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Continuing professional development services and management structures of the Society of Radiographers of South Africa: a survey and respondents' opinions

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Abstract

Rationale: To explore and describe renewal possibilities of the Society of Radiographers of South Africa (SORSA), in order to provide recommendations to meet the needs of the members in a cost-effective manner in relation to continuing professional development (CPD) and directed reading programmes (DRPs) provision, as well as journal distribution and management of SORSA.

Objectives: Nine broad objectives underpinned the overarching purpose and aims of the survey.

Methodology: A questionnaire was used to conduct a quantitative, descriptive, and exploratory survey. Invitations to participate in the online survey were placed on various SORSA regional branches' Facebook pages, and the SORSA website. Members also received an automated text message (sms) to their cellphone (mobile) numbers on the current database. There were 374 respondents. The questions related to biographical information; DRPs, the *South African Radiographer (SAR)*, CPD, and the management of SORSA.

Results: Respondents affirmed SORSA's relevance as a CPD provider in terms of the *SAR* and DRPs. In view of printing and postage costs, the respondents supported the use of a digital platform for both DRPs and the *SAR*. Respondents supported a more cost-effective management structure of SORSA which will require changes to the constitution.

Conclusion: There is a need for SORSA to embrace dynamic changes in a digital world, and to provide services to members in a cost-effective manner. The latter would require changes to the constitution.

Keywords continuing education unit, digital platform, directed reading programmes

Introduction

Continuing professional development (CPD) was introduced by the Health Professions Council of South Africa (HPCSA) to enable healthcare professionals (HCPs), to maintain and acquire new knowledge, skills and ethical attitudes on a continuous basis. In turn, CPD aims to promote and enhance HCPs' professional integrity. Participation in CPD activities is mandatory for all HCPs registered with the HPCSA.^[1]

Radiographers are required to obtain 30 continuing education units (CEUs) per 12 month period, of which five must be related to human rights, medical law and ethics. The CEUs are valid for a period of 24 months from the day they were acquired, after which they expire.^[1] Non-compliance to mandatory CPD requirements may result in disciplinary action being taken against a HCP.^[1] Many health professionals indicate, amongst others, the following challenges hindering mandatory CPD compliance:

lack of time, lack of funding and employer support, and personal obligations taking preference.^[2-7] A study found that licensure dependence on CPD participation is a demotivating factor, and that lack of structured programmes to CPD programmes is unattractive.^[8] This by implication affects CPD participation and could result in non-compliance.

To assist the radiography community in attaining their mandatory CEU requirements, the Society of Radiographers of South Africa (SORSA) facilitates a number of services. SORSA is an accredited CPD provider: Regional branches offer a variety of CPD activities and seminars to enable SORSA members, and non-members, to accumulate the necessary, or close to the necessary, annual CEUs. SORSA has also since 1972 hosted biennial congresses to afford radiographers an opportunity to keep abreast with advances in the profession.

SORSA publishes the *South African Radiographer (SAR)* twice a year. Each member

receives a hardcopy of the journal. The hardcopy includes 20 multiple choice questions (MCQs) which members may answer to gain three (3) CEUs per issue. For many members the *SAR* is important to gain CEUs as some face challenges to attend seminars and workshops to earn CEUs. Members can therefore earn six CEUs by completing the MCQs in the two issues of the journal each year. This service is free to members.

The *SAR* has been available as an open access journal on www.sar.org.za since 2003. The journal is also available at 513 local and international library holdings, albeit without the MCQs section. Since the launch of the *SAR* over five decades ago, members have received hardcopies. From time to time members have not received their posted hardcopy of the *SAR*. This results in increased costs as additional copies then have to be posted: this is an ongoing challenge. The rising costs of printing and postage of the journal have negatively impacted on membership fees

with a subsequent yearly increase. It is a well-established fact that the costs of publishing a printed journal are much higher than an e-journal. According to Plantinga^[9] the cost of printed newspapers for 2016 was R 2 266 million for circulation and R 11 800 million for advertising, whereas the digital version costs only R 52 million for circulation and R 472 million for advertising, respectively for the same year. Plantinga concluded that there is a developing digital readership in South Africa with a decline in print circulation.

