



SOUTH AFRICAN PHARMACY COUNCIL  
ANNUAL REPORT

**2012**

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### Vision

Quality pharmaceutical service for all the people in South Africa

### Mission Statement

To ensure the provision of quality pharmaceutical services in South Africa by developing, enhancing and upholding:

- Universally acceptable standards
- Professional ethics and conduct
  - Ongoing competence
  - Pharmaceutical care

### Core Values

Batho Pele (people first)  
Accountability  
Ethics  
Excellence  
Professionalism

## President's Message



Bada Pharasi  
SAPC President

As in previous years, this report reflects the efforts of the Registrar and his team to implement Council's strategic plan adopted at the beginning of the current five-year term. A perusal of the report will show that challenges continue to affect the smooth implementation of the plan but that, by and large, improvements in Council's operations have been significant.

Council's ability to continue to regulate pharmacy practice has, of course, been affected and significantly tested by the influence of commercial developments. The advent of courier pharmacy, the application of non-human means of dispensing/automated dispensing units and the ownership of pharmacies by non-pharmacists have all combined to overwhelm the pharmacy regulating body as we strive to reconcile technological advancement with the desire to retain the professionalism and dignity of the pharmacist. After all, the pharmacy is the place where members of the public should continue to expect only the highest standards of pharmaceutical care.

Council's reaction to these new developments and problematic, new experiences has been to enact new rules under *Good Pharmacy Practice* (GPP) standards. At least one of the new sets of regulations formed the basis for a legal challenge that will probably take centre stage in 2013 as the matter seems likely to go to court.

The report will also show that the enthusiasm with which Council embarked on continuing professional development (CPD) for pharmacy seems to have fizzled out, as the Department of Health has still not presented the CPD regulations to the Minister for his consideration and signature.

The CPD regulations were initially submitted to the Minister in 2011, published for comment between 12 May and 12 August 2011 and, thereafter, re-submitted to the Minister for implementation.

The year saw the finalisation of the Pharmacy Human Resources Plan, the key aspect of which was the impending enrolment of the first batch of learner pharmacy technicians and pharmacy technical assistants at the beginning of 2013. Talks on allowing traditional universities to become involved in the training of these pharmacy professionals continued with the Departments of Health and Higher Education and Training.

Some of the projects that Council embarked on during 2012 included developing the qualification and curriculum outline for the national certificate for pharmaceutical sales representatives, the authorised pharmacist prescriber course and the curriculum outline for pharmacy specialisation disciplines. The specialist areas targeted are clinical pharmacokinetics, clinical pharmacy, radiopharmacy, industrial pharmacy and public health and management. It is hoped that recognition of such specialisations, especially through remuneration, will act as an incentive and encourage more members of the profession to embark on specialisation.

On behalf of my fellow councillors, I hereby present the Pharmacy Council's 2012 Annual Report for the Minister's consideration.



South African  
Pharmacy Council

*"If you change the way you look at things, the things you look at change"*  
- Wayne W Dyer

*"Be the change that  
you wish to see in  
the world"*  
- Mahatma Gandhi

## Registrar's Message



Amos Masango  
Registrar/CEO

We are delighted to present the 2012 Annual Report to our stakeholders. This report boasts both the achievements of the organisation in 2012 and projects to look forward to in 2013.

### Achievements in 2012

2012 was a busy year, filled with challenges and long-term planning on how Council, through setting high, professional standards and improving the number of professionals, could best serve the people of South Africa. Funding continued to be a limiting factor. This is not a unique situation, but it does restrict Council from implementing additional plans to improve services to the profession and the public.

Budgetary constraints were, however, mitigated through sponsorship of strategic projects like internship review (developing a suitable model for pre-registration practice for pharmacists); research on pharmacy education and practice standards; drafting of qualifications and curricula outlines for authorised pharmacist prescriber, pharmacy general assistants and qualifications for specialists; review of legislation; and the plan for *Pharmacy Human Resources in South Africa*. The latter was achieved through financial sponsorship from Strengthening Pharmaceutical Systems (SPS), Management Sciences for Health (MSH), who also provided technical assistance to carry out some of the projects. Council is extremely grateful to SPS, MSH.

