software. All health-related software developed

by GPA, PSS and RTC has from August 2017 been available under the Qode Health Solutions (Pty) Ltd (Qode) brand. Qode has rapidly expanded during quarter three and four of 2017 to offer solutions in four developing countries outside South Africa.



The Foundation for Sustainable Innovation (Pty) Ltd

The Foundation for Sustainable Innovation (Pty) Ltd (FSI) is a company that was

incorporated between GPA, PSS and other strategic partners to offer a home to innovative projects that would require the support of software houses to flourish. Through this initiative, FSI in association with FPD, launched a Code Academy during October 2017 which will see thousands of young Africans gain access to Microsoft® Certifications. The FSI/FPD Code Academy is a certified Microsoft® Dreams Academy and will start 2018 by offering over 11 international Microsoft® certifications to bright young minds.

Some projects include:

- a "secure payment solution" for Audi and VW
- online store targeted at our PSS database to 35 000+ medical practitioners
- blockchain payment solution build for the Waste industry
- various applications for medical distributors
- hosting of SAP B1 systems on Microsoft Azure cloud
- website development for property industry



Property Skillz Invest 108 (Pty) Ltd

GPA needed to provide a working environment that is conducive to collaboration, innovation and all things

creative to ensure the maturation of investments made during 2017. Property Skillz Invest 108 (Pty) Ltd (PSI), a property company, was incorporated for this purpose. Yet another successful venture between GPA, PSS and other strategic partners, saw the acquisition of our first office building in the Old Farm Office Park in Faerie Glen, Pretoria. At the date of this report, further investigations were already underway to acquire a further two office buildings in the Old Farm Office Park to support the rapid growth of the FPD Group.

The PSI group now owns three buildings in the Old Farm Office Park valued at approximately R15m.

We are investigating acquiring a fourth building and are in negotiations with the owner.



Health Science Academy (HSA)

Health Science Academy (HSA) is a small to medium sized private Further Education and Training (FET) college focusing on training and education in the pharmaceutical industry and the healthcare sector. HSA students include doctors, nurses, pharmacist's assistants, front shop assistants, pharmacists and other healthcare professionals active within the sector.

The pharmacy workforce is a critical part of any health system, and planning for an adequate South African pharmacy workforce is important if high quality pharmaceutical services are to be delivered to the whole population. This includes the production of pharmacists and pharmacy support workers, and the optimal use of existing pharmacy personnel. It is estimated that there are 15 070 pharmacists in South Africa and an additional 769 who are presently serving their community service year.

All areas of pharmacy practice in the country report shortages: community, hospital, industry, and academia, with vacancy rates for pharmacists of up to 76% reported in the public sector in one province.

Due to the shortage of pharmacists, pharmacy mid-level workers, mainly pharmacist's assistants, play an important role in the provision of pharmaceutical services in the country. The South African Pharmacy Council's vision for 2030 include 24 000 pharmacists and

22 000 pharmacy support personnel being registered and serving the health needs of South Africans.

It is estimated that there are presently 2 899 learner basic and 2 160 learner post basic pharmacist's assistants busy studying to achieve their qualification. The Pharmacy Council is presently finalising the curriculum for the inclusion of the qualifications for pharmacist's assistants at NQF level 4 (basic) and NQF level 5 (Post-basic) as part qualifications into Pharmacy Technician (PT) at NQF level 6. HSA is well placed to provide the requisite training with the assistance of FPD for NQF level 6 education.

Expertise and Services

Pharmaceutical Sector Training

More than 1 500 learners were active in the National (basic) and Further Education and Training (post basic) Pharmacist's Assistance programme. A steady increase in the number of learners was observed during the period under review. The termination date of the course has also been extended by the South African Pharmacy Council and QCTO until 30 June 2019 for basic learners and 30 June 2020 for post basic learners, with the teach-out period ending 30 June 2022 and 2023 respectively.

Dispensing for Healthcare Professionals Course

This course is based on the recommended standard for the dispensing course for prescribers in terms of Act 101 of 1965 as amended, which was developed by the South African Pharmacy Council, in consultation with the other statutory health councils. Licencing with the relevant authority as a dispensing healthcare professional can only take place once the certificate is awarded. There is a notable increase in the number of nurses who enroll for the Dispensing course, which consists of four days of practical training and one day for assessments and practical exams. Doctors follow a distance course to address the theoretical aspects and then attend contact assessment sessions in different centres around the country.

Industry Courses

Industry courses include Medicine Registration in South Africa, Good Manufacturing Practice (GMP) as well as immunisation and injection techniques.

The Medicines Registration Course has been fully updated to the latest requirements and guidelines of the Medicines Control Council including the most recent views on devices and complementary medicines. It also includes the changes to the regulations of Act 101 of 1965 recently published. The target audience has been expanded to include the regulatory assistants as well.

HSA also addresses the needs of the Quality Assurance personnel within the pharmaceutical industry with a distance course named Quality Management Systems (QMS), as well as a course covering the writing and maintenance of Standard Operating Procedures (SOPs).

An exciting new course has been introduced addressing the practical aspects of bio-availability and bio-equivalence.

Management

Recently, we have received approval from LG SETA for a course in Generic Management at NQF level 4. This course is aimed at new entrants to the workforce that has an ambition to enter the supervisory or management levels.



Maurice Kerrigan Africa

Company Overview

Maurice Kerrigan Africa consistently delivers to our clients the highest level of quality and service excellence in training interventions. Our learning solutions are unique and practical. Unique because we studiously apply building blocks of learning in a measured process. Practical in that we always integrate our interventions with your organisational needs, culture, style, and processes and procedures.

We follow the integrated approach because history, and our own experience, has confirmed that short skills training works best when delegates recognise the context and are able to relate what they are learning to scenarios that take place in the workplace. Also, learning is cemented when delegates are easily able to practise behaviours and skills in a context similar to their workplace.

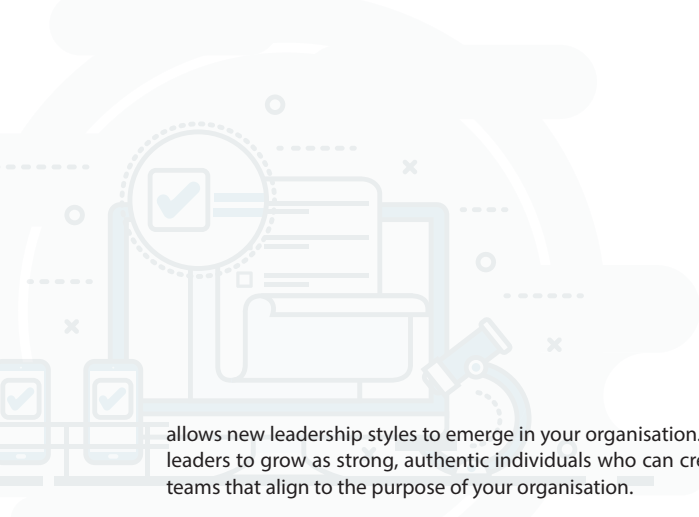
Our vision and mission reflect our passion for achieving successful training interventions and making a real difference in the skills and lives of people attending our programmes.

What we do

Develop excellent communication skills that give people confidence and skills to address others with clarity and poise so that they are perceived as competent, confident, trustworthy and approachable.

Develop effective intra- and inter-personal skills, to create strong, self-assured individuals who are motivated and ready to do their best. Also, develop relationship building skills that make for positive perceptions about you and that lead to great teamwork and contribution efforts. Well-crafted and purposeful interpersonal communication makes a difference internally and externally with your customers and suppliers and therefore quality written and face-to-face communication has become a much sought-after commodity in the modern business environment. Interactions must be purposeful rather than a default activity. Our skills courses guide delegates to understand and implement best practice standards in communication skills and intra-interpersonal skills.

Develop leadership skills among supervisors, managers and business managers, that accelerates their ability to build trust among others, empower strong teams and grow business networks within and around their organisation. These leaders will develop a mind-set that



allows new leadership styles to emerge in your organisation. We help leaders to grow as strong, authentic individuals who can create vital teams that align to the purpose of your organisation.

We have demanding clients who want to see measurable results and that is exactly the way we like it. This philosophy has led to long term partnerships with all our clients. Our uncompromising commitment to measurable results and quality in all we do, coupled with our sensible and practical approach to any implementation challenge, is, we believe, what makes us unique and ensures you a return on your investment.

We will customise the content of any of our programmes to suit your specific requirements. Such dedicated company programmes would incorporate your unique company and individual needs. This approach affords you and your team the benefit of being able to reference and contextualise skills in your environment and address specific challenges.

During the past financial year, the company performance has remained stable and we look forward to a year of growth in 2019.

Key products delivered during 2018

Effective Speaking & Presentation Skills

The ability to present is an enormous benefit in the workplace. Presentations help us to make compelling, persuasive arguments more effectively than any other communication tool at our disposal. Presentations give you time and room to make your case and, with help from your voice, face, and gestures, convince people that they should respond to your call to action. A well-crafted presentation achieves audience impact despite the multitude of distractions you are competing with.

During our *Effective Speaking & Presentation skills* programme, we examine in detail the use of key communication elements that enable the creation and delivery of high impact presentations and speeches. This programme deploys a highly evolved and practical learning solution which ensures that you will become the most effective presenter you can be, by discovering and cultivating your own natural speaking style.

