

SOUTH AFRICAN PHARMACY COUNCIL ANNUAL REPORT 2023

# SOUTH AFRICAN PHARMACY COUNCIL – GENERAL INFORMATION

Country of Incorporation and Domicile South Africa

Nature of Business and Principal Activities Statutory health council established as the

pharmacy industry regulator

Registered Office 591 Belvedere Street

Arcadia

Pretoria

0083

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0007

Bankers Standard Bank of South Africa

Independent Auditors MNB Chartered Accountants

Incorporated

Chartered Accountants (SA)

**Registered Auditor** 

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# PRESENTATION TO THE MINISTER: ANNUAL REPORT 2023

Minister of Health

It is our pleasure to submit the Annual Report on the activities of the South African Pharmacy Council for the period of 1 January 2023 – 31 December 2023, in terms of the Pharmacy Act, 53 of 1974.

MR MD PHASHA PRESIDENT MR VM TLALA REGISTRAR/CEO

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## FOREWORD BY THE PRESIDENT OF COUNCIL

"Agility is fundamental to leading a team through times of change." - Sandra E. Peterson

The 2018-2023 South African Pharmacy Council term of office can be considered a time of change. From setting out to embrace the 4th Industrial Revolution in pharmacy at the beginning of our term, to quickly adapting to an online and remote way of doing business during COVID-19, to successfully running an online election for the new Council in 2023, we have overcome and adapted to change greatly in our five years of service. During this term, there was also a change in the leadership of the Office of the Registrar, with the retirement of Mr Amos Masango and the appointment of Mr Vincent Tlala to the position of Registrar/CEO.

At the start of our term, we committed to attaining several strategic goals to carry out our statutory mandate and to achieve our newly adopted vision of "Accessible quality pharmaceutical services for all". One of the primary aspects of this vision is to ensure that pharmaceutical services are fully available to the public across the country and are of high quality, in terms of the Rules relating to Good Pharmacy Practice (GPP). In support of this, our term of office saw the introduction of compulsory continuing professional development (CPD) for all registered and active pharmacists, as well as the implementation of the removal of non-compliant pharmacies from the Register of Council. We have also made great progress in advancing the additional services that may be offered by pharmacists, including family planning, immunisation, Primary Care Drug Therapy (PCDT) services, sexual and reproductive health services, and Pharmacist-Initiated Management of Antiretroviral Therapy (PIMART).

The agility and innovation of the SAPC can be highlighted by the achievements obtained during the COVID-19 pandemic. With the implementation of the lockdown in South Africa in March 2020, the Office of the Registrar quickly adapted to a working-from-home model and oversaw the digitalisation of many of our processes, including applications. During COVID, the SAPC in partnership with the National Department of Health played a key role by developing an IT system for evaluating and issuing Section 22(A)15 COVID permits for vaccination sites and liaising with the Department of Trade and Industry on the categorisation of pharmacists as essential workers.

The launch of the SAPC Registration App greatly assisted pharmacy professionals as the SAPC did away with physical registration cards and provided registered persons with a quick and easy way to update their information on the SAPC systems. COVID-19 also saw the conversion of examinations hosted by the SAPC to online examinations, enabling Pharmacist Interns, Pharmacy Support Personnel, and Foreign-Qualified persons to write the relevant examinations remotely i.e. from their place of work, home, or other venue.

Several other milestones that have been reached can be seen from the feedback contained within this and previous annual reports.

I would like to express my heartfelt gratitude to the Honourable Minister of Health, Dr Mathume Joseph "Joe" Phaahla (MP) for his continued support. Without the support of the Minister, his office, the National Department of Health, all statutory health councils, education and training councils, professional associations, and our other stakeholders, we would not be able to perform the important work to which we are committed.

On behalf of the whole South African Pharmacy Council, I would like to thank all the registered professionals who, as essential front-line workers, continued to make the pharmacy profession proud throughout the COVID-19 pandemic and beyond. Your dedication and sacrifices during the strenuous times highlighted the vital role pharmacy plays in the South African healthcare environment.

I would like to take this opportunity to extend my heartfelt gratitude to my fellow Council members, the Executive Management, management, and employees of the Office of the Registrar, for making our five-year term of office a success, not only financially, but operationally and strategically as well.

It is safe to say that the past five (5) years have seen a massive transformation in the regulatory environment. Despite all the challenges we faced, I am certain that we, the outgoing Council, leave the South African Pharmacy Council with a firm foundation on which to build in the future. I wish the newly appointed/elected Council the best of luck during their term of office. May you continue to drive pharmacy forward and honour our noble profession.

Mr MD Phasha

President

South African Pharmacy Council

## **REGISTRAR/CEO'S 2023 OVERVIEW**

As we reflect on the accomplishments of 2023, it is with pride and responsibility that I present the Annual Report of the South African Pharmacy Council (SAPC). This year marked a pivotal moment as we approached the conclusion of our five-year strategic goals, achieving significant milestones while navigating challenges such as ongoing litigation regarding Pharmacist-Initiated Management of Antiretroviral Therapy (PIMART).

In accordance with Section 5(1)(a) of the Pharmacy Act, 53 of 1974, the Office has just finished the 2023 Council Elections process for the individuals who will make up the Council collective. This was the first time that the entire process was conducted online. The two-phased process took place between 08 August 2023, and 16 October 2023. The nominations phase, which ran from August 8 to September 8, resulted in the nomination of 161 pharmacists. The voting and ballot-casting phase occurred from Friday, 13 October to Monday, 16 October 2023. The elections saw a voter turnout rate of 38.79%, with 7 062 pharmacists out of 18 205 eligible voters participating. This increase in participation reflects the positive impact of electronic and digital voting. However, it is concerning that over 60% of pharmacists chose not to vote, despite the ease of participation and assistance offered by the Returning Officer before and during the election process. The Returning Officer announced the nine members elected by the profession during the 2023 Council Elections, as stipulated in Regulations 8(3) and 8(4) of the Regulations relating to the election of members of the South African Pharmacy Council on 19 October 2023.

Financially, we saw a decrease in the liquidity ratio of 6.53%, from 1.99 in the prior year to 1.86 as of 31 December 2023. However, our assets grew by over 13.60%, largely due to increases in both non-current and current assets, driven by significant additions to property and buildings. During the year under review, expenditure increased by 13.24%, resulting in a decrease of 24.68% in our surplus, from R13 052 304 to R10 468 582, primarily due to this increase in expenditure.

A highlight of the year is our achievement of the 15th clean audit in a row. A concerted drive to improve internal controls and financial management processes has resulted in the SAPC achieving a clean audit opinion for the year under review. My sincere appreciation goes to the Council and Committee Members, SAPC Management, and Employees for always offering support and valuable contributions in realising the SAPC's strategic objectives.

Legislative developments were also a highlight of the year. We published several key regulations, including:

- Rules relating to the services for which a pharmacist may levy a fee;
- · Good Pharmacy Practice (GPP) standard for sexual and reproductive health;
- The scope of practice, competency standards, and criteria for the Pharmacy Community Development Team (PCDT); and
- Proposed fees payable to the SAPC for 2024, which will see an increase of approximately 6.1% in line with inflation

Continuing Professional Development (CPD) remains vital for maintaining professional competence. While many pharmacists have embraced CPD by submitting their required entries, some still face compliance challenges. To address this, we facilitated CPD Masterclass sessions, with resources available online to support all pharmacists. Thank you to all the pharmacy professionals for making the health of the public their primary priority.

2023 also holds a bittersweet sentiment as we near the end of the current Council term, anticipating the appointment of a new Council by the Honourable Minister of Health. My special thanks go to the Council members, under the judicious leadership of the President, Mr Mogologolo David Phasha, for their patience, meticulous evaluation of our work, support, and guidance throughout the year. Gratitude also goes to the different Committee Members and Task Teams for their support, commitment, oversight, and guidance, as well as to the Minister and officials of the Department of Health.

This report captures a selection of highlights from our activities over the past year, including updates on regulations, election outcomes, and other critical initiatives. I encourage you to engage with the insights and achievements presented here as we continue our commitment to advancing the pharmacy profession in South Africa.

I extend my gratitude to all members of the SAPC and our partners for their continued dedication and support. Together, we are shaping a brighter future for pharmacy practice in our country.

VM Tlala

Registrar/CEO

South African Pharmacy Council

## **ABOUT THE ANNUAL REPORT**

This 2023 Annual Report of the South African Pharmacy Council (SAPC) presents the financial and performance information of the SAPC over the 2023 financial year.

The annual report presents reporting information that fulfils reporting requirements in line with the King IV Code on Corporate Governance, Principles 1-16.

#### REPORT LAYOUT

The report is divided into six main subcategories, namely:

- Part A: General Overview
- Part B: Performance Information
- Part C: Governance and Risk Management
- Part C: Human Capital and Development
- Part D: Stakeholder Relations
- Part E: Financial Management

## REPORTING PERIOD

The information contained herein relates to the work of the SAPC for the period 1 January 2023 – 31 December 2023.

#### **AVAILABILITY OF REPORT**

Electronic copies of this report and the audited Annual Financial Statements are available on the SAPC website at the following link: https://www.sapc.za.org/Publications

ISBN: 978-0-621-52128-3

Full name: Annual Report of the South African Pharmacy Council, 2023

## PART A: GENERAL INFORMATION

#### **ORGANISATIONAL PURPOSE**

#### Vision

Accessible quality pharmaceutical services for all.

#### Mission

Our mission is to promote universal health coverage by ensuring excellent and sustainable patient-centred pharmaceutical services by developing, enhancing and upholding acceptable norms and standards in all spheres of pharmacy.

This will be achieved by:

- protecting the rights and safety of the public;
- promoting the dignity of the profession;
- ensuring ethical practice and conduct;
- ensuring ongoing competency of pharmacy professionals; and
- embracing innovation and technology.

#### **Core Values**

- People first we care, we serve, we collaborate, we belong to the community
- Integrity we will be ethical, transparent and honest in conducting our business
- Accountability we are responsible and answerable for our actions
- Professionalism we will develop our staff to perform their work with expertise, dedication, care and act in a competent and excellent manner at all times

#### COUNCIL'S ROLE & RESPONSIBILITIES

The South African Pharmacy Council (hereinafter referred to as "SAPC"/"Council") is an independent statutory health professional council established in terms of the Pharmacy Act, 53 of 1974, to regulate the pharmacy profession, which includes pharmacists, pharmacy support personnel and pharmacies in both the public and private sector. The SAPC is vested with statutory powers of peer review and embraces as its objectives those outlined in the Pharmacy Act.

The SAPC is responsible for its own funding and endorses the principles contained in the King IV Code on Corporate Governance (2016)<sup>1</sup>. These principles form part of the Council members' responsibilities and are embedded in the Charter of Good Practice of the South African Pharmacy Council, together with key policies of the SAPC. Council members are required to familiarise themselves with both the objectives of Council as outlined in the Pharmacy Act and their responsibilities as outlined in the South African Pharmacy Council Charter

## **Objectives and Functions of Council**

In terms of the Pharmacy Act and incorporated into the Council's Strategic Plan 2018 – 2023, the Council's objectives<sup>2</sup> are to:

- Assist in the promotion of the health of the population of the Republic of South Africa.
- Advise the Minister of Health or any other person on any matter relating to pharmacy.
- Promote the provision of pharmaceutical care which complies with universal norms and values, in both the public and private sectors, with the goal of achieving definite therapeutic outcomes for the health and quality of life of a patient.

Institute of Directors in Southern Africa. (2016). King IV Report on Corporate Governance for South Africa 2016. Institute of Directors in Southern Africa. Publications-King IV - The Institute of Directors in South Africa NPC (iodsa.co.za) Section 3 of the Pharmacy Act, 53 of 1974

- Uphold and safeguard the rights of the general public to universally acceptable standards of pharmacy practice in both the public and private sectors.
- Establish, develop, maintain and control universally acceptable standards for:
  - o pharmaceutical education and training;
  - the registration of a person who provides one or more or all of the services which form part of the scope of practice of the category in which such person is registered;
  - o the practice of the various categories of persons required to be registered in terms of the Pharmacy Act;
  - o the professional conduct required of persons registered in terms of the Pharmacy Act; and
  - o the control of persons registered in terms of the Pharmacy Act by investigating in accordance with the Pharmacy Act complaints or accusations relating to the conduct of registered persons.
- Promote transparency to the profession and the general public in achieving its objectives, performing its functions, and executing its powers.
- Maintain and enhance the dignity of the pharmacy profession and the integrity of persons practising the profession.

#### **COMPOSITION OF THE COUNCIL**

The Council is comprised of twenty-five (25) members<sup>3</sup> who are elected or appointed from various sectors of the pharmacy profession with an appropriate balance of knowledge, skills, experience, diversity, and independence, for it to discharge its governance role and responsibilities objectively and effectively. Of the members, nine (9) members are voted in by registered pharmacists and sixteen (16) are appointed by the Minister of Health. During the reporting period of 2023, Council only had a complement of 24 members, due to the resignation of an appointed member.

It is noted that the member appointed by the Minister of Health to represent Gauteng Department of Health resigned from Council in 2020 due to retirement and a new appointment has not yet been made.

The Council is supported by additional expertise in the form of the Audit and Risk Committee and the Remuneration and Reimbursement Committee, which are composed of a majority of independent experts.

#### Council Members 2023

Mr Mogologolo David Phasha President

Ms Nelly Boitumelo Molongoana Vice-President

Mr Tshegofatso Daniel Moralo Treasurer

Prof. Yahya Essop Choonara Chairperson: Education Committee

Ms Jacqueline Ann Maimin Chairperson: Practice Committee

Mr Ayanda Soka Chairperson: CPD Committee

Prof. Moliehi Matlala Chairperson: Pre-registration Committee

Ms Mmapaseka Steve Emily Letsike Chairperson: Health Committee

Mr Johannes Stephanus du Toit Chairperson: Committee of Preliminary Investigation

Dr Margaritha Johanna Eksteen Chairperson: Committee of Informal Inquiries

Ms Khadija Jamaloodien National Department of Health Representative

Ms Pakama Pateka Tandokazi Dlwati

Ms Helen Catherine Hayes

Ms Josephine Winley Herbert

Section 5(1) of the Pharmacy Act, 53 of 1974

Mr Pieter Johannes Kilian

Prof. Sarel Francois Malan

Ms Moitsoadi Sarah Mokgatlha

Prof. Natalie Schellack

Dr (Adv.) Nazreen Shaik-Peremanov

Ms Tlou Mavis Shivambu

Mr Mosiuoa Shadrack Shuping

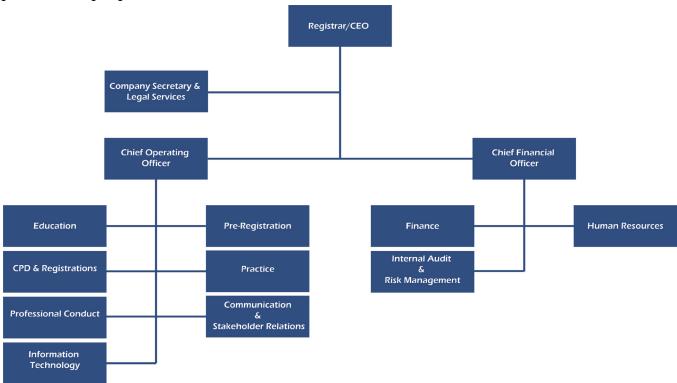
Prof. Ilse Truter

Ms Christina Aletta Venter

Prof. Petrus de Wet Wolmarans

## **SAPC ORGANOGRAM**

Figure 1: SAPC Organogram



#### **CORE FUNCTIONS**

## Registrar (Chief Executive Officer)

The Registrar, as accounting officer<sup>4</sup> with delegated overall control of the Office of Council, is responsible for:

- (a) Fulfilling the role and responsibilities as prescribed in terms of the Pharmacy Act;
- (b) Ensuring effective communication with all stakeholders, including the Minister of Health, Department of Health, pharmaceutical industry, voluntary professional organisations and the public, in conveying Council policy and resolutions;
- (c) The implementation of Council policies;
- (d) Ensuring cooperation, coordination and quality assurance of all activities at the Office of Council;
- (e) The supervision of Council spending according to relevant policies;
- (f) Implementation of all strategic and operational plans, resolutions, policies, and procedures of Council; and
- (g) Provide secretarial services to the Council.

## **Chief Operating Officer**

- (a) Ensure effective communication with all stakeholders;
- (b) Ensure cooperation, coordination, and quality assurance of all activities in the Office of Council;
- (c) Administration of the Office of Council;
- (d) Implement Corporate Social Investment (CSI) policies (outreach programmes);
- (e) Coordination of all Committees of Council;
- (f) Coordination of functions and effective management between different departments, including strategic management;
- (g) Maintains public relations;
- (h) Constant monitoring of expenditure against budget; and
- (i) Provide secretarial services to the Executive Committee of Council.

#### **Chief Financial Officer**

- (a) Monitor and control income and expenditure;
- (b) Effective application of purchasing and tendering processes;
- (c) Effective administration of the SAPC personnel pension fund and medical scheme contributions, payment of salaries, and insurance;
- (d) Effective maintenance of contracts, assets, property, equipment and security of all assets;
- (e) Compliance with statutory requirements for taxation, pension funds and returns;
- (f) Planning and control of the SAPC budget in terms of SAPC procurement and financial policies;
- (g) Assist the Registrar with risk management; and
- (h) Provide secretarial services to the Pension Fund Board of Trustees and the Audit and Risk Committee (ARC).

Regulations 23 & 24 of the Regulations relating to the appointment and business of office-bearers and committees of the council, meeting procedures and the manner in which the accounts of the council shall be kept (GNR: 215, of 3 February 1975) as amended.

## Company Secretary and Legal Services

- (a) Provide professional legal services, and administration to Council, the Registrar, the Office of the Registrar, the profession, and the public;
- (b) Provide advisory services on all legal enquiries;
- (c) Provide coordination and support in terms of litigation against and by the Council;
- (d) Execute the functions of the Company Secretary and ensure legislative compliance of the Council, the Registrar, and the Office of the Registrar;
- (e) Provide guidance and advice on matters pertaining to corporate governance;
- (f) Responsible for drafting the legislation and publishing legislation for the Council; and
- (g) Manage legal contracts and administration.

## **Education and Training Department**

- (a) Develop and review standards of education (GPE);
- (b) Development and review of accreditation criteria for registered providers and courses;
- (c) Development and review of accreditation and monitoring tools (questionnaires and applicable application forms) for providers and learning programmes;
- (d) Develop policies that direct the activities of Education;
- (e) Develop and review qualification curriculum outlines for all qualifications;
- (f) Develop and review the Code of Conduct for evaluators and verifiers;
- (g) Develop and review guidelines, manuals, and criteria documents for the interpretation and implementation of standards as well as the application of tools (e.g., internship manuals);
- (h) Develop specification documents for online systems and continuously review these processes as part of quality assurance;
- (i) Manage the monitoring and compliance process for pharmacy education (appoint and train a panel of evaluators, perform monitoring visits, evaluate and produce reports, and give feedback);
- (j) Regularly validate the processes, systems and procedures through performance assessment and the identification of stumbling blocks; and
- (k) Serve as secretariat for the Education Committee and its task teams.

## **Pre-Registration Department**

- (a) Develop, review, and manage the internship process (ensure compliance with registration requirements, Tutor/Intern workshops, 4<sup>th</sup>-year students empowerment workshops, assessment requirements (examinsations, CPD and progress reports);
- (b) Develop, review, and manage the traineeship process (ensure compliance with registration requirements, pharmacy support personnel (PSP) information empowerment workshops, assessment requirements examinations, and progress reports);
- (c) Development and review of accreditation criteria for foreign-qualified persons, including professional examinations;
- (d) Develop policies that direct the activities of pre-registration;
- (e) Develop and review the Code of Conduct for invigilators, examiners, assessors and moderators;
- (f) Develop and review guidelines, manuals and criteria documents for the interpretation and implementation of standards as well as the application of tools (e.g., internship manuals);
- (g) Develop specification documents for online systems and continuously review these processes as part of

quality assurance;

- (h) Regularly validate processes, systems and procedures through performance assessment and the identification of stumbling blocks; and
- (i) Serve as secretariat for the Pre-Registration Committee and its task teams.

## **CPD and Registrations Department**

- (a) Develop and review standards for CPD and Registrations;
- (b) Development and review of accreditation criteria for persons;
- (c) Develop policies that direct the activities of CPD and Registrations;
- (d) Development and review of accreditation tools (questionnaires and applicable application forms) for registered persons;
- (e) Develop and review the Code of Conduct for assessors and moderators;
- (f) Develop and review guidelines, manuals and criteria documents for the interpretation and implementation of standards as well as the application of tools (e.g., internship manuals);
- (g) Develop specification documents for online systems and continuously review these processes as part of quality assurance;
- (h) Manage the monitoring and compliance process for CPD and Registrations (appoint and train assessors and moderators for CPD, perform participation data analysis, evaluate and produce reports, and give feedback);
- (i) Manage and maintain the accreditation of all registered persons (students, interns, pharmacy support personnel, pharmacists, specialists, Primary Care Drug Therapy (PCDT), assessors and moderators);
- (j) Regularly validate processes, systems and procedures through performance assessment and the identification of stumbling blocks; and
- (k) Serve as secretariat for the CPD Committee, Health Committee, and relevant task teams.

## **Practice Department**

- (a) Develop and review standards of Good Pharmacy Practice (GPP):
- (b) Development and review of licencing criteria for pharmacies;
- (c) Development and review of accreditation and monitoring tools (questionnaires and applicable application forms) for pharmacies;
- (d) Develop and review scopes of practice for all SAPC registered persons;
- (e) Develop policies that direct the activities of Practice;
- (f) Develop and review Ethical Rules;
- (g) Develop and review the Code of Conduct for registered persons;
- (h) Develop and review guidelines, manuals and criteria documents for the interpretation and implementation of standards as well as the application of the tools (e.g., internship manuals);
- (i) Develop specification documents for online systems and continuously review these processes as part of quality assurance;
- (j) Manage the monitoring and compliance process for pharmacy practice (appoint and train inspectors, perform inspections, evaluate and produce reports, and give feedback);
- (k) Manage the processing of licences and recording of pharmacies, permits, automated dispensing units, remote automated dispensing units, internal changes, another business in a pharmacy, and the approval of premises for the purpose of training applications;
- (I) Regularly validate processes, systems, and procedures through performance assessment and the

identification of stumbling blocks; and

(m) Serve as secretariat for the Practice Committee and its task teams.

## **Professional Conduct Department**

- (a) Enforce compliance with all pharmacy legislation, and in particular the acts and omissions for which the Council may take disciplinary action, the code of conduct for registered persons, and standards;
- (b) Receive and process complaints from members of the profession and the public;
- (c) Investigate complaints against registered persons and facilities in terms of Section 39 of the Pharmacy Act and the Regulations relating to the conduct of inquiries in terms of Chapter V of the Pharmacy Act;
- (d) Support registered persons to maintain their capability, competency and suitability to practice;
- (e) Review and revise legislation, policies and systems related to professional conduct;
- (f) Develop and review the standards of enforcement of legislative provisions;
- (g) Provide advisory services on all legal enquiries related to professional conduct matters; and
- (h) Serve as secretariat for the Registrar's Review Panel, the Committees of Preliminary Investigation, Informal Inquiries and Formal Inquiries.

## Communication and Stakeholder Relations Department

- (a) Develop, implement and review internal communication (including staff briefings);
- (b) Develop, implement and review the SAPC Corporate Communication Strategy (including awareness campaigns, social media, print media, electronic media and presentations);
- (c) Web Content Management;
- (d) Develop, implement and review advertising and marketing initiatives;
- (e) Manage corporate identity;
- (f) Manage the library and e-document management system (Council agendas and minutes);
- (g) Develop, implement and enhance stakeholder relations (surveys and opinion polls);
- (h) Develop, implement and enhance media relations;
- (i) Undertake road shows, exhibitions, career days, conferences and campaigns;
- (j) Coordinate pro-active and reactive media interviews, press releases and press conferences;
- (k) Managing customer services which includes incoming calls, updating addresses and contact details on the Register, creating dashboard cases received on desktop mail and faxes, and receiving complaints; and
- (I) Manage the Logistics Unit which includes mail, e-mails, printing of approval or accreditation certificates and letters, e-achiving and hardcopy archiving, and shredding processes.

## **Human Resources Department**

- (a) Ensure fair recruitment and selection processes that remove unfair discrimination by ensuring that the employment patterns stabilise the operations in the various departments, and supporting Employment Equity and Affirmative Action;
- (b) Provide training and development that intends to improve competency levels;
- (c) Ensure compliance with all labour laws and occupational health and safety requirements;
- (d) Ensure a labour relations platform and develop policies and conditions that seek to help employment relations work better;
- (e) Provide payroll administration that ensures that the sum of financial records of salaries of employees,

- bonuses, withholdings, and deductions are carried out timely and accurately;
- (f) Ensure the development of systems and modules that enhance best HR practice relating to the retention and remuneration of employees; and
- (g) Secretariat for the Bargaining Council and the Remuneration and Reimbursement Committee (REMCO).

## Information Technology (IT) Department

- (a) Align IT objectives and programmes to Council objectives and strategies
- (b) Align IT risk management with enterprise-wide risk management
- (c) Optimise costs of services through a mix of internal and external resources
- (d) Evaluate the overall operations of computing and IT functions and recommend enhancements
- (e) Oversee the development, design, and implementation of new applications and changes to existing computer systems and software packages; and
- (f) Serve as secretariat for the Information and Communications Technology (ICT) Steering Task Team.

#### STATISTICS AT A GLANCE

## **Education**

The Education Department is tasked with registering and progressing learners who are registered in the qualifications: National Certificate: Pharmacist's Assistant – Basic (NQF Level 3) and Further Education and Training Certificate: Pharmacist's Assistant – Post-Basic (NQF Level 4). In the SAPC register as at 31 December 2023, there were 3 977 learner Basics, of which 2 340 (58,3%) were registered during 2023, while there were 2 321 learner Post-Basics, of which 1 455 (62.7%) were registered during 2023. Figure 1 shows the number of registered Learner Basic and Learner Post-Basics on the register, and those who were registered as at 31 December 2023.



Figure 2: Number of Learner Basic and Post-Basics registered in the year 2023

Every year, the Education Department liaises with the nine (9) schools of pharmacy to register and progress learners from first-year through fourth-year. Table 1 below illustrates the number of first-, second-, third- and fourth-year students per university. In 2023, there was a total of 4 628 registered students on the SAPC register, whereby 1 380 (29.8%) were first-year students, 1 149 (24.8%) were second-year students, 1219 (26.3%) were third-year students and 880 (19%) were fourth-year students.

Table 1: Number of students per university in	v in 2023
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University	First-Ye	ar	Second-Year Third-Year		ear	Fourth-Year		
	2022	2023	2022	2023	2022	2023	2022	2023
Nelson Mandela University	85	145	105	125	145	130	141	102
North-West University	187	210	180	183	189	195	258	275
Rhodes University	196	179	182	173	130	181	184	120
Sefako Makgatho Health Sciences University	72	71	71	80	74	79	36	57
Tshwane University of Technology	80	82	70	71	49	70	40	48
University of KwaZulu-Natal	115	126	112	107	100	104	127	113
University of Limpopo (Turfloop Campus)	84	68	80	92	74	82	63	80
University of the Western Cape	134	146	167	181	129	123	125	111
University of the Witwatersrand	139	184	89	112	67	96	103	74
Total	1 092	1 380	1 065	1 149	957	1 219	1 077	880

## **Pre-Registration**

Pharmacists Interns and Pharmacy Technician Trainees have completed their qualification, and for purposes of work-based experience are required to complete their internship or traineeship as required. Due to the discontinuance, at this stage, of the Pharmacy Technician course until the promulgation of the relevant legislation, the number of Pharmacy Technician Trainees has dropped substantially from 2020.

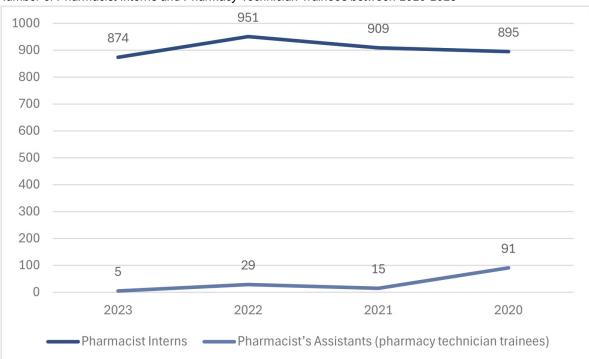


Figure 3: Number of Pharmacist Interns and Pharmacy Technician Trainees between 2020-2023

Table 2 summarises the outcomes of the different registration examinations conducted by Council in 2023, indicating the candidates writing each examination as well as the pass rate.