During the year under review Council continued to play its leading role in its advisory capacity on pharmaceutical issues to the Minister of Health. Consultative meetings were held with various government departments and international stakeholders on matters ranging from service delivery, human resources and norms and standards.

To encourage school learners to choose pharmacy as a career, Council initiated the Nurture a Pharmacist Campaign under the auspices of its social responsibility programme, and adopted Wozanibone Secondary School in Boschkop, Tshwane (Pretoria). The Office of the Registrar donated items to the school and lent a hand with paint and repair work, taking advantage of the opportunity to promote pharmacy. The Office also encouraged pharmacies to do likewise and invest in schools with the ultimate goal of influencing learners to consider a career in pharmacy.

To improve service delivery the organisational structure of the Office of the Registrar was reviewed, with the help of Petros Business Solutions. Although only partially implemented in 2012 because of financial constraints, the highlights of this review included the re-engineering of the Professional Affairs and Standards, Legal Services and Company Secretary, and Information and Technology departments.

The re-engineering focused on continuing professional development (CPD), licensing, pre-registration, registration, monitoring compliance, professional conduct, accreditation and the development of norms and standards. In addition to the introduction of the new open-book examination for interns, the process for the online submission of CPD entries was finalised.

Council was unable to effect full compliance with CPD practice as it was awaiting the Minister of Health's approval and subsequent publication of the *Regulations relating to continuing professional development*.

The development of the new *Good Pharmacy Education* standards reached an advanced stage. Patients, through public education and awareness campaigns, were enlightened about their rights and responsibilities with regard to medication, and informed they could comment on the quality of the pharmaceutical service they received from pharmacies and pharmacy professionals.

Processing customer applications improved through enhanced functionality of the dashboard, register system, hardware and software purchases. The dashboard now enables the Communications and Stakeholder Relations Department to send smses to acknowledge applications or communicate information.

The improved functionality of Council's website saw an increase in usage as professionals used the system to update their personal details, upload ID photos, make online credit card payments, submit progress reports, download annual fee invoices or receipts, etc.

In its quest to fulfil its oversight responsibility in terms of financial reporting, Council continued to receive assistance from the Audit Committee. The core values are in line with the principles of good corporate governance as contained in the King III Report on Corporate Governance for South Africa.

## Looking ahead – our path to 2013 and beyond

The Office will be embarking on the election/appointment of the new Council in 2013. The term of the current Council expires in October 2013.

As we pursue our mission and vision, we are confident that the strategic direction we have chosen is sound. In 2013 we will endeavour to continue with the good work and promote and improve pharmaceutical care in line with universal norms and values, both in the private and public sectors.

We will strive to promote the health and quality of life of a patient through updating the *Good Pharmacy Practice* manual and developing the new *Good Pharmacy Education* standards, and ensure that these manuals are available to the profession.

In conclusion, we made considerable progress in 2012, but there is still much to be done. We are confident that our financial performance and operations will improve further during 2013, enabling us to achieve our targets.

On behalf of management I would like to thank the President of Council Mr Bada Pharasi for his leadership, the Council for their guidance and support, and staff for their hard work, dedication and ability to embrace the culture of our work environment.

## About the South African Pharmacy Council

The South African Pharmacy Council (Council) is an independent statutory body created by the legislature in recognition of the pharmacy profession as an exclusive occupational group. Council is vested with statutory powers of peer review and is responsible for its own funding. Council is representative and consists of 25 members of which 16 are appointed by the Minister of Health and nine elected by pharmacists. Of the 25 members, 21 are pharmacists.

### Role and functions of Council

In terms of the Pharmacy Act, 53 of 1974 (hereinafter referred to as the 'Act'), Council has the following objectives:

- 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.
- 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 in:
  - o pharmaceutical education and training
  - o 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 Act
  - o the professional conduct required of persons to be registered in terms of the Act
  - o the control of persons registered in terms of the Act by investigating in accordance with the 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.