The Sales Professional

As a sales professional, you are responsible for the generation of income for the business. It is within this context that, for the duration of this programme, we will provide the critical skills to enable you to deliver on expectations.

Your organisation relies on a sales team of talented humans who are faced with extraordinary challenges daily. Their challenge is to develop skills to build trust and ability to communicate authentically so that good relationship management takes place and clients lean toward a decision in favour of your product or service. In today's marketplace people buy from people they can build relationships with, so you need to have the skills to make the right impression, seal the deal and live the values of a sales professional.

Personal Mastery and Emotional Intelligence

The ability to manage oneself appropriately and proactively in all circumstances can lead to success in all spheres of life. A high level of self-awareness and management of emotions in an intelligent and powerful manner, ie self-mastery, can optimise individual performance and relationships with others. It is about being proficient in relating to others in meaningful ways and being able to capitalise on relationships by enhancing motivation, inspiration, collaboration and influence.

This programme is intense and emotionally demanding and will require you to engage in honest introspection and to open your mind to a new, revitalised and focused mode of thinking. Our goal is that this programme will leave you energised and inspired to move forward towards your goals with a more positive and enlightened approach to your life.

Coaching for Performance

The single most important performance enhancing skill any leader-manager can practise, is coaching. Coaching is the catalyst to achieving breakthrough performance through people.

Our Coaching for Performance programme develops a clear understanding of the processes, benefits, pitfalls and criteria for effective coaching. The coaching tools provided in the toolkit are utilised in personal coaching during the programme, so that each delegate experiences the use of, and growth from, application of different tools.

Service Excellence

Service excellence is an attitude and it begins and ends with your people. Therefore, it requires more than a streamlined customer service department or a slogan on a wall poster.

Our Service Excellence programme develops among your team members the attributes, attitudes and skills aligned to those of a service champion. Delegates will improve their skills and techniques to connect and build rapport with customers and clients. The ability to regulate and manage behaviour during service interactions results in a balance between assertiveness and responding appropriately to ensure that both the customer as well as the organisation's needs are met.

New short 1-day courses - 2019

Assertiveness

Respond assertively, appropriately and positively

Although everyone acts in passive and aggressive ways from time to time, such ways of responding often result from a lack of self-confidence and are, therefore, inappropriate ways of interacting with others. By the end of this programme, the learner will demonstrate the ability communicate confidently and assertively with clients and colleagues.

Personality Styles Workshop

This ½ day workshop on personality and behavioural styles will equip professionals with a deeper understanding of their own personality

and how it influences their communication style and behaviour, as well as that of others, thereby equipping them with a finer ability to identify and develop sustainable relationships.

Values Workshop

Principles in Action

Identifying and understanding your values allows you to clearly identify your personal path for decisions and for focus in your life. Knowing what you stand for is good for you, and, it is good for business - it leads to better ethics, integrity and accountability. This programme helps you to firmly identify the values that are important to you and to use them to connect, in a principled manner, with your work, life and others.

Time, Energy and Productivity

On this workshop delegates will learn to identify between activity and the false sense of accomplishment it creates, and productive performance by making the best use of your time and energy to produce results. The workshop is full of practical and fun activities, including how to discover your 'money hours', and techniques for maintaining a positive energy state.

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Pioneering Solutions Studio (Pty) Ltd

At Pioneering Solutions Studio (Pty) Ltd (PSS), 2018 will be remembered as a year of realising strategic goals to further our Professional Development Platform offering outside healthcare. PSS started our software journey in healthcare as Medical Practice Consulting (MPC) during 2011 and we have learnt many lessons since. Lessons that have culminated in the development of our second-generation Professional Development Framework - "Gecko". PSS' investment in the development of Gecko, came to fruition this year with its successful launch within an EDonline platform offering.

PSS' EDonline platforms launched in financial services (FinEDonline), the built environment (BuiltEDonline), veterinary sciences (VetEDonline) and natural sciences (NatEDonline). Early indications are that EDonline is well received in all the industries noted above, with thousands of users already registering to access industry-specific Continuing Professional Development (CPD).

2018 Highlights

Microsoft Partner Certification

PSS and its group companies (Qode Health Solutions (Qode) and Foundation for Sustainable Innovation (FSI)), achieved Microsoft Partner® certification during 2018. The Microsoft Partner certification does not only bear testament to our commitment to the development of international-standard software but it also provides for various opportunities for our group to work with the leading technology development company in the world.

Qode Health Solutions (Pty) Ltd

Qode was highlighted as a leader in the development of Health Information Management Systems in the USAID Health Landscape Assessment published by Accenture. Qode will work closely with various USAID District Support Partners during the APACE grant period starting Q4 2018 to aid the drive towards achieving the 95-95-95 targets set by UNAIDS.

Foundation for Sustainable Innovation (Pty) Ltd

FSI spread its wings during 2018 with its first student intakes successfully certifying under the Microsoft Imagine Academy. The Microsoft Imagine Academy is an FSI-managed offering of the FPD School of Information Technology, which offers international Microsoft Certifications to aspiring software engineers.

Property Skillz Invest 108 (Pty) Ltd

Property Skillz Invest 108 (Pty) Ltd (PSI) acquired an additional two buildings in Old Farm Office Park during 2018, to serve as head quarters for PSS' growing group of technology affiliates. PSS, Qode and FSI are situated within the same campus-like office park – an environment which is well suited for software development and which supports innovative thinking.



PPO Serve

Introduction

PPO Serve (Professional Provider Organisation Services) is a health management company that helps clinicians deliver Value Based Care, with the aim of making quality healthcare more affordable and accessible to all South Africans.

Private healthcare is becoming increasingly unaffordable for the majority of South Africans. This is due to a fee-for-service tariff based fragmented service model that forces clinicians to work alone, making it hard to collaborate with colleagues, results in inefficiencies and prevents clinicians to deliver the care that their patients really need. PPO Serve helps clinicians to form their own multidisciplinary teams

by providing them with all the tools needed to set up a successful Value Based Care business.

PPO Serve offers the following Value Based Services:

Value Based Care	Value Based Team	Value Based Products	Value Based Toolkit	Value Based Consulting & Analytics
<p>Clinicians can join one of three existing Value Based Care products.</p> <ul style="list-style-type: none"> The Birthing Team GP Care Cell Population Healthcare 	<p>For clinicians just wanting to form a team, PPO Serve has a toolkit to help them set up a PTY LTD company customised to provide Value Based Care to their patients.</p> <p>PPO Serve assists with the process, provides all legally compliant contracts which is adapted to the team's needs & information on how to run a business.</p>	<p>PPO Serve designs customised Value Based Products. Instead of offering reactive healthcare services, PPO Serve develops end-to-end programmes for specific patient cohorts that offer real value priced as a global fee.</p> <p>This includes PPO Serve Patient Management System, a workflow system that enables a team to provide joint patient care.</p>	<p>For Value Based Teams that have Value Based Products, PPO Serve has a menu of tools available to assist teams to improve clinical outcomes, production efficiency and reduce liability risk.</p>	<p>PPO Serve provides consulting services for healthcare companies wanting to become NHI ready, and provides data analytics using their Episode grouper software.</p>

All products are based on PPO Serve's four pillar methodology:

- Integrated Multidisciplinary teams: The ICC® is an integrated clinical team that is owned and managed by the local working clinician. Production quality and costs is vastly improved because of organised, supported teamwork with standardised procedures and data driven continuous improvement.
- Value based contracting: Value Based Care is billed using patient risk based global fees, where clinicians are paid as a team for delivering quality health outcomes for a population rather than being paid for delivering quantity of services.
- Population health care: The team's focus is to promote good health status, identify and manage patients pro-actively according to their respective risk profiles.
- Individualised care plans: Patient centred care is based on proactive care plan customised for their needs and preferences. PPO Serve's patient management system enables the team to deliver care according to evidence based protocols with role specified tasks in systematic work-flow that tracks and monitors the tasks and resulting in quality outcomes.

Value Based Care product highlights for 2018



The Birthing Team® is a PPO Serve franchise that offers an affordable and quality end-to-end Maternity Programme for an all-inclusive global fee. The Birthing Teams are self-owned entities (PTY LTD companies) owned by the local clinician team who work in it. PPO Serve does all the preparatory administrative work, provides all the tools, a patient management system loaded with team based protocol-delivered care and support services to help the clinicians set it up and operate it, leaving them with good income, a more balanced life and better health outcomes for their patients.

The Programme is delivered by a multidisciplinary team that charges a global fee and makes use of task shifting to ensure that the right care is delivered by the right skill level, thereby reducing the cost to deliver healthcare and generating a small profit. Skilled midwives can for example perform most of the routine tasks leaving the specialists to focus on more complex patients. The team meets weekly to discuss complex patients in a multidisciplinary team meeting, ensuring that all members in the team are always informed and that patients needing more care are identified and managed.

As of 18th of December 2018, The Birthing Team has registered 975 pregnant women and delivered 360 babies with a caesarean section rate of 47%, despite the high number of enrolees who have had a previous caesarean section. This number is much lower than the private industry average of 80%. The Birthing Team has an active Facebook following of over 21 000 women and teams are currently based in Johannesburg (Netcare Parklane Hospital), Pretoria (Netcare Femina Hospital), Durban (JMH City Hospital) and Polokwane (Netcare Pholoso Hospital).