Table 2: Examinations conducted by Council in 2023

Category	Type of examination	No. of examinations	No. of candidates	Pass rate
Interns	Pre-reg examination	3		
		01/02 March 2023	233	94.85%
		01/02 August 2023	565	87.08%
		24/25 October 2023	240	89.58%
	Practice examination	4		
		24 January 2023	183	
		01 June 2023	772	
		20 July 2023	438	
		31 August 2023	207	
	Supplementary examinations	1		
		17 February 2023	05	80%
Foreign-qualified persons	Professional examinations	2		
		08 May 2023	12	83.33%
		10 May 2023	19	52.63%
		12 May 2023	17	64.71%
		02 October 2023	07	100%
		04 October 2023	12	8.33%
		06 October 2023	09	66.67%
Restoration pharmacist (>60 months inactive)	Pre-registration restoration examination	04 April 2023	01	100%

## **Continuing Profession Development (CPD)**

Figure 4: CPD compliance status for 2023

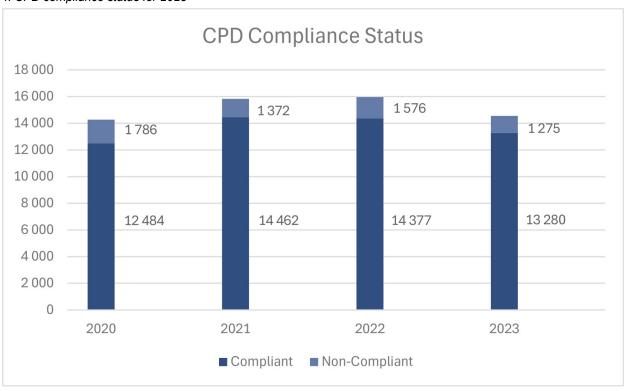


Figure 5: Tutor compliance status

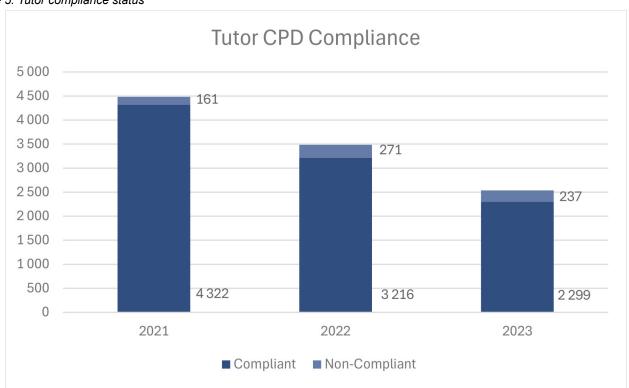


Figure 6: Responsible Pharmacist compliance status

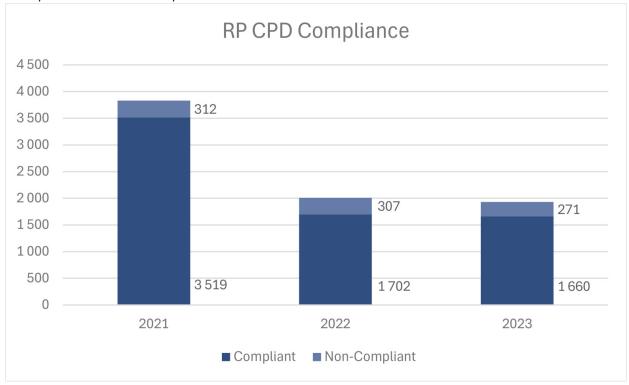
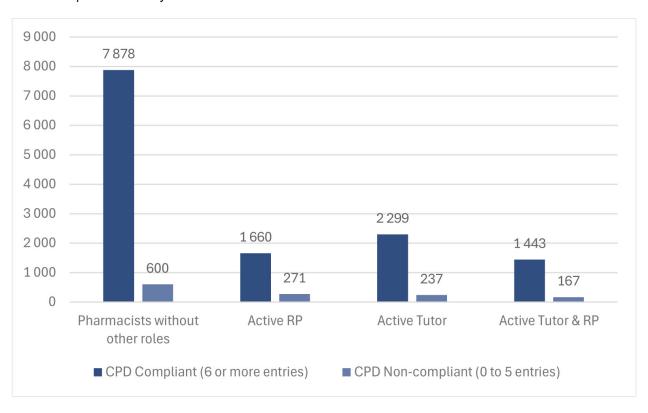


Figure 7: CPD compliance status by roles



## **Practice**

The figures below depict the number of inspections per province, the number of inspections per sector and per type, together with a pictorial view of the grades obtained following these inspections on the classification of inspection findings and the inspection cycles that follow such inspection findings/gradings.

Figure 8: Inspections per province

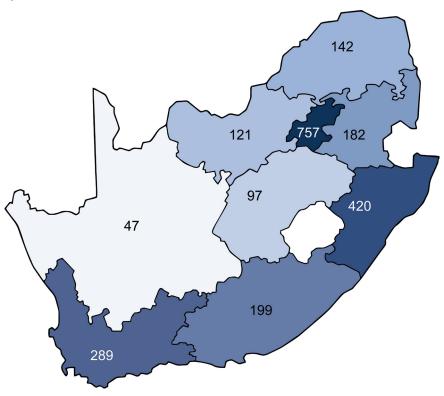


Figure 9: Number of inspections per sector of pharmacy

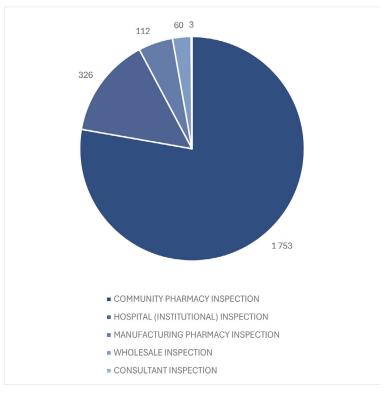


Figure 10: Number of inspections per type

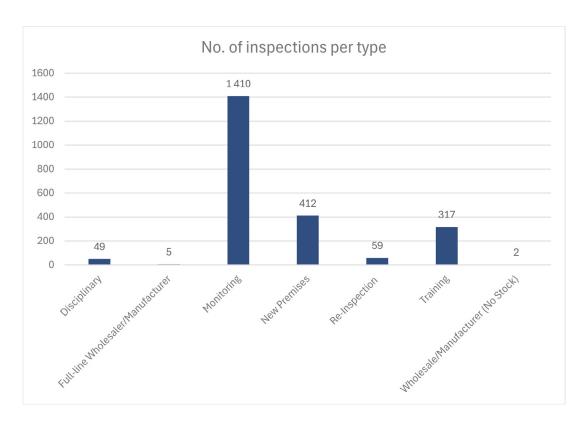
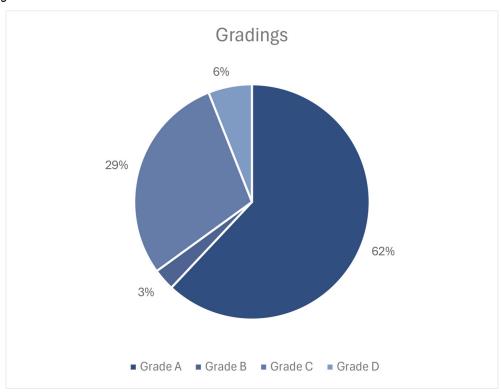


Figure 11: Overall grades obtained in 2023



## PART B: PERFORMANCE INFORMATION

#### STRATEGIC OBJECTIVE 1

Assist in the promotion of the health of the population of the Republic of South Africa.

Strategic Objective 1 is derived from the overall fundamental function of the SAPC, to protect the public by carrying out all of its regulatory functions as enshrined in the Pharmacy Act. The performance and achievements of Strategic Objective 1 are provided in this report in Part D: "Stakeholder Relations", where the details are provided as to the magnitude of such engagement, from international, national and provincial engagement to individual engagement with registered persons and providers of education and training.

In pursuit of Strategic Objective 1, the Office of the Registrar rolled out a year-long social media-driven health communication campaign on the backdrop of National and Global Health Days. This campaign had also been rolled out as an internal communication campaign to ensure the SAPC staff were educated on various health conditions, warning signs and how to seek help.

#### **STRATEGIC OBJECTIVE 2**

Advise the Minister of Health or any other person on any matter relating to pharmacy.

As the national regulator of pharmacies and pharmacy owners in all sectors of the pharmacy profession, in both the public and private sectors, of pharmacists (including specialist pharmacists), pharmacy students, Pharmacist Interns and all categories of pharmacy support personnel, the SAPC is strategically situated to advise the Minister of Health and any other person on any matter related to pharmacy and the pharmacy profession. This is achieved in an inclusive and objective manner, which includes international benchmarking, current and emerging local trends and issues in pharmacy, as well as day-to-day pharmacy matters.

## **Legal Enquiries and Legal Opinions**

In terms of providing legal support to the profession, the Office of the Registrar provided legal services to the public, the profession and stakeholders by addressing legal enquiries emanating from various sources as well as attending various stakeholder engagements initiated by various departments, Committees, Council and the Office of the Registrar. Legal enquiries may cover any variety of questions that the pharmacy stakeholders or the public require assistance in answering and addressing. Of particular interest and importance in 2023, the legal enquiries included issues pertaining to:

- (a) the validity of electronic prescriptions, particularly with regards to Schedule 6 prescriptions;
- (b) change in the ownership of pharmacies, particularly with regards to the change in membership or shareholding of the juristic owner; and
- (c) the emergence of companies growing and producing cannabis APIs submitting applications for pharmacy licences.

The Office of the Registrar formally addressed over 100 legal-related enquiries during 2023.

## **Legislation Proposals**

In 2023, the SAPC facilitated the drafting of the proposed amendments to the *Regulations relating to the election of members of the South African Pharmacy Council*, as amended, in order to provide for electronic voting for Council members, which Regulations were published by the Minister of Health for implementation on 4 August 2023.

The SAPC also facilitated the proposed review of the *Notice of Determination of Fine Amounts in terms of the Pharmacy Act*, which proposed revised amounts have been submitted to the Minister of Health for publication.

## **Board Notices**

It is the responsibility of Council through various Committees of Council and the departments within the Office of the Registrar to set standards in pharmacy practice and education and training. In terms of Section 35A of the Pharmacy Act, the Council may make various rules in terms of pharmacy practice. In addition, based on the role and functions of the Council, it is also critical for Council to engage with stakeholders in a formal manner by publishing Board Notices for comment before implementation. These Board Notices may include the proposed fees payable to Council each year, competency standards, and other information that Council may use as part of the development of standards, Regulations and Rules. Board Notices that are published for comment are, as a general rule, published for sixty (60) days as required in terms of Section 49 of the Pharmacy Act.

The Office of the Registrar is responsible for ensuring that the Board Notices that are published by Council are legally sound, aligned to Council's objects and functions, and are always reasonable and rational. The Office of the Registrar is responsible for the receipt and collation of all comments received from stakeholders when Board Notices are published for comment. Comments are then reviewed within the delegated structures of Council. Once all the comments have been reviewed, Council is required to publish such matters for implementation, where necessary and relevant.

## Input into proposed legislation

The SAPC provides input in respect of legal notices that are published for comment, be it to the Minister of Health or other external stakeholders, when such proposed legislation has or may have an impact on Council or the pharmacy profession. In 2023, Council provided comments in respect of the proposed amendments or new legislation relating to:

- (a) Regulation 42 under the *General Regulations* published under the Medicines and Related Substances Act, 101 of 1965, published by the South African Health Products Regulatory Authority (SAHPRA), relating to the advertising regulations, in particular with regards to the proposed advertising of specified Schedule 2 medicines and scheduled substances;
- (b) proposed Regulations relating to conditions under which a registered person may practice as a private practitioner, published under the Nursing Act, 33 of 2005; and
- (c) the proposed Guideline for Good Medicine Compounding Practice, by SAHPRA.

## Recommendations for the issuing of Section 22A(15) permits

Section 22A(15) of the Medicines and Related Substances Act, 101 of 1965, states that "the Director-General may, after consultation with the Pharmacy Council of South Africa as referred to in Section 2 of the Pharmacy Act, 53 of 1974, issue a permit to any person or organisation performing a health service, authorising such person or organisation to acquire, possess, use or supply any specified Schedule 1, Schedule 2, Schedule 3, Schedule 4 or Schedule 5 substance, and such permit shall be subject to such conditions as the Director-General may determine."

Council evaluates and makes recommendations on these applications to the Director-General in order to issue these permits. A total of eighty (80) applications were received, and sixty-two (62) Section 22A(15) permits for PCDT pharmacists were recommended and issued online, and 288 renews were recommended.

Council also participated in the renewal of facility permits for the COVID-19 vaccination programme. The SAPC was appointed to curate all pharmacies that are uploaded on the Master Facility List (MFL). A total of 5 369 renewal COVID-19 facility permits have been issued to date.

#### STRATEGIC OBJECTIVE 3

Promote the provision of pharmaceutical care that complies with universal norms and values in both the public and the private sectors, with the goal of achieving definite therapeutic outcomes for the health and quality of life of a patient.

In order to promote the provision of pharmaceutical care that complies with universal norms and values to achieve therapeutic health outcomes, the SAPC has identified the need to develop and implement competency standards for all categories of registered persons. Competency standards in pharmacy are defined as the knowledge, skills, and attitudes which include all the different tasks of a registered person, in terms of their scope of practice.

## Development of Competency standards for specialists in pharmacy

Council finalised the development of the competency standards for specialists in pharmacy which includes Radiopharmacy, Industrial Pharmacy, Clinical Pharmacy, and Public Health Pharmacy and Management Services. The purpose of the competency standards is to set out the competencies required for pharmacists to become specialists in pharmacy and whose specialisations will be registrable with Council.

Council published the following Board Notices for comment in 2023 in respect of the competency standards for specialists in pharmacy:

- (a) Board Notice 481/2023, pertaining to the Competency Standards for Industrial Pharmacists, Clinical Pharmacists and Radiopharmacists in South Africa, 29 September 2023;
- (b) Board Notice 513/2023, pertaining to the Competency Standards for a pharmacist who provides Public Health Services in South Africa, 24 November 2023.

Specialists in pharmacy are currently not prescribed in law, the *Regulations relating to specialisations in pharmacy* are awaiting publication for comment by the Minister of Health. These competency standards were developed in anticipation that the *Regulations relating to the registration of specialist pharmacists* will hopefully be published for comment soon. Once the regulations have been promulgated, the competency standards will become implementable at the end of the development process.

## **STRATEGIC OBJECTIVE 4**

Uphold and safeguard the rights of the general public to universally acceptable standards of pharmacy practice in both the public and private sectors.

In tandem with promoting the provision of pharmaceutical healthcare that complies with universal norms and values, the SAPC is required to uphold and safeguard the rights of the general public to universally acceptable standards of pharmacy practice. This is achieved through the on-going inspections of pharmacies.

## **Pharmacy Premises Inspections**

#### Pharmacy Inspection Tool (Inspection questionnaires) and grading of pharmacies

The Inspection Officers continue to conduct inspections using the mobile Inspection App on Android devices or the web version on laptops, whilst the Department ensures the stability of the mobile App, and makes necessary updates when required. The inspection questionnaires will be updated to prepare for the 2024 inspection cycle in line with decisions taken by Council in 2023 that affect the inspection of pharmacies, and the amendments were approved by EXCO at its meeting on 29 November 2023 to approve the changes. Responsible Pharmacists submitted self-inspections by 1 May 2023.

Council approved the questionnaire for primary healthcare clinic dispensaries and has further resolved that the Office of the Registrar engage with the Office of Health Standards Compliance to investigate areas of collaboration in these inspections.

#### Inspection of pharmacies

In terms of Section 22(6) of the Pharmacy Act, Council has the right to inspect pharmacy premises. Inspection Officers are appointed in terms of Section 38A of the Act. This is done on an ongoing basis.

In terms of the Inspection Methodology (2020), the outcome of such an inspection is determined by a Grade, either Grade A, Grade B, Grade C, or Grade D. The determination of a pharmacy inspection grade, and the consequence of such grade is detailed in the table below:

Table 3: Pharmacy inspection grading

Grade	Findings	Classification	% Score	Inspection cycle	Training approval
A	The pharmacy premises comply with most of GPP standards	Excellent - minor deficiencies were observed during the inspection	90-100%	3 years	3 years or less
В	The pharmacy premises comply with some of GPP standards	Good - major deficiencies were observed during the inspection	80-89%	2 years	2 years or less
С	The pharmacy premises do not comply with most of GPP standards or any of the non-negotiable criteria	Poor - critical deficiencies were observed during the inspection	1-79%	1 year	No approval
D	The pharmacy was found to be not in operation, has closed or relocated without informing SAPC	N/A	0%	N/A	N/A

A total of 2 254 inspections were conducted in 2023. These included monitoring, training, disciplinary and new pharmacy inspections. Out of the 2 254 inspections conducted, 1 409 were Grade A, 67 were Grade B, 645 were Grade C and 133 were Grade D.

## Approval of pharmacy premises for the purpose of training

In order for a pharmacy to be approved for purposes of training Pharmacy Interns and pharmacy support personnel (learners), such pharmacies must obtain a minimum of a grade B in an inspection, where there are minor shortcomings. In total 459 premises were approved for the training of Pharmacist Interns and pharmacy support personnel.

Removal of pharmacy registration/recording as a result of non-compliance with the Rules relating to Good Pharmacy Practice (GPP)

The Office of the Registrar established a review panel for the removal of pharmacy registration/recording due to non-compliance with the GPP in line with Board Notice 63 of 2020, titled *Guideline for the Removal of Pharmacy Registration/ Recording as a Result of Non-Compliance with Good Pharmacy Practice and Other Pharmacy Legislation.* 

The review panel held four (4) meetings in 2023, reviewing 534 cases, with recommendations of pharmacies to be removed serving at the Practice Committee. Council resolved that forty-four (44) pharmacies be removed from the register of Council. In addition, two (2) appeals and four (4) restoration applications have been received and have been considered by the panel and submitted to the Practice Committee.

The review panel has also recommended the review of the *Guideline for the Removal of Pharmacy Registration/ Recording as a Result of Non-Compliance with Good Pharmacy Practice and Other Pharmacy Legislation* with amendments approved by Council in October 2023. The amendments included the inclusion of an appeal period and a process of expediting licence removal for high-profile cases.

## Legal support

In conducting the business of Council, and to ensure universally acceptable standards of pharmacy, which include local and international bench-marking, it is necessary to ensure that the actions of the organisation are carried out in a manner that is lawful and duly authorised, procedurally fair and reasonable. In this regard, the Office of the Registrar provided Council with legal opinions where such matters are of direct and indirect

relevance to pharmacy and pharmaceutical services. These included issues relating to:

- (a) the impact of the Constitutional Court judgement in the matter between the Independent Community Pharmacy Association (ICPA) and Clicks, in respect of the issue of direct/indirect beneficial interest as contained in Regulation 6(1)(d) of the Regulations relating to the ownership and licencing of pharmacies;
- (b) the powers of the CPD Committee and Council in respect of non-compliance with the *Regulations* relating to Continuing Professional Development;
- (c) the impact and effect of education providers' submissions of disciplinary action taken by the provider against students registered with the Council, particularly where the action may impact on the registration of the students with Council;
- (d) whether a private Higher Education Institution (HEI) can apply for accreditation to offer the PCDT course;
- (e) the legality of the registration of Primary Health Clinics with the SAPC and the inspections thereof;
- (f) understanding the issuing of Section 22C licences by SAHPRA in respect of cannabis cultivators, who are also applying for manufacturing licences with the SAPC; and
- (g) Council's authority in addressing the gap in legislation in respect of the expungement of Committee of Formal Inquiry judgements.

#### STRATEGIC OBJECTIVE 5

In order to promote universal norms and values in pharmacy there is a need to establish, develop, maintain and control universal standards.

5.1 Establish, develop, maintain and control universally acceptable standards in pharmaceutical education and training.

Development and reviewing of accreditation criteria for registered providers and courses

Council has developed the *Criteria to accredit a generic short course for a pharmacist who wishes to register as a Responsible Pharmacist*. Council, through its disciplinary processes and committees, noted that some of the Responsible Pharmacists are not aware of the extent of their accountability to Council in ensuring compliance with the provisions of legislation regarding pharmacy practice. According to the *Rules relating to Good Pharmacy Practice* (GPP), the responsibilities of a Responsible Pharmacist are clearly outlined, however, there was no outline of the criteria for registration thereof.

Board Notice 514/2023, pertaining to the Criteria to accredit a generic short course for a pharmacist who wishes to apply for registration as a Responsible Pharmacist, was published on 24 November 2023, for comment.

## Development and reviewing of qualifications

#### Work-Based Learning

Qualifications for pharmacists and pharmacy support personnel require students/learners to complete Work-Based Learning. Council observed that different higher education institutions implement this requirement differently depending on their experiences with workplaces, their location and resources. There is also an additional requirement that learners enrolled for pharmacy support personnel qualifications should complete their experiential learning in all categories of pharmacy. The requirement for the implementation of Work-Based Learning for each qualification requires detailed planning and consultation with stakeholders.

In terms of Sections 3(e)(i), 33 and 34 of the Pharmacy Act, 53 of 1974, read together with the *Regulations relating to pharmacy education and training*, Council developed the Guidance Document for Work-Based Learning, which was published for comment in Board Notice 477/2023, pertaining to the South African Pharmacy Council Guidelines for Work-Based Learning (WBL) on 22 September 2023. Comments will be considered in 2024, and the guidelines will be finalised in 2024. These guidelines will guide the implementation of Work-Based Learning for each qualification.

#### Qualifications for all categories of pharmacy personnel

The Office of the Registrar is currently evaluating applications from applicants who would like to offer the Occupational Certificate: Pharmacist's Assistant (Basic) and the Occupational Certificate: Pharmacist's Assistant (Post-Basic). Thus far, Council has accredited one service provider to offer the Occupational Certificate: Pharmacist's Assistant (Basic) and the Occupational Certificate: Pharmacist's Assistant (Post-Basic) who took their first cohort of learners in August 2023.

Bachelor of Pharmacy: Curriculum Outline and Accreditation Criteria: Exit Level Outcomes and Associated Assessment Criteria

Council in collaboration with the Council on Higher Education (CHE) developed the Bachelor of Pharmacy (BPharm) qualification standard. Council is required to develop criteria for the accreditation of the Bachelor of Pharmacy learning programmes and curriculum outline to be used by Higher Education Institutions (HEIs) to develop their learning programmes. Council approved the process for the development of curriculum outline and criteria for the accreditation of learning programmes to be used for the revised BPharm and Curriculum Outline and Criteria for Accreditation: Exit Level Outcomes (ELOs) and Associated Assessment Criteria (AAC) will be published for broad stakeholder input in early 2024. The curriculum outline for the Bachelor of Pharmacy qualification will be finalised in 2024.

#### Reviewed mapping template for the evaluation of foreign qualifications

Council receives applications from foreign-qualified candidates who wish to be registered as Pharmacists or Pharmacy Support Personnel in South Africa. The application comprises a submission of a syllabus indicating the subjects, credits, and other details of the qualification that the candidate has obtained. Council resolved that the Education Committee oversee the desktop evaluation of foreign qualifications to determine whether such qualifications are equivalent to South African qualifications, as they are the appointed Committee to oversee the standards of education and training of pharmacists, including qualifications for registration. Council previously developed the instrument for the Mapping of an applicant's Bachelor of Pharmacy (or equivalent) Learning Programme to the South African BPharm curriculum, and during the implementation of the approved instrument for the evaluation of foreign qualifications, there were challenges encountered. In February 2023, Council approved the revised mapping template for the evaluation of foreign qualifications.

#### Review of the process for the evaluation of foreign qualifications

In the last quarter of 2023 Council, approved the reviewed process for the evaluation of foreign curricula to include four subject matter specialists (pharmacology, pharmacy practice, pharmaceutics, and pharmaceutical chemistry) in the evaluation of the foreign curricula so as to allow for the in-depth evaluation of the different foreign curricula for the four disciplines of the BPharm qualification.

Manage the monitoring and compliance process for pharmacy education (appoint and train a panel of evaluators, perform monitoring visits, evaluate and produce reports, and give feedback)

The following monitoring visits of providers in pharmacy education and training were conducted in 2023:

Table 4: Accreditation/ monitoring visits conducted during 2023

Name of institution	Dates of visit	Qualification	Outcome of evaluation
Sefako Makgatho Health Sciences University	05 June 2023 & 01 November 2023	Bachelor of Pharmacy	Full accreditation after verification that the laboratories were fully functional
University of Witwatersrand	14-18 August 2023	Bachelor of Pharmacy	Provisional accreditation
Nelson Mandela University	04-08 September 2023	Bachelor of Pharmacy	Provisional accreditation
North-West University	11-15 September 2023	Bachelor of Pharmacy	Full accreditation
Health Science Academy	09-10 October 2023	National Certificate: Pharmacist Assistance (Basic) and FET Certificate: Pharmacist Assistant (Post-Basic)	Full accreditation

#### Health Science Academy

The purpose of the visit was to monitor the delivery of the National Certificate: Pharmacist Assistance (Basic) and Further Education and Training Certificate: Pharmacist Assistance (Post-Basic), and to verify the contents of the response to the report submitted to Council on shortcomings identified in the 2021 visit. Accreditation was granted to the Health Science Academy.

#### Nelson Mandela University

The purpose of the visit was to monitor the implementation of the curriculum approved by Council, monitor the delivery of the programme for all year groups, and verify the contents of the response to the report submitted to Council on shortcomings identified in the 2019 visit. Provisional accreditation was granted to Nelson Mandela University subject to the university addressing the identified deficiencies.

#### The North-West University

The purpose of the visit was to monitor the implementation of the curriculum approved by Council, monitor the delivery of the programme for all year groups, and verify the contents of the response to the report submitted to Council on shortcomings identified in the 2019 visit. Full accreditation was granted to the North-West University.

In ensuring that minimum standards for education and training are upheld, the University of the Witwatersrand and Tshwane University of Technology were accredited to provide Immunisation and Injection Technique courses.

The following providers were accredited to offer short courses:

- (a) Pharmacy Development Academy (PDA) for the Dispensing of Medicines by Healthcare Professionals Short Course:
- (b) Quad Pharma for Registration of Biological and Orthodox Medicine;
- (c) Insight Medicine Information for Alpha Pharm Continuing Education Course on Mental Health in a Pandemic, Adult Vaccinations, Advances in the Treatment of Type 2 Diabetes, Urinary Tract Infections and Common Ear Problems;
- (d) University of the Witwatersrand for Immunisation and Injection Technique Course for Pharmacists.
- (e) Tshwane University of Technology for Immunisation and Injection Technique Course for Pharmacists and
- (f) Sefako Makgatho Health Sciences University for Immunisation and Injection Techniques Course.

- (g) To ensure compliance with the minimum requirements for the approval/accreditation as a provider of pharmacy education and training, monitoring visits were conducted at the following providers:
  - Sefako Makgatho Health Sciences University;
  - · University of the Witwatersrand;
  - Health Science Academy;
  - · Nelson Mandela University; and
  - North-West University.

Develop and review guidelines, manuals, and criteria documents for the interpretation and implementation of the standard as well as the application of the tool (e.g. intern manuals)

The Guidelines for examiners and moderators of the intern pre-registration examination, professional examination and PSP EISAs were reviewed in 2023.

The *Intern and Tutor Manual* was reviewed to incorporate the 2023 pre-registration evaluation schedules and the latest Council decisions.

The Guidelines for persons who hold qualifications in pharmacy obtained outside the republic and the Guidelines to the South African Professional Examinations for pharmacists with foreign qualifications were reviewed in 2023.

The Guidelines for the registration of Bachelor of Pharmacy graduates as Pharmacist's Assistants (Post-Basic) were reviewed to amend the requirements for restoration of BPharm graduates who have been removed from the register. Approval of the guidelines was deferred by the Committee until 2024.

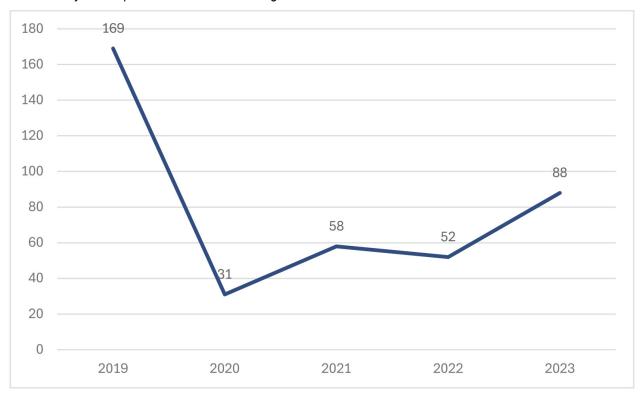
The Guidelines for the interruption of internship and the restoration process were drafted. Approval of the guidelines was deferred by the Committee until 2024.

5.2 Establish, develop, maintain and control universally acceptable standards for the registration of a person who provides one or more or all of the services which form part of the scope of practice of the category in which such person is registered.

#### Section 26 Certificates

Section 26 of the Pharmacy Act provides that a certificate issued by the Registrar is proof of registration or non-registration of a person or a pharmacy. Section 26 certificates are predominately issued to various law enforcement agencies as documented evidence that persons who are subject to criminal and other types of investigations are registered or are not registered with the Council. In such instances, Section 26 Certificates are issued to support potential charges of persons practising the scope of practice of a pharmacist without being registered. The Company Secretary and Legal Services provided eighty-eight (88) Certificates of Registration/Non-registration issued in terms of Section 26 of the Pharmacy Act, with thirty-two (32) of such certificates relating to a possible medical aid fraud syndicate.

Figure 12: Year on year comparison related to the issuing of Section 26 Certificates



The Education Department is responsible for evaluating curricula received from applicants who have obtained their Bachelor of Pharmacy (BPharm) degrees outside South Africa. The purpose of this evaluation is to determine if the submitted curriculum is equivalent to the BPharm which is offered in South Africa. During the 2023 year, there were four (4) qualifications that were evaluated by the Education Department, and all of them were found to not be equivalent to the South African BPharm qualification.

The Office of the Registrar has reviewed the process of evaluating foreign qualifications curricula and Council has approved a new process on 18 October 2023. The universities that were evaluated are listed below:

- (a) Ngudi Waluyo University Not Equivalent (NE);
- (b) University of Pgezira NE;
- (c) Andhra University NE;
- (d) Parul University NE; and
- (e) University of Gezira.

Develop, review and manage the traineeship process (ensure compliance with registration requirements, PSP information empowerment workshops, assessment requirements for examinations, and progress reports)

The standard operating procedures (SOPs) for the registration of pharmacy technician trainees were reviewed.

The practice examination papers have been developed to assist Pharmacy Support Personnel (PSPs) in preparing for the external integrated summative assessments (EISA).

Develop, review and manage the internship process (ensure compliance to registration requirements, tutor intern workshops, 4<sup>th</sup>-year students empowerment workshops, assessment requirements – exam, CPD and progress reports)

The SOPs for registration of interns were reviewed and all personnel involved in the registration process, including CSR, were trained on the process.

