Guide to Submit Attendance for Accredited Events

March 2024

Pre-guide Information

- CPE Providers are required to collate the following information for either of the attendance's type:

1. **Hardcopy attendance:**

    a) Participant's name

    b) Participant's registration number

    c) Participant's signature

2. **Softcopy attendance:**

    a) Participant's name

    b) Participant's registration number

    c) Timestamp from online meeting platforms indicating the participant's time-in/time-out

Login to PRS

1. Visit the AHPC's website at **www.ahpc.gov.sg** and click on the "**Login**" button which can be found on the left menu of the AHPC's homepage.

Login to PRS

2. Click on the radio button for "**CPE Provider**".

You will be re-directed to the login page for CPE Providers.

MINISTRY OF HEALTH
SINGAPORE
Allied Health Professions Council

Instructions for Authorised Users

I am logging as:
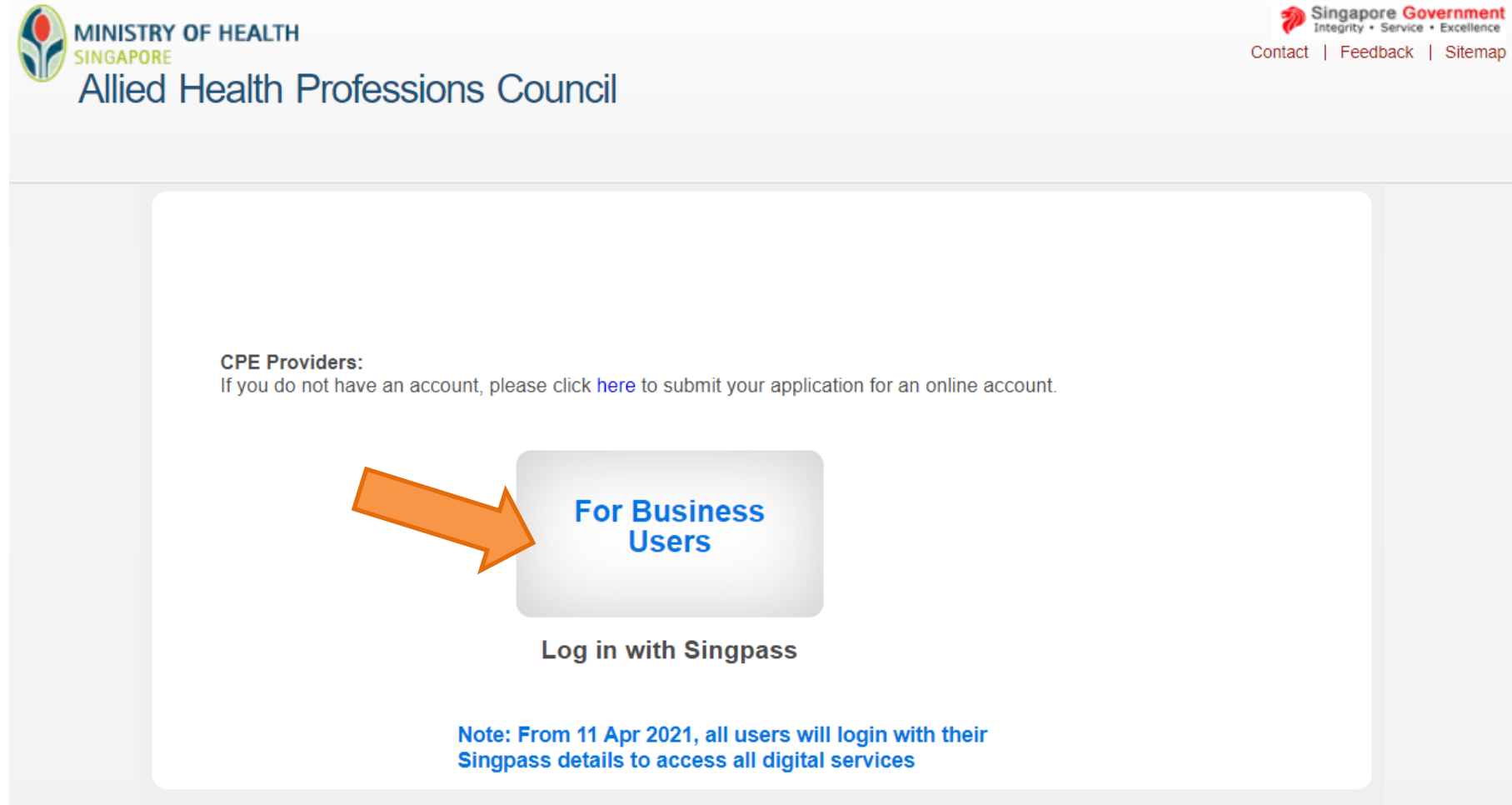
○ Allied Health Professional