### Council Members (2008-2013)



*Bada Pharasi (President)*



*Lorraine Osman (Vice President)*



*Simon Choma (Treasurer)*

Council Members (2008-2013)



Lynn Ambler  
(in Memoriam 15 March 2012)



Dr Shirley-Anne Boschmans



Charlie Cawood



Prof. Cassim Dangor



Douglas Defty



Prof. Andries Gous



Dr Joey Gouws



Keith Johnson



Willie Jordaan



Tinus Joubert



James Meakings  
(replaced Lynn Ambler in  
December 2012)



Zuko Makunzi



Lesiba Moshiga



Tshepo Mphaka



Sibongile Mthiyane



Lizzy Mulovhedzi



Dr Panjasaram (Vassie) Naidoo



Prof. Douglas Oliver



Sello Ramasala  
(replaced Adv. Phillip Mokoena  
who resigned in 2009)



Palesa Santho



Elaine Sclanders



Cyril Shabalala



Sayo Skweyiya

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## Primary Goal of Council

The primary goal of a statutory health council such as the SAPC is to assist in the promotion of the health of the population of South Africa. Broadly speaking, this is achieved in the fields of registration, education, practice and professional conduct.

### Education

Council is responsible for the establishment, development, maintenance and control of minimum standards of education and training, the inspection of training facilities, carrying out of certain examinations and the recognition of qualifications for registration of persons qualifying both in South Africa and in other countries.

### Control of Practice

Council plays a role in the establishment, development, maintenance and control of standards of professional practice and monitoring of the standard of practice through inspection of premises.

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## Standing Committees of Council

Various standing committees are elected annually to facilitate the functioning of Council. Ad hoc committees may be appointed as the need arises. Committees are appointed every year at the first Council meeting. The legislative definitions of these standing committees are outlined below. The work done by the standing committees for the period under review is discussed in this report as part of the departmental reports.

The **Executive Committee** considers and deals with matters which, in the opinion of the President, require urgent attention. Any acts performed or decision taken by the Executive Committee are of force and effect unless they are set aside or amended by Council at its next meeting. The Executive Committee deals with matters relating to conditions of employment, finance and any other matter which falls outside the terms of reference of other committees. The Executive Committee also deals with any matter which requires urgent attention.

The **Education Committee** considers and reports on all matters relating to the establishment, development, maintenance and control of universally acceptable standards in pharmaceutical education and training, including the approval of providers of education and training and the courses offered by providers, examinations, the evaluation of educational qualifications and exemptions from examinations. The committee may also deal with other matters delegated to it by Council.

### Control of Professional Conduct

With regard to professional conduct, the duties of Council are discharged according to strict legal principles following complaints lodged against registered persons. The need for impartiality is self-evident and implies the observance of legal requirements as well as of the rights of all parties concerned.

### Advice to the Minister of Health

Council, in addition, plays an advisory role to the Minister of Health on matters that fall within its scope, and communicates relevant information which may come to its attention to the minister.

The **Practice Committee** considers and reports on all matters relating to the establishment, development, maintenance and control of universally acceptable standards of practice of the various categories of persons required to be registered in terms of the Act; the promotion of pharmaceutical care which complies with universal norms and values, both in the public and the private sectors; the registration of pharmacies and related matters; and recommendations for the issuing of permits in terms of the Act or medicine-related legislation. The committee may also deal with other matters delegated to it by Council.

The **Preliminary Investigation Committee** conducts investigations in terms of Chapter II of the *Regulations relating to the conduct of inquiries held in terms of Chapter V of the Pharmacy Act, 1974*.

The **Informal Inquiry Committee** conducts informal inquiries in terms of Chapter III of the *Regulations relating to the conduct of inquiries held in terms of Chapter V of the Pharmacy Act, 1974*.

The **Formal Inquiry Committee** conducts formal inquiries in terms of Chapter IV of the *Regulations relating to the conduct of inquiries held in terms of Chapter V of the Pharmacy Act, 1974*.

The **Health Committee**, appointed by Council in terms of the *Regulations relating to the management of a person unfit to practise for reasons other than unprofessional conduct*, considers allegations or

information received by the Registrar that a person registered in terms of the Act may be unfit to practise.