^[9] It is therefore not unreasonable to argue that the same trend is developing with regard to journals. Digital versions of journals are therefore more cost-effective and circulated to a wider readership. No extra storage space is needed if an electronic journal is available. Technology has enabled portability of information and ease of sharing thereof, as well as granting access to the most current information on a particular topic in a matter of seconds.^[10-11]

Another CPD-related service that SORSA provides is access to directed reading programmes (DRPs). In the mid-90s SORSA commenced offering DRPs to members in preparation for mandatory CPD, which came into effect in 2002. There is a standing CPD committee on SORSA that handles approval of DRPs. Each DRP has a shelf-life thus there is a need to constantly add to the stock. Both members and non-members make use of this service. Those who do so are required to pay for their selected DRPs. When proof of payment has been received by the administrative office, the secretary posts the DRP to the client. On completion of the MCQs the completed form then has to be returned via 'snail mail' to the administrative office, where it is manually marked. These processes are slow and increase the turnaround time of the transaction. The costs of DRPs include copyright payments, photocopying, printing and postage. An online platform may be strategic, easy to access and with immediate feedback to a client. Costs should also be reduced.

The above services are managed nationally, by the executive committee (EXCO) and national council (NC). In accordance with the current constitution^[12] there are 16 NC members inclusive of one regional branch representative of each of the seven regional branches, as well as five category representatives (diagnostic, ultrasound, radiotherapy, nuclear medicine, and education). National council also includes

the national treasurer, the public liaison officer, the president and immediate past president;^[11] EXCO consists of seven members. Up until 2015, NC met twice a year, and EXCO mainly communicated by electronic mail (e-mail). As a cost saving measure EXCO met twice and NC met once during 2016; all other business was handled via email. The cost of NC meetings involves venue hire, refreshments, meals, air tickets and travel costs of all NC members. Each year these costs increase substantially.

In order to minimise annual membership fee increases, and, after reflecting on current practices in managing SORSA, it came to the fore that more cost-effective management practices need to be in place to effectively serve members and the profession of radiography at large. As Brock notes, many professional organisations face considerable uncertainty, and change influenced by the dynamic environments they function in.^[13]

Since SORSA values the opinions of members, as well as those who may not be members, an online survey was conducted. The rationale for this survey was to explore possibilities of SORSA to renew and to provide recommendations to meet the needs of the members in relation to CPD and DRP provision, as well as journal (SAR) distribution and management of SORSA in a cost-effective manner;

Nine broad objectives underpinned the overarching rationale of the survey, namely:

1. To establish how many radiographers currently make use of hardcopy DRPs annually to gain CEUs.
2. To establish how many radiographers would be willing to regularly make use of digital DRPs.
3. To establish how many radiographers pay for, or have free access to online CPD options offered by others to gain annual CEUs.
4. To establish how many radiographers have access and make use of CPD events in places of employment.
5. To establish how many radiographers submit hardcopy answers of the SAR CPD questionnaire for marking.
6. To establish how many radiographers are aware that the SAR articles are published online.
7. To determine how many radiographers read the journal online, and

whether a future e-journal option would be acceptable.

8. To determine whether radiographers would prefer attending an annual general meeting in November that is linked to a CPD event, instead of late January/early February annual general meetings.
9. To explore and describe radiographers' opinions regarding more cost-effective options of management of SORSA in respect of constitutional changes.

Methods and materials

A quantitative, descriptive, exploratory survey that used a questionnaire, was conducted. A descriptive study typically describes current perceptions and quantifies a phenomenon studied. The survey was exploratory since its aim was to gain quantitative information related to the opinions of the respondents, since the data collected are summarised and presented in a numerical format using distribution frequencies.^[14-16]

To address the objectives, a questionnaire comprising 28 questions was compiled as a research tool for the survey (Table 1). The questionnaire comprised five categories that were broadly linked to the objectives. The tool was self-developed.

Predominantly closed-questions were used to obtain quantitative data on aspects such as the demographics; biographical information; DRPs; the SAR; CPD; and the management of SORSA. Since the survey aimed to obtain the opinions of radiographers open-ended questions were also included. Respondents were requested to provide at least three (3) topics for DRPs that they would like access to. Reliability was increased with the use of closed-ended questions, having options from which the respondents could select the most applicable to them.