○ Applicant with Temporary Registration Number (XA-number)

○ HR Personnel

○ CPE Provider

ALLIED HEALTH PROFESSIONS COUNCIL

Login to PRS

3. Click on the **login button** to log in with your SingPass.
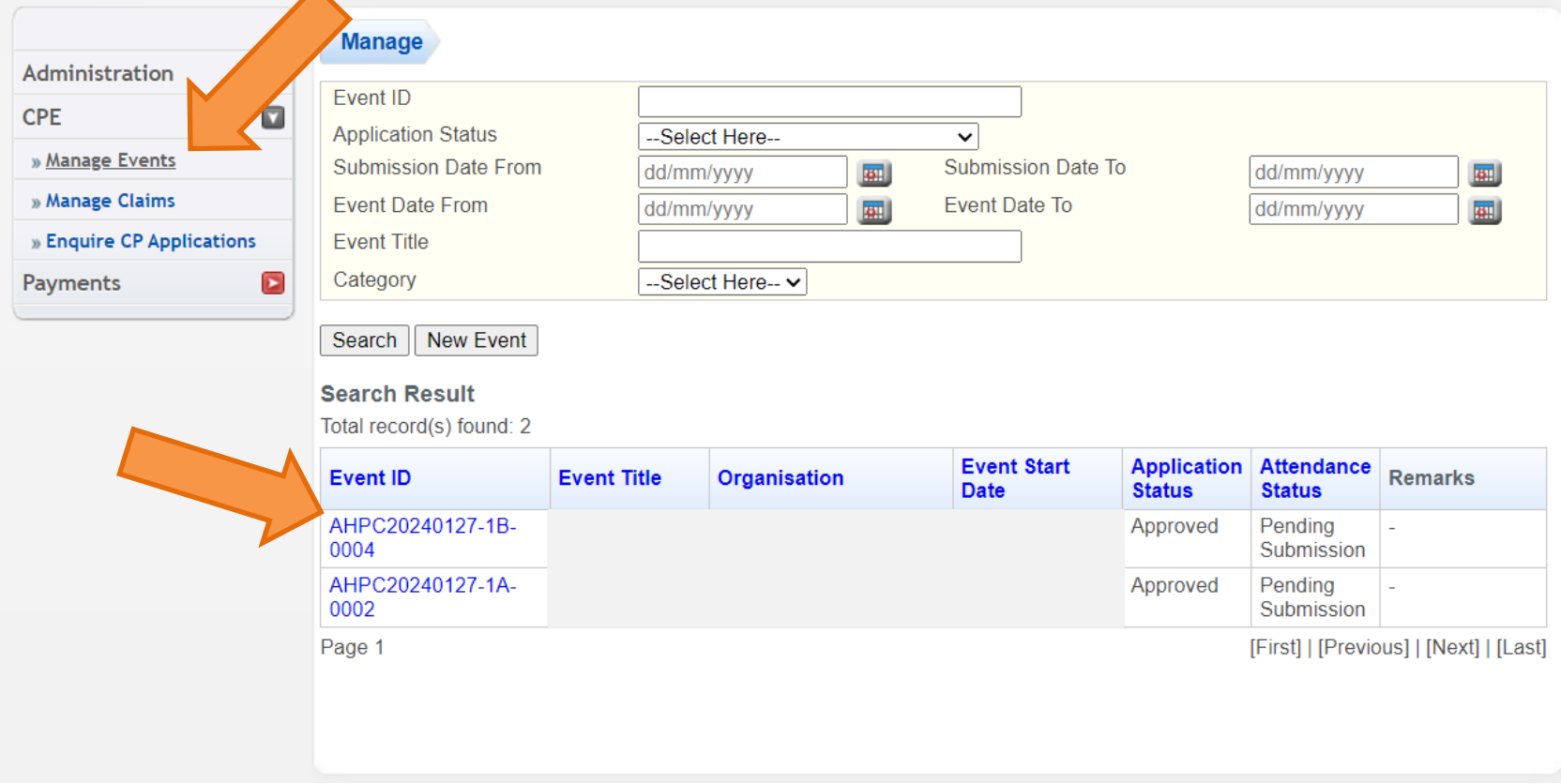
Note that you should already be accredited as a CPE Provider. If not, please refer to the guide to apply for CPE Provider accreditation.