The GP Care Cell is a National Health Insurance (NHI) aligned innovation project, that comes out of the HIV Think Tank, which aims to expand access to antiretroviral treatment (ART) for uninsured People Living with HIV by leveraging the capacity of private general practitioners to provide high quality HIV Testing Services and ART outside of public sector health facilities in a controlled manner.

The model was co-designed by FPD, PPO Serve and the South African National Department of Health (NDoH). The pilot was co-funded by NDoH (test kits, medicines and laboratory services) and PEPFAR through USAID. Management of the Programme is done by FPD and PPO Serve and includes clinical management, network management, stock logistics and control, financial administration, monitoring and evaluation and ensures compliance to NDoH governance requirements.

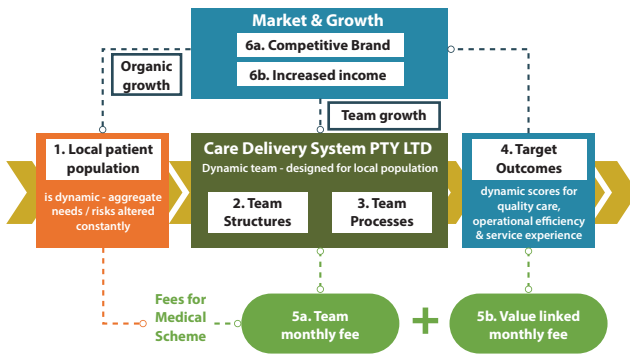
The GP Care Cell has ran as a pilot from May-September 2018 in Tshwane, Gauteng, and included six GPs and one community pharmacy. It has succeeded as proof of concept for the operational model components, achieved desired level of state systems integration through digitisation (reporting and supply chain), proven ability to effectively manage state-funded stock in the private sector, and confirmed patient demand and private sector appetite for a model providing subsidised clinical services to uninsured patients. The GP Care Cell has tested 1 736 clients for HIV, diagnosed 400 HIV+ and started 348 patients on on ART.

The GPCC pilot project succeeded in The GPCC's network organisation approach enabled standardised clinical services and streamlined quality assurance processes resulting in a model with high levels of quality, compliance, control and accountability and potential for economies of scale. The project is currently being rolled out in Ekurhuleni.



Integrated Clinical Consortium® (ICC®)

Population healthcare products provide Value Based Care for a local population. The Alberton Pioneer ICC® is now two and a half years old and has consistently reduced the admission rate. The team remuneration is linked to the value they produce for the Schemes population. The Population healthcare product brings together the full PPO Serve offering aimed at the creation of a system that delivers Value Based Care. This is illustrated in the following picture.



The multidisciplinary team of GPs, a consulting physicians and associate allied healthcare professionals is directed by a Clinical Director and employs nurse care coordinators. The approach includes the POPI enrolling of target patient populations, and the creation of complete and accurate patient information. Care Coordinators assess severity using disease specific, frailty, mental health tools as well as the degree of social isolation. Multidisciplinary team forums then link every patient to individual care plans which are then loaded into the workflow system that specifies tasks and monitors progression. Forums include local clinical and social partners such as from subacute hospitals, the local hospice, and psychiatric facilities. Care plans aim to provide comprehensive proactive care that improves outcomes for patient populations.

A new Value Based Care Population healthcare project is being launched in January 2019 in Pretoria North, with the Government Employee Medical Scheme (GEMS) as the anchor medical scheme.



Skills Panda

Who we are:

Skills Panda is an all-encompassing skills training company that embraces technology to unlock the true potential in the people we train and the corporate organisations we service. We are a black youth owned enterprise that is led by dynamic leaders who have massive experience over the years, in training, BBBEE consultation and human resource management. Through Skills Panda's hub of affiliations and partnerships, we offer accredited short courses and learnerships across a wide spectrum of qualifications that are B-BBEE aligned to ensure maximum benefit on client's Skills Development scorecard.

What we do:

We use a blended learning approach in all our programmes. This teaching method encompasses a hybrid teaching method that combines e-learning, independent study time and traditional face-to-face classroom sessions. In our approach we have adopted the rotation learning model, which allows our students to cycle through a fixed but flexible schedule of face-to-face classroom time and independent online study. This allows the student to be engaged, set their own study pace as well as drive their individual learning experience.

Our products:

- Short Courses
- Learnerships
- Skills Programs
- Soft Skills

STRATEGIC PARTNERSHIP

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

These partnerships include:

International



CLINICAL CARE OPTIONS®

Clinical Care Options (CCO)

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 providers around the world.

FPD, CCO and the University of the Witwatersrand jointly developed the first South African mobile phone application-based educational resource for HIV and TB medicine that was rolled out to healthcare professionals.



Columbia University / New York State Psychiatric Institute

Columbia University Medical Center (CUMC) provides global leadership in scientific research, health and medical education, and patient care. CUMC plays a leading role in global health issues, in particular, capacity building. In collaboration with The New York State Psychiatric Institute (NYSPI), CUMC and NYSPI provide world renowned care and treatment, and conduct research in global mental health.

In 2017, FPD's Research Unit and NYSPI entered into a collaboration to support global mental health research and capacity development in five Southern African countries, including Botswana, Malawi, Zambia, Mozambique and South Africa. Funded through a major research grant from the U.S. National Institutes of Health, this five-year project will support implementation science research in Mozambique that aims to assess different models of community mental health service delivery. This project will also fund pilot research teams from the five African countries to develop the capacity for implementation science research projects in their home countries.



FHI360

FHI360 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 organisations and government entities, developing policies and guidelines that promote health and well-being, and expanding access to education.



ITH | Immune Therapy Holdings

Immune System Regulation

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 ground-breaking HIV related Phase I/II Clinical Trials taking place in Pretoria, South Africa. FPD is also a shareholder of ISR.



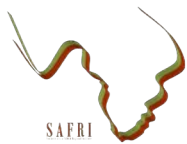
Manchester Business School (MBS)

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 (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% 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).



Sub-Saharan Africa-Faimer Regional Institute (SAFRI)

The Foundation for the Advancement of International Medical Education and Research (FAIMER) promotes excellence in international health professions education through programmatic and research activities. By working to advance health professions education in sub-Saharan Africa, SAFRI supports FAIMER's mission of improving global health by improving education. The FPD joined forces with SAFRI in the curriculum development and Council of Higher Education (CHE) accreditation of the Post Graduate Diploma in Health Professions Education and Leadership. This qualification aims to develop suitably qualified leaders in Health Professions Education (HPE) to meet the increasing complexity of HPE in a fast and continuously changing educational landscape. It is in response to the increasing demand for individuals with specialised knowledge and leadership skills in order to best educate 21st century health professionals and ensure the quality of healthcare in Sub-Saharan Africa.

Yale

Yale School of Epidemiology and Public Health

Founded in 1915, Yale's School of Public Health is one of the oldest accredited schools of public health. In the 1960s it was decided to merge the Department of Public Health with the Section of Epidemiology and Preventive Medicine, a Unit within the Department of International 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 among members and improve relationships among 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, an FPD and Rural Health Initiative joint venture, was established as separate, not for profit legal entity during 2012. AHP(NPC) and FPD will continue to collaborate closely on recruitment and retention of highly skilled healthcare workers AHP forms part of the consortium's that are implementing the NHI Pilot Project to ensure that Primary Healthcare Clinics have doctors on site and specifically focuses on recruitment.



Aurum Institute

The Aurum Institute is a public-benefit organisation with over 19 years' experience in leading the response, treatment and research efforts to eradicate TB and HIV. Aurum has been working alongside government, the mining industry, among NGO's and in communities

to better understand the epidemics to provide real solutions and to improve the health of people and communities living in poverty through innovation in global research, systems, and delivery. Aurum is part of a consortium of partners that are implementing the NHI Pilot Project to ensure that Primary Healthcare Clinics have doctors on site.



CareWorks

CareWorks is a private HIV management company based in South Africa and is fully accredited with the Council for Medical Schemes in SA. CareWorks make a tangible impact, particularly in the workplace, on the degenerative effects that HIV & AIDS, as well as TB, have on individuals, organisations and South Africa as a whole. CareWorks is an implementation partner of FPD in the Programmatic implementation and Technical Assistance (TA) for HIV/ AIDS and Tuberculosis (TB) Prevention, Care and Treatment Services throughout the Health System in South Africa.



Centre for Communication Impact (CCI)

CCI is a South African not for profit company (NPC), established in 2004. CCI has expertise in applying communication and development theory, qualitative and quantitative research methods, organisational development and governance, and financial and grant management to achieve impactful and sustainable public health communication solutions. The organisation has extensive experience working in partnership with government departments, funders, civil society sectors, not-for-profit partners and the private sector to design, implement, monitor and evaluate award-winning and impactful national communication programmes. CCI is an implementation partner of FPD in the Programmatic implementation and Technical Assistance (TA) for HIV/AIDS and Tuberculosis (TB) Prevention, Care and Treatment Services throughout the Health System in South Africa.



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 coordinates 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.