A pre-test (pilot) was undertaken to evaluate the reliability and validity of the questionnaire and minor changes to the tool were made. Due to time and costs restraints an online software programme (SurveyMonkey)^[17] was used to capture and calculate the responses. The data were analysed using descriptive statistics. The results were presented as distribution frequencies. Convenience non-probability sampling was used^[16] since the survey focussed on radiographers' opinions related to the areas identified previously.

Email addresses and cellphone numbers were sourced from the SORSA membership database. To include radiographers, who were not members of SORSA, an invitation to participate in the online survey was posted on SORSA's website, advertised at SORSA CPD activities at branch level in 2016, and on SORSA's social media platforms. Email addresses of non-members who responded to the invitation to participate in the survey were included. The email addresses of potential respondents were uploaded and e-invitations were sent to all the uploaded email addresses.

The authors adhered to research ethics thus respondents were informed that the information they provided would not be divulged to other persons. Furthermore, the privacy and anti-spam policies of SurveyMonkey^[18] were strictly adhered to. The email invitation message included an 'opt out' option (remove link field). Completion of the questionnaire was assumed to be confirmation of consent. Respondents' identities were kept confidential. They were informed that the outcome of the survey would be published.

Seven hundred and 82 (n=782) invitations were sent out via email messages on using SurveyMonkey online software. Sixteen (n=16) emails bounced, and ten (n=10) opted out. To alert radiographers about the questionnaire and to request participation, a text message notice was sent to the members on the database (n=799). In addition, social media (i.e. regional branches Facebook pages) was used for the same purpose. There was an online response deadline of three weeks. All responses were captured by means of SPSS statistics software of SurveyMonkey.^[18] Descriptive statistics was used to analyse the data, and presented as frequency distributions.

Results

Three hundred and 74 (n=374) online responses were received from all four categories of radiographers in the nine provinces in South Africa, radiographers in education, and radiographers who were not practicing. Three hundred and twenty (n=320) respondents were SORSA members, and the rest (n=64) were non-members who responded to invitations posted on SORSA's official website and social media platforms. There was a 47% (n=374) response rate. (Note that in this paper decimal points are rounded off to the nearest figure).

The demographics of the respondents were as follows. Sixty-four percent (64%) were diagnostic radiographers; fourteen percent (14%) were radiotherapists; nine percent (9%) were sonographers; two percent (2%) were nuclear medicine radiographers; five percent (5%) were involved in education, and the remaining five percent (5%) were no longer practicing radiography (Table 2).

The majority of the respondents (69%) practice radiography in a major South African city, with the remaining practicing radiography either 100 km from a major city (20%) or no longer practicing (11%). Public and private sector respondents were 41% and 38%, respectively. Radiographers owning their own private practices (8%), working in the higher education sector (7%), and unemployed (5%), and engaged in other sectors (2%) also responded.

The responses from provinces were: Gauteng (29%), KwaZulu-Natal (24%), the Western Cape (23%), Eastern Cape (11%), Free State (5%), North West (3%), Mpumalanga (2%), Limpopo (2%), and the Northern Cape (1%).

Most of the respondents indicated that they use SORSA's services continuously for CPD purposes (44%), whereas 26% rarely made use of the services, and 15% not at all. The majority rated SORSA's administration processes of their services as either very good (38%) or average (35%), and 85 (24%) stated they do not utilise any services.

Related to the DRPs section of the survey eighteen respondents (n=18) did not complete this section. The question requesting at least three topics to include for DRPs (i.e. question 10) was only completed by one hundred and sixty-seven respondents (n=167). An online platform for accessing and completing DRPs was the most

preferred option (76%), some were still unsure (11%) or did not prefer it (8%). In addition, an online payment facility for DRP-related activities also enjoyed preference (68%), whereas 13% did not support this option, and 14% were unsure. The majority of respondents did not know they can volunteer and obtain CEUs for the compilation of DRPs (66%), whilst the rest were aware (34%). The majority also indicated that they did not know how to compile DRPs in relation to SORSA and HPCSA guidelines (63%), whilst some indicated a disinterest (17%). Very few knew what this process entails (6%), and some were unsure (14%). Table 3 presents a summary, in themes, of the suggested DRPs topics of the respondents (n=167).

