

GUIDELINES ON VISITING LECTURERS

BACKGROUND

The Medical and Dental Practitioners Council of Zimbabwe (MDPCZ) is a statutory body established in terms of the Health Professions Act (Chapter 27:19). The functions of the Council as provided in Section 30 (1) of the Health Professions Act (Chapter 27:19) are registration of all practitioners wishing to practice in the country, education of medical and dental practitioners and ensuring discipline within registered medical and dental professions. The three functions are performed to fulfill the provisions of Section 30 (1) (a) of the said legislation which mandates Council to assist in the promotion of the health of the population of Zimbabwe. It is against this background that Council values and recognizes the activities of visiting lecturers willing to undertake educational programmes in Zimbabwe. Council may exempt not automatically registration requirements for the visiting Lecturers. The exemption shall not absolve Council from the need to ensure professional and ethical practice.

PURPOSE OF THE POLICY

The purpose of the policy is to facilitate the registration of visiting Medical and Dental Lecturers.

POLICY

Any organisation wishing to bring visiting lecturers is required to seek their registration permission with MDPCZ and shall be issued a letter of permission within thirty days of receipt of the application.

The letter would cover the period and contents of the programme and shall be issued upon complying with the following conditions:-

- a) Submission of a completed application form.
- b) Submission of a Certificate of Good Standing (CGS), Verification Letter or any equivalent document to prove that the practitioner does not have any outstanding disciplinary issues in their home jurisdiction where they are currently practising.
- c) Submission of an updated Curriculum Vitae.
- d) Each practitioner within the mission will be held accountable to normal standards of Health Professions in Zimbabwe.
- e) The Visiting lecturers should have a local coordinator.
- f) Application fee of \$100, 00

REQUIREMENTS

 The Coordinator shall submit reports and responses that may be sought by the Council in performing its normal regulatory function.

	Details of the institution(s) and duration of	tails of the institution(s) and duration of the activities.	
c)	All communication with the Council shall be Council offices by the Coordinator at most	be addressed to the Registrar and duly submitted to t six weeks before the mission.	
Name of Accountable Practitioner:			
Qualifications:			
Signature:			
Na	ame of Practitioner:		
Qı	ualifications:		
Da	ate of assumption of the programme:		
Si	gnature:		

b) The Coordinator shall provide Council with:

APPROVED MAY 2011

MEDICAL AND DENTAL PRACTITIONERS COUNCIL OF ZIMBABWE

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APPLICATION FORM FOR VISITING LECTORERS	
FIRST NAME	
SURNAME	
QUALIFICATIONS	
REGISTRATION STATUS	
CURRENT EMPLOYMENT	
PROPOSED DATES OF THE VISIT AND DURATION	
NAME OF THE COORDINATOR	
QUALIFICATIONS	M
PLACE OF EMPLOYMENT OF THE COORDINATOR	
DATE	