DENOSA

Democratic Nursing Organisation of South Africa (DENOSA)

In addition to its advocacy role in 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 Department of Health in supporting Health Systems Strengthening. During 2017, FPD's Technical Assistance Cluster provided district based technical assistance support with the following districts; Amatole district and Buffalo City Metro. FPD also provides community-based testing in Buffalo City Metro, Sarah Baartman, Nelson Mandela Bay Metro and OR Tambo until 31 December 2018.



Department of Health Free State

FPD operates with the Free State Department of Health within Fezile Dabito district to relieve the burden of stable ART patients on the health facilities and to increase retention of ART patients to 70% in care five years after treatment initiation.



Department of Health Gauteng

FPD has a long-standing relationship with the Gauteng Provincial Department of Health in developing provincial capacity through technical assistance and training. FPD is the comprehensive technical assistance partner for Tshwane Districts. FPD also provides community-based testing in Sedibeng, City of Johannesburg and City of Tshwane and supports ART adherence programmes in Tshwane and Sedibeng until 31 December 2018.



health

Department:
Health
PROVINCE OF KWAZULU-NATAL

Department of Health Kwazulu-Natal

FPD partners with the KwaZulu-Natal Department of Health to provide community-based testing and linkage services in Ugu, Zululand, Umkhanyakude, eThekweni and Uthungulu until 31 December 2018.



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF
EDUCATION

Department of Education Limpopo

The partnership between FPD and the Limpopo Provincial Education Department is relatively new and was occasioned by the funding that FPD secured from USAID to introduce a Reading Support Project to support and promote reading literacy in African Home Languages and English as First Additional Language in the Foundation Phase Schools. The project offers targeted support to Curriculum Advisors and school based Departmental Heads to enhance their skills and competencies in the teaching of literacy at Foundation Phase level (Grades 1-3). In addition, principals/deputies are also provided with the necessary training to enable them to introduce and sustain strategies that would create environments that are conducive to the promotion of reading and literacy practises/cultures in their schools. The final component of the intervention revolves around the provision of appropriate Learning and Teaching Support Materials (LTSM) packages to participating schools to support reading activities. This partnership started in November 2016 and is intended to continue up to the end of 2020. FPD is leading a consortium made up of Molteno Institute, the South African Institute for Distance Education (SAIDE), Oxford University Press - South Africa (OUP-SA) and Voluntary Services Overseas (VSO) to implement this project.



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF HEALTH & SOCIAL DEVELOPMENT

Department of Health Limpopo

FPD has a long-standing relationship with the Limpopo Provincial Department of Health, developing provincial capacity through technical assistance and training. FPD is the comprehensive technical



health

MPUMALANGA PROVINCE
REPUBLIC OF SOUTH AFRICA

Department of Health Mpumalanga

FPD has a long-standing relationship with the Mpumalanga Provincial Department of Health, developing provincial capacity through technical assistance and training. FPD is the comprehensive technical assistance partner for the Nkangala District. FPD also provides community-based testing in Nkangala, Gert Sibande and Ehlanzeni and supports ART adherence programmes in Nkangala and Gert Sibande until 31 December 2018.



Education and Sport Development

Department of Education and Sport Development
Departement van Onderwys en Sportontwikkeling
Lefapha la Thuto le Tlhabololo ya Metshameko

NORTH WEST PROVINCE

Department of Education North West

The partnership between FPD and the North West Provincial Education Department is relatively new and was occasioned by the funding that FPD secured from USAID to introduce a Reading Support Project to support and promote reading literacy in African Home Languages and English as First Additional Language in the Foundation Phase Schools. The project offers targeted support to Curriculum Advisors and school based Departmental Heads to enhance their skills and competencies in the teaching of literacy at Foundation Phase level (Grades 1-3). In addition, principals/deputies are also provided with the necessary training to enable them to introduce and sustain strategies that would create environments that are conducive to the promotion of reading and literacy practices/cultures in their schools. The final component of the intervention revolves around the provision of appropriate Learning and Teaching Support Materials (LTSM) packages to participating schools to support reading activities. This partnership started in November 2016 and is intended to continue up to the end of 2020. FPD is leading a consortium made up of Molteno Institute, the South African Institute for Distance Education (SAIDE), Oxford University Press - South Africa (OUP-SA) and Voluntary Services Overseas (VSO) to implement this project.



Department of Health North West

FPD partners with the North West Department of Health to provide community-based testing and linkage services in Bojanala and Ngaka Modiri Molema Districts until 31 December 2018.



Dira Sengwe

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, national AIDS conferences in the world attracting over 4 000 attendees. FPD provides the Conference Secretariat for these conferences.



The Foundation for Professional Development Fund

The Foundation for Professional Development Fund is a nonprofit 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. FPD has partnered with the Fund to implement the National HIV Think Tank project.



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.



HUMANA
People to People

Humana People to People South Africa

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 who contribute 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.



IQVIA

IQVIA (NYSE:IQV) is a leading global provider of information, innovative technology solutions and contract research services focused on helping healthcare clients find better solutions for patients. Formed through the merger of IMS Health and Quintiles, IQVIA applies human data science - leveraging the analytic rigor and clarity of data science to the ever-expanding scope of human science - to enable companies to reimagine and develop new approaches to clinical development and commercialisation, speed innovation and accelerate improvements in healthcare outcomes. Powered by the IQVIA CORE™, IQVIA delivers unique and actionable insights at the intersection of large-scale analytics, transformative technology and extensive domain expertise, as well as execution capabilities. With more than 55,000 employees, IQVIA conducts operations in more than 100 countries.

IQVIA is a global leader in protecting individual patient privacy. The company uses a wide variety of privacy-enhancing technologies and safeguards to protect individual privacy while generating and analysing the information that helps their customers drive human health outcomes forward. IQVIA's insights and execution capabilities help biotech, medical device and pharmaceutical companies, medical

researchers, government agencies, payers and other healthcare stakeholders tap into a deeper understanding of diseases, human behaviors and scientific advances, in an effort to advance their path toward cures. To learn more, visit www.IQVIA.com.



Molteno

Molteno brings to the Consortium 42 years experience in promoting literacy in African languages and an extensive record of training and coaching district CAs and HODs using a combined training and mentorship approach as well as established relationships with national and provincial DBEs. Molteno is a consortium partner of FPD's USAID Reading Support Programme.



National Department of Health

The National Department of Health (NDoH) has embarked on a programme of increasing the presence of doctors in primary healthcare clinics on either full time or part time. FPD, as lead agency, together with BroadReach, Aurum, Right to Care, the Wits Reproductive Health & HIV institute (WRHI) and African Health Placements (AHP) forms the consortium that will be responsible for providing the required services to the National Department of Health until March 2018.



Oxford University Press Southern Africa

Oxford University Press SA bring 100 years of in-country support in developing the ability of educators to teach reading. They do not only publish materials but also support teachers through teacher training workshops, and online support platforms. Oxford University Press SA is the first choice of thousands of teachers across South Africa for teaching resources. Oxford SA is a consortium partner of FPD's USAID Reading Support Programme.



PEN

PEN is a non-profit, 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.



PEOPLES UNI

The People's Open Access Education Initiative (Peoples-uni) is a non-profit organisation established in 2007 to help build public health capacity in developing countries through low cost online education to health professionals. Peoples-uni aims to provide Public Health education for those working in low- to middle-income countries who would otherwise not be able to access such education, via e-learning. They utilise a 'social model' of capacity building, with volunteer academic and support staff and Open Educational Resources available through the Internet, using a collaborative approach and modern Information and Communication Technology.



PPO Serve

PPO Serve (Professional Provider Organisation Services) is a private company that creates new local healthcare systems that work for both patients and doctors, with the aim of making quality healthcare more affordable and accessible to all South Africans. Private healthcare is becoming increasingly unaffordable for the majority of South Africans. This is due to a fragmented service model and the absence of remuneration models that fund value. PPO Serve develops

multidisciplinary teams, called Integrated Clinical Consortia™ (ICC™), which provide comprehensive healthcare in systems for the people they serve and are paid based on the value they deliver. PPO Serve supplies the support services and easy to use toolkits and an IT system to enable them to work together in teams. During 2017, FPD worked closely with PPO Serve to conceptualise and implement the following two innovations: 1) FPD's GP Care Cell model to contract and manage private GPs and community pharmacies to initiate uninsured PLHIV outside public sector clinics; and 2) an Ideal Clinic modelling project in line with the vision for NHI. Both projects will be piloted in 2018.



Right to Care

Right to Care is supporting and delivering prevention, care, and treatment services for HIV and associated diseases. They work with government and communities to find pioneering solutions to build and strengthening public healthcare. Right to Care is part of the consortiums of partners that are implementing the NHI Pilot Project to ensure that Primary Healthcare Clinics have doctors on site that ended in March 2018.



Partners for a healthier nation

Society for Family Health (SFH)

SFH is South Africa's leading non-profit, non-governmental provider of health products, services and communications, and South Africa's leading social marketing organisation. 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 organisation and since that date has distributed 1 009 300 619 condoms.

Additionally, since its inception, 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 Service International, the world's leading network of social marketing organisation with affiliates in 69 countries around the world.

FPD and SFH 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 reversion, Counselling and Testing" project until 31 December 2018.