The majority of respondents (82%) indicated that they receive the journal twice per annum. Only members receive copies of the SAR, thus one can assume that the 22 who skipped this question were non-members. Many respondents indicated that they would prefer the journal in digital format on a dedicated platform with a link sent to members (32%), but many still prefer the hardcopy version of the journal (28%). In terms of a digital route on a dedicated online platform 15% supported this option, whereas 22% selected a link directing them to the platform via an email to members. The majority (78%) stated they know about the SAR web site. In terms of making use of the manual marking option of the MCQs, 21% regularly use this service whereas 23% seldom do so. Furthermore 56% do not use the service as there is also a sms and web option.

Most of the members indicated they know how to update personal details on the SORSA website (47%), however a significant number were either not sure (25%) or did not know at all (24%).

Regarding access to CPD activities, three

Table 1. Categories in which respondents are working

CATEGORY	PERCENTAGE
Diagnostic	65%
Ultrasound	9%
Radiotherapy	14%
Nuclear medicine	2%
Education or other	5%
No longer a practicing radiographer	5%
TOTAL	100% (n=374)

Table 2. Themes related to topics for DRPs

DIAGNOSTIC RADIOGRAPHY	RADIOTHERAPY	ULTRASOUND
<ul style="list-style-type: none"> Occupational Health and Safety issues Good clinical governance Challenges private practice face Pattern recognition Role extension related to image interpretation and contrast administration Occupational lung disease and other chest pathology Advances in radiographic techniques and equipment MRI protocols Social media and service delivery Digital imaging, including PACS, exposure indices, dose reduction, and quality assurance Staff retention strategies and mentorship Radiation protection Patient care Forensic radiography Professionalism, ethics and health law Teamwork Advances in cardiac and paediatric radiography 	<ul style="list-style-type: none"> Advances in techniques Development of radiotherapy as a profession Stress management Use of CyberKnife in South Africa Treatment planning Stereotactic radiosurgery The use of IMRT or VMAT in head and neck cancer treatment Reduction of LADCA dose in patients with left side breast cancer Attending to psychological needs of patients Role extension Use of cone beam CT 	<ul style="list-style-type: none"> Any ultrasound related articles due to the current lack thereof.

hundred and forty-nine (93%) completed this section (n=349). The majority indicated that they have access or make use of CPD events in their places of employment (60%), whilst the rest were either unsure (5%) whether it exists, or do not make use of such events nor have access to them (28%). Most (52%) indicated that they do not make use of any other online programmes to attain CEUs, whereas some do (41%).

The survey included questions pertaining to restructuring of SORSA in terms of the current constitution.^[12] For example, members in provinces without branches do not have representatives on council. In addition, the costs of attending council meetings have escalated over the years. These and other issues were addressed in questions 20 to 28.

In question 20, the respondents were asked to indicate their preference for annual general meetings (AGMs): late January/early February or November. Sixty percent (60%) selected late January/early February. The constitution (22 a iv)^[12] states that each branch must hold an annual general meeting by no later than 15 February of each year. Members at an AGM have a right to elect committee members. In addition they are entitled to have sight of financial statements. In terms of 22 a (vii) of the constitution a regional (branch) committee “shall submit a financial statement signed by an accountant reflecting the state of their affairs at 31st

December, together with an income and expenditure account (including stock on hand) for the financial year ending December 31”^[12] In question 21 the respondents were asked whether an AGM should be linked to a CPD event. Seventy-seven percent (77%) replied in the affirmative (Figure 1). Question 22 stated: “Would you regularly attend an AGM if it is held in November?” Forty percent (40%) said they would, 40% were not sure, and 20% stated they would not do so.

Question 23 stated: “Do you think it would be cost-effective for the national council (16 members) to meet every 2nd year, and for the executive committee (7 members) to meet twice a year, instead of

the current number of meetings per year, to reduce meetings costs by at least R210 000-00 per 2 years?”. Ninety-one percent (91%) were in agreement. In question 24 the respondents were asked “Would you support reducing the current number of national council (NC) branch representatives (7) to 5, if the NC representatives from provinces with more than one branch alternate every 2 years, namely Bellville and Cape Town, and Johannesburg and Pretoria?”. Seventy-seven percent (77%) were in agreement with this question.