The *Intern and Tutor Manual* (2023) was reviewed to incorporate the 2023 pre-registration evaluation schedules and the latest Council resolutions i.e., the penalties imposed on interns found to have contravened the Examination Code of Conduct.

In preparation for the 2023 CPD assessment year, intern/tutor workshops were held virtually in order to provide information to interns and tutors on internship requirements, and to elaborate on the compilation of a CPD portfolio of evidence using the CPD online system. The workshops were held on 17 and 21 February, as well as on 22 March 2023.

Council further conducted two intern CPD feedback workshops on 07 June and 29 August 2023 to share assessment experiences with interns, respond to interns' questions, as well as guide interns on how to improve the quality of their CPD entries.

Council successfully conducted two pre-registration examination workshops on 09 and 11 May 2023 to prepare Pharmacist Interns for the pre-registration examinations. The workshops were held virtually using Microsoft Event and were also streamed on Council's YouTube and Facebook pages. The workshop presentations were made available on the SAPC website for interns to review after the workshop. Overall, the workshops were well attended with 328 logins on Teams as well as 2 630 views on Facebook/YouTube.

Council conducted one (1) supplementary pre-registration examination on 17 February 2023. To prepare these interns for the supplementary examination one (1) remediation workshop was held on 31 January 2023 where the moderator revised calculation questions and explained the structure of the examinations.

The fourth-year student information workshops were conducted on 24/31 October and 09/27 November 2023. The objective of these workshops was to prepare BPharm students for internships and to outline the online application process. The sessions were held virtually on Microsoft Teams.

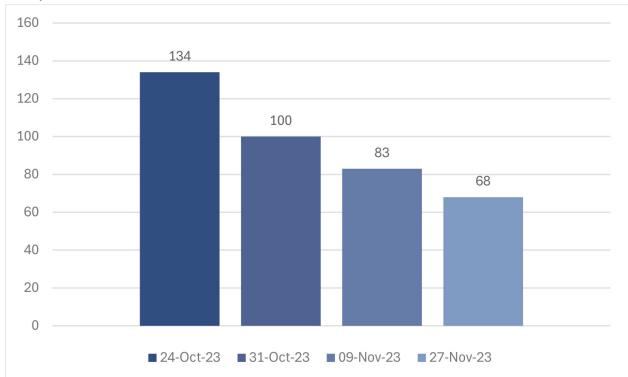


Figure 13: 4th year student information session attendee statistics

Development and review of accreditation criteria for foreign-qualified persons including professional examinations

Persons who obtained qualifications in pharmacy outside of the Republic of South Africa and who wish to be registered as pharmacists in South Africa are required to write a professional examination. The Guidelines for persons who hold qualifications in pharmacy obtained outside the republic, the Guidelines to the South African Professional Examinations for pharmacists with foreign qualifications, and the Checklist for application by candidates with foreign qualifications requiring registration as a pharmacist or pharmacy support personnel in South Africa were reviewed to incorporate the relevant Council resolutions made in 2022.

The Committee developed a Checklist for foreign-qualified persons who meet the requirements of Regulation 17 of the *Regulations relating to the registration of persons and maintenance of registers* to be used for conducting a desktop evaluation for similarities to the South African qualification.

The *Process flow for the evaluation of applications received from foreign-qualified persons* was also reviewed, in line with the Council resolution made in July 2023.

Council in October 2023 implemented the proctoring software for live invigilation of the online/remote professional examinations. Workshops were conducted for candidates prior to the examination to orientate them on the remote/online examination integrated with the proctoring software and take them through the guidelines and code of conduct for the examination.

## Develop policies that direct the activities of pre-registration

The *Policy for Examinations Conducted by the South African Pharmacy Council* was updated to incorporate the conducting of examinations using the integrated live proctoring software.

## Pharmacy Internship

The *Intern and Tutor Manual (2023)*, which outlines all the essential information for Pharmacist Interns to successfully navigate their internship, such as the pre-registration requirements for Pharmacist Interns, was updated with the 2023 pre-registration evaluation schedules and the latest Council decisions. The manual was published on the SAPC website together with the 2023 intern/tutor and pre-registration examination workshop presentations. Email and SMS notifications were sent to all interns, tutors, Responsible Pharmacists and heads of pharmaceutical services informing them of the availability of the manual and other internship information on the website.

#### Pre-Registration examinations for interns

The Guidelines for examiners and moderators of the intern pre-registration examinations were reviewed to incorporate examinations scheduled for 2023.

Pre-Registration examinations for 2023 were successfully conducted online/remotely in March and online/remotely with integrated proctoring software in August and October 2023. Council conducted Pre-Registration examination workshops virtually in May 2023 to prepare interns for the examinations. Council further conducted compulsory practice examinations in January, June, July, and August 2023 to provide interns with an opportunity to experience the proctored online remote examination conditions.

Interns who were unsuccessful in the pre-registration examination on two occasions but passed the same section of the examination on two occasions were permitted to write the supplementary pre-registration examinations in February 2023. To prepare for the supplementary examination, interns were required to attend a compulsory virtual remediation workshop and complete a tutorial prior to attending the workshop.

#### Pre-Registration examination for restoration of pharmacists

In terms of Board Notice 80 of 2020, pertaining to the restoration requirements and process for pharmacists who have been removed from the register, pharmacists who have been removed, either voluntarily or involuntarily, from the register for a period of more than sixty (60) months are required to write and be successful in the pre-registration examination, as one of the requirements to be restored to the register of pharmacists.

Council, in July 2020, approved the format for the pre-registration restoration examination for pharmacists who have been removed, either voluntarily or involuntarily, from the register for a period of sixty (60) months or more. The pre-registration restoration examination was conducted remotely in April 2023 for one (1) pharmacist undergoing restoration, who passed.

#### Candidates with qualifications obtained outside South Africa

#### Applications for recognition of foreign qualifications

The Guidelines for persons who hold qualifications in pharmacy obtained outside the republic (2023), which outline all the application and registration requirements, were updated to include the revised fees and latest Council resolutions.

In 2023, Council approved twenty-six (26) applications for recognition of foreign pharmacist qualifications that were evaluated by the Pre-registration Committee.

#### Professional Examination

Upon approval by the Committee, candidates with qualifications in pharmacy obtained outside South Africa are required to write and pass the professional examination before they can be registered as Pharmacist Interns to undergo internship and comply with the applicable pre-registration requirements. Candidates who apply for registration as Pharmacist's Assistants (Post-Basic) are required to register as learners, undergo in-service training under an approved tutor in approved premises and complete a module in pharmacy law and ethics through an approved provider.

Council appointed examiners and moderators from the universities approved by Council to provide the Bachelor of Pharmacy programme, for their expertise in pharmacology, pharmaceutics, pharmaceutical chemistry and pharmacy practice, law and ethics to set professional examination papers in their respective subjects for 2023. The Professional Examination Task Team met in March, April, June and July 2023 to review and approve the questions for the professional examination.

The Guidelines for examiners and moderators of the professional examinations were reviewed to incorporate the examinations scheduled for 2023.

Professional examinations for 2023 were held online/remotely in May and online/remotely with integrated proctoring software in October 2023. To prepare candidates for the online remote examinations, Council conducted workshops for candidates to explain the examination procedures, demonstrate access and how to navigate the examination platform as well as provide an overview of the examination.

The Guidelines to the South African Professional Examinations for pharmacists with foreign qualifications were updated with the 2023 professional examination schedules and the latest Council resolutions.

## Pharmacy Support Personnel (PSP): External Integrated Summative Assessments (EISA) for PSPs

Pharmacy support personnel (PSP) who successfully complete the requirements of the Occupational Certificate learning programmes offered by an accredited skills development provider (SDP) must successfully complete an external integrated summative assessment (EISA) before they are awarded the qualification for registration with Council in the relevant category of PSP.

The *Guidelines for examiners and moderators of the PSP EISAs* were reviewed to incorporate the schedule for setting examination questions for 2023.

The task team held a meeting in July 2023 to approve outstanding examination questions for the pharmacy technician and to review and approve the examination questions for the Pharmacist's Assistant (Basic). Another meeting was held in November 2023 to review and approve the examination questions for the Pharmacist's Assistant (Post-Basic).

The EISA for Pharmacist's Assistants was not conducted in 2023 as there were no eligible candidates.

#### **Specialist Pharmacists**

Currently, there are two categories of Specialist Pharmacists registered with Council, namely Pharmacokinetics and Radiopharmacy. Council approved the *Criteria for the evaluation of Radiopharmacy Specialist applications* and the *checklist for evaluation of applications for registration as a Radiopharmacy Specialist Pharmacist.* 

Council further approved the template for the evaluation of the Radiopharmacy curriculum. Thus, the evaluation of applications is held in abeyance until the curriculum review is finalised.

The Committee considered a request from the CPD Committee to appoint one (1) member of the Preregistration Committee to be a member of the Task Team for the development of competency standards for specialists in pharmacy. The Pre-registration Committee recommended that Prof. M Matlala be appointed.

Development and review of the accreditation tool (questionnaire and applicable application forms) for registered persons

#### Change of designation from practising to non-practising

The CPD and Registrations Department has converted the application form for change of designation from non-practising to practising, to an online application form. This online application form is accessible through the pharmacist's secure profile. The online application form combines two forms which include the form for

a change of designation from non-practising to practising following voluntary designation as non-practising and the form for change of designation from non-practising to practising following involuntary designation to non-practising due to non-compliance with CPD requirements. These applications have different fees. On application, the system will check the reason for the non-practising designation and invoice the pharmacist for the correct fee. If the reason for the non-practising designation is failure to comply with CPD requirements, the system will require the pharmacist to record the outstanding CPD entries prior to the application being submitted to Council for processing.

Manage and maintain the accreditation of all registered persons (students, interns, pharmacy support personnel, pharmacists, specialists, PCDT, assessors and moderators)

The majority of applications received during 2023 were submitted online, which resulted in improved turnaround times and improved quality of data. Although there a still a few applications that are manual, Council intends to convert all its applications to online applications.

Table 5: Persons registered

Category of persons	No. registered in 2023	Total No. active
Assessors and Moderators	2	388
Pharmacy students	1 022	4 750
Community Service Pharmacists	850	875
Pharmacist's Assistants (Basic and Post-Basic)	2 784	20 169
Pharmacist's Assistant Learners (Basic and Post-Basic)	3 067	6 258
Pharmacy Technician (Post-Basic)	13	379
Pharmacy Technician trainees	5	86
Pharmacists after community service	535	17 892
Specialist Pharmacists	0	9
Tutors	1 644	5 649
Responsible Pharmacists	1 018	4 776

The CPD and Registrations Department registered persons in the different categories of registered persons and maintained the register of persons.

# 5.3 Establish, develop, maintain and control universally acceptable standards of the practice of the various categories of persons required to be registered in terms of this Act.

#### Section 37 Applications

In terms of Section 37 of the Pharmacy Act, a pharmacy may continue to be operated by an executor of a deceased estate, or a trustee or liquidator of a liquidated/sequestrated estate for a period of 12 (twelve) months, or until the change of ownership can be affected in terms of Section 22 of the Pharmacy Act. It is, however, imperative that such a pharmacy always has a registered Responsible Pharmacist. As part of creating awareness around the reporting of deceased estates and pharmacy ownership, Inspection Officers were encouraged to alert the Company Secretary and Legal Services of such pharmacies when conducting various inspections, as these matters are often not reported to Council by the Responsible Pharmacists or the Executors of such Estates. In 2023, the Company Secretary and Legal Services facilitated five (5) applications from executors in terms of Section 37.

## Licensing and recording of pharmacies

Section 22 of the Pharmacy Act, read together with Regulation 8(2) of the *Regulations relating to the ownership* and *licensing of pharmacies* requires that pharmacy licence applications submitted to the Director-General: Health may be reviewed by the Council for purposes of determining whether such application complies with the requirements for ownership, with specific emphasis being placed on the determination of compliance with the *Rules relating to Good Pharmacy Practice*.

Council has to date evaluated 809 GPP recommendation cases for pharmacy licence applications for the Director-General: Health (DG) to issue the relevant pharmacy licences. This includes new, relocation and change of ownership licence applications. There are other processes where GPP recommendations are issued

to the DG to reissue a licence, these include a change in trading title, change of address without relocation, and change of name of the owner (not change of ownership). A total of 215 of these GPP recommendations were completed.

A total of 616 licences issued by the DG were recorded by Council by 31 December 2023. Although GPP recommendations were submitted to the NDoH, not all licences are then issued or recorded immediately with SAPC. The variance in recommendations and recordings may be a result of various factors, such as the NDoH not issuing the licence, the application for licence process not being finalised within the same year, and the applicant deciding not to move forward with opening a pharmacy, amongst other reasons. The NDoH is in the process of withdrawing licences issued that have never been collected and subsequently recorded, and the notification for withdrawal is sent to SAPC.

Updates have been finalised to improve the GPP evaluation pages and ownership pages for the owner verification project.

## Approval of trading titles

Council has been receiving a number of complaints about trading titles approved in terms of Rule 2.31 of the *Rules relating to Good Pharmacy Practice*. The Registrar has constituted a panel to review and approve trading titles in order to look at the criteria of trading titles. The Review Panel is constituted of the Chief Operations Officer (COO), Company Secretary, and all Senior Managers: Professional Affairs, the Professional Conduct Senior Manager, the Professional Conduct Manager and the Practice Department Managers.

The panel has picked up other gaps in the evaluations and as such has made recommendations to the Practice Committee on the following matters-

- (a) Owners who are non-compliant with GPP in other pharmacies applying for new pharmacy licences. The recommendation made was that GPP non-recommendation be issued for owners that do not comply with GPP.
- (b) Emergence of several groups of pharmacies.

## Issuing and recording licences to pre-May 2003 pharmacies

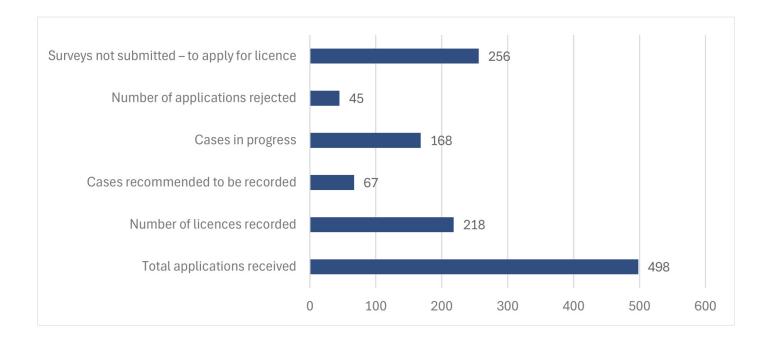
Section 22(9) of the Pharmacy Act provides that any pharmacy that was registered on 30 April 2003 is deemed to be licensed. Such pharmacies have been referred to as pre-May 2003 pharmacies.

Pre-May 2003 Pharmacy owners and Responsible Pharmacists who had not yet submitted the survey received two (2) e-Notes in 2023 informing them of the latest Council decision:

- the Office of the Registrar sent out reminders to owners of pre-May 2003 pharmacies who have not yet submitted responses to the survey to do so;
- (b) all pharmacies registered prior to 1 May 2003 be required to submit the pre-May 2003 survey in order to obtain a licence from the National Department of Health and to record such licence with Council at no cost until 30 June 2023; and
- (c) pharmacy premises that have not yet submitted the pre-May 2003 survey by 30 June 2023 be levied the applicable fees for the application and recording of pharmacy licences from 1 July 2023.

The survey has been closed and any owners who have not submitted the survey will have to apply for a pharmacy licence and record that licence at the full cost. The office is processing the submitted surveys and recording them as licences are being issued by the DG. Figure 13 depicts the progress of issuing licences to pre-May 2003 pharmacies.

Figure 14: Issuing of pre-May 2003 pharmacy licences as at 31 December 2023



#### Registration of Responsible Pharmacists

Responsible Pharmacists are registered in terms of Section 22(4) of the Pharmacy Act which states that "A pharmacy shall, subject to such conditions as may be prescribed, be conducted under the continuous personal supervision of a pharmacist, in accordance with good pharmacy practice as determined in the rules made by the council." A total of 1 188 Responsible Pharmacists have been registered to date.

- 5.4 Establish, develop, maintain and control universally acceptable standards of professional conduct required of persons to be registered in terms of this Act.
- 5.5 Establish, develop, maintain and control universally acceptable standards of control over persons registered in terms of this Act by investigating in accordance with this Act, complaints or accusations relating to the conduct of registered persons.

#### Enforce compliance with standards (perform prosecutorial services)

The Professional Conduct Department is mandated in terms of the *Regulations relating to the Conduct of Inquiries held in terms of Chapter V of the Pharmacy Act*, to investigate complaints of unprofessional conduct against the pharmacists, pharmacy and pharmacy support personnel, and to perform prosecutorial services at the Committee of Formal Inquiry (CFI).

The Department is required in terms of Regulation 3(c)(i)(ii) of the *Regulations relating to the conduct of inquiries*, to appoint a Pro Forma Complainant, when the matter is referred to the CFI. The Pro Forma Complainant will act as a prosecutor for matters referred to CFI.

The Department is also required in terms of Regulation 27 of the *Regulations relating to the conduct of inquiries*, to appoint a legal assessor or adviser to advise CFI on matters of law, procedure, and evidence. The appointment of legal assessors was reviewed, and the Department was able to develop *Criteria for the appointment of the legal assessors*.

#### Receive and process complaints from members of the profession and the public

In terms of the Operational plan for 2023, the Department's target was to investigate general complaints received from the members of the public, investigating fronting of Responsible Pharmacists and second-time Grade C pharmacies.

- (a) 928 complaints were received from the members of the public for the period January 2023 to 31 December 2023.
- (b) 372 complaints were received from the Continuous Professional Development and Registration Department in respect of Responsible Pharmacists and tutors who failed to comply with the *Regulations relating to Continuing Professional Development* (hereafter "CPD Regulations") in respect of submission of CPD activities for 2022. In terms of the CPD Regulations, pharmacists are required to submit six (6) continuous professional development entries per year.
- (c) In terms of the CPD Regulations, the Registrar may designate a pharmacist who fails to submit six (6) CPD entries per year as a non-practising pharmacist or refer the pharmacist for the disciplinary process.
- (d) The matter of Responsible Pharmacists and tutors, who did not comply with CPD Regulations was referred to Council for a resolution, whether to designate them as non-practising or refer them for the disciplinary process.
- (e) The Council resolved that the Responsible Pharmacists and tutors who failed to comply with CPD Regulations be referred to disciplinary process.

## STRATEGIC OBJECTIVE 6

# Promote transparency to the profession and the general public (Corporate governance).

In terms of the SAPC's Strategic Plan 2019-2023, the SAPC has undertaken to promote transparency to the profession and the general public in line with good corporate governance principles through regular meetings by Council and relevant committees to ensure oversight on operations, publicising the activities of the SAPC in the form of annual reports and auditing financial statements. The Charter for Council Members and the Audit and Risk Committee will be continually monitored and updated to be in line with best practices in corporate governance.

Transparency entails the availability of reliable and relevant information about the financial performance, performance, governance, risk and value of the organisation. In order for the SAPC to be transparent to both the profession and the public in achieving its objectives, performing its functions and exercising its powers, Council resolutions are published as a standard feature in each edition of the e-*Pharmaciae*.

Full transparency to the pharmacy profession and the general public is provided in detail in this Report under Parts C, E and F, in terms of Governance, Stakeholder Engagement and Finance.

#### STRATEGIC OBJECTIVE 7

# Maintain and enhance the dignity of the pharmacy profession.

## International Conference Report

Council sent a delegation to the 2022 International Pharmaceutical Federation (FIP) Congress. A report from this delegation made various recommendations in relation to the training of pharmacy professionals, best practices and emerging changes in the practice of pharmacy in light of international guidelines, as well as on Council's hosting and/or participation in international conferences held on South African soil, among other lessons, observations and recommendations.

# Workshops to promote ethical conduct and compliance with Good Pharmacy Practice standards

Council hosted workshops for Pharmacist Interns and Tutors throughout 2023, in addition to these a workshop aimed at preparing the Pharmacist Interns for their year of Community Service was held. These are further elaborated upon in Part E: Stakeholder Engagement of this report.

# Fostering GPP compliance in pharmacy premises

In order to ensure a high compliance rate to GPP, especially as it relates to pharmacy premises, inspection/ grading reports from all inspection types including Grade C pharmacies contain commentary on areas requiring improvement. These reports are made available to Responsible Pharmacists and owners to ensure both transparency and to encourage them to make changes that ultimately enhance inspection outcomes.

Furthermore, the inspection gradings of all pharmacies are now available as part of the public record of pharmacies on Council's website.

# Guiding the profession on emerging practice issues

The e-Pharmaciae was also used as a vehicle to communicate practice guidelines/advice.

#### STRATEGIC OBJECTIVE 8

# Coordinate the activities of Council and its Committees.

The Council is the governing body of the organisation as the custodian of the management and control of the pharmacy profession. Council meetings are public. The committees of Council and management support Council in carrying out its mandate in terms of the Pharmacy Act, the Regulations thereto, as well as the Terms of Reference for all Council's Committees.

In 2023, the Council held four (4) ordinary meetings. Together with the key issues considered by the various committees of the SAPC, established in terms of Section 4(o) of the Pharmacy Act, as detailed in Part C hereunder, the Council also considered the following matters:

(a) Litigation against the SAPC in terms of the publication of Board Notice 101 of 2021 in respect of pharmacists providing PIMART services;

Figure 15: Council meeting attendance (24 members)

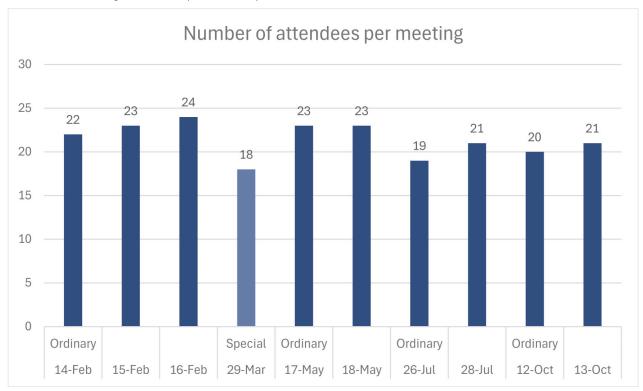
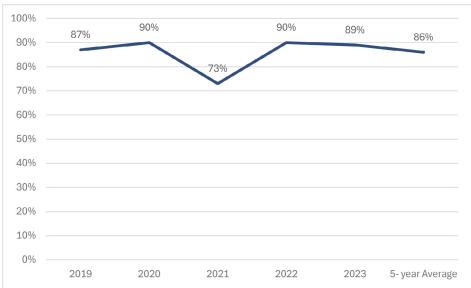


Figure 16: 5-year average attendance of Council meetings



Comprehensive Attendance Reports for Council and the committees were prepared for 2023.

The activities of the Committees of Council are detailed under Part C of this Report.

#### STRATEGIC OBJECTIVE 9

# Improve internal efficiency and effectiveness.

Development and review of the accreditation and monitoring tool (questionnaire and applicable application forms) for providers and learning programmes)

New template for Evaluation of Radiopharmacy Programmes

Council has prescribed specialities in Clinical Pharmacokinetics and Radiopharmacy in terms of Section 28(1)(b) of the Pharmacy Act, 53 of 1974, read together with Regulation 2 of the *Regulations relating to the registration of the specialities of Pharmacists* (GNR. 2342, published on 5 October 1990). In evaluating the applications for persons wishing to be registered as Specialist Pharmacists in Radiopharmacy, Council had previously approved that such applications be evaluated by three (3) specialists in Radiopharmacy including an international specialist. However, there was no tool for the evaluation of such applications. Council has developed a template for the evaluation of Radiopharmacy curriculum which is being used.

Develop and review guidelines, manuals, and criteria documents for the interpretation and implementation of the standards as well as the application of the accreditation tool

In 2023, the criteria to accredit a generic short course for a pharmacist who wishes to apply for registration as a Responsible Pharmacist were developed. The purpose of this short course is to equip Responsible Pharmacists with the theoretical and practical knowledge to realise and act on their responsibility in terms of the Pharmacy Act, 53 of 1974 and other legislation, as well as the *Rules relating to Good Pharmacy Practice* (GPP), Good Manufacturing Practice (GMP) and Good Distribution and Wholesale Practice (GDWP) guidelines.

New instruments for reports on the visit to SDPs were developed, i.e.;

- 1. the Evaluation Report (Basic);
- the Evaluation Report (Post-Basic);
- 3. the Accreditation Report teaching and learning (Basic);
- 4. the Accreditation Report teaching and learning (Post-Basic);
- 5. the Accreditation Report laboratory report; and
- 6. the Executive Summary Report on the accreditation visit.

Regular validation of the processes, systems and procedures through performance assessment and identification of stumbling blocks

#### Council developed:

- (a) Terms of Reference for the Task Team to Develop the Guidance Document for Work-Based Learning were approved to guide the work to be done by this task team.
- (b) The list of subject matter specialists for university accreditation/monitoring visits for 2023 and 2024 was approved by Council.
- (c) Terms of Reference of the Heads of Schools Forum were approved by Council to guide the Heads of Schools in their work with Council.
- (d) An online application for former BPharm students to register as Pharmacist's Assistant (Learner Basic) or Pharmacist's Assistant (Learner Post-Basic).

- (e) The process for restoration of learners.
- (f) The online application for restoration learners.

Develop specifications document for online systems and continuously review these processes as part of quality assurance

Specifications for the online remote live proctoring for the examinations were developed. The Office of the Registrar procured the proctoring software to be incorporated into the examination platform. Development and integration were completed, tested and implemented with the 2023 pre-registration and professional examinations.

Specification for the online exam booking for the pharmacy support personnel examinations was developed. Developments were completed and testing is in progress.

Specification for the incorporation of statistical analysis results conducted for online examinations was developed. Development has been completed and testing is in progress.

Develop and review guidelines, manuals, criteria documents for the interpretation and implementation of the standard as well as the application of the tool

The CPD and Registrations Department developed a CPD implementation plan for Pharmacy Support Personnel. The purpose of the plan is to outline the activities to be taken and timelines to ensure the successful implementation of compulsory CPD for Pharmacy Support Personnel. The implementation plan was approved by Council for implementation.

Develop specifications document for online systems and continuously review these processes as part of quality assurance

#### CPD system changes 2023

The CPD and Registrations Department developed the specification document for changes to be made to the CPD system for pharmacists. The purpose of these changes was to allow pharmacists who designate themselves as non-practising to receive a letter indicating their non-practising designation at the completion of an annual declaration. Previously, this letter was only issued to pharmacists who had designated themselves as practising during the completion of an annual declaration. These letters are automated, and upon completion of an annual declaration, they are emailed by the system to pharmacists.

#### Plagiarism detection system for CPD entries submitted by interns

The CPD and Registrations Department developed a specification document in 2022 to introduce a plagiarism detection system for interns' CPD entries. The purpose of the system is to ensure that interns submit their own work. Interns, as part of the pre-registration evaluation, are required to submit six (6) CPD entries i.e., portfolios using the pharmacist CPD platform, however, they are required to submit evidence of participation in activities, unlike pharmacists. These entries are assessed for competency and form part of the pre-requisites for writing the pre-registration examination. Development of the plagiarism detection system is close to being completed and it is anticipated to be implemented in 2024.

#### Conversion of the pharmacist secure site to Module-View-Controller (MVC)

The Office of the Registrar implemented phase 1 of the 3 phases of the conversion of the pharmacist secure site to the Module-View-Controller (MVC) platform. Phase 1 focuses on the dashboard and online applications. Phase 2 will focus on progress reports for interns and Pharmacist's Assistant learners. Phase 3 will focus on inspections and pharmacy-related online applications. The purpose of the conversion to the MVC platform is to keep up with the latest technology which offers more security, more user support, and enhanced aesthetics amongst others. Development of Phase 2 has commenced and is anticipated to be finalised in December 2023. Phase 3 development will commence early in 2024.

#### Automation of online printing and notifications

The Office of the Registrar is developing a system to automate the emailing of registration documents and implement SMS notifications. The purpose of the automation of emailing documents and SMS notifications is to improve efficiencies by changing how the Office of the Registrar transmits correspondence related to application outcomes to registered persons. On finalisation of the application, at the click of a button, correspondence will be emailed by the system to applicants and an SMS notification will be sent to alert them of the emails sent. The goal is for the South African Pharmacy Council to be a paperless environment. The development has advanced and is close to being finalised. Once implemented, Council will discontinue the issuing of original certificates for certain applications and will issue online certificates instead.

#### **STRATEGIC OBJECTIVE 10**

# Build a pipeline of highly skilled workers to meet Council's mandate.

Investment in the human resources of the SAPC will always remain a priority for the SAPC. In this regard the SAPC continues to strive towards building a pipeline of highly skilled workers to meet the SAPC's mandate, through training, implementation of performance management and retention of key personnel.

Human Capital and Development are detailed in Part D of this Report.

# PART C: CORPORATE GOVERNANCE AND RISK MANAGEMENT

## **CORPORATE GOVERNANCE**

#### COMPLIANCE

In terms of the Protection of Personal Information Act, 4 of 2013 (POPIA) read together with the Promotion of Access to Information Act, 2 of 2000 (PAIA), the Registrar is the Information Officer of Council, and the Registrar has delegated the responsibility of the Deputy Information Officer to the Company Secretary. In terms of Section 55 of POPIA, the Registrar and the Company Secretary have been registered with the Information Regulator as the Information Officer and Deputy Information Officer respectively.

In terms of Section 18(1) of PAIA read together with Regulation 6, Council did not receive any applications for information in 2023.

In 2021, the Office of the Registrar introduced a centralised process of providing data for purposes of research. The Council is frequently requested to share data of registered persons and pharmacies for purposes of conducting research in pharmacy and pharmacy-related matters. For researchers to be allowed access to such data, they are required to provide details of the data requested, purpose/s for which the data will be used, and confirmation that the research has been approved by the relevant Ethics Committee of the academic institution where the research is being conducted. Researchers who request data are advised that:

- (i) the data may only be used for the identified research project;
- (ii) only the researcher may use the data, and it may not be given to a third party or sold;
- (iii) the data must be protected from unauthorised distribution at all times;
- (iv) communication to the data subjects must explain the reasons for the communication and allow for an opt-out from receiving further communication; and
- (v) the outcome of the research must be shared with the Council.