South African Institute for Distance Education (SAIDE)

Saide has 23 years of experience in distance education programmes for educators and developing open educational resources including material development. Saide's African Storybook Initiative, is a digital library of over 600 unique storybooks for early reading, which are openly licenced supplementary readers in all SA official languages designed to support home language and English First Additional Language reading instruction. Saide is a consortium partner of FPD's USAID Reading Support Programme.



South African Medical Association (SAMA)

The South African Medical Association (SAMA) is a nonstatutory, 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 projects and a number of educational projects aimed at SAMA members.



The South African National AIDS Council (SANAC)

The South African National AIDS Council (SANAC) is a voluntary association of institutions established by the national cabinet of the South African Government to build consensus across government, civil society and all other stakeholders to drive an enhanced country response to HIV, TB and STIs. In the absence of a government coordination body, SANAC convenes a Technical Working Group on GBV of development partners, government civil society and other stakeholders. This is currently the only forum where organisations in the GBV field can meet and share information.



Southern African HIV Clinicians Society (SAHIVCS)

The Southern 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 the skill building programmes at a number of conferences that FPD organises.



South African Institute of Healthcare Managers (SAIHCM)

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 adapted 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 efforts to enhance the status and qualifications of healthcare managers within the 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.



South Africa Society of Occupational Medicine (SASOM)

SASOM is a Professional Society, registered as a special interest group with the South African Medical Association and is affiliated to the International Commission of Occupational Health. SASOM entered into a partnership with FPD to offer a series of online training programmes on occupational health and safety to healthcare workers.



VSO

VSO recruit and manage teams of international and local school management and language teaching experts and have experience in supporting education programmes in 16 countries to improve learning outcomes including literacy. VSO is a consortium partner of FPD's USAID Reading Support Programme.



Wits Reproductive Health and HIV Institute (WRHI)

The Wits Reproductive Health and HIV Institute (WRHI) was established in 1994 to support the new South African government formulate and implement new national policies around sexual and reproductive health and is part of the Faculty of Health Sciences and the largest research institute of the University of the Witwatersrand. WRHI is part of the consortium of partners that is implementing the NHI Pilot Project to ensure that primary healthcare clinics have doctors on site.

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Mr D Bizani



Ms DG Blom



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Mrs PS Botoman



Ms Z Bronkhorst



Ms TE Chauke



Dr A Combrink



Dr RJ Davin



Ms L de Weerd



Ms GC Devereux



Ms NC Duba



Mr F Dube



Mr M Essa



Ms TL Farirai



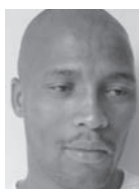
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Ms MM Fourie



Mr D Gausi



Ms AA Gerber



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Ms MI Hanong



Mr TT Hoveka



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Dr ND Kalombo



Mrs NP Kantyo



Mrs B Kapp



Ms S Kellerman



Mr M Kentane



Dr NM Kgopong



Dr MF Kindoki



Ms A Kruger



Mr W Kruger



Mr L Kute



Mr AM La Grange



Ms SD Lelobo



Mrs NP Legodi



Mr AM Lesele



Mr MS Lwana



Mrs SR Mabela



Ms SN Madondo



Miss CNK Maginindane



Mr S Mahashe



Mr MP Mahlaela



Mrs FS Mahlangu



Ms N Makayi-Kali



Dr GRM Makgoka



Mr HC Makhathisa



Mr MK Makhavhu



Ms MJ Makhura



Miss PG Makobeni



Ms MP Makwela



Mr MF Mamadi



Ms R Manaka



Ms TJ Manaka



Mr ML Manthata



Dr TF Manthata



Mrs LH Manxiwa



Mrs ME Manzini



Miss NE Mapitsa



Mrs KY Marule



Mr MJR Masango



Ms MC Masemola



Dr TD Masenya



Dr MC Mashamba



Mr FP Masilela



Mr G Masondo



Ms MM Matabane



Ms EPM Mathabe



Mr JK Matlala



Mrs T Matlala



Ms NM Matlou



Dr NP Mavuso



Mr PD Mawasha



Miss ZM Mayana



Miss B Mbanjana



Mrs J McGarry



Ms N Mchiza



Dr A Medina-Marino



Ms CZ Mngamqo



Mr MD Mgulwa



Miss NS Mkasi



Ms ML Mlambo



Dr ASR Mmekoa



Mr J Mmekwa



Mrs LM Mnisi



Mr VJ Mnisi



Ms BK Mnyamana



Dr MJ Moabelo



Mrs MA Mochaki



Mrs MN Modiba



Ms MP Moepye



Ms BS Mogakane



Mrs J Mokoena



Mrs R Molate



Miss LC Molelekoa



Ms R Monare



Miss TE Montalama



Mrs NC Motlana



Mr MI Motloutsi



Dr L Motsilili



Mrs DK Moyana



Ms N Mtande



Ms KA Mudau



Mr M Mudau



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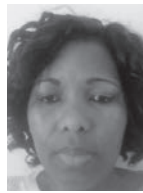
Mrs K Nair