In question 25 the respondents were asked whether the past-president should serve on NC. Seventeen percent (17%) supported retention of a past-president on

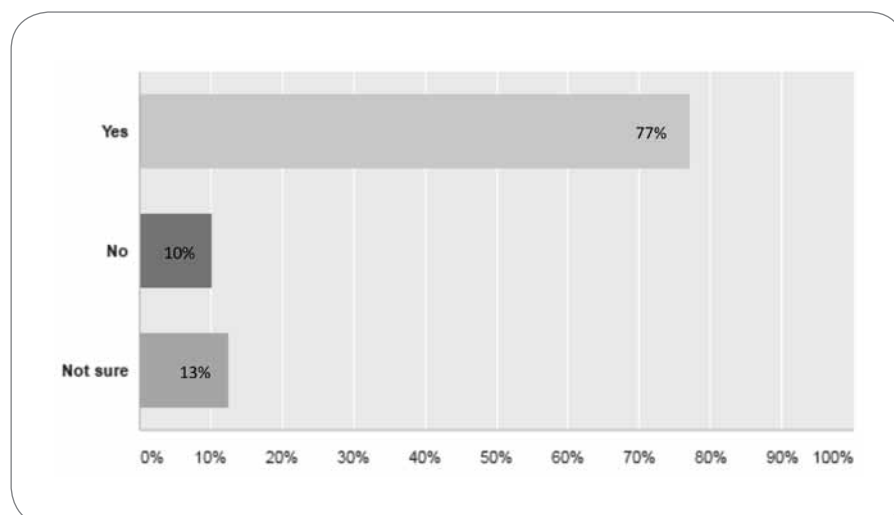


Figure 1. Linking the AGM with a CPD event.

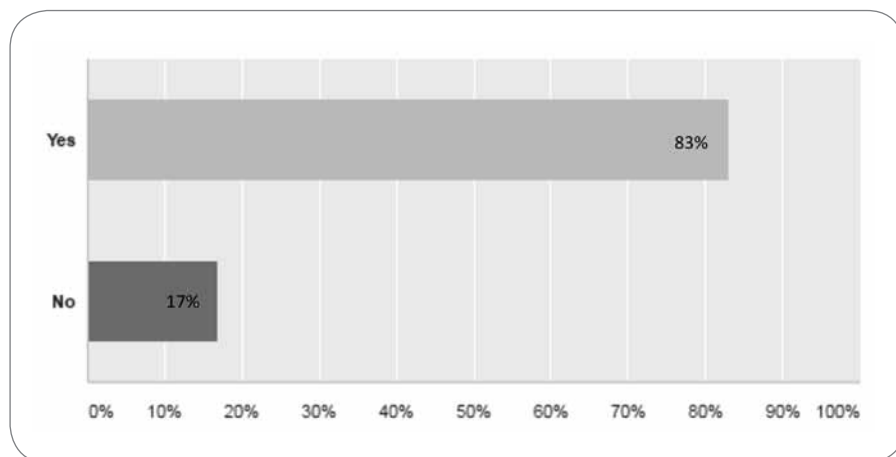


Figure 2. ISRRRT Portfolio expansion to include CPD responsibilities and education portfolio.

NC, whereas 73% disagreed. In question 26 the respondents were asked "Would you support reducing the current composition of the executive committee (7) to 5 members?" Seventy-seven percent (77%) affirmed that they would do so. In question 27 the respondents were asked "Do you think the ISRRRT representative's portfolio should include CPD responsibilities and education portfolios on NC?" The vast majority (83%) replied in the affirmative (Figure 2). Question 28 stated "Do you agree that for wider representation of members, that the provinces with no branches should elect a representative to serve on NC, provided that there are not less than 15 members in the relevant province?" An overwhelming majority (84%) were in agreement.

Discussion

Continuing professional development (CPD) refers to the continuous formal and informal learning activities that healthcare professional engage in, in view of developing as a professional.^[19] In South Africa, every radiographer on the HPCSA register is obliged to participate in CPD activities for licensure purposes. Failure to comply could result in disciplinary action by the HPCSA.