In terms of providing data for research purposes, the Office of the Registrar has provided data to twelve (12) researchers in 2023.

# **Policy Review**

The resolution of Council to review policies at least once during a term of office was set aside by the Audit and Risk Committee in 2021, whereby in terms of best practice, policies should be reviewed at least every three (3) years, with an exception in terms of Information Technology policies that should be reviewed more frequently due to the constant changes and developments in terms of ICT. In order to ensure that Council follows a regulated review of policies it is necessary for Council to develop and implement a robust strategy for the development, implementation and review of policies.

The Company Secretary and Legal Services provided support in the drafting/review of the following existing policies:

- (a) Leave Policy;
- (b) Gift Policy;
- (c) IT Patch Management Policy; and
- (d) IT Physical Environment Policy.

The Company Secretary and Legal Services provided support in the drafting of the new Prevention and Elimination of Harassment in the Workplace Policy.

# **Delegation of Authority**

In terms of Principle 8 of the King IV Code, 2016, Council should ensure that its arrangements for delegation within its structures promote expertise and independent judgement to assist with ensuring that Council effectively discharges its duties. Council's committees are established in terms of Section 4(o) of the Pharmacy Act. In establishing its committees, Council has also taken cognisance of the requirements for the organisation to have certain oversight functions that lend itself to good governance.

The delegation to committees established in terms of regulations or the objects of Council provided in terms of Section 3 of the Pharmacy Act, are provided in detailed Terms of References for each committee, these include the Executive Committee of Council (EXCO), Education and Practice Committees, the Pre-Registration Committee, CPD and Health Committees, the Committee of Preliminary Investigation, the Committee of Informal Inquiry and the Committee of Formal Inquiry. The delegation to committees with oversight roles is contained in the various Charters for such committees, these include the Audit and Risk Committee and the Remuneration and Reimbursement Committee (REMCO).

In 2022, Council approved the Delegation of Authority Policy, which policy details the delegation to committees as well as the Office of the Registrar. In 2023 the Company Secretary and Legal Services implemented and monitored the Delegation of Authority Policy, which policy serves as the foundation for the drafting of the Council's Corporate Governance Framework (CGF). Other initiatives towards the finalisation of the CGF for approval include the identification by Council for a stand-alone Conflict of Interest/Declaration of Interest Policy, and amendments to the Meeting Policy, which details the acceptable attendance levels of Council members at Council and committee meetings.

In 2023, the Company Secretary and Legal Services continued to manage the terms of reference in respect of the relevant committees of Council and the terms of reference of the task teams of Council and task teams established under the various committees of Council. The purpose of this function is to ensure the accurate monitoring of the delegation of the functions of Council in terms of Section 4(o) of the Pharmacy Act. Of particular noting would be the amendment to the CPD Committee in terms of the delegation of consequences to persons who do not comply with the annual CPD requirements.

# Record keeping of meetings

In terms of the principles of Corporate Governance and legal principles of administrative law, Council and Committee members must exercise their discretion in making decisions or providing recommendations to Council. This should be done within the confines of the Pharmacy Act and associated regulations.

The Council committees, appointed in terms of Section 4(o) of the Act, consider and discuss matters relevant to their portfolios as provided in various regulations, and provide recommendations to Council for consideration. Council makes decisions in terms of its general functions as contained in Section 4 of the Pharmacy Act, in consideration of the recommendations provided by various committees. In order for Council to be transparent to both the profession and the public in achieving its objectives, performing its functions and exercising its powers, Council resolutions are published as a standard feature in each edition of the e-*Pharmaciae*.

In February 2023, Council was presented with detailed reports of each members' attendance at meetings for both Council and committee meetings from 2019 – 2022.

For purposes of Corporate Governance, the attendance registers for the 2023 committee meetings are represented in the figures contained under the committee reports that follow.

# **Corporate Governance training**

The first meeting of Council each year is identified for purposes of reporting in terms of Corporate Governance as well as the necessary training of Council members. At its meeting in February 2023, Council considered the review of the organisation's strategic planning and the Management Report for 2022, and noted the Operational Plans for 2023. In terms of training, Dr Munyadziwa Kwinda, the Ombudsman at the Health Professions Council of South Africa, addressed Council on the delegation of authority and the roles and functions of committees within the Council structure.

Staff training on corporate governance is conducted as part of employee orientation, and all new employees employed in 2023 underwent such training. However, the Company Secretary and Legal Services has identified the need to formalise staff training on Corporate Governance, and to recommend to the Human Resources Department the need for staff orientation when persons within the organisation have been promoted, as the focus of the original training may be different now that the person has been promoted or changed positions within the organisation.

## Develop and review code of conduct for evaluators and verifiers

The Code of Conduct for evaluators of learning programmes was implemented during 2023.

# Develop and review Code of Conduct for invigilators, examiners, assessors and moderators.

The contracts for independent contractors, which include the relevant Codes of Conduct and confidentiality clause were reviewed in 2023 and signed by all examiners, moderators and the Registrar.

The guidelines, which include the Code of Conduct for Invigilators, was updated for each examination and communicated to the invigilators. Training was also conducted for invigilators prior to each examination.

#### Develop and review Code of Conduct for Assessors and Moderators

The CPD and Registrations Department reviewed the Code of Conduct for Assessors and Moderators of CPD for Pharmacist Interns. The Code of Conduct document remains materially the same as the 2022 Code of Conduct. The Code of Conduct governs the relationships between assessors/moderators and Council, colleagues and staff members, and the pharmacy profession. It further covers the conduct of assessors/moderators and the performance of their duties.

# **Council Inspection Officers**

In 2023, the Office of the Registrar facilitated four meetings, as well as an *Inspection Officer's Lekgotla*, which was held over 2 days on 26/27 October 2023. During these meetings, updates on the SAPC Inspection Application functionality, inspection questionnaires and Council expectations from inspectors were discussed. In addition, Inspection Officers highlighted practice concerns and trends picked up during the inspections and these were discussed as recommendations to the Practice Committee. Thirty-five (35) Inspection Officers were appointed for 2023.

#### **SAPC COMMITTEES**

#### **Practice Committee**

Figure 17: Practice Committee meeting attendance

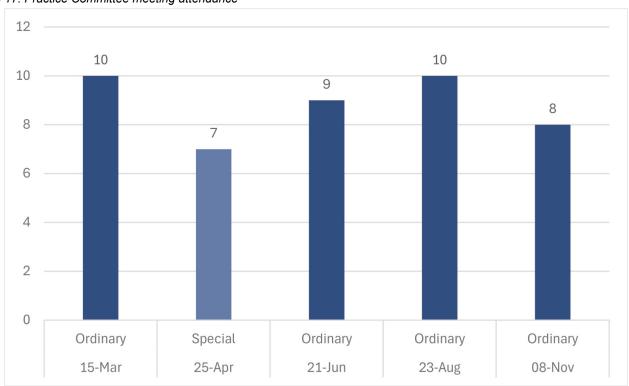
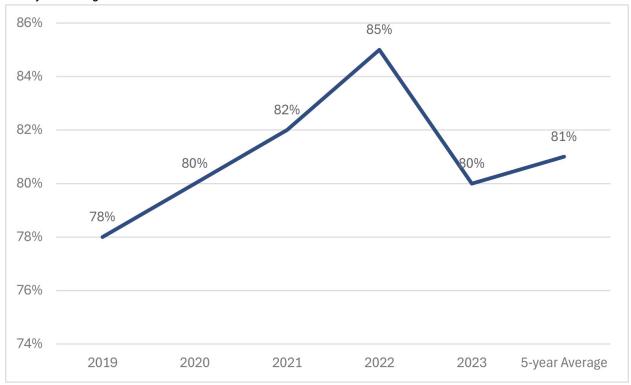


Figure 18: 5-year average of Practice Committee attendance



The Practice Committee held five (5) meetings in 2023, of which four (4) were ordinary meetings and one (1) was a special meeting. The Task Team that develops standards held three (3) meetings and the Task Team that reviews standards had five (5) meetings in line with the action lists of these task teams. The Practice Committee developed new standards, reviewed existing standards and discussed compliance with these standards using reports from an inspection tool as a measure of compliance.

The highlights of matters addressed by the Committee during 2023 included but were not limited to -

# Scope of practice and phases of dispensing

Council has, through its disciplinary committees, noticed a trend of complaints that result from pharmacy support personnel being left to perform acts outside of their scope of practice, including where certain acts in the three (3) phases of dispensing were performed by a Pharmacist's Assistant instead of a pharmacist.

The Committee deliberated on the matter and resolved that the profession be engaged and reminded on the following matters:

- (a) phases of dispensing;
- (b) allowing registered persons to perform acts outside the scope of practice for which they are registered and the implications of such misconduct; and
- (c) Stakeholders implementing systems to review original prescriptions when dispensing repeat prescriptions.

The resolutions have been communicated in the stakeholder forum and will be added to the webinars to be held with Responsible Pharmacists.

## Delivery of medicines

Inspection officers have raised concerns over the handling of medicines when in transit and the hubs used by courier companies. The issues raised included leaving fridge items outside the refrigerator and boxes in the sun. These would be in contravention of Rule 1.8, the minimum standards specifically relating to a storage area for pharmaceuticals outside the physical premises of a pharmacy and Rule 2.3.5, the minimum standards for the procurement, storage, and distribution of thermolabile pharmaceutical products.

The Committee resolved that Responsible Pharmacists be reminded of their responsibility to comply with these and all other rules. The matter was also escalated to SAHPRA in order to consider regulating the hubs used whilst medicine is in transit.

# Facilities from which a pharmacist may practice the scope of practice of a pharmacist

The Practice Committee discussed enquiries from the profession requesting guidance from Council on the matter of Responsible Pharmacists (RPs), deputy or regulatory pharmacists working from home. In terms of Rule 3.9.2.1.1 of the *Rules relating to Good Pharmacy Practice* (GPP): "Circumstances and conditions under which a Responsible Pharmacist may be absent from his/her pharmacy", the conditions for a Responsible Pharmacist to be absent from the pharmacy are clearly articulated.

The Committee on 21 June 2023 noted that facilities such as managed health care facilities that have employed Pharmacist's Assistants need to be registered as pharmacies as the scope of practice of Pharmacist's Assistants requires them to practice under the direct supervision of a pharmacist in a pharmacy. The matter has therefore also been added to the agenda in meetings the Office holds with the Council for Medical Schemes and the Board of Healthcare Funders. The Committee thus resolved that the Office sources an external legal opinion on where the persons registered with Council may perform their scope of practice before the *Guidelines for places from which a pharmacist may offer services in line with their scope of practice* may be finalised.

# Criteria for the registration of a Responsible Pharmacist

Council has observed that although Responsible Pharmacists (RPs) are appointed by owners and registered with Council as per the enabling legislation, there are no provisions or guidance to the profession with respect to the criteria for the registration of Responsible Pharmacists. Through its disciplinary processes and committees, Council also noted that some of the RPs are not aware of the depth of their accountability to Council in ensuring compliance with the provisions of legislation regarding pharmacy practice.

The *Criteria for registration of a Responsible Pharmacist* have been drafted and submitted for consideration by Council in several meetings. Council requested the Committee to consider a number of points:

- (a) the requirement that a pharmacist be in practice for three or more years post-internship for registration as a Responsible Pharmacist might be a barrier to entry for pharmacists who wish to own pharmacies and be Responsible Pharmacists;
- (b) that Council may be perceived as being discriminatory if there is a relaxation of the requirement of being in practice for three or more years is placed on pharmacists practising in private pharmacies while not placing the same requirement on those practising in public institutional pharmacies;
- (c) the requirement for Responsible Pharmacists to complete a short course might prove to be difficult as there is not yet an approved provider or a course for Responsible Pharmacists; and
- (d) whether the training as a Responsible Pharmacist may be one of the mandatory CPD submissions during the internship year.

The Committee in November considered the following:

- (a) the implementation clause of the Criteria will cater for pharmacists who are already registered as Responsible Pharmacists to ensure that they continue being registered as such;
- (b) that provision is also made for those pharmacists who are registered as Responsible Pharmacists, but registered for less than three (3) years as pharmacists at the time of implementation; and
- (c) that pharmacists who are not registered as Responsible Pharmacists will need to comply with the criteria should they wish to be so registered.

The draft Criteria was submitted to EXCO for approval for publishing for comment and is to be published in January 2024.

#### Announcing inspections

Inspection Officers at their meeting on 3 March 2022, requested that the issue of announced monitoring inspections be addressed by the Practice Committee, as the announcement of inspections poses several challenges, including but not limited to the following:

- (a) Inspection Officers' contact details are distributed without consent, to pharmacy owners or managers asking to be part of the inspection;
- (b) personal safety concerns when trying to access pharmacies that are owned by non-pharmacists; and
- (c) staging of inspections by Responsible Pharmacists, especially in non-compliant pharmacies, for a week or two following an announcement of the inspection.

The matter was discussed on 16 March 2022, where the Committee noted that the approach to announce all monitoring inspections was adopted in 2020, under the State of Disaster Management Act. As a result, Council on 18/19 May 2022 resolved that the pre-COVID approach for monitoring inspections be reinstated, i.e., monitoring inspections are not announced prior to being conducted. This resolution was amended in July 2022 to include that the Office of the Registrar sends out monthly notifications to Responsible Pharmacists in respect of pharmacies scheduled to be inspected in the next month. However, because of more input from Inspection Officers regarding the staging of inspections and the safety of Inspection Officers, the implementation of the resolution was delayed. The Office submitted reports of investigations to substantiate the submissions by officers to the Committee. The Committee in August 2023 concluded that the resolution of Council to announce inspections be upheld. Final development of the system is underway to allow for inspection officers to submit monthly the list of inspections to be conducted.

# The sale of vaping devices/liquids in a pharmacy

The Office of the Registrar received an enquiry on whether vaping devices and liquids may be sold in a pharmacy. In terms of Rule 2.29 of the *Rules relating to good pharmacy practice*, under the title, "Products which may not be sold in a pharmacy", the sale of tobacco, snuff, cigarettes, and tobacco-related products is prohibited, but the rule does not clearly address vaping liquids which contain nicotine, and those which are nicotine free. The Office conducted benchmarking on what other countries are doing to legislate the distribution and sale of vaping devices and liquids.

In November, the Committee considered the suggested amendments to Rule 2.29 and the report on the benchmarking. Draft amendments were considered by EXCO for approval in November and EXCO approved the amendments for comment for a period of sixty (60) days.

## Registration of pharmacies offering compounding services

The Practice Committee has considered that pharmacies offering compounding services may be performing small-scale manufacturing. The recommendation by the Committee to Council is for the Office of the Registrar to engage SAHPRA for a joint submission to the Minister to consider the addition of another category of pharmacy in order to regulate this practice adequately.

The Committee has two (2) Task Teams that looked at various standards during 2023.

# **Pre-Registration Committee**

Figure 19: Pre-registration Committee meeting attendance

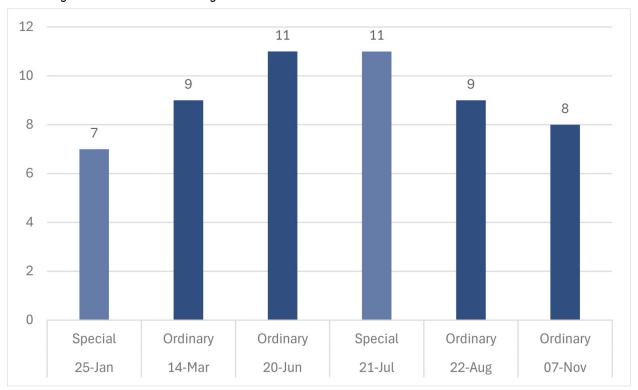
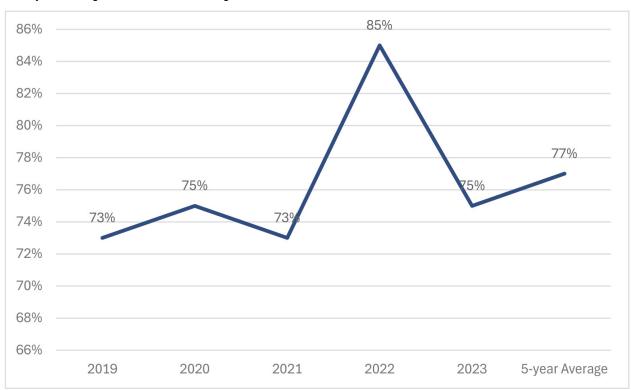


Figure 20: 5-year average attendance of Pre-Registrations Committee



The Pre-Registration Committee held seven (7) meetings in 2023; four (4) ordinary meetings, two (2) Special Pre-Registration Committee meetings and one (1) joint meeting of the Education and Pre-Registration Committees, with Prof. M Matlala as the Chairperson. The Committee discussed and made recommendations on the following items.

#### Recognition of foreign qualifications

The Pre-Registration Committee evaluates applications from candidates with foreign qualifications who wish to be registered with Council as pharmacists. In 2022, the Committee deliberated on the delays in the turnaround time for the evaluation of the curricula which might expose Council to litigation, and recommended that the process for evaluation of applications received from foreign qualified persons be aligned to Regulation 17 of the *Regulations relating to the registration of persons and the maintenance of registers*. The Executive Committee of Council recommended that on confirmation of at least a suitable four (4) year pharmacy qualification, a foreign-qualified person who meets the requirements of Regulation 17 of the *Regulations relating to the registration of persons and the maintenance of registers* be allowed to sit for the professional examinations. Council was, however, concerned that although Regulation 17 does not state that mapping of the curriculum should be conducted, there may be possible inconsistencies that may arise with the implementation of Regulation 17, wherein applicants registered as pharmacists in their country of qualification may be deemed to qualify for registration in South Africa, however, their curriculum may not necessarily be equivalent to the South African qualification. Council thus resolved that a joint meeting of the Pre-Registration and Education Committees be arranged to discuss the management of foreign qualification applications and measures that may be implemented to strengthen the evaluation and approval of applications qualifying for the application of Regulation 17 and to avoid inconsistencies that may arise from approving applications with curricula that may not be equivalent to the South African qualification.

A joint meeting of Pre-Registration and Education Committees resolved that to address the concerns, all curricula received from foreign-qualified persons will be evaluated as follows:

Table 6: Evaluations to be conducted for Foreign-Qualified Persons

Committee Name	Characteristics of application (these inform the type of evaluation)	Type of evaluation
Pre-Registration Committee	The application meets/does not meet the requirement of Regulation 17 and the curriculum was previously approved by Council.	Evaluation of application to determine that it meets the requirements for admission to the professional exam.
Committee	The application meets the requirements of Regulation 17 and the curriculum was never evaluated by Council.	Desktop evaluation for similarities to SA qualification using the <i>Checklist for foreign-qualified persons</i> .
Education Committee	The application does not meet the requirements of Regulation 17, and the curriculum was never evaluated by Council.	Comprehensive evaluation of curriculum to determine whether such qualifications are equivalent to SA qualifications using the Reviewed Mapping instrument for the evaluation of foreign qualification (BPharm or equivalent).

The Committee approved twenty-six (26) applications from candidates with foreign qualifications who wish to be registered as Pharmacists. This includes the allowance of three (3) South African candidates to write the Applied Pharmacy Practice in a Legal Framework paper, and if successful in the paper, be permitted to practice the scope of practice of a Pharmacist's Assistant (Post-Basic), under the direct personal supervision of a pharmacist in a pharmacy, whilst awaiting the outcome of their curricula evaluation.

The Committee deferred applications from two (2) candidates: (1) a candidate provisionally registered to submit confirmation of their registration as a pharmacist from the statutory council in their country of qualification; (2) a candidate's application to be subjected to the new process of curriculum evaluation.

The Committee reviewed a request from a candidate to be exempted from the internship requirement and only be required to write the pre-registration examination. The Committee declined the request as a minimum requirement for a six (6) months internship is important to familiarise foreign-qualified persons with and ensure exposure to healthcare conditions and medicines within the South African framework.

The Committee reviewed the preliminary examination results for the professional examinations written in May and October 2023, as well as the moderator's report, and recommended that questions be either removed or retained in the examination paper prior to finalisation and release of results.

The Committee considered the following recommendation from the Professional Examination Task Team:

- (a) the professional examinations be conducted once a year to ensure that a large number of candidates sit for the examinations and definitive conclusions can be drawn from analysis of the examination results;
- (b) the blueprint for the Applied Pharmacy Practice in a Legal Framework paper be reviewed and developed using the Competency Standards for Pharmacists;
- (c) the blueprint for the professional examinations be reviewed to align the level of cognition across all three professional examination papers; and
- (d) the allocation of questions in the Applied Pharmacy Practice in a Legal Framework be reviewed and the Law and Ethics questions be allocated a higher percentage in the paper.

The Committee resolved that the Professional Examination Task Team review the percentage allocation for the Law and Ethics section of the Applied Pharmacy Practice in a Legal Framework paper and the blueprint for the professional examinations to align the level of cognition across all three professional examination papers; the review and development of the blueprint for the Applied Pharmacy Practice in a Legal Framework paper using competency standards for pharmacists be held in abeyance until the programme for foreign qualified BPharm graduates is finalised by the Education Committee, and that the Council resolution to conduct Professional Examinations twice a year be upheld.

The Committee accepted and approved the minutes of the Professional Examination Task Team.

# Pre-Registration examination for Pharmacist Interns

In 2022, the Committee discussed the unprofessional conduct of interns during the pre-registration practice examination and raised concerns over the security measures implemented in Council examinations. The Committee recommended that the Office of the Registrar, in collaboration with the Pre-Registration Examination Task Team, investigate additional measures that can be implemented to strengthen the security of the examination platform, prevent candidates from cheating during the examination and enforce compliance with the Examination Code of Conduct. The recommendations from the task team were discussed by the Committee during the March 2023 meeting and the Committee recommended that a live proctoring software be implemented for all Council examinations.

The live proctoring software was implemented with the June and July 2023 practice examinations. Council in July 2023 discussed the challenges experienced with the implementation of the proctoring software during the pre-registration practice examinations and suggested that the Office of the Registrar present the feasibility of reverting to conducting online examinations at designated venues to the Pre-Registration Committee. The Office of the Registrar presented a report indicating that the benefits of conducting the online remote examinations outweigh the challenges of conducting the examinations at designated venues. Furthermore, no challenges were experienced during the actual examination in August 2023. The Committee therefore recommended that the Council decision of 21/22 July 2020 to conduct online examinations remotely be upheld; and Council continue to strengthen the online remote examination platform using the proctoring software to ensure no interruptions during any gateway examinations.

The Committee reviewed the Pre-Registration preliminary examination results for March and August 2023, as well as the moderator's report, and recommended that questions be either removed or retained in the examination paper prior to finalisation and release of results.

The Committee identified plagiarism in interns' submission of CPD entries as a risk to the integrity of entries submitted by interns and recommended that the Office of the Registrar investigate and implement a system to detect plagiarism within intern CPD submissions. The Office of the Registrar procured a plagiarism detection system which will be integrated into the register system to compare CPD entries submitted by current interns for similarity against the existing database of CPD entries submitted by current and past interns. However, during the system functionality testing, it was discovered that the system only compared submitted CPD entries with websites and not with the existing database of interns' CPD entries; and modification would require additional funds not budgeted for in 2023. The Pre-registration Committee thus recommended that the implementation of the plagiarism detection system be deferred to 2024, and it be introduced to the 2024 cohort of interns, subject to approval by Council of the costs associated with the service provider which includes the incorporation of CPD content data of past interns against which current interns CPD entries will be compared for similarity.

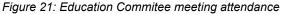
The Committee deliberated on the intern CPD submission for eligibility to the August pre-registration examination and was concerned about the low number of interns eligible to write the examination as well as a considerable number of interns registered from 2022 still struggling to complete and be competent in the required CPD entries. The Committee further noted a concern from one of the Committee members that

employers intentionally submit intern CPD entries and progress reports late as this will affect the intern's illegibility for community service placement and put the intern in an unnegotiable position to be later retained by the employer. The Committee recommended that the Office of the Registrar generate reports for the Committee to analyse and evaluate if patterns of late submissions relating to CPD entries and progress reports by tutors are employer/pharmacy group related. The Committee discussed the reports during the August 2023 meeting and noted outstanding progress reports from a few interns.

Assessors and moderators of CPD entries revised the criteria for assessment of a CPD entry to remove ambiguity, simplify the criteria and clarify statements that may have contributed to assessment inconsistencies. The Committee discussed the changes and recommended that the reviewed criteria be approved.

The Office of the Registrar reviewed the *Guidelines for the registration of Bachelor of Pharmacy graduates* as *Pharmacist's Assistants* (*Post-Basic*) following an inquiry from a candidate who was removed from the register of students after successfully completing the Bachelor of Pharmacy qualification in 2021 and requesting to be restored to the register. The Office further drafted the *Guidelines for the interruption of internship and the restoration process* following requests from Pharmacist Interns to interrupt their internship and work as Pharmacist's Assistants (Post-Basic), in the interim, until they can resume their internship for the Pre-Registration Committee to consider. The Pre-Registration Committee considered both guidelines and resolved that the guidelines be further reviewed by the Office of the Registrar, and enquiries received by the Office of the Registrar be handled operationally.

#### **Education Committee**



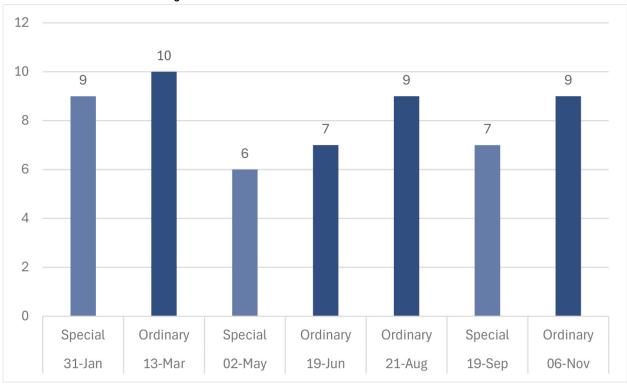
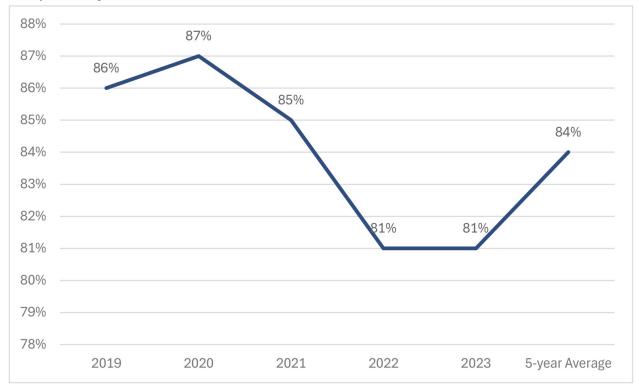


Figure 22: 5-year average attendance of Education Committee



The Education Committee consisted of ten (10) members, and six (6) members were needed for each meeting to form a quorum. A total of seven (7) meetings were held in the 2023 calendar year. The Committee had four (4) ordinary meetings and three (3) special meetings.

# **Education Committee Meetings 2023**

The overall average attendance of the meetings was 80.4%, with 73.3% and 87.5% attendance for special and scheduled meetings respectively. The majority of the Committee meetings (71.4%) were led by the appointed Committee Chairperson, and only 28.6% of the meetings were led by an acting chairperson. Six (6) meetings were held via audio/visual virtual conference and only one (1) meeting was held with physical attendance at the Kgorong Boardroom. A quorum (≥ 6 Committee members present) was formed in all seven (7) meetings.

Three (3) special meetings were held to address urgent matters that may impact negatively on the profession.

The Education Committee on 21 August 2023 resolved that the skills development providers (SDPs) be advised that it is no longer a requirement to submit the six-monthly reports (as this was an interim measure initiated during the COVID-19 pandemic).

The Education Committee on 19 September 2023 resolved that the examiners of the professional examinations be appointed as the evaluators of foreign curricula.

#### Task Teams

## Task Team to develop Guidelines for Work-Based Learning (WBL)

The Education Committee on 22 August 2022, resolved that a Task Team be established to develop Guidelines for Work-Based Learning (WBL). The Task Team held a meeting on 20 September 2022 and could not complete the task. The next meeting was held on 27 February 2023. The minutes of the meeting were presented at the Education Committee meeting on 13 March 2023 and the Committee resolved that the Task Team address the comments made during the meeting. The Task Team met on 05 April 2023 to finalise the documents. The final document was accepted and approved to be published for comment on 02 May 2023 by the Education Committee and by Council on 18 May 2023. The document (BN477/2023) was published for comment for a period of sixty (60) days on 22 September 2023.

#### Task Team for Evaluation of Foreign Qualifications

The Education Committee on 13 June 2022, established a Task Team to review the process for the evaluation of Foreign Qualifications and to review the template for the evaluation of the Radiopharmacy curriculum. The Task Team met on 11 April 2023 to deliberate on the template for the evaluation of the Radiopharmacy curriculum and resolved that the template be quality-assured utilising international curricula and experts. These evaluations were presented at the Task Team meeting on 05 September 2023 which resolved that the template be accepted and approved. A new process for the evaluation of foreign qualifications was also developed and approved in this meeting. The template for the evaluation of the Radiopharmacy curricula and the new process for evaluation of foreign qualifications was accepted and approved by the Education Committee on 19 September 2023 and by Council on 18 October 2023.