Mrs MN Ncube



Mr SS Ncube



Mrs MB Ndima



Miss N Ndzantsi



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Mr RR Netshitongwe



Ms SN Ngoza



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Ms N Nxuweni



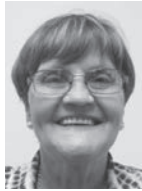
Mr DH Olivier



Mr IB Opio



Mrs RM Overmeyer



Mrs AC Peters



Mrs MM Phatlane



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Mr KKE Pullen



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Ms SL Ramaila



Ms N Ramdas



Mr JM Ramphisa



Mr MI Rampilo



Mr PS Rangoato



Mr MS Rasegotoma



Dr MS Rashopole



Ms W Rasi



Mrs CL Roelofsen



Miss L Rossouw



Miss PV Sakala



Dr RE Schoeman



Dr Abe Seakamela



Ms PL Sebone



Ms PJ Seforo



Mrs MD Sehuba



Ms MP Selepe



Dr S Shamu



Mrs MS Shiburi



Ms R Shiviti



Miss S Shologu



Ms NP Sibanyoni



Ms IM Sitole



Mr SR Skidmore



Prof JA Slabbert



Mr JD Slabbert



Ms AM Smith



Mr RJ Stephen



Mrs JY Swanepoel



Mr NH Swanepoel



Ms H Swart



Dr FS Tema



Ms NM Thantsa



Mrs MF Tsolo



Dr MA Uys



Mrs GW van der Walt



Mrs A van Dyk



Dr EJ Venter



Mr ALA Vinagre



Dr CA Visser



Dr MS Vlug



Ms JS Wansink



Ms E Webb-Mazinyo



Mrs Z Williams



Mr GM Wolvaardt



Miss PF Wongama



Ms VV Zele



Mrs NM Zuma

Junior Management and Skilled Staff



Ms TI Baloyi



Ms TB Bambo



Ms NLA Booi



Ms ST Bopape



Mrs NS Chiloane



Miss LA de Vos



Mr D Du Bruyn



Mr P Du Toit



Mrs M Engelbrecht



Mrs C Ferreira



Mr T Gaba



Mr AP Gbore Oluwa



Ms EK Gindra



Mr J Gounder



Ms NM Hatang



Ms C Hira



Mrs N Hlengwa



Ms A Jansen



Mr CJ Jansen van Vuuren



Mr MR Joubert



Ms CL Joyce



Mr MA Kekana



Mr IJG Kgosiemang



Mrs GN Khoza



Mrs TV Khumalo



Ms MM Khunou



Ms S Khupakonke



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Mrs MM Kubayi



Mr MA Lediga



Mrs MD Lekala



Mr WL Lekgau



Ms MN Lewele



Mr S Lindeque



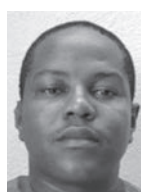
Mr CP Louwrens



Miss P Lukhele



Mr SM Lukhozi



Mr L Luwaca



Ms Z Luwaca



Miss YZB Mabamba



Miss SH Mabanga



Mr KJ Mabasa



Ms NT Mabasa



Ms TA Mabena



Ms MP Mabogo



Mr E Machebele



Mr MS Machete



Mrs LM Maenetja



Mr CT Mafliika



Ms H Mafuyeka



Mr SK Magagane



Mr KT Mahasela



Ms NB Mahlalela



Mrs ES Mahlangu



Mr NG Mahlangu



Miss W Mahlanyana



Miss DM Mahlase



Miss NC Makatu



Mr JP Makgamatha



Miss NS Makhubo



Miss MQ Makwela



Ms VM Makwela



Mr TJ Malema



Mr TD Malemela



Mrs B Maluleke



Ms NPS Mampuru



Ms P Manilall



Miss NN Manqele



Mr LE Maseko



Mrs MP Mashaba



Mr MZ Mashaba



Ms P Masia



Mr AH Masilela



Mrs R Masingi



Ms EEN Masondo



Ms TE Masuku



Mrs NA Mathabatha



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Mr ER Matheka



Mr LJ Mathibela



Mrs ZN Mathibela



Miss M Mathode



Mr S Maunatlala



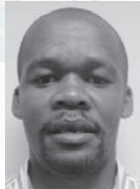
Mr RM Mawarire



Ms TK Mawayi



Ms LS Mazibuko



Mr K Mjamba



Miss HN Mkhombo



Mr E Mkhonto



Mr TJ Mkhwanazi



Ms M Mlanjeni



Ms T Mncanyana



Ms LD Mngomezulu



Ms LT Mnisi



Ms MM Moalamedi



Mrs GM Mobe



Mr MI Modiba



Miss MA Mohale



Ms ER Moima



Miss TN Mojapelo



Mr NH Mokaba



Ms KC Moke



Mrs GA Mokoena



Mr TL Mokou



Mrs TD Molapo



Mrs A Molefe



Ms TP Molise



Mr MT Monyamane



Ms L Monyemoratho



Ms BA Moroka



Miss MF Mothiba



Mr PLR Mothotse



Miss FVM Motsogi



Mr A Mtembi



Mr GH Mthembu



Miss L Mtshabi



Mr FM Munyai



Ms MP Munzhezzi



Mrs N Naidoo



Miss PP Nakene



Ms N Ndamase



Mr P Ndikuyenze



Mrs MB Ndimande



Miss A Ndlovu



Mrs N Ndwambi



Mr MM Nemaconde



Mrs NP Nene



Miss DR Netshitshivhe



Mr S Ngqobe



Mr SA Nkabinde



Mr Z Ntantiso



Mrs BF Nxumalo



Ms NS Paul



Ms M Payne



Mr TC Phalatse



Ms P Pinzi



Mrs M Pitsoane



Mr GE Podile



Mrs L Pullen



Mrs T Qwabe



Miss AP Ralikhwatha



Mr LF Raphadu



Ms LT Raphela



Ms MM Rapodile



Mr S Ravele



Mrs A Roberts



Miss SD Sebopela



Ms KR Segakweng



Ms MP Sekhu



Ms MD Seshoene



Ms DKP Shibiti



Mr MGM Shikwambana



Mr TN Shikwambana



Ms LF Shongwe



Mr O Sibhoko



Mrs IM Sigid



Ms N Sikiti



Ms TZ Sithole



Ms RZ Skhosana



Mr N Slabbert



Miss FB Slaven



Mrs SD Smalberger



Ms Z Sobuza



Ms I Swart



Mr TP Tiro



Mr CK Tladi



Mr T Tsatsi



Mrs U Tshazibana



Miss MC Tshenuwani



Mr A Tutton



Mrs I Van der Merwe



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Ms N Vilakazi



Mr HO Vukeya



Miss IB Vuma



Ms L Wolvaardt



Mrs TH Wright



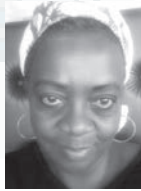
Mr TF Xaba



Mr QB Xulu



Ms EF Zaba



Mrs P Zalani



Mrs TM Zuzani

Administrative and Support Staff



Mrs MT Agida



Mrs EN Al Mamun



Mr BW Alset



Mr T Aphane



Miss IS Baloi



Miss CM Baloyi



Mr D Baloyi



Ms DP Baloyi



Ms KS Baloyi



Ms MI Baloyi



Ms MP Baloyi



Ms NJ Baloyi



Ms NN Baloyi



Miss PL Baloyi



Mr RA Baloyi



Mr SM Baloyi



Mrs TG Baloyi



Ms P Bana



Miss CT Bapela



Mr BB Bashele



Miss LR Batela



Ms TM Bates



Mr S Beja



Mr NB Bengeza



Miss N Blessie



Mrs DR Blok



Miss KP Bogoshi



Ms TM Bopape



Mr CSL Borman



Mr T Boroko



Miss PF Botha



Ms ZS Buhali



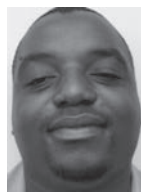
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Miss KG Buthelezi



Ms NN Buthelezi



Mr NP Buthelezi



Miss NS Buthelezi



Ms SL Buthelezi



Ms ZP Buthelezi



Miss PJ Cele



Ms SK Chauke



Mrs SR Chauke



Miss VV Chavani



Mr BK Chego



Ms BM Chilenge



Mr PR Chubisi



Ms AF Daantjie



Miss YR Damba



Miss T Danca



Mrs N Dayimani



Mrs C De Lange



Ms L De Villiers



Ms GKS Diale



Ms KKB Dibaga



Ms MPS Dibakwane



Mr SD Dikobe



Ms JP Dladla



Ms SA Dladla



Miss BC Dlamini



Miss FNF Dlamini



Miss NC Dlamini



Ms NL Dlamini



Ms TI Dlamini



Ms TW Dlamini



Mr LSA Dlangalala



Mr NNS Dlangalala



Miss S Dlangamandla



Mr SC Dlodla



Ms H Du Plessis



Ms I du Plessis



Miss GN Dube



Miss SL Duma



Mrs B Dyakop



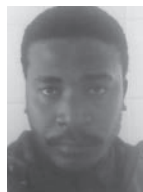
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Ms TM Fandesio



Ms MD Fenyane



Mr I Fihla



Ms LN Flank



Ms JJ Francis



Miss RT Frans



Miss ST Fundama



Mrs NV Gantsho



Ms YS Gantsho



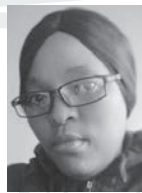
Miss S Gebe



Mr TG Getyane



Ms PR Godfrey



Ms TM Gololo



Mr RS Gordon



Ms PZ Gqeba



Ms Y Green



Mrs NB Grobler



Miss T Gumede



Mr WS Gwala



Ms SM Hamese



Ms N Hanabe



Mrs SM Handi



Ms M Havhi



Ms MLE Hlalele



Miss TE Hlangwana



Mrs CH Hlatshwayo



Ms MM Hlatshwayo



Ms NS Hlatshwayo



Ms MR Hlekane



Mr J Hlongwane



Mrs NP Hlongwane



Miss SR Hlongwane



Ms SF Hlophe



Ms PLT Hlungwani



Ms A Honono



Mr TJ Hosha



Mr OJ Jabari



Mr MD Jako



Mrs E Jansen van Vuuren



Mr JM Jeleni



Mr NH Jiyane



Mr L Joodt



Mr T Jumo



Miss PN Kabini



Miss SZ Kabini



Ms BK Kambula



Ms NQ Kambule



Mrs SK Karsten



Mr AE Keebaye



Ms LM Kenny



Mrs TO Kerai



Ms TF Ketsise



Ms KM Kgari



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Mr JM Khalo



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Mr GV Khanyi



Mr IL Khanyile



Mrs S Khалу



Ms CN Kheswa



Ms GV Khobedi



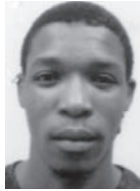
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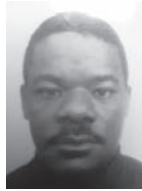
Mr AE Khoza