The **Continuing Professional Development (CPD) Committee**, appointed by Council in terms of section 4 of the Act, deals with all matters relating to CPD to ensure that natural persons registered with Council continuously enhance their competence throughout their professional careers, and encompass a range of activities including continuing education and supplementary training.

The **Audit Committee** assists Council in fulfilling its oversight responsibility by serving as an independent and objective party to: monitor and strengthen the objectivity and credibility of Council's financial reporting process and internal control systems; appraise the audit efforts of the external auditors and internal audit function; provide an open avenue of communication among the external auditors, internal audit unit and senior management.

The **Bargaining Committee** appointed by Council considers and deals with human resources matters relating to Council employees to negotiate and bargain collectively to reach agreement on matters of mutual interest.

The **Trustees Committee (Board)** is appointed by Council (Employer's Trustees) and employees (Members' Trustees) with the sole responsibility of managing the SA Pharmacy Council Pension Fund (the Fund). The Trustees have the power in the name of the Fund to enter into and sign any contracts or documents and to institute, conduct, defend, compound or abandon any legal proceedings by or against the Fund and to make bye-laws prescribing the form and manner in which claims are to be lodged and dealt with by the Fund.

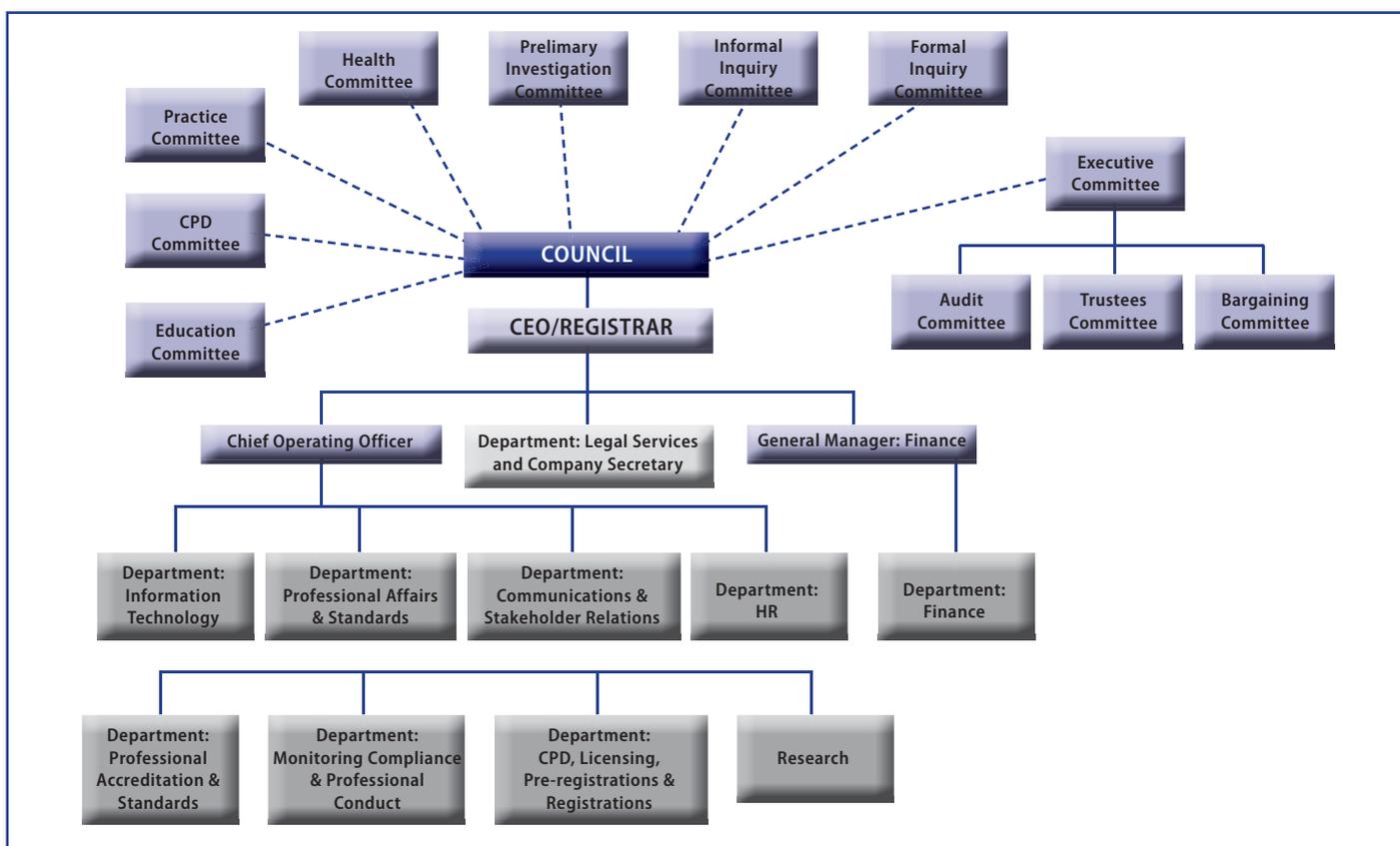


Figure 1: Structured relationship between Council, standing committees and Office of the Registrar

## Declaration of Interest

In the interests of transparency and good governance a “declaration of interest” form is completed at the first meeting of Council every year and it is a standard item on the agenda of all committee and Council meetings. The declaration of interest requires all members of Council to perform their duties and exercise their powers diligently and honestly

at all times. Council members must fulfil all obligations imposed upon them by the Act, and must act in good faith and in the best interest of good governance. All councillors must act in a manner that is consistent in every respect with the integrity of their office and that of Council.

*“There are only two ways to live your life. One is as though nothing is a miracle. The other is as though everything is a miracle”  
- Albert Einstein*

## Corporate Services



*Vincent Tlala  
Chief Operating Officer*

### Strategic focus area

The activities of corporate services are primarily focused on five strategic objectives of Council:

- Assist in the promotion of the health of the population of the Republic of SA.