#### **CPD Committee**

Figure 23: CPD Committee meeting attendance

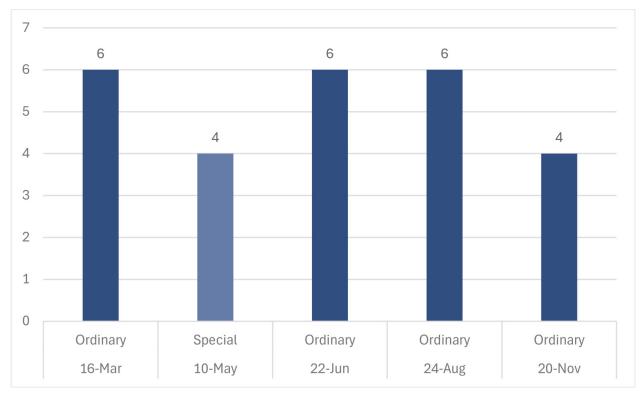
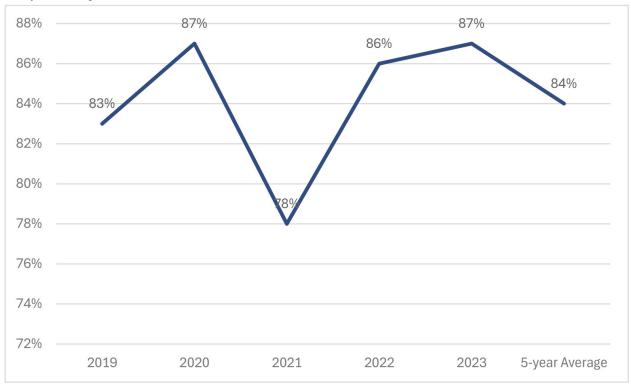


Figure 24: 5-year average attendance of CPD Committee



The CPD Committee was chaired by Mr A Soka and held five (5) meeetings in 2023, one (1) of which was a special meeting. The CPD Committee considered and concluded the following matters –

- (a) The Committee considered and approved the Competency standards for a pharmacist providing Industrial Pharmaceutical Services, the Competency standards for a pharmacist providing Radiopharmaceutical Services, the Competency standards for a pharmacist providing Clinical Pharmacy Services and the Competency standards for a pharmacist providing Public Health Pharmacy and Management Services.
- (b) The Committee monitored CPD participation by pharmacists.
- (c) The Committee considered a project plan for the rollout of CPD for pharmacy support personnel.
- (d) The Committee considered referrals of CPD non-compliant Responsible Pharmacists and tutors to disciplinary committees.
- (e) The Committee considered one request for exemption from the restoration requirements for a pharmacist removed for a period between 37 to 60 months.
- (f) The Committee considered one (1) request for deferment from compliance with CPD requirements.

## **Health Committee**

Figure 25: Health Committee meeting attendance

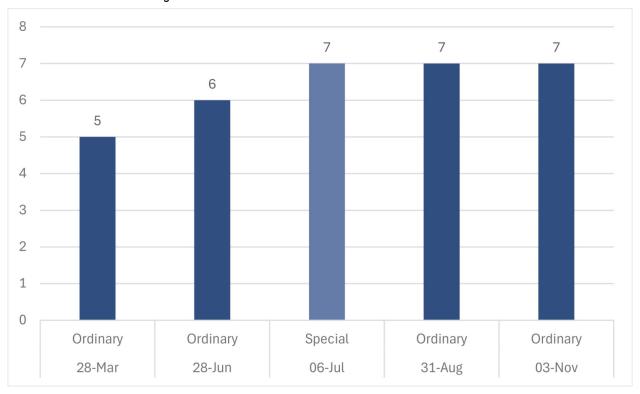
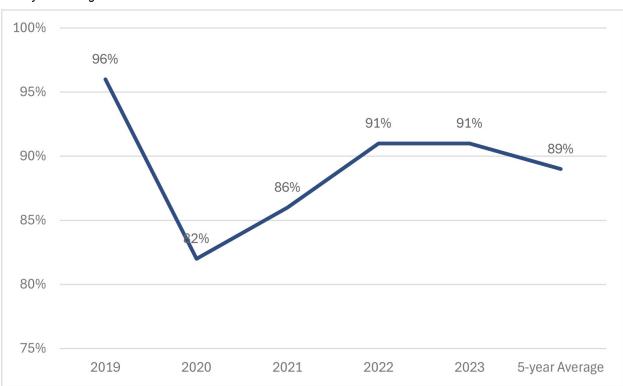


Figure 26: 5-year average attendance of Health Committee



The Health Committee was chaired by Ms MSE Letsike and held five (5) meetings in 2023, one (1) of which was a special meeting. The Health Committee supported twelve (12) members of the profession. Three (3) cases were recommended for closure due to members being determined fit to practice. Two (2) members were suspended from practice due to them being determined unfit to practice and their failure to comply with Health Committee resolutions.

# Committees established in terms of Chapter V of the Pharmacy Act (Disciplinary Committees)

# Registrar's Complaints Review Panel (RCRP) 2023

The RCRP is an internal meeting established by the Registrar. The RCRP is constituted of the Registrar, the Chief Operating Officer, the staff of the Professional Conduct Department, the Senior Managers: Professional Affairs, as well as the Company Secretary and Legal Services. In 2023, no RCRP meetings were held.

# Committee of Preliminary Investigation (CPI) 2023

Figure 27: CPI meeting attendance

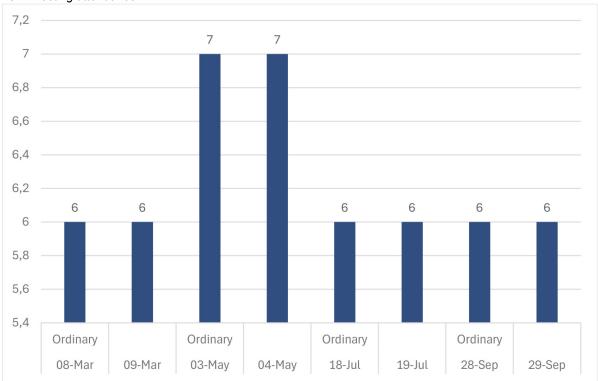
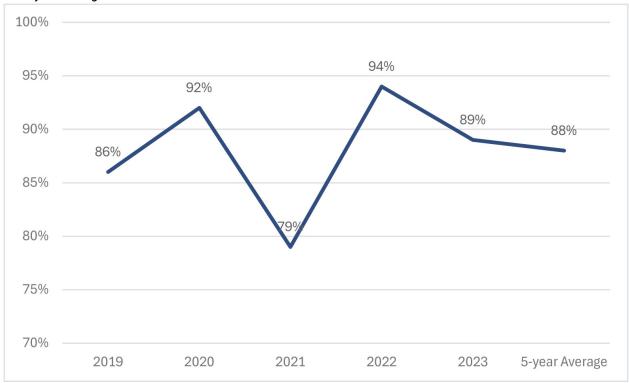


Figure 28: 5-year average of attendance of CPI



In 2023 the Committee of Preliminary Investigation (CPI) was held via Microsoft Teams Audio/Visual, and the meetings were chaired by Mr J du Toit. The CPI held four (4) meetings and reviewed 928 complaints.

The recommendations of CPI are summarised as follows:

Figure 29: Recommendations of the CPI

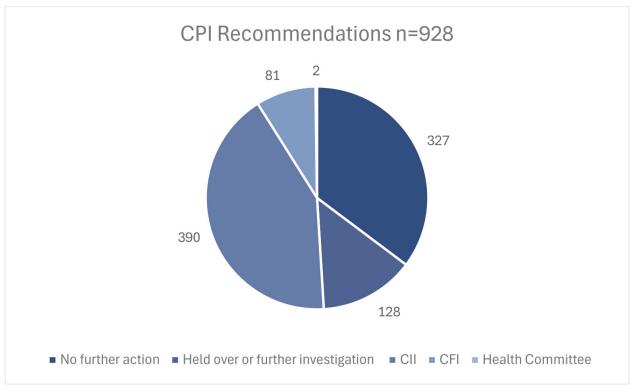
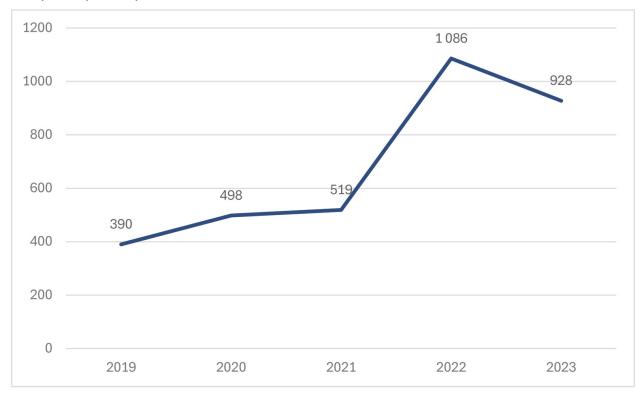


Figure 30: A year-on-year analysis of the total of CPI case numbers

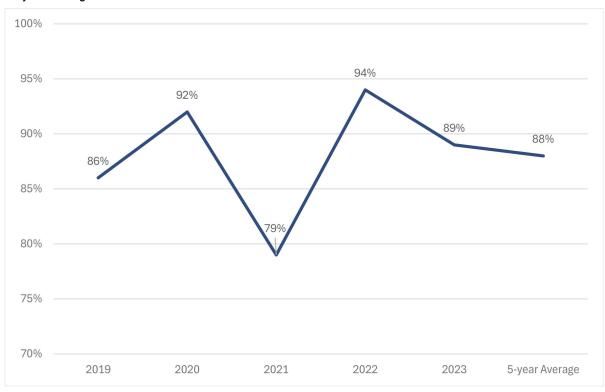


# Committee of Informal Inquiry 2023

Figure 31: CII meeting attendance



Figure 32: 5-year average of attendance of CII



In 2023, the Committee of Informal Inquiry was chaired by Dr Mariet Eksteen, and the Committee reviewed 387 cases. We had a high number of CPD non-compliance cases that were held over due to failure to respond to the CII Notice.

Figure 33: Findings of the CII

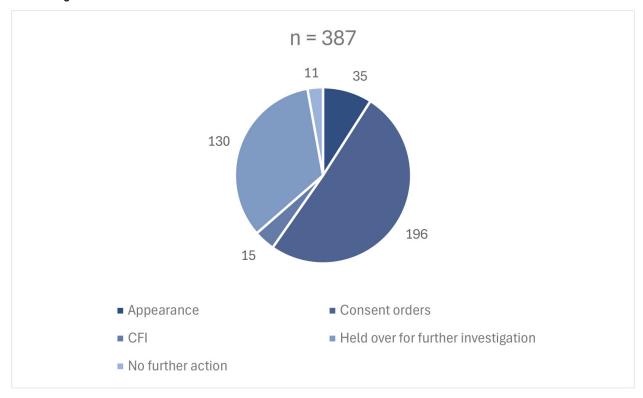


Figure 34: CII Fines and cost orders



Figure 35: A year-on-year analysis of the total of CII case numbers

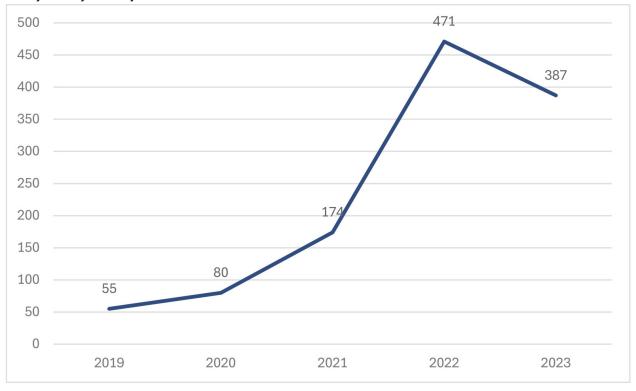


Table 7: Nature of the contraventions reviewed by CII

	Contraventions	Frequency of occurrence
(i)	Dispensing error	56
(ii)	Ethical Rule 10	20
(iii)	Ethical Rule 17	1
(iv)	Ethical Rule 18	24
(v)	Failure to furnish advice	3
(vi)	Failure to act in the best interest of the patient	4
(vii)	Dispensing expired medicine	1
(viii)	GPP shortcomings	2
(ix)	Incorrect labelling	6
(xi)	Section 22 (No RP)	1
(xii)	Substitution without permission	1
(xiii)	CPD non-compliance	66
(xiv)	Regulation 36 of Act 101 1965	1
(ivx)	Regulation 8 (Ownership)	1
(xvi)	Regulation 9 (Practice Regulations)	1

# Committee of Formal Inquiries 2023

The members of the CFI committee are not elected, any Council member can be a member of the CFI. The CFI Committee is constituted by three (3) Committee members and one (1) Legal Assessor at a sitting.

In 2023, the CFI held eight (8) meetings and 27 cases were finalised. Two (2) cases were partly heard and are set to be finalised in 2024.

In 2023 the Committee of Formal Inquiry finalised 27 matters and the cases were finalised as follows:

- Nineteen (19) respondents were found guilty, and eight (8) respondents were found not guilty.
- Two (2) partly heard matters will be heard in 2024.

Figure 36: Year-on-year analysis of the total number of CFI cases

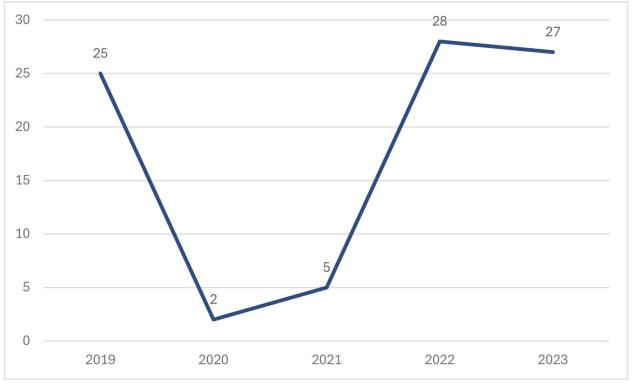


Table 8: Nature of the contraventions reviewed by CFI

	Contraventions	Frequency of occurrence
(i)	Allowing unregistered persons access to medicines	16
(ii)	No pharmacist on the premises	9
(iii)	GPP shortcomings	10
(iv)	Ethical Rule 10	23
(v)	Dispensing error	6
(vi)	Expired medicine	1
(vii)	Ethical Rule 4(c)	4
(viii)	Regulation 35 Act 101 of 1965	6
(x)	Regulation 36 Act 101 of 1965	2
(ix)	Regulation 39 Act 101 of 1965	1
(iix)	Section 22A Act 101 of 1965	5
(xix)	Section 14 Act 101 of 1965	2
(xi)	Section 19 Act 101 of 1965	1
(xii)	Section 22 Pharmacy Act	4
(xiii)	Ethical Rule 23	2
(xix)	Ethical Rule 17	1
(xiix)	Section 22F of Act 101 of 1965	1
(xiiix)	Regulation 72 of Registration Regulations	1
(iixx)	Regulation 5 of Practice Regulations	1
(iiixx)	Regulation 11 of Practice Regulations	1

In 2023, the Department had a CPI/CII Task Team meeting to review the Notice of Determination of Fine Amount. The CPI/CII Task Team had the meeting on 03 May 2023. The CPI/CII Task Team recommended the Notice to Council and the Notice was approved by Council on 26 July 2023. The Notice was sent to the Company Secretary for preparation of the Notice to be published. The Notice is with the Office of the CEO to be referred to the Minister for publication.

# Remuneration and Reimbursement Committee (REMCO)

Figure 37: REMCO meeting attendance

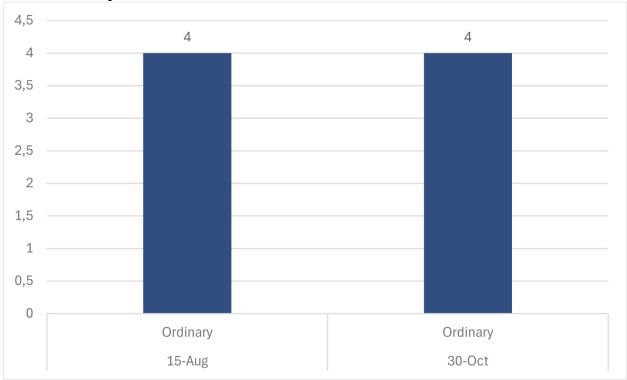
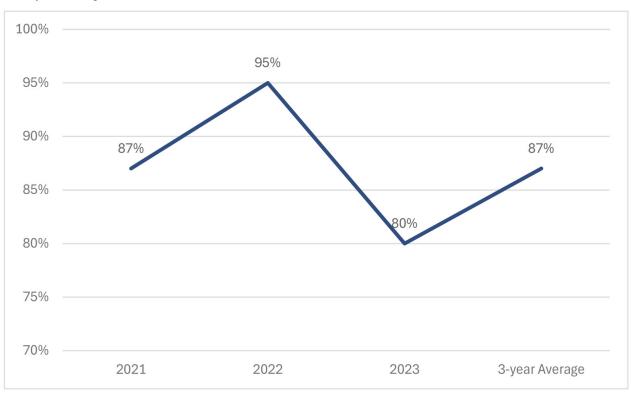


Figure 38: 3-year average REMCO attendance



REMCO had three (3) meetings in 2023 and addressed several matters including medical aid refinancing and the Cost-of-Living Adjustment (COLA) for the management category.

# **Bargaining Council**

The Bargaining Council had four (4) meetings wherein the following issues were dealt with:

- (a) Leave policy;
- (b) Policy on elimination and prevention of harassment in the workplace;
- (c) Compulsory Funeral Cover;
- (d) Cost-of-Living Adjustment for 2024; and
- (e) other matters of mutual interest.

# Audit and Risk Committee (ARC)

Figure 39: ARC meeting attendance

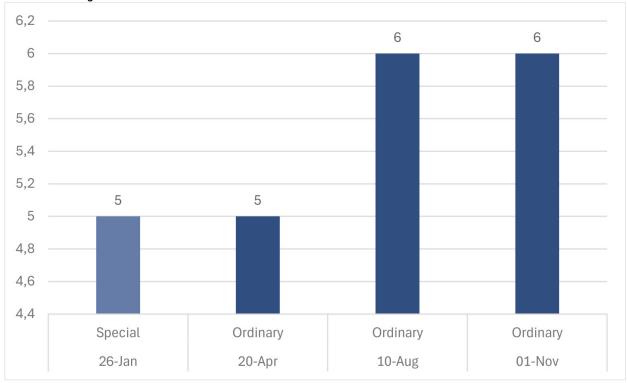
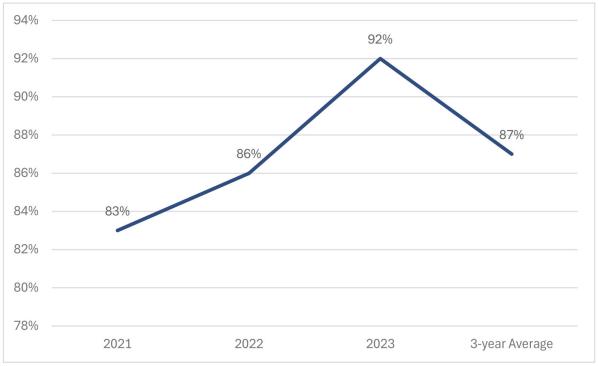


Figure 40: 3-year average ARC attendance



The ARC held a total of four (4) meetings during the current financial year, of which one (1) was a special meeting and three (3) were ordinary meetings. The Committee dealt with the following matters:

- (a) Review of Financial Performance quarterly;
- (b) Approval of the risk register and quarterly monitoring of progress report;
- (c) Review and approval of Annual Financial Statements;
- (d) Review of new and old policies;
- (e) Review of internal audit reports per the audit plan;
- (f) Approval of the internal audit plan for 2024;
- (g) Approval of the engagement letter and audit plan for external auditors;
- (h) Monitoring of IT governance and activities through the ICT Task Team; and
- (i) Monitoring of compliance with laws and regulations.

#### **Tender Committee**

The Tender Committee held a total of four (4) ordinary meetings during the 2023 financial year. The Committee dealt with the appointment of service providers as per the Procurement and Tender Policy for the following services:

- (a) Additions & renovations for 3rd floor conference facilities;
- (b) Supply and installation of conference facilities furniture;
- (c) CRM & telephony; and
- (d) Hygiene solutions for the Office of the Registrar.

# **Adjudicating Committee**

The Adjudicating Committee held a total of four (4) ordinary meetings duringn the 2023 financial year. The Committee dealt with the appointment of service providers as per the Procurement and Tender Policy.

#### IT Governance and Performance

# Upgrading IT Infrastructure, Software, and Hardware in Line with Current Technology

In response to the rapidly evolving technological landscape, the IT Department embarked on a systematic approach to upgrade SAPC's IT infrastructure, software, and hardware. Periodic assessments were conducted to identify areas for improvement, ensuring that the organisation's IT assets remained resilient, efficient, and aligned with the evolving demands of the business.

#### Enhancing Staff Ability to Work Offsite for Processing Applications and Customer Requests

The implementation of Fortinet VPN empowered staff to seamlessly work from remote locations, ensuring business continuity and enabling efficient processing of applications and responses to customer requests. This strategic initiative aligned with the evolving dynamics of the modern work environment.

# Reviewing and Developing Service Level Agreements (SLA) for Quality Vendor Services

An ongoing commitment to optimising relationships with external vendors was evident through the regular review and refinement of Service Level Agreements (SLAs). This ensured that vendor services consistently aligned with business objectives and maintained the high-quality standards necessary for the success of IT initiatives.

# Digitalising Manual Processes Through Digital Transformation

A comprehensive digital transformation is a continual effort to identify and digitise manual and paper-based processes within the SAPC. This not only streamlines workflows but also positions the organisation for greater efficiency and effectiveness in service delivery.

# Developing Systems Architecture to Support Future Growth and Technological Advancements

Proactive engagement in developing a robust and scalable systems architecture demonstrated the IT Department's commitment to anticipating and accommodating future growth and technological advancements. The design and implementation of flexible IT infrastructures underscored the organisation's readiness to embrace innovation.

# Implementing a Business Continuity Plan to Safeguard Operations in the Face of Disruptions

The implementation of a comprehensive Disaster Recovery Plan (DRP) exemplified the commitment to business continuity. This plan, encompassing business impact analysis, recovery strategies, and proactive measures, positioned SAPC to navigate unforeseen events with minimal disruption.

# Enhancing Cybersecurity Measures to Address Evolving Threats

The dynamic nature of cybersecurity threats necessitated continuous enhancement of measures to fortify SAPC's defences. Investments in technologies such as FortiGate, GFI Languard, and ongoing cybersecurity awareness programs reflected a proactive stance in safeguarding sensitive data.

# Building Internal ICT Capacity Through Annual Maintenance and Training Strategy Updates

A dedicated annual training plan aimed at updating skills, certifications, and knowledge among the IT workforce emphasised the organisation's commitment to fostering a culture of competence and innovation.

# Engaging the IT Workforce Through Skills Transfer from Third Parties, Fostering a Culture of Continuous Learning

Active engagement with third-party service providers in skills transfer initiatives highlighted the commitment to diversifying skill sets. This collaborative approach witnessed during project implementations and through monthly service meetings, contributed to a dynamic and innovative work environment.

# Reducing the Number of Service Providers by Internalising Certain Responsibilities for Improved Control and Efficiency

Strategically working towards internalising certain responsibilities previously outsourced to external service providers demonstrated the IT Department's commitment to improved operational control and efficiency. This approach aimed at optimising costs and improving response times, ultimately contributing to enhanced operational efficiency and strategic autonomy.

### **Review of Core Functions**

The Information Technology Department, in the year 2023, underscored its commitment to excellence by not only successfully executing core functions but also by aligning its activities with strategic objectives. The Department demonstrated a proactive and adaptive approach to IT governance, showcasing a dedication to staying at the forefront of technological advancements and ensuring a robust and resilient IT infrastructure.

#### IT Development

The IT Development team played a pivotal role in enhancing business operations and customer experience by undertaking system developments and making improvements to existing applications. The focus was on responding to the dynamic needs of the organization and its stakeholders.

The team successfully executed numerous change requests during the year 2023, concentrating on refining and augmenting existing systems and processes within the SAPC.

#### IT Governance Oversight

The IT Steering Task Team led by the chairmanship of Mr Faizal Docrat, an independent member of the Audit and Risk Committee, guided by its well-defined terms of reference, maintained regularity in meetings, thereby providing effective oversight of IT activities. The team, through collaborative efforts, played a central role in decision-making and streamlined governance processes. The comprehensive review of critical policies, including but not limited to the Backup Policy, Information System and Security Policy, and Disaster Recovery Plan, ensured the robustness of the SAPC's governance framework.

#### IT Assets (Hardware)

The management of IT hardware assets reached significant milestones in the year. This included expanding storage capacity, ensuring ongoing support for servers and firewalls, upgrading operating systems to Windows Server 2019, and decommissioning outdated servers. These efforts not only reflect prudent asset management but also a commitment to maintaining a state-of-the-art technology infrastructure.

#### IT Software Applications

To maintain compliance and efficiency, the IT Department diligently renewed various software licenses, encompassing essential applications such as Symantec Endpoint Protection, Microsoft 365 Suite, and Adobe Creative Cloud. This proactive approach ensures that the SAPC operates with complying updated software.

#### Cybersecurity

Cybersecurity emerged as a top priority, with the implementation of an internally conducted user-awareness workshop, the acquisition of GFI LanGuard for continuous vulnerability scanning, and the execution of a penetration test by external experts. Regular audits and maintenance of laptops, coupled with firmware updates for FortiGate, fortified the organisation's cybersecurity posture, ensuring a robust defence against evolving threats.

#### Disaster Recovery

2023 marked a year since SAPC contracted Afrocentric IP as the provider of a backup and disaster recovery solution marking a crucial step in ensuring the resilience of SAPC's data environment. Four disaster recovery tests and quarterly restore tests were conducted to validate the SAPC's readiness to respond effectively to unforeseen events.

#### Connectivity

Strategic improvements in connectivity, including the termination of the Liquid Telecom line and its replacement with iConnect, upgrading the Telkom line to 1000MPBS, maintaining secure VPN options, and effective management of APN usage, contributed to a robust and seamless network infrastructure.

#### IT Helpdesk Report

Central to IT support at SAPC is the IT service desk, which efficiently coordinates all IT support requests. The IT Helpdesk processed a substantial number of calls, with a commendable closure rate, highlighting the responsiveness and efficiency of the support system.

A total of 5 618 were logged in our Track-It Helpdesk system. 5 498 tickets were resolved and closed while those in progress amount to 120.

# **SAPC Social Responsibility**

# Corporate Social Investment Policies (outreach programmes)

In September 2023, Council carried out its corporate social investment (CSI) programme at Wozanibone Secondary School. As part of this CSI initiative Council donated school supplies, school furniture and provided learners with essentials including sanitary towels.

# **Council Elections 2023**

The current term of Council comes to an end on 31 December 2023; therefore, it was necessary in 2023 to attend to the election and the appointment of a new Council to take office on 01 January 2024. The Registrar/CEO, in consultation with the National Department of Health/Office of the Minister of Health, facilitated the appointment of the Council members to be appointed by the Minister of Health, in terms of Section 5(1)(b)-(e) of the Pharmacy Act.

The election of the Council members is conducted in terms of the *Regulations relating to the election of members of the South African Pharmacy Council* (GNR 823, published on 19 June 1998). As part of the Council's Strategic Plan 2019-2023, it was resolved that the election of Council members for the next term of office would be conducted online. In order to achieve this, it was necessary to amend the *Regulations relating to the election of members of the South African Pharmacy Council* to enable a move away from a manual nomination and voting system to one that allows for the entire election process to be conducted digitally.

On 10 February 2023, the Minister of Health published for comments, for a period of 90 days, the proposed Regulations relating to the election of members of the South African Pharmacy Council: Amendments. Comments were received by the NDoH and reviewed in consultation with the Office of the Registrar. The Minister of Health published for implementation the Regulations relating to the election of members of the South African Pharmacy Council: Amendment on 04 August 2023, in Government Gazette GNR3758. The publication of the amended Regulations enabled the election of Council members to proceed using a digital online voting system developed by the Council.

In July 2023, Council appointed the Independent Electoral Commission (IEC) as the independent monitoring body in terms of Regulation 2 of the *Regulations relating to the election of members of the South African Pharmacy Council*. However, due to changes in the project plan, the IEC was not able to assist, and it was necessary for Council to appoint the Electoral Institute for Sustainable Democracy in Africa (EISA) in August 2023. The Registrar, who is the Returning Officer for elections, published Board Notice 469/2023 on 08 August 2023 calling for nominations for candidates, with the closing date being 08 September 2023. On 15 September 2023, in Board Notice 479/2023, the Returning Officer published the Board Notice providing the list of 161 valid nominees. Online voting was open for a period of 72 hours from 06h00 13 October 2023 to 06h00 16 October 2023. EISA determined after both the nomination phase and the voting phase that the election process was free and fair.

#### Online Election System Development

The online/digital election platform was developed to link to the Council's database of registered persons. This enabled the automation of determining the voters' roll, the candidates eligible to nominate, second a nomination or be nominated, as well as the generation of a ballot form that incorporated information from the register system. Key features of the system included the use of the existing secure site through the Council's website, with ID and password access for users, real-time processing of nominations, automatic time control for start and end dates and times, full date and time stamp reports, user access history and reports, if need be, and communication reports linked to the registered person's P number for full communication history.

The system was developed in two (2) phases, the nomination phase and the voting phase, with a secure user access administrator's functionality available in both phases, in real time.

The election platform was subject to an internal audit review for purposes of quality assurance, security and functionality.