Miss EL Khoza



Mr LS Khoza



Mr SB Khoza



Miss WA Khoza



Mr BL Khumalo



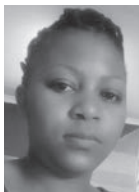
Miss IV Khumalo



Miss JK Khumalo



Ms NP Khumalo



Ms SSO Khumalo



Ms TP Khumalo



Miss TZ Khumalo



Miss TP Khuzwayo



Mr S Kobe



Miss SE Kokela



Ms MR Koma



Miss TB Komane



Miss KP Komape



Ms DO Kompi



Ms T Koti



Ms LN Kubeka



Ms MB Kubhai



Miss ME Kubyana



Mr MS Kubyane



Mrs NJ Kubyane



Miss EN Kunene



Miss NT Kunene



Mrs PBS Kunene



Ms SN Kunene



Ms ZMC Kunene



Mrs MN Kutase



Ms Z Kute



Miss MM Kwele



Mrs NM Kwetepane



Mrs J Kyndell



Miss N Lamani



Ms S Lamfti



Mr TH Langa



Ms N Lebeko



Ms DC Lebepe



Ms ML Lebepe



Mr MW Ledwaba



Miss MD Legodi



Miss N Lehutso



Miss MPL Lekalakala



Miss SB Lekitlane



Mr TB Lengweng



Mr JM Lenyeki



Ms MT Lephuthing



Ms O Leshaba



Mr NG Letseka



Miss NS Letshaba



Mrs LM Letsoene



Ms ME Letsoalo



Ms JM Letsolo



Ms Z Lowting



Miss AR Lubisi



Ms PM Lubisi



Ms LC Lukhele



Miss L Lukheli



Ms MA Maakane



Ms TC Mabadahanya



Ms Y Mabadi



Ms MV Mabalane



Miss E Mabasa



Miss IA Mabasa



Miss MR Mabe



Mr KG Mabena



Mrs NF Mabena



Ms SA Mabena



Ms M Mabesele



Mrs TR Mabinane



Ms P Mabirimisa



Miss NR Mabokela



Ms MM Mabotja



Ms TP Maboye



Mr HD Mabunda



Mrs NC Mabunda



Miss T Mabusa



Ms TT Mabuyangwa



Mrs N Mabuza



Mr NC Mabuza



Mr SP Mabuza



Mrs KG Machabaphala



Mr MD Machaka



Miss ML Macheke



Miss KP Machevele



Ms ZH Madide



Miss AZ Madikani



Ms L Madisha



Ms RJ Madisha



Ms SJ Madondo



Ms Y Madubedube



Ms M Madzebu



Mrs N Maenetsa



Miss RI Maeyane



Mr KL Mafele



Ms BA Mafoko



Mr NH Mafu



Miss T Magada



Miss S Magafane



Mrs RS Magagane



Ms ME Magalefa



Mr MI Magawu



Ms GP Magoa



Ms A Magobongo



Mrs RK Magome



Miss N Maguada



Mrs NS Magubane



Ms L Magwane



Mrs HM Mahlaba



Mr PT Mahlaba



Miss JM Mahlaela



Ms P Mahlambi



Mrs AP Mahlangu



Ms EN Mahlangu



Mrs FL Mahlangu



Ms IR Mahlangu



Mrs KJ Mahlangu



Miss LB Mahlangu



Mrs MS Mahlangu



Ms MX Mahlangu



Miss PM Mahlangu



Ms SN Mahlangu



Ms SS Mahlangu



Ms VP Mahlangu



Mrs MM Mahlare



Mrs MR Mahlare



Ms KN Mahlase



Miss MA Mahlase



Ms TR Mahlasela



Mrs N Mahlatjie



Ms EP Mahlatsi



Ms MM Maila



Mr MV Maimela



Mrs JM Maja



Ms T Maja



Ms L Majiza



Mr HC Makena



Mrs MT Makgamatha



Ms KA Makgatho



Ms MK Makgato



Miss MC Makgobola



Ms TN Makhalantshetse



Miss NN Makhoba



Mr MLW Makhura



Mr CK Makhutudisa



Ms LD Makinita



Mrs EM Makofane



Ms RC Makonqo



Miss NH Makubu



Ms MM Makuoane



Ms SD Makuwa



Mr C Makuyana



Ms CY Makwakwa



Miss SB Malahla



Mrs AC Malaka



Mr DF Malangeni



Ms P Malatji



Ms RME Malatjie



Ms KC Malaza



Mr MS Malebye



Ms IF Maledi



Ms LS Maleka



Miss MD Maleka



Mrs AL Malele



Mr MP Malemela



Ms B Malobola



Mrs F Malomane



JN Maluleke



Ms MG Maluleke



Ms N Maluleke



Miss MM Mametja



Mr TS Mampa



Ms M Manaka



Ms MA Manamela



Miss SE Manana



Mr SM Manana



Ms NP Manda



Ms ZP Mandlaze



Ms A Mandoyi



Ms DM Manganye



Mrs MJ Mangena



Ms DT Mangwane



Ms N Mangwane



Mrs P Mangwane



Ms SA Mankahla



Ms JM Mankge



Mr VF Manzini



Mr TA Maoka



Miss SC Mapatlakane



Ms JB Mapheto



Mrs MMRR Maphoto



Miss NZ Maphumulo



Mrs WPB Maphumulo



Ms TE Mapotela



Mr XE Maqwele



Ms F Marindili



Mr G Maringa



Mrs MC Marobe



Ms MM Maroka



Mr PV Marumo



Mrs CH Marx



Mrs RK Masedi



Mr MA Masehela



Mr IL Maseko



Ms N Maseko



Ms SN Maseko



Miss MF Masemola



Mrs MJ Masemola



Mr MM Masemola



Ms MS Masemola



Mr P Masemola



Mr RD Masenge



Mr CM Masenya



Ms B Mashaba



Miss BG Mashaba



Mr DC Mashaba



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Miss TC Mashaku



Mr M Mashapa



Miss TV Mashavane



Ms DT Mashele



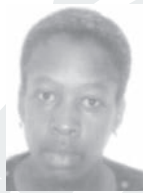
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Mrs MR Mashele



Miss BJ Mashiane



Miss EP Mashiane



Ms DM Mashigo



Mr BM Mashile



Mrs SN Mashiloane



Ms MT Mashiya



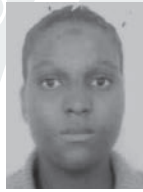
Mr AM Masilela



Mr TE Masilela



Ms AT Masilo



Ms LO Masilo



Ms SL Masina



Miss J Masingi



Mr TR Masite



Miss RT Masiteng



Mr R Masopha



Ms LM Matabane



Miss ET Matabula



Miss NE Matee



Ms TP Mathabela



Ms R Mathada



Mr BL Mathebula



Ms DI Mathebula



Miss L Mathebula



Ms NF Mathebula



Miss TG Mathebula



Mr TN Mathebula



Mrs MS Mathedimusa



Mr J Mathelela



Ms MG Mathelele



Mrs SL Mathelele



Ms NB Mathenjwa



Mr KM Mathibela



Mr TP Matidza



Ms PM Matjeke



Ms IM Matjila



Ms MP Matjipa



Miss PK Matlakala



Ms MM Matlala



Ms TL Matlala



Ms DM Matlawa



Miss MC Matlhaba



Ms LS Matome



Mr L Matsepane



Ms MP Matshi



Miss IP Matsho



Ms GN Matunjwa



Ms MA Maumela



Miss JN Maunatlala



Ms NW Mavuso



Ms SG Mavuso



Ms K Mawela



Ms M Mayaba



Miss N Mayeki



Miss MP Mazibuko



Mrs NF Mazinyo



Mr S Maziya



Ms MS Mbaola



Ms BB Mbatha



Ms DG Mbatha



Ms S Mbobo



Mr PT Mbokane



Miss SM Mbokane



Miss P Mbonani



Ms F Mbopha



Mrs NE Mboweni



Mr AJ Mcpherson



Ms EN Mdlatose



Ms AB Mdletshe



Miss FP Mdletshe



Miss CN Mdluli



Mr O Mdyolo



Miss JP Mdziba



Ms SB Mdzibha



Ms CM Mello



Ms MM Mello



Miss JI Menyuku



Ms VM Merile



Mrs SL Meyer



Mr BR Mfolo



Mr MN Mgyai



Miss CH Mgeni



Ms N Mgulwa



Mr TM Mgweba



Ms A Mhlaba



Miss DB Mhlari



Miss SN Mhlongo



Miss T Miga



Miss VB Mitchell



Miss LF Mkafulo



Ms MN Mkhabela



Miss CB Mkhathswa



Mr H Mkhawana



Mrs ZB Mkhize



Ms NP Mkhondo



Ms GZ Mkhwanazi



Ms A Mlati



Ms B Mlotana



Mr MS Mmotla



Ms S Mngomeni



Ms EC Mngomezulu



Ms NT Mngqibisa



Miss CN Mnguni



Ms M Nguni



Miss SM Mnguni



Miss ZN Mnguni



Ms E Mnisi



Miss J Mnisi



Ms SD Mnisi



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Ms CK Mochechela



Ms KM Modiba



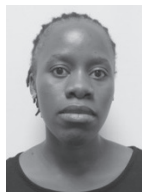
Ms RB Modise



Ms T Modise



Ms RM Moela



Miss LB Moeng



Ms SM Moetanaló



Mrs LS Moffat



Mr MS Mofokeng



Ms MV Mofokeng



Miss PP Mofokeng



Ms T Mogakane



Ms AM Mogale



Mr KA Mogale



Miss NG Mogale



Ms MH Mogane



Mr JT Mogashane



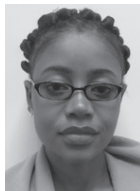
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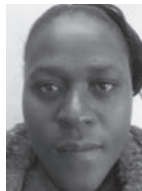
Ms TN Mogofe



Mrs CM Mogotlane



Ms KDJ Mohale



Ms DJ Mohlabane



Miss MC Mohlala



Ms MG Mohlala



Ms ML Mohlamonyane



Mr P Mohlamonyane



Mr JS Mohoaduba



Miss OL Mohoree



Miss PO Moifatjane



Mr MJ Moilakgomo



Mr MD Mojapelo



Ms FM Mokale



Ms JM Mokati



Mr TJ Mokatsane



Mrs M Mokgetle



Ms C Mokhofo



Miss SJ Mokhonwana



Mr MV Mokoatedi



Ms IM Mokoena



Miss LE Mokoena



Miss LK Mokoena



Ms PM Mokoena



Ms PM Mokoena



Mrs TP Mokoena



Mrs DS Mokone



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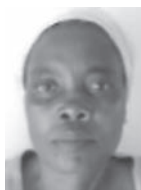
Mr P Mokwena