- Advise the Minister of Health or any other person on any matter relating to pharmacy.
- Provide managerial and administrative support to the Office of the Registrar.
- Coordinate the activities of Council by appointing committees.
- Promote transparency to the profession and the general public.

In line with the above strategic focus areas, the department is responsible for all operational issues including the constant monitoring of expenditure against budget, providing secretarial services to both Council and the Executive Committee and to coordinate management activities to execute the strategic objectives of Council.

The department reports directly to the Registrar/CEO of Council.



*Bada Pharasi  
Chairperson: Executive Committee*

### Executive Committee

During the year under review the Office of the Registrar facilitated three sit-ins and one teleconference meeting of the Executive Committee chaired by the President, Mr Bada Pharasi.

### Strategic highlights

As part of its stakeholder relations and becoming transparent to the profession the Office of the Registrar held strategic partnership meetings with various government departments.



## Pharmacy Human Resources in South Africa

2030

**2030 HR vision for Pharmacy:**  
24,000 pharmacists and 72,000 pharmacy support  
personnel registered and serving South Africans



South African  
Pharmacy Council

Ensuring quality pharmaceutical services  
for all the people of South Africa

Contact the SAIPC

A Committed Team to Professionalism

Registered Office: SAIPC Building, 591 Bulwerine Street, Arcadia, Pretoria, 0001  
Postal Address: Private Bag 80040, Arcadia, 0007  
Customer Care Line: 0861 SAIPC 00 or 0861 7272 00  
Fax: (27)11 321 1492 /1479  
E-mail: [customerscare@saipc.za.org](mailto:customerscare@saipc.za.org)  
Website: [www.saipc.za.org](http://www.saipc.za.org)



South African  
Pharmacy Council  
in collaboration with  
**HATFIELD**  
*online*  
Christian School



**Adopt a School - Nurture a  
Pharmacist Campaign:  
Online-School  
Project**

## Department of Health

The Office of the Registrar had several meetings with the Department of Health to discuss matters of common interest. Among issues discussed with the Director-General of Health on 28 September 2012 were the publication of the CPD Regulations, mid-level workers in pharmacy, and licensing of pharmacies. A task team was established to discuss delegating the process of licensing of pharmacies to Council in terms of Section 49 of the Act. At the request of the Department of Health, the primary care drug therapy (PCDT) list for medicines and diseases/conditions was revised and Council approved the CPD PCDT workshop to update pharmacists on the list and diseases/conditions.