## Statistics from the Council Election 2023:

Figure 41: Nominations received

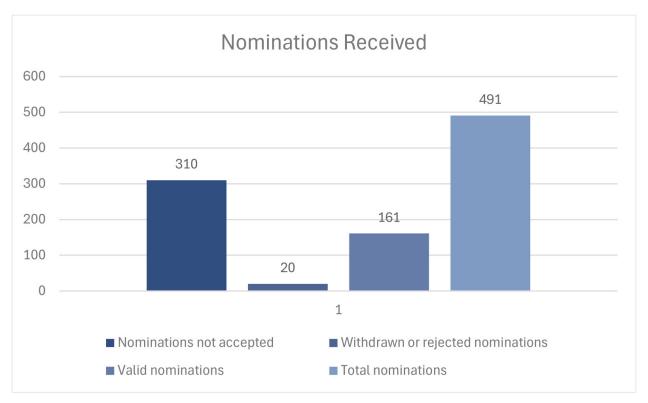


Figure 42: Nominator ethnicity

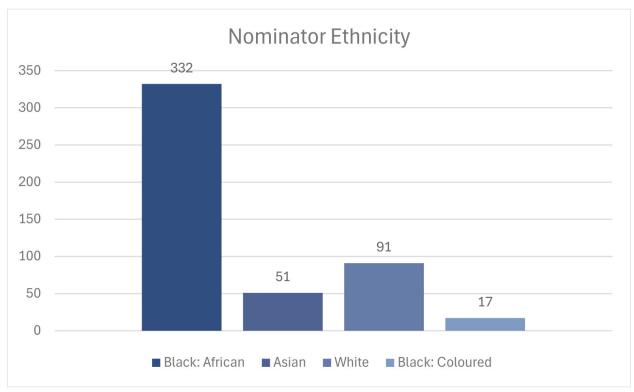


Figure 43: Nominator gender

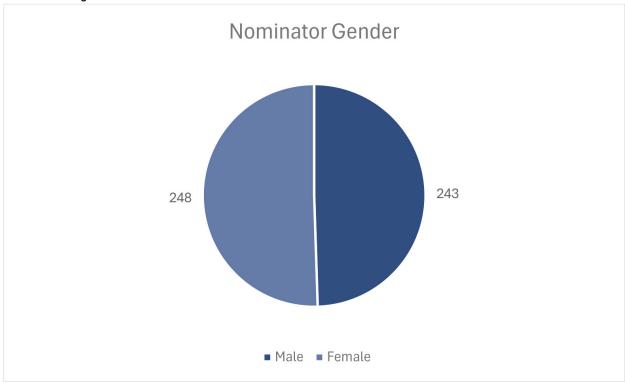


Figure 44: Nominator age

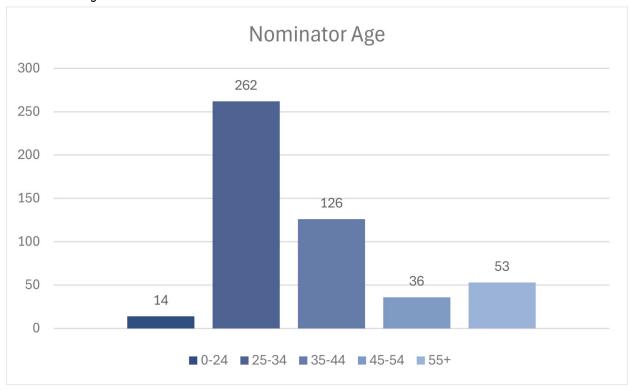


Figure 45: Seconder ethnicity

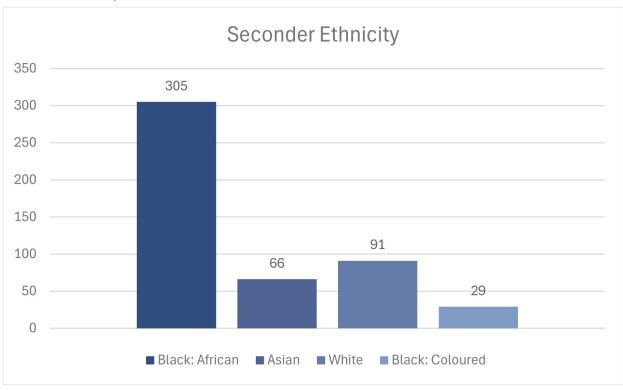


Figure 46: Seconder Gender

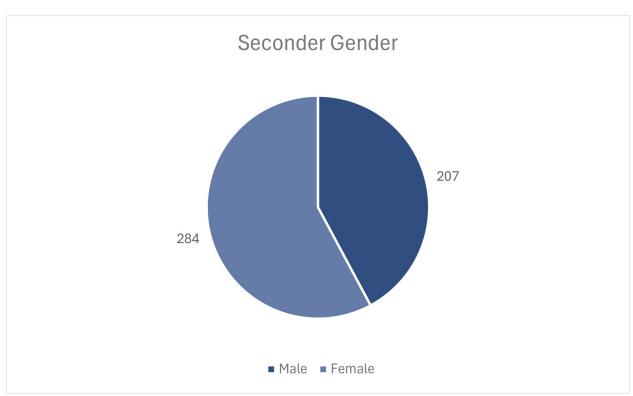


Figure 47: Seconder age

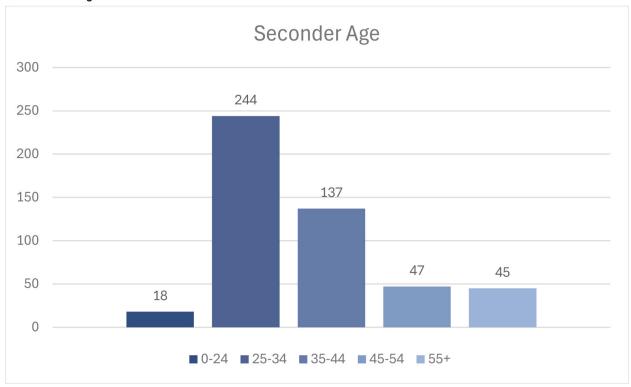


Figure 48: Nominee ethnicity

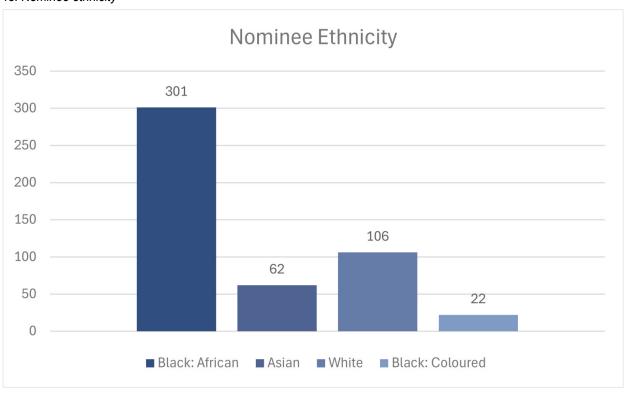


Figure 49: Nominee gender

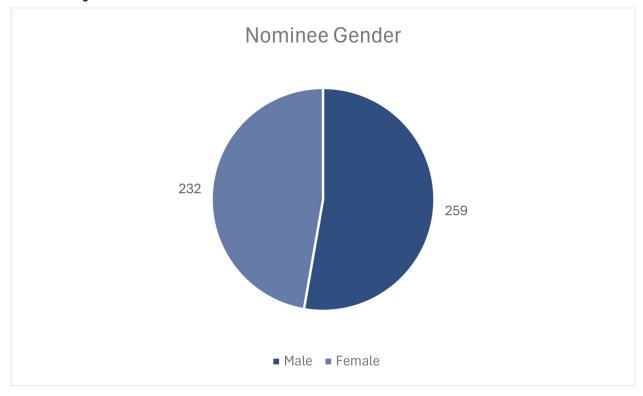


Figure 50: Nominee age

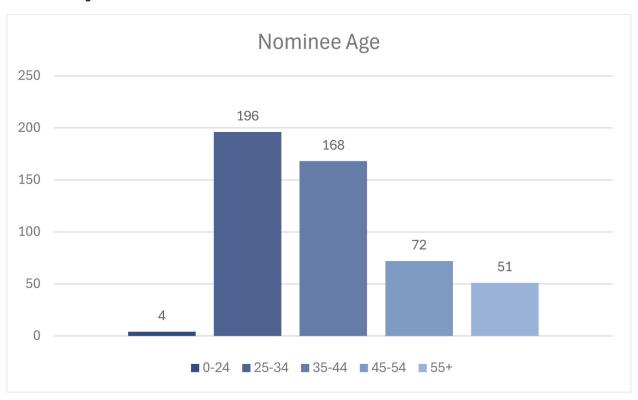


Figure 51: Voter statistics

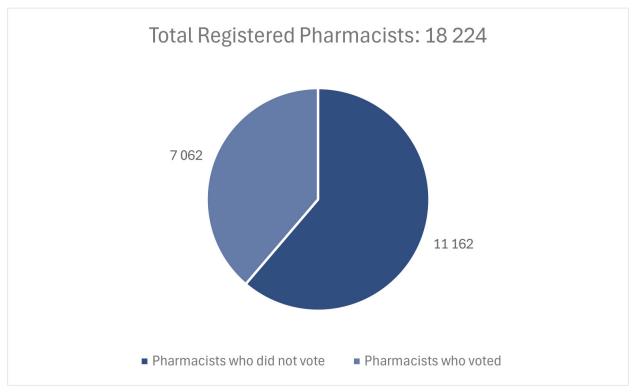


Figure 52: Voter ethnicity

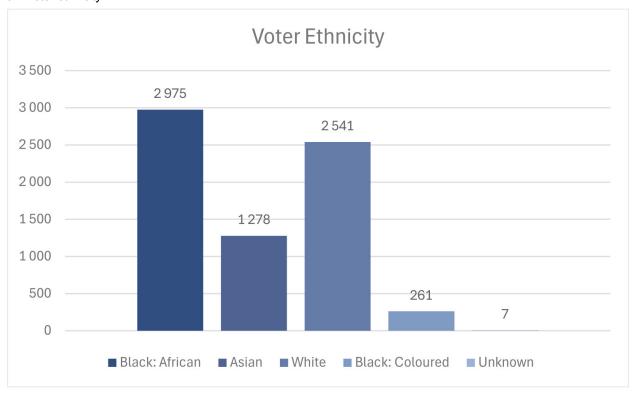


Figure 53: Voter gender

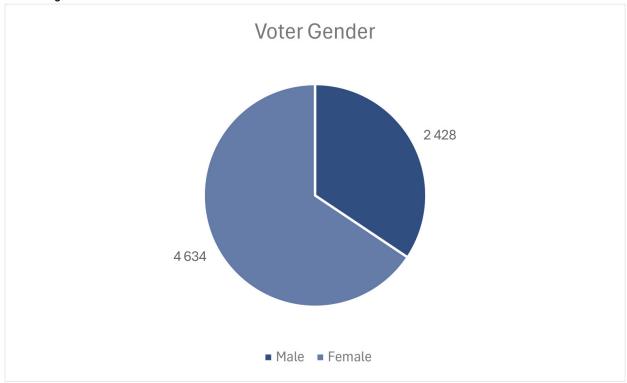
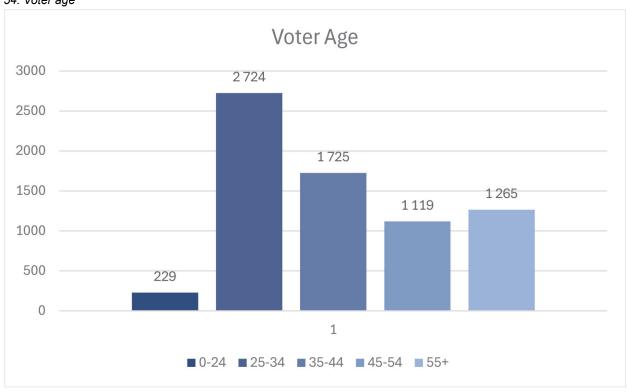


Figure 54: Voter age



## PART D: HUMAN CAPITAL AND DEVELOPMENT

## SAPC PEOPLE MANAGEMENT

## Recruitment, Retention and Terminations

Several positions were filled in the period under review, including:

- Manager Professional Affairs;
- Communication Practitioner;
- Communication Officers;
- Contact Centre Agents;
- Personal Assistant to COO;
- IT Interns;
- · Occupational Health & Safety Practitioner; and
- Secretarial Support Officer to COO.

Council, unfortunately, lost three Managers in the Professional Affairs Cluster who left due to personal reasons and the pursuance of other career interests.

## **Employee training and development**

Council supported 11 professional development initiatives by staff (MBL, Human Resources, BCom Accounting, BA Psychology, PhD in Pharmacy, Masters in Pharmacy, Certificate in Management, Post Graduate Diploma in Accounting Science, Senior Management Development Programme, MTech Public Strategic Communication and BCom in Information Technology) and the costs associated with assistance for further studies amounted to **R206 701**.

Furthermore, skills training to enhance the competence of staff in varied areas was conducted in terms of the workplace skills plan. The Skills Development Training Committee convened to reprioritise the training needs as identified by staff and supported by HODs.

In summary, a total of 13 skills interventions were meted out in 2023, with the cost implication of **R247 630**.

## **Employee Wellness**

Employee assistance was provided through a programme run by Workforce Health. This happens at the most self-referral by staff members who experience psychosocial challenges (manager referral is available). The Office also conducted a Wellness Day in November 2023, which was supported by talks around psychosocial issues, as well as health screenings (Old Mutual, Workforce Health), a bootcamp to test our fitness levels and to encourage staff to participate in physical exercise.

## Occupational Health and Safety

The OHS Committee was strengthened to ensure equitable representation and provided induction to all Committee and staff members. Trained Committee members in all areas of health and safety, *viz* Incident Investigation, firefighting, SHE Rep, Evacuation, etc.

Inspections were conducted on a quarterly basis and areas of concern were addressed as and when they came up. The OHS Practitioner ensured Contractors' compliance prior to commencement and throughout projects.

## **OVERSIGHT STATISTICS**

## **Employment Statistics**

The staff structure of Council has 123 positions, 108 of these positions are filled and 15 are vacant. Positions are filled incrementally due to budget constraints.

Table 9: Employment statistics

## **WORKFORCE PROFILE**

the total number of employees (including employees with disabilities) in each of the following occupational levels: Note: A=Africans, C=Coloureds, I=Indians and W=Whites

Occupational Levels	Male		Female			Foreign Nationals		Total			
	Α	С	I	W	Α	С	I	W	Male	Female	
Top Management	2	0	0	0	1	0	0	0	0	0	3
Senior Management	3	0	0	0	3	0	0	2	0	0	8
Professionally qualified and experienced specialists and mid-management	6	1	0	0	8	0	1	2	0	0	18
Skilled technical and academically qualified workers, junior management, supervisors, foremen, and superintendents	6	0	0	0	19	0	1	4	0	0	30
Semi-skilled and discretionary decision-making	9	0	0	0	28	2	0	1	0	0	40
Unskilled and defined decision-making	4	0	0	0	5	0	0	0	0	0	9
TOTAL PERMANENT	32	0	0	0	76	0	0	0	0	0	108
Temporary employees	0	0	0	0	0	0	0	0	0	0	0
GRAND TOTAL	32	0	0	0	76	0	0	0	0	0	108

Table 10: Remuneration and Reimbursement statistics (Rand values refer to AFS) (C-Suite and Board)

2020	2021	2022	2023
5 593 707	5 656 367	5 744 902	6 449 203

## **PART E: STAKEHOLDER RELATIONS**

## NATIONAL DEPARTMENTS

Engagements with the National Department of Health focused on the issuing of permits, licenses for pre-May 2003 pharmacies, and enhancements to GPP evaluation pages.

#### PROVINCIAL DEPARTMENTS

As part of the annual stakeholder engagement, the Pre-Registration Department held a number of meetings with various groups, as listed below:

- Free State Provincial Pharmaceutical Services
- South African Health Military Services

Some of the matters discussed with the groups were:

- Pharmacies without Responsible Pharmacists; pharmacy inspections, premises approvals and recording of pharmacies;
- Training of Pharmacy Support Personnel;
- Reconciliation of financial statements (facilities/personnel); and
- Group owner access.

## PHARMACY GROUPS AND ASSOCIATIONS

Meetings with the Spar Group were held while meetings with other groups allocated to the Education Department were cancelled as the groups were addressed as a collective in a meeting of the Heads of Pharmaceutical Services which was held on 21 November 2023.

Four (4) stakeholder forum meetings have been held this year addressing heads of pharmaceutical services (HOPS), public and private, on the latest developments within the profession in areas of professional conduct, legislation, education & training, pre-registration, CPD & registrations and pharmacy practice.

The issues addressed with stakeholders include the following -

- (a) Obstructing an inspection officer from conducting an inspection;
- (b) Removal of pharmacies;
- (c) Pharmacy staffing fronting;
- (d) Council elections;
- (e) Training of Pharmacy Support Personnel; and
- (f) GPP Compliance matters.

#### PUBLIC AND MEDIA

## **Public and Media Relations**

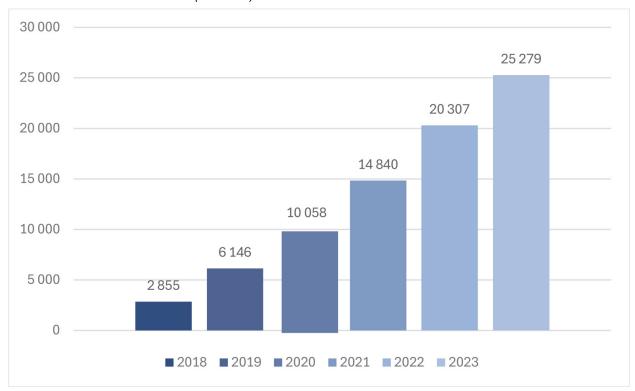
In the 2023 reporting period, public and media relations efforts comprised two media statements (one being a joint statement with the Department of Health), eleven (11) media enquiries addressed, and one media briefing. Chiefly, the Office provided replies to media enquiries focusing on codeine abuse within the country and the implementation of Pharmacist-Initiated Management of Antiretroviral Therapy.

The 2023 Pharmacy Month campaign rolled throughout September 2023, with the profession encouraged to engage in outreach activities within their communities. For the first time, the material was translated into Khoi and San languages. The Pharmacy Month programme was the subject of 58 media articles and/or interviews.

## Social & Digital Media

Council is actively engaging stakeholders through the four (4) most popular social networking platforms (Facebook, X (formerly known as Twitter), Instagram, LinkedIn and TikTok) and the world's largest video network, YouTube. The CSR department has managed to increase the combined social media audience of the SAPC by 24,5% (4 972), from 20 307 followers in 2022 to 25 279 in 2023.

Figure 55: Social Media Audience Growth (Followers)



## Social Media Stakeholder Support

In addition to rolling our awareness and education campaigns, social media was also used to provide stakeholder support and resolve service queries and/or requests. During the year to date, 1 725 queries and service requests were fulfilled through our social media channels (Facebook, Instagram and X (formerly known asTwitter).

6 000 5 3 6 5 5 000 4000 3 194 2990 2998 3 000 2694 2 597 2000 1725 1173 1000 273 197 147 144 130 66 32 0 2020 2022 2023 2021 ■ Facebook ■ Instagram X (Formerly known as Twitter)

Figure 56: Social media service queries and requests

## **Publications**

One issue of the *Pharmaciae* was published in October 2023, and another issue is currently underway with expected publication in January 2024. The *Pharmaciae* serves as the official mouthpiece of Council, the first issue of 2023 (Volume 10, Issue 1) comprised updates on Council decisions, operational changes, as well as legislative amendments affecting the profession, including various guidance on compliance with good practice standards.

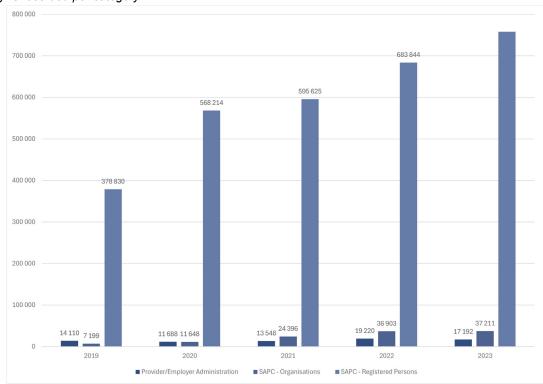
The 2022 Annual Report has been compiled and published. To ensure that the SAPC continues to comply with the country's reporting laws, especially the Legal Deposit Act, 54 of 1997, the Office of the Registrar acquired an International Standard Book Number (ISBN) for the 2022 Annual Report, through the National ISN Agency. This will be the fifth SAPC Annual Report recorded with the ISN Agency and deposited in all places of Legal Deposit in the country.

## Management of Website content

Logins to the secure site of the website continued to increase. Up to mid-November 2023, the SAPC website had been visited by over 375 000 persons, carrying out over 1 180 000 sessions during this period, implying that the average visitor to our website was visiting at least 3,1 times during the first eleven (11) months of the year. By mid-November, the total SAPC website pages had been viewed just under 5 million times.

For the year to date, there had been 812 361 logins to the secure site of the SAPC website; a majority of these were made up of logins by registered persons (757 958 or 93%), followed by organisations [i.e., pharmacies and pharmacy groups] (36 903 or 5%), and education & training providers/employers (19 220 or 2,6%).

Figure 57: Logins recorded per category



On 24 February 2023, we had a Microsoft Teams Meeting with Metropolitan Medical Scheme to discuss how to better investigate Medical Aid fraud matters and what information SAPC require to successfully investigate and prosecute the complaints.

On 25 May 2023, we had a meeting with Universal Health. The purpose of the meeting was to induct Universal Health on the legislative framework of SAPC, how SAPC investigate complaints, information sharing and time frames for providing feedback on the complaints submitted by Universal Health.

On 23 June 2023, we attended our regular Pharmaceutical Crime Task team meeting, where updates with respect to the hijacking of trucks with medicines were provided.

On 13 July 2023, we had a meeting with GEMS to provide them with an update on the complaints they have lodged with Council.

On 29 August 2023, we attended a Teams Meeting hosted by the Pharmaceutical Crime Task Team, the issue of investigation capacity was discussed by the stakeholders.

On 8 September 2023, we hosted a workshop with GEMS, Universal Health and Metropolitan. The Senior Managers from Professional Affairs presented the roles and responsibilities of their departments.

## STATUTORY BODIES

The Education Department has maintained compliance with the South African Qualifications Authority (SAQA) requirements by conducting data verification, cleansing and submitting National Learners' Records Database (NLRD) learners and designations to SAQA, as well as maintaining registers of learners and students, whereby a report for orphaned learners was generated.

Compliance with the Quality Council for Trades and Occupations (QCTO) requirements was maintained, and all quarterly reports were submitted within the deadlines.

## Cooperation with other quality councils

Council is the Assessment Quality Partner (AQP) to conduct the EISA for the new Occupational Certificate: Pharmacist's Assistant Basic (part qualification), Pharmacist's Assistant Post-Basic and the Pharmacy Technician qualifications, and has duly submitted the annual report as well as status reports required by the Quality Council for Trades and Occupations (QCTO) in March, June, September and December 2023.

QCTO has approved the PSP Examination blueprints for the Pharmacist's Assistant Basic, Pharmacist's Assistant Post-Basic and the Pharmacy Technician. The practice examination papers for the Pharmacist's Assistant (Basic and Post-Basic) were also approved by QCTO.

In meetings held with SAHPRA matters discussed included the codeine care initiative, licensing of provincial depots, and the role of each statutory body when collaborating in performing inspections.

On 23 February 2023, we attended a SAHPRA-hosted webinar on increasing awareness and reporting of medication errors. On the same day, we also attended a Microsoft Teams meeting with the Pharmaceutical Crime Task Team.

On 2 March 2023, we had an operational meeting with SAHPRA. The meeting was about sharing information and providing feedback on the collaborative investigation we conducted.

On 15 May 2023, we attended a meeting at the SAHPRA offices. In the meeting, we discussed THC Pharmacy and the case that was brought against SAHPRA by THC Pharmacy in respect of the medicines that SAHPRA seized.

On 6 June 2023, we attended a meeting with BHF, where issues relating to practice numbers of dispensing pharmacists and how the SAPC can be involved in the BHF regular meetings with other industry stakeholders, especially around fraud and waste management.

On 13 June 2023, a follow-up meeting was held with SAHPRA in respect of providing information to SAHPRA, to prepare for the court case against THC Pharmacy.

On 11 October 2023, we attended the Codeine Care meeting arranged by SAHPRA. The Codeine Care Initiative seeks to develop a database of stock movement to lessen the abuse of Codeine. The SAPC was elected to be at the ICT Sub-Committee of the Codeine Care Initiative.

On 17 October 2023, we had a meeting with the Council for Medical Schemes, where the following issues were discussed: issuing of practise numbers, consultant pharmacy, competency standards and designated service providers.

On 24 October 2023, we had a meeting with BHF to discuss the outcomes of an investigation conducted by them with respect to the claiming pattern by Florida Square Pharmacy.

#### **PROVIDERS**

In enhancing the provision of pharmacy education, the Education Department has enhanced the provision of pharmacy education by:

- (a) conducting consultative meetings/sessions with HEIs on 26 April 2023, and Skills Development Providers on 04 April 2023; and
- (b) accrediting one skills development provider (SBuys Academy) to provide the OQSF course.

Meetings were held with the SDPs on 04 April 2023 and the heads of the nine pharmacy schools on 26 April 2023. The Heads of School Forum members thanked Prof. PH Demana for chairing the Forum for the past two terms. Prof. PH Demana thanked the Heads of Schools for supporting him for the two terms he served as the Chairperson of the Forum. Prof. S Khamanga was appointed as the chairperson of the Heads of Schools Forum for the period 2023 to 2025.

The Heads of Schools recommended to the Education Committee that:

- (a) the Office of the Registrar consider providing a formal template for supervising pharmacists at the sites where the 400 hours of work-based learning are performed to complete for sectoral progress reports that are completed by Pharmacist Interns in academic institutions;
- (b) the Office of the Registrar requested Tshwane University of Technology to indicate the name of the person to be the member of the Committee in order to confirm whether Ms N Mayimele could be nominated to represent the Heads of Schools' Forum in the Task Team for the Internship Planning, Development and Funding of Posts; and
- (c) Rev. LJ Mathibe be nominated as an alternate person to represent the Heads of Schools' Forum at the Task Team for the Internship Planning, Development and Funding of Posts should Ms Mayimele not be a member of the Heads of Schools' Committee.

Council, however, resolved that Rev. LJ Mathibe represent the Heads of Schools' Forum at the Task Team for the Internship Planning, Development and Funding of Posts.

## **REGISTERED PERSONS**

In 2023, CSR undertook various corporate communication activities comprising stakeholder communication and supported stakeholder engagement initiatives of the organisation, including workshops with the profession. Stakeholder communication efforts comprised of 130 e-Note and SMS campaigns on various operational and professional matters. These included a robust campaign to issue licenses to and record pre-May 2003 pharmacies, as well as an elaborate Elections Communication Campaign covering all phases of the elections process.

Furthermore, event coordination and live event production was conducted for eleven (11) virtual events.

## Instant messaging and e-messages

- **SMS campaigns:** A total of 1 098 901 SMSs were sent out during the period under review.
- **Bulk email campaigns:** A total of 121 different bulk e-campaigns (58% more than in 2022) were conducted during 2023 to communicate key information to stakeholders.

In the year under review, CSR maintained the CPD Blog and developed tutorial campaigns around the use of the newly rolled out model-view-controller (MVC) secure website for registered persons.

As with the previous year, and in pursuit of Strategic Objective 1 (Assist in the promotion of the health of the population of the Republic of South Africa), the Office of the Registrar had rolled out year-long social media driven health communication campaigns on the backdrop of National & Global Health Days. This campaign had also been rolled out as an internal communication campaign to ensure that the SAPC staff are educated on various health conditions, warning signs and how to seek help.

In order to mitigate reputational risk, the Office of the Registrar, through CSR, has managed to implement a reputation management programme based on a Reputation Management Strategy that emphasises the monitoring of risk, the management of the SAPC reputation and the implementation of reputation-building and reputation-mitigating actions within all operational areas and service points, in order to sustain positive relations with stakeholders. The strategy is supported by a reputation intelligence tool and an Annual Stakeholder Feedback Survey and Communication Audit.

## CRM Stakeholder Relations (surveys on email interactions)

In June 2022, the Office of the Registrar introduced a survey interaction on its official email address, i.e., customercare@sapc.za.org. The purpose of this survey is to test the satisfaction rate of our customers in the following five areas:

- 1. Was your email responded to within the expected timeframe of 72 hours?
- 2. Did the agent understand your query?
- 3. Did you receive the result you needed from the service interaction?
- 4. Were you satisfied with the agent's level of friendliness and professionalism?
- 5. Are you satisfied with the South African Pharmacy Council's service delivery overall?