The rationale for this survey was to explore possibilities of SORSA to renew and to provide recommendations to meet the needs of the members in relation to CPD and DRP provision, as well as the SAR (journal) distribution and management of SORSA in a cost-effective manner.

A total of three hundred and seventy-four (n=374) radiographers participated in this study. Only three hundred and thirty-one (n=331) completed the entire survey.

When considering the radiographer population in South Africa, using statistics from the HPCSA from December 2016 (personal communication with Y Daffue from the HPCSA on 15 December 2016), the percentage of radiographer population that participated in this study is 4.6% (n=371/8146), across all categories.

The rationale was underpinned by nine objectives. A discussion of the results in terms of each objective is presented below.

Objective 1. To establish how many radiographers currently make use of hardcopy DRPs annually to gain CEUs.

Responses show that most of the respondents rely on DRPs for CPD purposes. To address this need it is imperative to expand this service. Furthermore, the information sought by radiographers for DRPs (cf. Table 2) should also be addressed in order to make this service worthwhile to those using it, as well as ensuring that the DRPs contribute to the development of radiographers' professional practice and knowledge base. The administration process related to the DRP service was rated very good to good. Ideally we should aim for a rating of very good; there is therefore room for improvement. Branch committees could assist in obtaining specific feedback from their members at CPD events for forwarding to EXCO/NC to address administrative needs as well as streamline administrative processes.

Interestingly, very few respondents (34%) knew that they can volunteer to compile DRPs to obtain CEUs. Sixty-three percent (63%) did not have adequate knowledge of the respective guidelines of HPCSA and SORSA as to how to go about doing this. According to the HPCSA's CPD guidelines,

compiling a DRP is a level two (2) activity and the compiler thereof can obtain three CEUs for each DRP compiled.^[1]

In the question requesting at least three topics for DRPs, some responses were disregarded, as it pertained to issues that the DRP service cannot 'solve' or that are inappropriate for a DRP, such as short courses, increasing salaries and the like. Some of these comments are of concern. Do all radiographers know what a DRP is and what it entails? Again, branch committees can play a vital role in educating members.

Objective 2. To establish how many radiographers would be willing to regularly make use of digital DRPs.

Two questions addressed this objective. The majority of respondents (76%) indicated that they would prefer an online platform to download and complete the DRP on a digital platform, whilst very few (8%) were opposed to it. In addition, the majority also indicated that an online payment facility would be preferred (68%). NC previously investigated both these initiatives. Aspects such as the overall cost to establish and sustain these services specifically with the backdrop of the dwindling membership numbers, have hindered the implementation of the digital platform.

Objective 3. To establish how many radiographers pay for, or have free access to online CPD options offered by others to gain annual CEUs.

One question addressed this objective, namely "Do you pay for online CPD programmes or articles by others to gain annual CEUs?" Fifty-two percent (52%) of the respondents indicated that they do not make use of other CPD services or any online services to obtain CEUs. This gives the impression that SORSA's CPD events are these respondents only avenue of obtaining CEUs.

Objective 4. To establish how many radiographers have access and make use of CPD events in places of employment.

Most of the respondents (208/349; 60%) indicated that they do have access to CPD events at their place of employment. However, what was not included in the survey was how many make use of these events in their places of employment.

In relation to objective 3, it however does seem that SORSA as an accredited CPD provider does fulfill a significant role in assisting radiographers in South Africa to

obtain CEUs, as prescribed by the HPCSA.^[1] A study done in KwaZulu-Natal found that rural area radiographers identified lack of institutional support as a barrier hindering their participation in CPD activities and programmes.^[20] Whilst others indicated the only reason they attend CPD activities is to collect the points, and meet up with old friends. In addition, radiographers in the rural areas also indicated accessibility and work-related obligations to CPD activities pose a challenge.^[20]

Objective 5. To establish how many radiographers submit hardcopy answers of the SAR CPD questionnaire for marking.