Ms WP Mokwena



Mr MD Molalathoko



Mrs M Molefe



Ms TG Molefe



Ms TV Molefe



Miss TG Molefi



Ms M Molele



Mrs NH Molepo



Miss M Molobela



Mrs N Moloelang



Ms RA Molokomme



Mr KL Molomo



Ms L Moloto



Ms LM Moloto



Ms MP Monareng



Ms MP Mongaula



Ms MH Monguni



Ms LS Monyamane



Ms NJ Monyebodi



Mr DP More



Mrs SL Moreti



Mrs CM Moretsi



Mr AJ Moree



Ms LN Moropa



Ms L Morota



Mrs KE Mosehle



Mr PF Moshidi



Mr PBD Mosuoé



Ms KM Motau



Ms NP Motau



Ms NL Motha



Mr LB Mothapo



Mr JK Mothemane



Miss T Mothokoa



Mr JN Mothupi



Ms S Motileng



Mr JT Motileni



Mr K Motja



Mr BF Motla



Mr TK Motloung



Miss MF Motloutsi



Ms MM Motloutsi



Ms RP Motsamai



Mr DL Motsepe



Mr AXM Motshegoa



Mr KB Motshwane



Ms KH Motsoko



Miss N Mpakati



Mr T Mpane



Ms NP Mpfuni



Mrs CR Mphahlele



Miss ML Mphekoane



Ms TT Mpfu



Ms RB Mposi



Miss HM Mpungose



Ms DA Mpya



Ms LS Mpya



Miss MA Mqabe



Mr ATV Mrobongwane



Ms NS Msibi



Miss HB Msimango



Mr ML Msimango



Miss MK Msiza



Ms P Msiza



Ms S Msiza



Mr SF Msiza



Mrs SS Msiza



Mrs TC Msiza



Mr TD Msiza



Ms VB Mthelo



Miss BC Mthembu



Ms NL Mthembu



Miss HG Mthethwa



Mrs TT Mthethwa



Miss GN Mthimkhulu



Mrs M Mthimunye



Ms TS Mthimunye



Ms JR Mthombeni



Mr M Mthombeni



Ms NF Mthombeni



Ms SS Mthombeni



Miss JS Mthimunye



Miss AS Mtshali



Ms BP Mtshali



Miss TT Mtshali



Miss NE Mtshula



Mrs AN Mtshweni



Ms CZ Mtsweni



Mr LM Mtsweni



Miss BP Mtubu



Ms Z Mtyoko



Mr AA Mudau



Mr EE Mudau



Ms TP Mudau



Mr TS Mudugwe



Ms T Muenda



Mr T Mugwena



Ms T Mukomafhedzi



Ms L Mukwevho



Mr A Mulaudzi



Mr N Mvimbi



Mr XS Myeni



Miss B Mzaca



Ms P Naidoo



Ms AI Nakani



Ms M Namadzavho



Mr N Nana



Mr LE Nani



Miss SS Ncanana



Ms T Nchabeleng



Miss PT Ncongwane



Miss XM Ncumani



Miss NN Ndaba



Ms NM Ndaba



Ms SC Ndala



Ms DN Ndlovu



Miss V Ndimba



Mr TE Ndlazi



Ms LP Ndlovu



Mr N Ndlovu



Mr NW Ndlovu



Mr T Ndlovu



Mr MG Ndomo



Ms LPH Ndwandwe



Miss NM Ndwandwe



Ms S Ndzandzeka



Ms R Nekhwevha



Mrs NB Nene



Ms M Nesengani



Ms TR Netshifhehe



Miss LP Netshitungulu



Ms VK Ngapo



Ms BM Ngatane



Ms Y Ngcawa



Mr L Ngcelwane



Miss NN Ngidi



Ms N Ngobe



Mrs MC Ngobeni



Miss RM Ngobeni



Mr SR Ngobeni



Ms TW Ngobeni



Miss M Ngobese



Ms ZA Ngobese



Miss ZZ Ngobese



Mr EJ Ngomane



Ms NS Ngomane



Ms KL Ngqumba



Ms SK Nguta



Ms NN Ngwenya



Miss ST Ngwenya



Mrs V Nhamango



Ms NA Nhlapho



Mrs LP Nhlumayo



Mr TD Njokweni



Ms ES Nkabinde



Ms TN Nkabinde



Miss SN Nkadimeng



Ms M Nkambule



Mr FT Nkanyani



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Mr O Nko



Mr MK Nkoana



Ms RE Nkoana



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Ms HM Nkosi



Mr KC Nkosi



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Miss ME Nkosi



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Ms RD Nkosi



Ms SN Nkosi



Miss TC Nkosi



Mrs TN Nkosi



Miss TY Nkosi



Ms BE Nkuna



Ms PP Nkuna



Ms MM Nkwane



Ms RN Nomtshongwa



Miss NZ Nopulula



Ms MA Nqulu



Miss M Ntenga



Ms TE Ntjwana



Mr XT Ntsele



Ms TTK Ntshabele



Miss N Ntshangase



Ms TD Ntshwane



Ms NR Ntsibande



Ms MM Ntsoane



Ms NP Ntsomishe



Mr IN Ntuli



Mrs IS Ntuli



Mrs KL Ntuli



Mrs LN Ntuli



Ms NP Ntuli



Ms S Ntuli



Mrs SP Ntuli



Ms TN Ntuli



Ms N Ntunja



Mr NJ Ntwagae



Ms M Nukeri



Mr VC Nwaila



Mr M Nxadi



Ms ND Nxodo



Miss A Nxonki



Ms NBG Nxumalo



Mr L Nyaluza



Mr SE Nyanda



Mr ST Nyatheli



Miss AD Nyathi



Miss GZ Nyawo



Miss LP Nyawo



Mr HH Nzima



Mr LN Nzuzo



Ms T Nzuzo



Ms BC Olebogeng



Ms JM Oliphant



Miss T Palani



Mr GJ Pelesa



Ms SL Pete



Ms B Phadi



Ms M Phaho



Miss MP Phaka



Ms TR Phakoago



Ms ME Phalane



Mr T Pharamela



Mrs SS Phatshwane



Ms G Phiri



Miss ME Phitsane



Mrs SM Phoko



Ms ET Phosa



Ms LSP Phosa



Ms Z Pillay



Mr PM Ponyane



Miss L Poyo



Miss A Pupa



Ms KL Putu



Ms O Qayiso



Miss NP Qondela



Miss BP Quluva



Mr MD Rabalao



Mrs AL Rabali



Ms MA Radebe



Ms NJ Radebe



Miss EM Rafedile



Mr TM Rafedile



Ms MA Rahube



Ms ED Rakau



Ms LP Ralithi



Mr N Ralivhesa



Ms LL Ramaboa



Mr TB Ramala



Ms EM Ramalamula



Mrs DI Ramaphakela



Miss NB Ramathemela



Ms S Ramatlho



Ms DM Ramatlo



Mr KR Rambau



Ms MS Rambuda



Ms T Rambuda



Ms GP Rammekwa



Mrs MS Ramodike



Ms AS Ramokgadi



Ms ML Rampedi



Mrs RM Ramphele



Miss C Ramputle



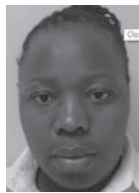
Mr G Ramudzuli



Mr T Ranthako



Mr MC Rapakgadi



Mrs RM Rapatsa



Mrs NV Raphathelo



Ms AM Raphela



Ms TP Rasalanavho



Ms MP Rasekgwalo



Mrs S Rasetho



Mr VM Rasodi



Mr ZS Rathebe



Ms MB Ratlhagana



Mr R Ratshirumela



Miss MC Ratshitanga



Ms T Roderick



Ms MJ Seabi



Mrs LR Sebe



Mr KD Sebelebele



Ms N Sebilwane



Mr T Sedumedi



Miss T Seerana



Miss AK Sefala



Mr SS Sefiti



Ms MML Sefoloshe



Ms SM Sehlohole



Miss MIB Seisa



Ms B Sejane



Ms ME Sekele



Mr PC Sekgobokgobo



Mrs MH Sekhala



Ms SP Sekhula



Mr MP Sekomane



Ms TS Sekonya



Ms MM Sekuba



Miss KM Selahle



Mr PT Selala



Ms JBS Seloadi



Mrs AN Selwane



Ms RS Seloane



Ms KL Selokela



Miss PL Selotlego



Ms SJ Sengoatsi



Mr L Senti



Mrs MM Senwamadi



Miss LM Seopa



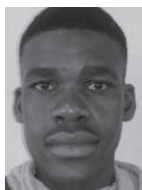
Mr KKN Sere



Miss RM Sereko



Ms TT Serogole



Mr ML Serumula



Ms MS Setata



Mr KPL Setwaba



Mr M Shabalala



Miss BL Shabangu



Ms TM Shabangu



Miss NE Shai



Miss SF Shandu



Miss YH Shelembe



Ms PBD Shibiti



Ms MH Shilenge



Mr KM Shilubane



Miss JR Shipalane



Miss TV Shoko



Ms MM Shole



Mr DM Sibambo



Mr CM Sibanyoni



Miss NF Sibanyoni



Mr PS Sibanyoni



Mr TS Sibanyoni



Mr ZL Sibeko



Miss TM Sibisi



Mr H Sibiya



Mr IT Sibiya



Mr NA Sibiya



Miss NG Sibiya



Ms NS Sibiya



Mr S Sibiya



Mr ME Sibuyane



Miss N Sibuyi



Mr KR Sigagamba



Mrs N Sisele



Ms P Sihlali



Miss LM Sihlangu



Mrs EB Sikhosana



Mrs EM Sikhosana



Mrs M Sikhosana



Ms VT Sikhosana



Ms MY Sikhwai



Ms N Sikiti



Ms N Sikoti



Miss NS Silo



Mrs HT Simelane



Mr WM Simelane



Mr EM Singo



Ms BN Sitanya



Mr B Sithole



Ms KO Sithole



Ms KQ Sithole



Miss NG Sithole



Ms NP Sithole



Miss SH Sithole



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Mr GS Skhosana



Miss JJ Skhosana



Miss LL Skhosana



Ms LN Skhosana



Miss NI Skhosana



Miss TT Skhosana



Ms ES Skosana



Ms LN Skosana



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Ms PE Skosana



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Miss A Sobekwa



Ms EL Sodi



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Ms A Stedi



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