Submission of Attendance

4. Click on "**Manage Events**" on the left menu and the page on the right will appear. Locate the "**Event ID**" of the event that you wish to submit attendance for. Click on the "**Event ID**" link to open the application.

Submission of Attendance

5. Click on the "**Add Attendance**" button.

Event   Attendance

Application for Accreditation of Event

Event ID	
Application Status	
Applicant Name	
Applicant ID	
Submission Date	
Outcome Date	
Attendance Status	

Provider Details & Address

Provider Type	
Organisation Type	
Organisation	
Department/Ward	
Address	

Contact Person(s)

S/N	Name	Telephone No.	Email Address
1			
2			

Event Details

Event ID	AHPC20240221-1A-0002		
Category	1A		
Event Specialty	Physiotherapist		
Type of Event	Journal clubs		
Event Title	PT Journal Club		
Target Audience	Allied Health Professionals		
Target Audience (Others)			
Target Audience Specialty	Physiotherapist		
Start Date	17/04/2024	Start Time	10:00
End Date	17/04/2024	End Time	12:00
Event Duration	02 Hrs		
Frequency	-		
Venue	KKH		
Event URL	-	☑ Display in Calendar	
Previous Event ID/Title	-		
Copied from Event ID/Title	-		
Additional Remarks	-		
Max CPE Points	2		

Attendance Details

Date	Duration	Status	Last Approval Date	

Add Attendance

Documents Attached

No document attached.

Submission of Attendance

6. Enter the registration numbers of AHPs who have participated in the event. Alternatively, the **excel template** can also be downloaded to fill in for large numbers of participants. Click on the "**Attach**" button to upload the file.

Note that only the attendance of registered AHPs should be keyed in. Attendance for other registered healthcare professionals should be submitted with the relevant Professional Board.

Event Attendance

*Date	dd/mm/yyyy	[📅]		*Duration	1 to <2 hours ✔

Attendance Details

Attendance Status	Pending Submission
Last Approval Date	-
☐ No Attendance	

Search Attendance

Reg No./Name	[ ]	Search

Note:
• File must be in EXCEL (.xls o

Upload Attendance File

Upload attendance Excel sheet, if participants are more than 10.
Click here to download attendance excel template. Click here to view sample of attendance upload excel

Choose File	No file chosen	Attach

Attendance List   Add More Rows [10]   Add Delete

☐	S/N	Reg No. ▲	Name of Professional	Role / Speaker Duration	CPE Points	Status
☐	1	[ ]		Participant ✔	1	Draft
☐	2	[ ]		Participant ✔	1	Draft
☐	3	[ ]		Participant ✔	1	Draft
☐	4	[ ]		Participant ✔	1	Draft
☐	5	[ ]		Participant ✔	1	Draft
☐	6	[ ]		Participant ✔	1	Draft
☐	7	[ ]		Participant ✔	1	Draft
☐	8	[ ]		Participant ✔	1	Draft
☐	9	[ ]		Participant ✔	1	Draft
☐	10	[ ]		Participant ✔	1	Draft

Delete

Save	Submit