The results showed a rather mixed response. However, the majority (56%) indicated that they never submit hardcopy answers of the SAR CPD questionnaire for marking, although 21% regularly, and 23% seldom, do this. A comparison of use of manual versus sms/web answers shows that the latter is more popular. Between 200 to 250 members use this service for each issue of the SAR questions. On average 90 to 105 members submit their hardcopy answer sheet for manual marking.

Objective 6. To establish how many radiographers are aware that the SAR articles are published online.

Of the 352 respondents to the question pertaining to this objective, 78% indicated that they knew that the SAR articles are published online on the SAR website. On the other hand 22% did not know.

Objective 7. To determine how many radiographers read the journal online, and whether a future e-journal option would be acceptable.

Although 82% of the respondents indicated that they receive their hardcopy journal twice per annum 16% indicated the opposite; many prefer future journals to be in digital format (69%). In contrast, 28% would prefer receiving a hardcopy journal format.

The method of digital delivery of future journals was indicated as follows: a specific digital platform (15%), an email link directing members to the digital platform (22%), and 32% indicated delivery should be a combination of the two preceding methods.

Objective 8. To determine whether radiographers would prefer attending an annual general meeting in November

that is linked to a CPD event, instead of late January/early February annual general meetings.

Question 20 responses supported the status quo in the constitution.^[12] A limitation of this question is that it was not possible to determine how many of respondents regularly attend AGMs. Attendance is important: over the past few years there has not been a quorum at some branches' AGMs. This has impacted on the national audit of all of SORSA's bank and investment accounts; according to the constitution^[12] a submitted financial statement has to be approved at an AGM of each branch. Furthermore, in the absence of a quorum committee members cannot be elected. There was overwhelming support for a CPD event to be included at an AGM as evident in the responses to question 21. The respondents were asked in question 22 whether they would regularly attend an AGM, if held November. Forty percent (40%) stated they would; 40% were not sure; and 20% said they would not. It should be noted, based on feedback from branches, that there is good support from members, and non-members, at World Radiography Day CPD events in early November each year. It could thus be argued that there would be good support at an AGM in November, if it includes a CPD event. For comparison purposes the wording of questions 20 and 22 should have been the same.

Objective 9. To explore and describe radiographers' opinions regarding more cost-effective options of management of SORSA in respect of constitutional changes.

There was overwhelming support for a more cost-effective composition of NC as evident in the responses to questions 23 to 27. The majority supported inclusion of representation on NC in those provinces without branches.

Limitations

There were three limitations in this survey.

- This was a convenient sample of mainly SORSA members who had access to the internet to complete the online survey. SORSA members and non-members who did not have internet access were thus excluded from participating in this opinion survey.
- The limitations of the study include a low (less than 50%) response

rate. A bigger response rate may provide validity to the findings as reported in the article. Additionally a number of the radiographers reported that they were unable to submit the completed questionnaire online, even though provision was made to complete the survey from a mobile apparatus.

- Lack of response in some sections of the questionnaire could have had an influence on the results.

Recommendations

Based on the results of this survey it is clear that the CPD services of SORSA are sometimes the only method radiographers have to obtain required CEUs. For this reason regional branches should take cognisance of the barriers that hinder participation in CPD programmes.^[2-8] Since an e-journal is preferred by most of the respondents, as well as an online platform for the DRP service, SORSA should look into this option for possible future implementation. Members who are interested need to be empowered to compile DRPs and utilise the interesting topics that the respondents proposed. Amendments to the constitution need to be proposed to address objectives 8 and 9.

Conclusion

Continuing professional development is part and parcel of a radiographer's professional responsibility, and licensure with the HPCSA is dependent thereon. There are many ways to obtain the mandatory CEUs per annum, however barriers do exist. SORSA has, for several decades, provided CPD opportunities to radiographers. We should not be complacent since society is dynamic and situations change. It is important to constantly interrogate the needs of radiographers to keep abreast with advances in a digital world. SORSA has to consider management restructuring as well as the methods and means to maintain both its cost-effective operations and CPD services to the benefit of, mainly, its members.

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Competing interests

The authors have no financial or personal relationships which may have inappropriately influenced them in writing this article. They place on record that they are SORSA members.

Contributions of authors

RvdV (NMMU), HF-N (CUT), and LM developed the questionnaire. They and FP analysed the results, drafted and edited the manuscript.

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