The following figures depict the overall results from 04 January 2023 – 31 October 2023:

Figure 58: Survey question 1

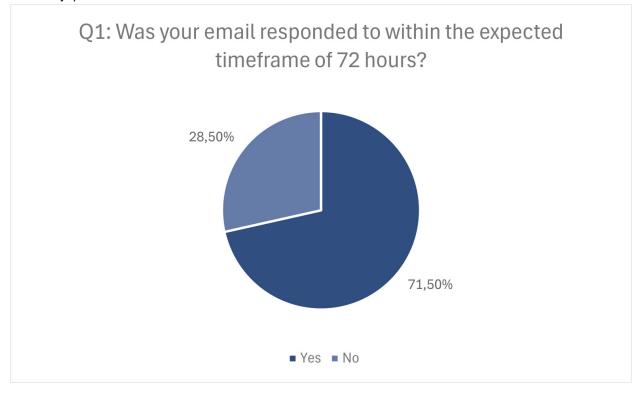


Figure 59: Survey question 2

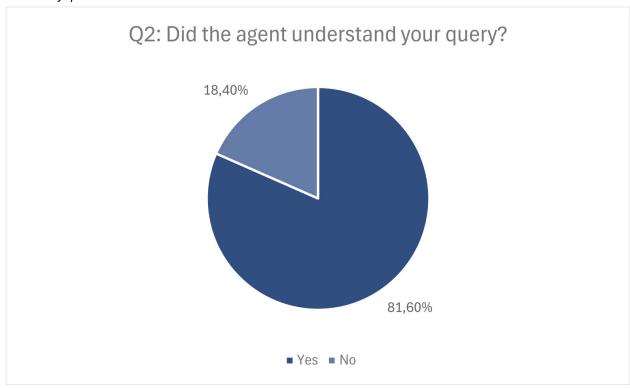


Figure 60: Survey question 3

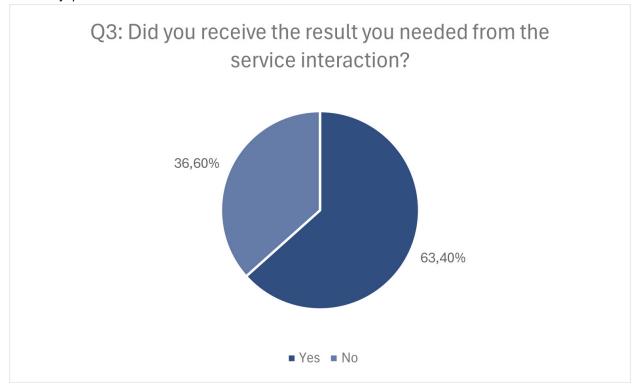


Figure 61: Survey question 4

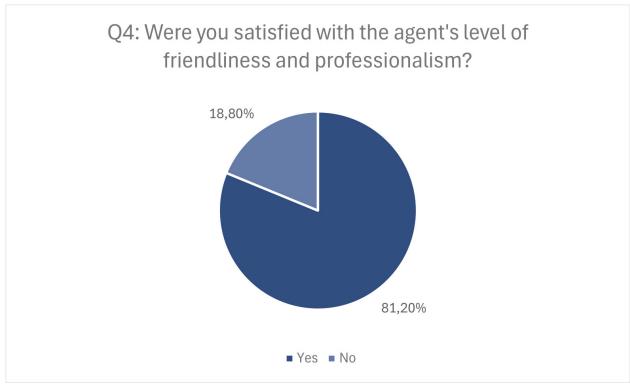


Figure 62: Survey question 5



To improve the monitoring of the interaction of stakeholders with Council, the development of an online service delivery survey to rate the quality of interaction with Council via telephone calls is underway.

In support of the profession, and to improve engagement with our primary stakeholders, being the registered persons, CSR has supported and coordinated the hosting of 11 workshops and masterclasses aimed at pharmacists, Pharmacist Interns, and tutors. CSR has also ensured that Council engages stakeholders at four industry conferences, which enabled increased compliance with CPD and pre-registration requirements for both pharmacists and interns. Furthermore, CSR coordinated the hosting of the 2023 multi-stakeholder driven Pharmacy Month Webinar and, as part of the 2023 Elections Communication Plan, supported the coordination of the 2023 Elections Webinar and bulk email and SMS communication throughout the election process.

Information sessions were held with BPharm first-year students to explain the processes involved in the registration of students with the SAPC, and to clarify any challenges that students may have in terms of the Council business activities. Two sessions were held on 19 April 2023 with the University of the Witwatersrand BPharm first-year students and on 01 June 2023 with Tshwane University of Technology students.

The CPD department conducted a number of webinars for the different categories of registered persons.

Table 11: Intern workshops

Month	CPD activity type	Number of ses- sions held
February	Intern/tutor work-	2
March	shop	1
June		1
June	CPD feedback	1
August	workshop	1

Table 12: Pharmacist workshops

Month	CPD activity type	Number of ses- sions held
April	CPD webinar/mas-	1
October	terclass	1
December		1

## PART F: FINANCIAL INFORMATION

During the year under review, Council ensured efficient and effective management of financial resources in line with best practice. Council had adequate financial resources to fund its operations and received an unqualified audit opinion.

## STRATEGIC FOCUS AREA

Financial Management focuses on three strategic objectives of Council:

- coordination of standing committees of Council;
- promotion of transparency to the profession and the public; and
- provision of managerial and administrative support for the sustainability of Council's operations.

#### COORDINATION OF STANDING COMMITTEES OF COUNCIL

## **Audit and Risk Committee**

The Audit and Risk Committee assisted Council in fulfilling its oversight responsibility by serving as an independent and objective party to monitor and strengthen the objectivity and credibility of financial reporting processes and internal control systems.

The committee appraised the internal and external assurance functions and provided a channel of communication between the auditors and executive management.

The committee consisted of six members appointed in terms of the Audit and Risk Committee Charter, four independent members drawn from outside the Council, and two councillors.

During the year, the committee held four meetings. The report of the committee is on page 63.

## **Pension Fund Board**

Council has a post-employment defined contribution benefit plan, established on 1 July 1977, operated as a separate legal entity in terms of the Pension Funds Act, 24 of 1956, the South African Pharmacy Council Pension (the Fund). The Pension Fund Board has oversight of operations of the Fund. At the time of the report, the trustees were in the final stages of the process of closing down the stand-alone fund and members had been transferred to the Sanlam Umbrella Fund so as to save on administration expenses. The Board meet 3 times during the financial year.

The benefits payable to employees, due to retirement and withdrawals from the pension, are contributions made by members to the pension, employer contributions and investment returns net of operational expenses. Council's contribution to the plan is charged to the income statement when incurred.

The actuarial risk that benefits will be less than expected and the investment risk that assets invested will be insufficient to meet expected benefits is borne by employees.

The Fund governance information during reporting period was as follows:

#### **Employer representatives**

Mr MD Phasha (Chairperson)

Mr TD Moralo

Mr VM Tlala

Ms MS Letsike (Alternate)

#### **Employee representatives**

Mr NJ Mashishi

Ms MM Mokoena

Mr D Nkuna

Ms F Ngoveni (Alternate)

## **Principal Officer**

Mr SG Ntsomi

#### Administrator

Sanlam Employee Benefits

#### **Valuator**

Ms L Langner

#### **Auditors:**

Geyser & Du Plessis

## **Adjudicating and Tender Committees**

The Tender and Procurement Policy provides framework to govern the procurement processes to ensure transparency, fairness, equity, value for money and sustainability of the supply chain management function.

In line with the policy the Adjudicating Committee and Tender Committee presided on purchases above the value of R50 000 and R500 000, respectively. During the year under review the whole financial management division, including procurement processes, was reviewed by independent auditors and controls were found to be adequate. The Adjudicating committee meet 4 times while the Tender committee meet 4 times during the current financial year.

## PROMOTION OF TRANSPARENCY TO THE PROFESSION AND THE GENERAL PUBLIC

## **Council Leadership**

The Council has a charter for councillors which in addition to the Pharmacy Act, 53 of 1974 stipulates its terms of reference to ensure that it leads ethically and effectively. Council holds itself to high standards of good governance in terms of the charter. Council members meet four times annually and are responsible for overall compliance of administering the Pharmacy Act, setting overall policy, preparing financial statements, monitoring executive management, and exercising control over the organisation's activities. The roles of the president and the chief executive officer are separate in accordance with good practice. The president holds a non-executive office.

## **Ethics and Compliance**

The Council is committed to an exemplary standard of business ethics and transparency in all its dealings with stakeholders. The Council is committed to govern compliance within applicable laws and including inter alia the King IV Code, and had adopted non-binding rules, codes and standards in a way that supports the organisation to be ethical, and a good corporate citizen. Both councillors and employees are bound by codes of conduct. Any conflict of interest during meetings is declared and managed. Gifts received, if accepted, are declared in line with good corporate governance. The Audit and Risk Committee provide oversight of the Council's governance of ethics. A monitoring report on Ethical and Legal Compliance was considered at every committee meeting.

#### RESPONSIBLE CORPORATE CITIZENSHIP

The Council ensures that the organisation is and is seen to be a responsible corporate citizen. Council has embarked on initiatives to protect the environment, promote sustainability, and ensure health and safety of employees and the public. To protect the environment agenda documents for meetings are largely in soft to reduce use of paper. Council has also adopted a rural school, and sources for corporate sponsorships for various needs of the school. Staff members take time to undertake community development work at the school.

## STRATEGY, PERFORMANCE AND REPORTING

The Council appreciates that the organisation's core purpose, its risks and opportunities, strategy, business model, performance and sustainable development are all inseparable elements of the value creation process. The Council strives to maintain a harmonious cohesion between these elements. The Council has a five-year strategic plan and is monitoring the performance thereon. The budget for the year under review and risk register was approved by Council. Budget performance and risk management reports were presented to Council and sub-committees, in line with good governance.

The Audit and Risk Committee had oversight of financial and risk management reporting. The Audit and Risk Committee carried its oversight responsibilities by ensuring risk based internal audits were planned and carried out. The full details of the work of the Audit and Risk Committee is included in the committee's report.

#### GOVERNING STRUCTURES AND DELEGATION

The Council serves as the focal point and custodian of corporate governance in the organisation. All committees to which Council has delegated responsibilities in terms of the Pharmacy Act and empowering Regulations have detailed Terms of Reference and report quarterly to the Council. Delegation to management is through the Registrar and is governed by a performance-based contracts of employment.

## Composition of the Council

The Council is comprised of 25 members who are elected or appointed from various sectors of pharmacy profession with an appropriate balance of knowledge, skills, experience, diversity, and independence for it to discharge its governance role and responsibilities objectively and effectively. Of the members, 9 are voted by the profession and 16 are appointed by the Minster of Health. The Council is supported by additional expertise in the form of the Audit and Risk Committee and Remuneration and Reimbursement Committee which are composed with a majority of independent experts.

## Committees of the Council

The Council ensures that its arrangements for delegation within its own structures allow effective discharge of its duties, promote independent judgement, assist with balance of power, and provide expert input. All committees to which Council has delegated responsibilities have terms of reference and report quarterly to the Council. Council's committees' reports are included separately within the Annual Report.

## Performance Evaluations of the Council

The Council ensures that the evaluation of its own performance and that of its committees, its chair, and its individual members, supports continued improvement in its performance and effectiveness. A self-evaluation of the performance of the Council and its committees is performed every second year. The results of such evaluations are considered, and actions taken where required.

## Appointments and delegation to management

The Council ensures that the appointment of, and delegation to, management contribute to role clarity and the effective exercise of authority and responsibilities. In addition to the legislative delegation to the Registrar in terms of the Pharmacy Act, the Council has delegated to the Registrar the authority to run the day-to-day operations within approved policy framework.

## **Risk Governance**

The Council governs risk in a way that supports the organisation in setting and achieving its strategic objectives. In line with Council Policy on risk management, risks are managed through the systematic analysis of actual and potential risks and the development and implementation of measures to counter those risks. Risk management is essentially made up of three stages – risk identification, risk analysis and risk control. Risk Management is included on page 63.

## Information and Technology Governance

The Council governs Information and Technology (IT) in a way that supports the organisation setting and achieving its strategic objectives. The Audit and Risk Committee assists the Council in carrying out its oversight responsibilities on IT. IT report is included on page 64.

#### **Remuneration Governance**

The Council ensures that the organisation remunerates fairly, responsibly, and transparently to promote the achievement of strategic objectives and positive outcomes in the short, medium, and long term. The Council, through the Remuneration Committee, oversee that the implementation and execution of the Remuneration Policy achieves the set objectives.

#### **Assurance**

The Council have adopted a combined assurance model that identifies the risk areas affecting the organisation and maps the level of assurance being provided by management, internal auditors, and external auditors. Assurance services are overseen by the Audit and Risk Committee. The details of such assurance for the year are included in the Audit and Risk Committee Report.

# PROVISION OF MANAGERIAL AND ADMINISTRATIVE SUPPORT FOR THE SUSTAINABILITY OF COUNCIL AS A GOING CONCERN

Table 13: Financial performance indicators

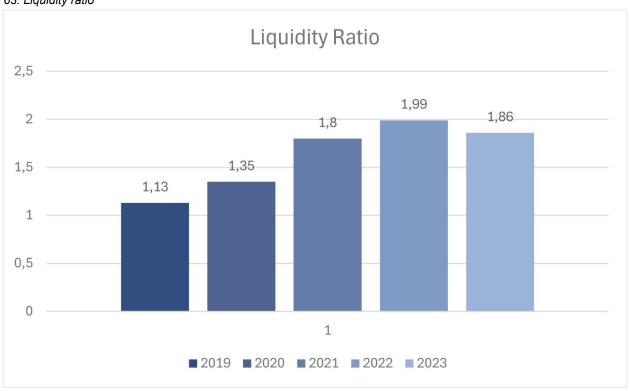
Description	2019	2020	2021	2022	2023
Current assets (R)	55 931 930	65 569 389	80 985 758	104 116 211	112 065 770
Current liabilities (R)	49 557 509	48 413 580	44 970 937	52 405 084	60 334 521
Liquidity ratio	1.13	1.35	1.80	1.99	1.86
Income (R)	98 404 568	107 159 411	114 339 054	123 912 573	136 009 172
Expenditure (R)	93 466 007	98 821 865	97 112 762	110 860 268	125 534 260
Surplus for the year (R)	4 938 561	8 337 546	17 226 292	13 052 304	10 468 582

## **Statement of Financial position**

Assets grew by over 13.60% mainly due to an increase in non-current assets and current assets. Non-current assets are made up of property, plant and equipment, investment property and intangible assets whose growth was attributed additions to buildings.

Total equity and liabilities grew in line with assets due to surplus for the year. The liquidity ratio decreased by 6.53%, from 1.99 in the prior year to 1.86 on 31 December 2023.

Figure 63: Liquidity ratio



## STATEMENT OF COMPREHENSIVE INCOME

Council is a not-for-profit organisation, and its funding is mainly membership fees from the pharmacy profession, such as annual fees, registration fees and restoration fees. Other sources of income are sponsorships/donations for specific once-off projects. Income grew by 9.76% mainly due to increase in interest received, registration and annual fees.

During the year under review expenditure increased by 13.24%. Surplus for the year has decreased by 24,68%, from R R13 052 304 to R10 468 582 mainly due increase in expenditure.

Figure 64: Surplus/(Deficit)

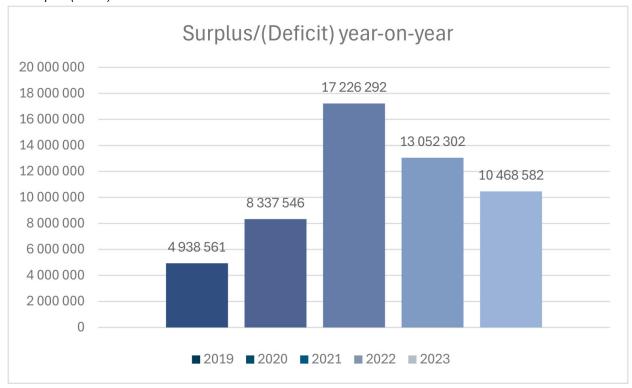


Table 14: Surplus/(Deficit)

2019	2020	2021	2022	2023
4 938	8 337	7 546 17 226 29	13 052 302	10 468 582

## PLANNING AND BUDGETARY CONTROL

Council's budget is guided by the five-year strategic plan. The budget for the year under review was approved at the 18/19 October 2023 Council meeting and EXCO meeting on the 29 November 2023. Budget performance reports were presented to management, the Executive Committee, the Audit and Risk Committee and Council. At various council committee meetings respective budget performance reports formed part of the agenda.

## **SUPPLY CHAIN MANAGEMENT**

Council has adopted a proactive stance towards black economic empowerment. The procurement policies of Council are in support of government policy for the general good in addressing past imbalances. The list of prospective suppliers was updated. The adjudicating committee and tender committee presided on purchases above the value of R50 000 and R500 000, respectively. During the year under review the whole financial management division, including procurement processes, was reviewed by independent auditors and controls were found to be adequate.

Financial Statements for the year ended 31 December 2023



These financial statements were prepared by: Sandiso Ntsomi CA (SA) Chief Financial Officer

These financial statements have been audited in compliance with the applicable requirements of the Pharmacy Act 53 of 1974.

Issued 15 May 2024

Annual Financial Statements for the year ended 31 December 2023

#### **General Information**

Country of Incorporation and Domicile South Africa

Nature of Business and Principal Activities Pharmacy industry regulation governed by the Pharmacy

Act, 53 of 1974

Registered Office 591 Belvedere Street

Arcadia Pretoria 0083

Business Address 591 Belvedere Street

Arcadia Pretoria 0083

Postal Address Private Bag X40040

Arcadia Pretoria 0007

Bankers Standard Bank of South Africa

Investec Bank Limited ABSA Bank Limited

Independent Auditors

MNB Chartered Accountants Incorporation

Chartered Accountants (SA)

Registered Auditor

**Level of assurance** These financial statements have been audited in

compliance with the applicable requirements of the Pharmacy Act 53 of 1974 and IFRS for SMEs.

Preparer The financial statements were internally compiled by:

Sandiso Ntsomi CA (SA) Chief Financial Officer

Annual Financial Statements for the year ended 31 December 2023

## Index

The reports and statements set out below comprise the annual financial statements presented to the shareholder	s:
General Information	1
Councillors' Responsibilities and Approval	2
Independent Auditor's Report	3-5
Directors' Report	6-7
Statement of Financial Position	8
Statement of Comprehensive Income	9
Statement of Changes in Equity	10
Statement of Cash Flows	11
Accounting Policies	12 -17
Notes to the Financial Statements	18- 29
The supplementary information presented does not form part of the annual financial statements and is unaudited:	
Detailed Income Statement	30- 31

Annual Financial Statements for the year ended 31 December 2023

#### Councillors' Responsibilities and Approval

The councillors are required by the Pharmacy Act of 1974 to maintain adequate accounting records and are responsible for the content and integrity of the annual financial statements and related financial information included in this report. It is their responsibility to ensure that the annual financial statements satisfy the financial reporting standards as to form and content and present fairly the statement of financial position, results of operations and business of the council, and explain the transactions and financial position of the business of the council at the end of the financial year. The annual financial statements are based upon appropriate accounting policies consistently applied throughout the entity and supported by reasonable and prudent judgements and estimates.

The councillors acknowledge that they are ultimately responsible for the system of internal financial control established by the entity and place considerable importance on maintaining a strong control environment. To enable the councillors to meet these responsibilities, the council sets standards for internal control aimed at reducing the risk of error or loss in a cost effective manner. The standards include the proper delegation of responsibilities within a clearly defined framework, effective accounting procedures and adequate segregation of duties to ensure an acceptable level of risk. These controls are monitored throughout the entity and all employees are required to maintain the highest ethical standards in ensuring the entity's business is conducted in a manner that in all reasonable circumstances is above reproach.

The focus of risk management in the entity is on identifying, assessing, managing and monitoring all known forms of risk across the entity. While operating risk cannot be fully eliminated, the entity endeavours to minimise it by ensuring that appropriate infrastructure, controls, systems and ethical behaviour are applied and managed within predetermined procedures and constraints.

The councillors are of the opinion, based on the information and explanations given by management that the system of internal control provides reasonable assurance that the financial records may be relied on for the preparation of the annual financial statements. However, any system of internal financial control can provide only reasonable, and not absolute, assurance against material misstatement or loss. The going-concern basis has been adopted in preparing the annual financial statements. Based on forecasts and available cash resources the councillors have no reason to believe that the entity will not be a going concern in the foreseeable future. The annual financial statements support the viability of the entity.

The annual financial statements have been audited by the independent auditing firm, MNB Chartered Accountants Incorporation, who have been given unrestricted access to all financial records and related data, including minutes of all meetings of the Council and committees of the Council. The Councillors believe that all representations made to the independent auditor during the audit were valid and appropriate. The external auditors' unqualified audit report is presented on pages 3 to 5.

The annual financial statements as set out on pages 8 to 29 were approved by the Council on 15 May 2024 and were signed on their behalf by:

Ms. TM Shivambu (Treasurer)

Mr. MD Phasha (President)

Mr. VM Tlala (Registrar)



**MNB Chartered Accountants Inc.** 

38 Boerneef Street Vorna Valley Midrand 1686

Tel: +27 11 025 9908 Fax: +27 86 657 6349 Email: info@mnbca.co.za Web: www.mnbca.co.za

#### Independent Auditor's Report

To the Council of South African Pharmacy Council

Report on the Audit of the annual financial statements.

## Opinion

We have audited the financial statements of South African Pharmacy Council set out on pages 8 to 31 which comprise of the statement of financial position as at 31 December 2023, and the statement of comprehensive income, the statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the annual financial statements present fairly, in all material respects, the financial position of South African Pharmacy Council as at 31 December 2023, and its financial performance and cash flows for the year then ended in accordance with International Financial Reporting Standard for Small and Medium-sized Entities and the requirements of the Pharmacy Act 53 of 1974.

## Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (ISAs). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the company in accordance with the Independent Regulatory Board for Auditors' Code of Professional Conduct for Registered Auditors (IRBA Code) and other independence requirements applicable to performing audits of financial statements in South Africa. We have fulfilled our other ethical responsibilities in accordance with the IRBA Code and in accordance with other ethical requirements applicable to performing audits in South Africa. The IRBA Code is consistent with the corresponding sections of the International Ethics Standards Board for Accountants' International Code of Ethics for Professional Accountants (including International Independence Standards). We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

## Other Information

The Councillors are responsible for the other information. The other information comprises the information included in the document titled "South African Pharmacy Council Annual Financial Statements for the year ended 31 December 2023", which includes the Councillor's Report and Detailed Income Statement. The other information does not include the financial statements and our auditor's report thereon.

Audit Tax Accounting Consulting

Director: RG Ntuli CA(SA), RA



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Our opinion on the financial statements does not cover the other information and we do not express an audit opinion or any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements, or our knowledge obtained in the audit, or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

#### Responsibilities of the Councillors for the financial statements

The councillors is responsible for the preparation and fair presentation of the financial statements in accordance with International Financial Reporting Standards for Small and Medium-sized Entities and the requirements of the Pharmacy Act 53 of 1974 of South Africa, and for such internal control as the councillors determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the councillors are responsible for assessing the Organisation's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the councillor either intend to liquidate the organisation or to cease operations, or have no realistic alternative but to do so.

#### Auditor's Responsibilities for the Audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with ISAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

Identify and assess the risks of material misstatement of the financial statements, whether
due to fraud or error, design and perform audit procedures responsive to those risks, and
obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The
risk of not detecting a material misstatement resulting from fraud is higher than for one

Audit	Tax	Accounting	Consulting

Director: RG Ntuli CA(SA), RA



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resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

- Obtain an understanding of internal control relevant to the audit in order to design audit
  procedures that are appropriate in the circumstances, but not for the purpose of expressing
  an opinion on the effectiveness of the company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.
- Conclude on the appropriateness of the director' use of the going concern basis of accounting and based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the company to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including
  the disclosures, and whether the financial statements represent the underlying transactions
  and events in a manner that achieves fair presentation.

We communicated with the councillors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

MNB Chartered Accountants Inc.

Chartered Accountant (SA), Registered Auditor Engagement Partner: Rivalani Glen Ntuli

MNB Chartered Accountants Inc

Engagement Partr 03 June 2024 38 Boerneef Street Vorna Valley Midrand 1686

Audit Tax Accounting Consulting

Director: RG Ntuli CA(SA), RA

Annual Financial Statements for the year ended 31 December 2023

#### Councillors' Report

The councillors present their report for the year ended 31 December 2023.

#### 1. Review of financial results and activities

#### Main business and operations

The principal activity of the entity is pharmacy industry regulation governed by the Pharmacy Act, 53 of 1974 and there were no major changes herein during the year.

The operating results and statement of financial position of the company are fully set out in the attached financial statements and do not in our opinion require any further comment.

Profit from continuing operations before finance costs and investment revenue amounted to R2 102 710 (2022: R8 309 519) for the current financial period. Financing costs for the period amounted to R6 330 (2022: R6 192) and Investment revenue amounted to R8 372 196 (2021: R4 748 975)

The council declared a net surplus for the year of RIO 468 576 (2022: R13 052 302)

#### 2. Going concern

The annual financial statements have been prepared on the basis of accounting policies applicable to a going concern. This basis presumes that funds will be available to finance future operations and that the realisation of assets and settlement of liabilities, contingent obligations and commitments will occur in the ordinary course of business.

The Councillors believe that the company has adequate financial resources to continue in operation for the foreseeable future and accordingly the annual financial statements have been prepared on a going concern basis.

#### 3. Events after reporting date

All events subsequent to the date of the annual financial statements and for which the applicable financial reporting framework require adjustment or disclosure have been adjusted or disclosed.

The councillors are not aware of any matter or circumstance arising since the end of the financial year to the date of this report that could have a material effect on the financial position of the company.

#### 4. Councillors' interest in contracts

To our knowledge none of the councillors or prescribed officers had any interest in contracts entered into during the year under review.

Annual Financial Statements for the year ended 31 December 2023

## Councillors' Report

#### 5. Councillors

The Council consists of non-executives and are South African citizens. The councillors of the entity during the year and to the date of this report are as follows:

Councillors	Office
Mr Mogologolo David Phasha	President
Ms Boitumelo Nelly Molongoana	Vice-President
Mr Tshegofatso Daniel Moralo	Treasurer
Ms Kahdija Jamaloodien	Representative from NDoH
Prof Yahya Essop Choonara	Education Committee Chairperson
Ms Mmapaseka Steve Letsike	Health Committee Chairperson
Mr Johannes Stephanus du Tait	Committee of Preliminary Investigation Chairperson
Dr Margaritha Johanna Eksteen	Committee of Informal Investigation Chairperson
Ms Jacqueline Ann Maimin	Practise Committee Chairperson
Mr Ayanda Saka	CPD Committee Chairperson
Dr Moliehi Matlala	Pre-Registrations Committee Chairperson
Ms Helen Catherine Hayes	
Dr (Adv) Nazreen Shaik-Peremanov	
Ms Josephine Herbert	
Prof Sarel Francois Malan	
Mr Pieter Johannes Kilian	
Ms Moitsoadi Sarah Mokgatha	
Prof Natalie Schellack	
Ms Tlou Mavis Shivambu	
Mr Mosioua Shadrack Shuping	
Prof Ilse Truter	
Ms Christina Aletta Venter	
Dr Petrus de Wet Wolmarans	
Ms Pakama Dlwati	

## 6. Independent Auditors

 $\label{lem:mnb} \mbox{MNB Chartered Accountants Incorporation were the independent auditors for the year under review.}$ 

# **South African Pharmacy Council**Financial Statements for the year ended 31 December 2023

## Statement of Financial Position

	Note(s)	2023	2022
Assets			
Non-Current Assets			
Property, plant and equipment	2	40,015,582	24,674,071
Investment property	3		4,200,000
Intangible assets	4	1,578,312	2,274,824
		41,593,894	31,148,895
Current Assets			
Trade and other receivables	5	23,137,359	18,768,098
Cash and cash equivalents	6	88,928,411	85,348,113
		112,065,770	104,116,211
Total Assets		153,659,664	135,265,106
Equity and Liabilities			
Equity			
Retained earnings		93,320,844	82,852,262
Non-Current Liabilities			
Finance lease liabilities	7	4,299	7,760
Current Liabilities			
Trade and other payables	8	60,308,549	52,358,697
Finance lease liabilities	7	25,972	46,387
I mance rease habilities	<i>I</i> -	60,334,521	52,405,084
Total liablilties		60,338,820	52,412,844
Total Equity and Liabilities		153,659,664	135,265,106
Total Equity and Elabilities		100,000,004	155,205,100

Financial Statements for the year ended 31 December 2023

## Statement of Comprehensive Income

	Note(s)	2023	2022
Revenue	9	127,440,760	118,817,598
Other income	10	196,216	346,000
Operating expenses		(125,534,260)	(110,854,077)
Profit from continuing operations	11	2,102,716	8,309,521
Investment revenue	12	8,372,196	4,748,975
Finance costs	13	(6,330)	(6,192)
Surplus for the year		10,468,582	13,052,304
Other comprehensive income			
Net surplus/ {deficit) for the year		10,468,582	13,052,304

Financial Statements for the year ended 31 December 2023

## Statement of Changes in Equity

	Note(s)	Retained earnings	Total equity
Balance at 1 January 2022		69,799,958	69,799,958
Surplus/ (deficit) for the year		13,052,304	13,052,304
Other comprehensive income			
Net surplus/ (deficit) for the year		13,052,304	13,052,304
Balance at 31 December 2022		82,852,262	82,852,262
Surplus/ (deficit) for the year  Other comprehensive income		10,468,582	10,468,582
Net surplus/ (deficit) for the year		10,468,582	10,468,582
Balance at 31 December 2023		93,320,844	93,320,844

Financial Statements for the year ended 31 December 2023

## Statement of Cash Flows

	Note(s)	2023	2022
Cash flows from operating activities			
Cash receipts from customers		127,440,760	118,817,598
Cash payments to suppliers and employees		(116,323,136)	(96,518,924)
Cash generated from operations	14	11,117,624	22,298,674
Investment revenue	12	8,372,196	4,748,975
Finance costs	13	(6,330)	(6,192)
Net cash flows from operating activities		19,483,490	27,041,457
Cash flows used in investing activities			
Investment property transferred	3	4,200,000	
Property, plant and equipment acquired	2	(19,662,889)	(2,457,693)
Intangible assets acquired	4	(435,010)	(573,159)
Proceeds on disposals of property, plant and equipment		57,339	50,436
Net cash flows used in investing activities		(15,840,560)	(2,980,416)
Cook floor and in the section and built			
Cash flows used in financing activities		(02,022)	(04.540)
Finance lease payments		(62,632)	(61,540)
Net cash flows used in financing activities		(62,632)	(61,540)
Net increase in cash and cash equivalents		3,580,298	23,999,501
Cash and cash equivalents at beginning of the year		85,348,113	61,348,612
Cash and cash equivalents at end of the year	6	88,928,411	85,348,113

Financial Statements for the year ended 31 December 2023

## **Accounting Policies**

#### 1. Presentation of financial statements

The financial statements have been prepared in accordance with the International Financial Reporting Standard for Small and Medium-sized Entities, and the Pharmacy Act 53 of 1974. The financial statements have been prepared on the historical cost basis, and incorporate the principal accounting policies set out below. They are presented in South African Rands.

These accounting policies are consistent with the previous period.

#### 1.1 Significant judgements and sources of estimation uncertainty

In preparing the financial statements, management is required to make judgements, estimates and assumptions that affect the amounts represented in the financial statements and related disclosures. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results in the future could differ from these estimates which may be material to the financial statements.

#### Critical judgements in applying accounting policies

The following are the critical judgements, apart from those involving estimations, that management have made in the process of applying the council accounting policies and that have the most significant effect on the amounts recognised in the financial statements.

#### Lease classification

The council is party to leasing arrangements, as a lessee. The treatment of leasing transactions in the financial statements is mainly determined by whether the lease is considered to be an operating lease or a finance lease. In making this assessment, management considers the substance of the lease, as well as the legal form, and makes a judgement about whether substantially all of the risks and rewards of ownership are transferred.

#### Key sources of estimation uncertainty

The following are the key assumptions concerning the future, and other key sources of estimation uncertainty at the end of the reporting period, that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year.

#### Useful lives of property, plant and equipment

The council reviews the estimated useful lives of property, plant and equipment when changing circumstances indicate that they may have changed since the most recent reporting date.

#### Impairment testing

The council reviews and tests the carrying value of property, plant and equipment and intangible assets when events or changes in circumstances suggest that the carrying amount may not be recoverable. When such indicators exist, management determine the recoverable amount by performing value in use and fair value calculations. These calculations require the use of estimates and assumptions. When it is not possible to determine the recoverable amount for an individual asset, management assesses the recoverable amount for the cash generating unit to which the asset belongs.

Financial Statements for the year ended 31 December 2023

#### **Accounting Policies**

#### Presentation offinancial statements continued...

#### Investment property valuation

The council reviews the fair value of investment property at each reporting date with impairments or any changes in fair value being recognised in profit or loss. The review of fair value requires the use of estimates and assumptions. The fair value of investment property is determined using a valuation expert based on the market value of comparable properties.

#### **Provisions**

Provisions are inherently based on assumptions and estimates using the best information available.

#### Other estimates made

The council makes estimates for:

- the calculation of finance lease present values; and
- the determination of useful lives and residual values of items of property plant and equipment.

#### Trade receivables, Held to maturity investments and Loans and receivables

The Council assesses its trade receivables, held to maturity investments and loans and receivables for impairment at the end of each reporting period. In determining whether an impairment loss should be recorded in profit or loss, the Council makes judgements as to whether there is observable data indicating a measurable decrease in the estimated future cash flows from a financial asset.

The impairment for trade receivables, held to maturity investments and loans and receivables is calculated on a portfolio basis, based on historical loss ratios, adjusted for national and industry-specific economic conditions and other indicators present at the reporting date that correlate with defaults on the portfolio. These annual loss ratios are applied to loan balances in the portfolio and scaled to the estimated loss emergence period.

#### 1.2 Property, plant and equipment

Property, plant and equipment are tangible items that are held for use in the production or supply of goods or services, or for rental to others or for administrative purposes; and are expected to be used during more than one period.

Property, plant and equipment is carried at cost less accumulated depreciation and accumulated impairment losses. Cost include costs incurred initially to acquire or construct an item of property, plant and equipment and costs incurred subsequently to add to, replace part of, or service it. If a replacement cost is recognised in the carrying amount of an item of property, plant and equipment, the carrying amount of the replaced part is derecognised.

Leased asset is amortized/depreciated from the lease commencement date (the date the lessee begins to make payments) to the end of the lease's term. In some cases, it may be from the commencement date to the end of the useful life of the asset.

Depreciation is provided using the straight-line method to write down the cost, less estimated residual value over the useful life of the property, plant and equipment. Depreciation commences when the asset is ready for use for it's intended and ceases when the asset is disposed or retired. All assets are depreciated to a nil residual value. Depreciation rates are as follows:

Financial Statements for the year ended 31 December 2023

#### **Accounting Policies**

#### Presentation of financial statements continued ...

Item	Depreciation method	Average useful life
Land	Straight line	Indefinite
Buildings	Straight line	20 years
Motor vehicles	Straight line	4 years
Furniture and fittings	Straight line	10 years
Office equipment	Straight line	5 years
IT equipment	Straight line	3 years
Cell phones & tablets (included in office equipment)	Straight line	2 years
Land is not depreciated as it is deemed to have an indefinite life.		

The carrying values of property and equipment are reviewed for impairment when events or changes in circumstances indicate the carrying value may not be recovered. If any such indication exists and where the carrying values exceed the estimated recoverable amount, the assets or cash generating units are written down to their recoverable amount. The residual values and useful lives of each asset are reviewed at each financial period.

Gains and losses on disposals are determined by comparing the proceeds with the carrying amount and are recognised in profit or loss in the period.

#### 1.3 Investment property

Investment property is property (land or a building, or part of a building, or both) held by the council to earn rentals or for capital appreciation or both, rather than for use in the production or supply of goods or services or for administrative purposes, or sale in the ordinary course of business.

Investment property is initially measured at its cost. After initial measurement, investment property whose fair value can be measured reliably without undue cost or effort is measured at fair value at each reporting date with changes in fair value recognised in profit or loss. Where council is not able to apply fair value, it classifies the investment property as property, plant and equipment and measures and presents it as such.

#### 1.4 Intangible assets

An intangible asset is an identifiable non-monetary asset without physical substance. Intangible assets are initially recognised at cost.

All research and development costs are recognised as an expense unless they form part of the cost of another asset that meets the recognition criteria.

The amortisation period and the amortisation method for intangible assets are reviewed at each reporting date if there are indicators present that there is a change from the previous estimate. Amortisation is provided to write down the intangible assets, on a straight-line basis, as follows:

Item	Useful life
Computer software	2 to 5 years

Financial Statements for the year ended 31 December 2023

## **Accounting Policies**

## Presentation of financial statements continued ...

### 1.5 Financial instruments

### Initial measurement

The council classifies financial instruments, or their component parts, on initial recognition as a financial asset, a financial liability or an equity instrument in accordance with the substance of the contractual arrangement. At initial recognition, council measures a financial asset or a financial liability at its fair value plus or minus, in the case of a financial asset or a financial liability not at fair value through profit or loss, transaction costs that are directly attributable to the acquisition or issue of the financial asset or the financial liability.

## Financial instruments at amortised cost

These include loans, trade receivables and trade payables. Those debt instruments which meet the criteria in section 11.8(b) of the standard, are subsequently measured at amortised cost using the effective interest method. Debt instruments which are classified as current assets or current liabilities are measured at the undiscounted amount of the cash expected to be received or paid, unless the arrangement effectively constitutes a financing transaction.

At each reporting date, the carrying amounts of assets held in this category are reviewed to determine whether there is any objective evidence of impairment. If there is objective evidence, the recoverable amount is estimated and compared with the carrying amount. If the estimated recoverable amount is lower, the carrying amount is reduced to its estimated recoverable amount, and an impairment loss is recognised immediately in profit or loss.

## Cash and cash equivalents

Cash and cash equivalents comprise cash on hand and demand deposits, and other short-term highly liquid investments that are readily convertible to a known amount of cash and are subject to an insignificant risk of changes in value. These are initially and subsequently recorded at fair value.

## 1.6 Leases

A lease is classified as a finance lease if it transfers substantially all the risks and rewards incidental to ownership to the lessee. A lease is classified as an operating lease if it does not transfer substantially all the risks and rewards incidental to ownership.

## Finance leases - lessee

Finance leases are recognised as assets and liabilities in the statement of financial position at amounts equal to the fair value of the leased property or, if lower, the present value of the minimum lease payments. The corresponding liability to the lessor is included in the statement of financial position as a finance lease obligation.

The lease payments are apportioned between the finance charge and reduction of the outstanding liability. The finance charge is allocated to each period during the lease term so as to produce a constant periodic rate of on the remaining balance of the liability.

## Operating leases - lessee

Operating lease payments are recognised as an expense on a straight-line basis over the lease term except in cases where another systematic basis is representative of the time pattern of the benefit from the leased asset, even if the receipt of payments is not on that basis, or where the payments are structured to increase in line with expected general inflation.

Financial Statements for the year ended 31 December 2023

## **Accounting Policies**

Presentation of financial statements continued ...

## 1.7 Impairment of assets

The council assesses at each reporting date whether there is any indication that an asset may be impaired. If there is any indication that an asset may be impaired, the recoverable amount is estimated for the individual asset. If it is not possible to estimate the recoverable amount of the individual asset, the recoverable amount of the cash-generating unit to which the asset belongs is determined.

If an impairment loss subsequently reverses, the carrying amount of the asset (or group of related assets) is increased to the revised estimate of its recoverable amount, but not in excess of the amount that would have been determined had no impairment loss been recognised for the asset (or group of assets) in prior years. A reversal of impairment is recognised immediately in profit or loss.

## 1.8 Employee benefits

Council operates a defined contribution plan, the assets of which are held in a separate trustee-administered umbrella fund, the Sanlam Umbrella Pension Fund (the fund).

Under defined contribution plan the council's legal or constructive obligation is limited to the amount that it agrees to contribute to the fund. Consequently, the actuarial risk that benefits will be less than expected and the investment risk that assets invested will be insufficient to meet expected benefits is borne by employees.

The benefits payable by the fund in the future, due to retirements and withdrawals from the fund, are contributions by members to the fund together with fund interest at a rate determined by the valuator with the consent of the trustees. The rate is so determined that the value of total benefits of the fund shall not exceed the value of the total assets of the fund. Council's contribution to the plan is charged to the income statement when incurred.

## 1.9 Provisions and contingencies

Provisions are measured at the present value of the amount expected to be required to settle the obligation using a pre-tax rate that reflects current market assessments of the time value of money and the risks specific to the obligation. The increase in the provision due to the passage of time is recognised as interest expense.

Provisions are not recognised for future operating losses. Provisions are recognised when:

- the company has an obligation at the reporting date as result of a past event;
- it is probable that the company will be required to transfer economic benefits in settlement; and
- the amount of the obligation can be estimated reliably.

Contingent assets and contingent liabilities are not recognised but disclosed, unless the possibility of an outflow of economic resources is remote.

## 1.10 Revenue

Revenue is measured at the fair value of the consideration received or receivable and represents the amounts receivable for goods and services provided in the normal course of business, net of trade discounts and volume rebates, and value added tax.

The council derives revenue from it's registered members in the following categories:

Annual fees

Evaluations, re-inspections and fines

Examinations

Registration fees.

Financial Statements for the year ended 31 December 2023

## **Accounting Policies**

## Presentation of financial statements continued ...

### Interest

Interest is recognised, in profit or loss, using the effective interest rate method.

### Rental Income

Rental income from operating leases (net of any commission or incentives given to the lessees) is recognised on a straight-line basis over the lease term.

## 1.11 Equity

An equity instrument is any contract that evidences a residual interest in the assets of an entity after deducting all of its liabilities.

## 1.12 Related Parties

A related party is a person or an entity with the ability to control or jointly control the other party, or exercise significant influence over the other party, or vice versa, or an entity that is subject to common control, or joint control.

Management are those persons responsible for planning, directing and controlling the activities of the Group, including those charged with the governance of the entity in accordance with legislation, in instances where they are required to perform such functions.

The entity is exempt from disclosure requirements in relation to related party transactions if that transaction occurs within normal supplier and/or client/recipient relationships on terms and conditions no more or less favourable than those which it is reasonable to expect the entity to have adopted if dealing with that individual entity or person in the same circumstances and terms and conditions are within the normal operating parameters established by that reporting entity's legal mandate.

Where the entity is exempt from the disclosures in accordance with the above, the entity discloses narrative information about the nature of the transactions and the related outstanding balances, to enable users of the Annual Financial Statements to understand the effect of related party transactions on its Annual Financial Statements.

## 1.13 Other income

Other income is recognised when it is probable that future economic benefits will flow to the entity and when the amount can be measured reliably. Other income consists of insurance proceeds, training refunds, profit on sale of assets and other income.

Financial Statements for the year ended 31 December 2023

## Notes to the Annual Financial Statements

					2023	2022
z. Property, plant and equipment		2003		6606		
		Accumulated	2023 Carrying		Accumulated	2022 Carrying
	Cost	Depreciation	Value	Cost	Depreciation	Value
Land	12,349,275		12,349,275	8,600,000		8,600,000
Buildings	30,818,624	(11,500,685)	19,317,939	19,115,223	(10,029,423)	9,085,800
Motor vehicles	907,532	(794,646)	112,886	752,893	(598,248)	154,645
Furniture and fittings	5,843,341	(3,149,693)	2,693,648	4,570,541	(2,629,778)	1,940,763
Office equipment	4,641,957	(3,387,593)	1,254,364	3,965,167	(2,750,912)	1,214,255
IT equipment	11,966,358	(7,678,888)	4,287,470	9, 163, 191	(5,484,583)	3,678,608
Total	66,527,087	(26,511,505)	40,015,582	46,167,015	(21,492,944)	24,674,071

Financial Statements for the year ended 31 December 2023

## Notes to the Annual Financial Statements

					2023	2022
Property, plant and equipment continued						
Reconciliation of property, plant and equipment - 2023						
	Opening					
	Balance	Transfer	Additions	Disposals	Depreciation	Total
Land	8,600,000	3,749,275				12,349,275
Buildings	9,085,800	450,725	10,848,082		(1,066,668)	19,317,939
Motor vehicles	154,645				(41,759)	112,886
Furniture and fittings	1,940,763		1,135,403	(909'6)	(372,912)	2,693,648
Office equipment	1,214,255		630,665	(70,691)	(519,865)	1,254,364
IT equipment	3,678,608		2,848,739	(234,141)	(2,005,736)	4,287,470
Total	24,674,071	4,200,000	15,462,889	(314,438)	(4,006,940)	40,015,582
Reconciliation of property, plant and equipment - 2022						
	Opening					
	balance	Reclassification	Additions	Disposals	Depreciation	Total
Land	8,600,000					8,600,000
Buildings	9,789,210		155,560		(858,970)	9,085,800
Motor vehicles	231,965				(77,320)	154,645
Furniture and fittings	1,873,519		443,405	(1,511)	(374,650)	1,940,763
Office equipment	1,328,089	314,622	410,454	(5,635)	(833,275)	1,214,255
IT equipment	3,986,020		1,448,274	(6)	(1,755,677)	3,678,608
Total	25,808,803	314,622	2,457,693	(7,155)	(3,899,892)	24,674,071

The Land and Buildings, Portion 1 of ERF 34 held as investment property was transferred into Property, Plant and Equipment due to change of use (owner occupation) at fair value and effective on the 1 January 2023.

## Net carrying amounts of leased assets

52,057 26,043 Office equipment

Financial Statements for the year ended 31 December 2023

## Notes to the Annual Financial Statements

		ı
	2022	
	2023	
2000/2004/2004/2000 200		

## Property, plant and equipment continued...

## Details of properties

Land and buildings, Erf 1470, situated at 591 Belvedere Street, Arcadia, Pretoria in the extent of 1708 (one thousand seven hundred and eight) square meters.

Land and buildings, Erf/HAT 30, situated at 1019 Francis Baard Street, Hatfield, Pretoria in the extent of 2552 (two thousand five hundred and fifty two) square meters.

Land and buildings, Portion 1 of Erf 35, situated at 1020 Arcadia Street, Haffield, Pretoria in the extent of 1931 (one thousand nine hundred and thirty one) square meters.

## 3. Investment property

		2023		2022	2	
	Cost	Decrease in Value	Fair Value	Cost	Decrease in Value	Fair Value
Investment properties				6,833,322	(2,633,322)	4,200,000
Reconciliation of investment property - 2023		ö	Opening Balance	Transfer	Fair Value	Total
Investment properties			4,200,000	4,200,000 (4,200,000}	Adjustiment	

Financial Statements for the year ended 31 December 2023

## Notes to the Annual Financial Statements

			2023	2022
Investment property continued				
Reconciliation of investment property - 2022	Opening Balance	Additions	Fair Value Adjustment	Total
Investment properties	5,000,000		(800,000)	4,200,000

## Details of investment property

Land and buildings, Portion 1 of Erf 35, situated at 1020 Arcadia Street, Hatfield, Pretoria in the extent of 1931 (one thousand nine hundred and thirty one) square meters. The property is used as communal for students and is earmarked in the long term for office development. The investment property fair value was evaluated by Van Zyl Professional Associated Property Valuers. The significant assumptions used by the valuer is the highest and best use of the property which was considered to be re-development for the purposes of flats or offices and comparable market value within the area. The Land and Buildings, Portion 1 of ERF 34 held as investment property was transferred into Property, Plant and Equipment due to change of use (owner occupation) at fair value and effective on the 1 January 2023.

## 4. Intangible assets

		2023		2022	2	
	Cost	Cost Accumulated	ed Carrying Value	Cost	Accumulated	Carrying
		Depreciation			Depreciation	Value
Computer software	8,917,913	(7,339,601)	1,578,312	7,550,221	(5,275,397)	2,274,824

Financial Statements for the year ended 31 December 2023

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				2023	2022
Intangible assets continued					
Reconciliation of intangible assets - 2023					
	Opening	Disposal	Additions	Depreciation	Carrying
Computer software 2,	2,274,824	(79,304)	435,010	(1,052,218)	value 1,578,312
Reconciliation of intandible assets - 2022					
	Opening	Reclassification	Additions	Depreciation	Carrying
	Balance			•	Value
Computer software 2,	2,978,621	(314,622)	573,159	(962,334)	2,274,824
F. Trade and other receivables					
o. Itade alla Otter receivables					
Trade receivables				21,783,676	17,471,034
Deposits				95,646	95,646
Value Added Tax (VAT)				498,273	445,423
Other receivables				759,764	755,995
				23,137,359	18,768,098

Included in the trade receivables amount is a provision for doubtful debts amounting to R20 618 509 (2022: R16 714 509).

Financial Statements for the year ended 31 December 2023

## Notes to the Annual Financial Statements

	2023	2022
6. Cash and cash equivalents		
Cash and cash equivalents consist of:		
Cash on hand	7,279	6,708
Bank balances	22,995,689	37,876,268
Short-term deposits	65,925,443	47,465,137
	88,928,411	85,348,113

Details of bank facilities held by the Council are presented below and have an expiry date of 17 December 2024:

- Overdraft amounting to RI 500 000 for unforeseen emergencies;
- Guarantees by Bank amounting to RS0 000;
- Corporate Credit Card, Travel card and/or Garage Card facility by Bank amounting to RSS0 000;
- · Fleet management services amounting to RIS 000; and
- Electronic Funds Transfer Services of R6 000 000 and RI 150 000 for Salary Run and Debit Runs respectively.

## 7. Finance lease liabilities

Minimum lease payment which fall due		
Within one year	25,972	46,387
In second to fifth year inclusive	4,299	7,760
	30,271	54,147
Present value of minimum lease payments	30,271	54,147
Non-current liabilities	4,299	7,760
Current liabilities	25,972	46,387
	30,271	54,147

Financial Statements for the year ended 31 December 2023

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	2023	2022
8. Trade and other payables		
Trade payables	1,541,096	1,501,772
Income received in advance	50,775,297	46,761,592
Employee leave days	3,551,529	2,923,904
Other payables	4,440,627	1,171,429
	60,308,549	52,358,697

Other payables consists of accruals and payroll related debt.

## 9. Revenue

79,307,057	13,412,592	349,468	25,748,481	118,817,598
86,247,317	13,863,492	459,419	26,870,532	127,440,760
Annual fees	Evaluation, re-inspection and fines	Examination fees	Registration fees	

## 10. Other Income

47,520 37,582	148,596 263,137	43,281	2,000	196,216 346,000
Insurance claim received	Other income	Profit on sale of assets	Sponsorship	

Other income mainly consists of seta refunds.

Financial Statements for the year ended 31 December 2023

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	2023	2022
8. Trade and other payables		
Trade payables	1,541,096	1,501,772
Income received in advance	50,775,297	46,761,592
Employee leave days	3,551,529	2,923,904
Other payables	4,440,627	1,171,429
	60,308,549	52,358,697

Other payables consists of accruals and payroll related debt.

## 9. Revenue

118,817,598	127,440,760	
25,748,481	fees 26,870,532	Registration fees
349,468	459,419	Examination fees
13,412,592	Evaluation, re-inspection and fines	Evaluation,
79,307,057	86,247,317	Annual fees

## 10. Other Income

.0 37,582	6 263,137	43,281	2,000	6 346,000
47,620	148,596			196,216
Insurance claim received	Other income	Profit on sale of assets	Sponsorship	

Other income mainly consists of seta refunds.

Financial Statements for the year ended 31 December 2023

## Notes to the Annual Financial Statements

	Notes to the Annual Financial Statements		
		2023	2022
11.8	11. Surplus for the year from continuing operations		
J	Operating profit for the year is stated after accounting for the following:		
ш.	Profit/(loss) on sale of assets	(257,099)	43,281
`	Amortisation of intangible assets	1,052,218	962,334
]	Depreciation on property, plant and equipment	4,006,940	3,899,892
ш	Employee costs	78,694,887	69,952,094
	Research and development	165,454	118,552
,	Audit fees	305,351	212,279
12. 1	12. Investment revenue		
_ = =	Interest received Bank	8,372,196	4,748,975
13.	13. Finance costs		
-	Finance leases	6,330	6,192
		6,330	6,192

Financial Statements for the year ended 31 December 2023

## Notes to the Annual Financial Statements

	2023	2022
14. Cash generated from operations		
Surplus for the year	10,468,582	13,052,304
Adjustments for:		
Depreciation and amortisation	5,059,158	4,862,226
(Profit)/loss on sale of assets	257,099	(43,281)
Investment income	(8,372,196)	(4,748,975)
Finance costs	6,330	6,192
Fair value adjustment		800,000
Extraordinary items	118,060	93,887
Changes in working capital:		
Decrease/ (Increase) in trade and other receivables	(4,369,261)	869,048
Increase/ (Decrease) in trade and other payables	7,949,852	7,407,273
	11,117,624	22,298,674
15. Commitments		
Operational Expenditure		
Already contracted for but not provided for		
- within one year	2,969,727	2,347,056
- in second to fifth year inclusive	1,525,351	1,573,047
	4,495,078	3,920,103

46,387 7,760 **54,147** 

30,271

25,972 4,299

Financial Statements for the year ended 31 December 2023

## Notes to the Annual Financial Statements

2022
2023

## 19. Financial risk management

The council's activities expose it to a variety of financial risks including interest rate risk, credit risk and liquidity risk. The council's overall risk management programme focuses on the unpredictability of financial markets and seeks to minimise potential adverse effects on the council's financial performance.

Risk management is carried out by senior management under financial policies approved by council.

## Liquidity risk

Prudent liquidity risk management includes maintaining sufficient cash and the availability of funding from an adequate amount of committed credit facilities. The council manages liquidity risk through the compilation and monitoring of cash forecasts, as well as ensuring that adequate borrowing facilities are maintained. The maturity profile of the council's financial instruments is less than 12 months.

## Interest rate risk

The council's interest rate risk arises from the interest payable on operating leases. Interest rate is based on prime.

## Credit risk

Credit risk consists mainly of cash deposits, cash equivalents and trade debtors. The council only deposits cash with major banks with high quality credit standing and limits exposure to any one counter party

Financial Statements for the year ended 31 December 2023

## Notes to the Annual Financial Statements

Notes to the Allinai Fillancial Statements		
	2023	2022
Financial risk management continued		
Fair value of financial instruments		
The carrying amount of the financial assets and liabilities reported in the statement of financial position are considered to approximate their fair value as at 31 December 2022.	December 2022.	
Categories of financial instruments		
Financial assets		
Loans and receivables	112,065,770	104.116.211
Reconciliation to statement of financial position		
Trade and other receivables	23,137,359	18,768,098
Cash	88,928,411	85,348,113
Loans and receivables	112.065.770	104,116,211
Financial liabilities		
Financial liabilities measured at amortised cost	60,338,820	52.412.844
Reconciliation to statement of financial position		
Trade and other payables	60,308,549	52,358,697
Finance lease liabilities	30,271 60,338,820	54,147 52,412.844

Financial Statements for the year ended 31 December 2023

## **Detailed Income Statement**

	Note(s)	2023	2022
Revenue			
Annual fees		86,247,317	79,307,057
Evaluation, re-inspection and fines		13,863,492	13,412,592
Examination fees		459,419	349,468
Registration fees		26,870,532	25,748,481
	9	127,440,760	118,817,598
Other Income			
Insurance claim received		47,620	37,582
Other income		148,596	263,137
Profit on sale of fixed assets			43,281
Sponsorship			2,000
	10	196,216	346,000
Investment income			
Interest received		8,372,196	4,748,975
	12	8,372,196	4,748,975
Expenses (refer to page31)		(125,534,260)	(110,854,077)
Surplus for the year	11	10,474,912	13,058,496
Interest Paid - Bank Overdraft	13	(6,330)	(6,192)
Net surplus/ (deficit) for the year		10,468,582	13,052,304

Financial Statements for the year ended 31 December 2023

## **Detailed Income Statement**

	Note(s)	2023	2022
Operating expenses			
Allowances		(96,538)	(91,072)
Auditors' remuneration		(305,351)	(212,279)
Bank charges		(671,601)	(716,618)
Cleaning, health and safety		(354,812)	(545,313)
Consumables		(318,386)	(175,991)
Council elections		(51,763)	
Depreciation		(5,059,158)	(4,862,226)
Employee costs		(78,694,887)	(69,952,094)
Fair value adjustment			(800,000)
Information technology expenses		(6,456,904)	(6,263,804)
Insurance		(830,113)	(840,806)
Internal audit and consultancy		(497,030)	(440,835)
Lease rental on operating lease		(372,621)	(394,463)
Legal expenses		(736,862)	(1,088,397)
Loss on sale of fixed assets		(257,099)	
Meeting expenses- accommodation		(1,430,913)	(728,289)
Meeting expenses- catering		(399,327)	(183,962)
Meeting expenses- locum expenses		(337)	(2,322)
Meeting expenses- member fees		(1,406,293)	(1,019,201)
Meeting expenses- preparation fees		(637,027)	(458,369)
Meeting expenses- transport and travelling		(288,358)	(262,919)
Office expenses		(1,266,325)	(737,026)
Office transport		(52,933)	(65,699)
Pharmacy education and training		(2,935,042)	(3,066,734)
Pharmacy inspections		(4,819,860)	(4,075,773)
Postage and courier		(1,365,046)	(1,231,088)
Printing and stationery		(564,806)	(393,547)
Provision for doubtful debts		(4,141,899)	(4,628,255)
Public relations and promotions		(629,046)	(418,805)
Repairs and maintenance		(3,761,693)	(1,034,724)
Research and development costs		(165,454)	(118,552)
Security		(1,469,168)	(977,626)
Social responsibility		(46,871)	(11,466)
Telephone and fax		(3,314,772)	(3,584,298)
Travel - overseas		(784,581)	(394,424)
Utilities		(1,351,384)	(1,077,100)
		(125,534,260)	(110,854,077)

ABBREVIATIONS AND ACRONYMS

AAC Associated Assessment Criteria API Application Processing Interface

APN Access Point Name
ARC Audit and Risk Committee
AQP Assessment Quality Partner
BHF Board of Healtchare Funders

BPharm Bachelor of Pharmacy
CEO Chief Executive Officer

CFI Committee of Formal Inquiries

CFO Chief Financial Officer

CGF Corporate Governance Framework
CHE Council for Higher Education
CII Committee of Informal Inquiries

COO Chief Operating Officer

CPD Continuing Professional Development
CPI Committee of Preliminary Investigations
CRM Customer Relationship Management
CSI Corporate Social Investmeent

CSP Community Service Pharmacist
CSR Communication and Stakeholder Relations

DG Director-General

DoH Department of Health (when used in provincial context)

DRP Disaster Recovery Plan

EISA External integrated summative assessments OR Electoral Institute for Sustainable

Democracy in Africa

ELO Expected Learning Outcome

EPC Emergency post-coital contraception
EXCO Executive Committee of Council
FET Further Education & Training

FIP International Pharmaceutical Federation
GDWP Good Distribution and Wholesale Practice
GEMS Government Employees Medical Scheme

GMP Good Manufacturing Practice
GPE Good Pharmacy Education
GPP Good Pharmacy Practice
HEI Higher Education Institutions

HEQSF Higher Education Qualifications Sub-framework HPCSA Health Professions Council of South Africa

HR Human Resources

ICPA Independent Community Pharmacy Association ICT Information and Communications Technology

IEC Independent Electoral Commission
ISBN International Standard Book Number

IT Information Technology MCQ Multiple-choice questions

MEC Member of the Executive Committee

MFL Master Facility List MoH Minister of Health

MOA Memorandum of Agreement MVC Module-View-Controller NDoH National Department of Health

NE Non-Equivalent

NQF National Qualifications Framework

OQSF Occupational Qualifications Sub-Framework PAIA Promotion of Access to Information Act

PCDT Primary Care Drug Therapy
PDA Pharmacy development Academy

PIMART Pharmacist-Initiated Management of Antiretroviral Therapy

PIT Pharmacist Initiated Therapy

POPIA Protection of Personal Information Act

PSP Pharmacy Support Personnel

PSSA Pharmaceutical Society of South Africa
QCTO Quality Council for Trades and Occupations
RCRP Registrar's Complaints Review Panel

REMCO Remuneration and Reimbursement Committee

RP Responsible Pharmacist

SAHPRA South African Health Products Regulatory Authority

SAPC South African Pharmacy Council

SAPS South African Police Services
SARS South African Revenue Services
SDP Skills Development Provider
SETA Sector Education and Training Authority
SLA Service Level Agreement
SOP Standard operating procedure
VPN Virtual Private Network
WBL Work-Based Learning
YTD Year to date

## **LEGAL REFERENCES**

King IV Code on Corporate Governance (2016) Legal Deposits Act, 54 of 1997 Medicine and Related Substances Act, 101 of 1965 Pension Funds Act, 24 of 1956 Pharmacy Act, 53 of 1974 Promotion of Access to Information Act, 2 of 2000 Promotion of Administrative Justice Act, 3 of 2000 Protection of Personal Information Act, 4 of 2013

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