## Department of Trade and Industry

The Office of the Registrar was invited to a meeting with the Department of Trade and Industry (DTI) on 22 June 2012 to discuss the results of the study the DTI had commissioned, namely: *Human Capital Outlook Implications for Skills Development in the Pharmaceutical Sector*. The document highlights the shortage of various skills required in the production of pharmaceuticals.

In addition, the document indicates that the training of pharmacists in South Africa does not adequately prepare graduates for practice in the pharmaceutical manufacturing industry, and highlights the low number of pharmacists graduating from pharmacy schools. Following this meeting Council resolved to arrange an HR Seminar for all pharmacy stakeholders and government departments that employ pharmacists or who are involved in the production of pharmacists.

A subsequent meeting was held with the DTI to invite them to participate in the seminar and to discuss how they could contribute towards producing more human resources for pharmacy.

## Department of Public Services and Administration

On 7 November 2012 the Office of the Registrar was invited to a meeting with the Department of Health and the Department of Public Services and Administration. The DPSA was represented by the Chief Director: Service Delivery. The meeting was informed that the Minister of Public Service, as part of the signed performance agreement with the State President, had promised to improve service delivery in the public service.

The Department of Health was identified as one of the key departments that needed to improve service delivery, in particular the shortage of medicines. The DPSA enquired if they could assist in drafting generic standards and processes to improve the dispensing of medicines.

It was agreed by all parties that a workshop be arranged to discuss the existing standards and identify other problems that potentially lead to the shortage of medicines in public institutional pharmacies.

## Department of Higher Education and Training

In July 2012 the Office of the Registrar received a meeting invitation from the Deputy Director-General: Department of Higher Education and Training to discuss increasing the number of pharmacy professionals. The meeting took place on 3 August 2012. Concerns were raised over the DHET's policy which restricts traditional universities from training mid-level workers and the impact this has on pharmacy human resources. The DHET agreed it would consider revising the policy to enable traditional universities to offer training for mid-level workers.

## Heads of pharmaceutical services

As part of engaging pharmacy stakeholders and promoting transparency, the Office of the Registrar organised the annual heads of pharmaceutical services meeting on 26 July 2012. Matters communicated to them included developments in pharmacy practice, pharmacy education and registration. They were informed about the 1st National Pharmacy Conference scheduled for 23–26 June 2013.

## National and provincial liaison

The Office of the Registrar was invited to participate in the following national and provincial conferences:

- The 26th South African Association of Hospital Institutional Pharmacists (SAAHIP) conference at the Drakensberg Champagne Sport Resort, KwaZulu-Natal: 25–28 March 2012
- PSSA Conference at Emperors Palace: 29 May–1 June 2012
- ICPA conference at Birchwood, Kempton Park: 15–16 September 2012
- Gauteng Pharmaceutical Conference at Saint George Hotel in Pretoria: 14–15 September 2012
- 6th Clicks Pharmacy Conference at ICC, Cape Town: 20–22 November 2012
- Western Cape Provincial Conference
- Academy Conference
- Clinical Pharmacy Conference
- Adcock Ingram Health Summit: 9–11 November 2012.

## International liaison

### Visit by Pharmacy Council of Zimbabwe

In March 2012 the Office of the Registrar hosted a delegation from the Pharmacy Council of Zimbabwe. The delegation was on a fact-finding mission to learn more about Council's operational and strategic functions and how it discharges its mandate in terms of the Act.

### Visit to Namibia

In September 2012 the Office the Registrar was invited by the Health Professions Council of Namibia to assist with a monitoring inspection

of the Namibia School of Pharmacy. The Registrar, together with four subject specialists, visited the pharmacy school to assist with the inspection.

## Visit to Gulf Medical University

In May 2012 the Office of the Registrar hosted a delegation from the Gulf Medical University (GMU). The delegation enquired about the accreditation and registration requirements for a higher education and training provider for a pharmacy qualification. The delegation extended an invitation to Council to visit GMU and investigate the following:

- SAPC recognition for the GMU Doctor of Pharmacy (PharmD) programme. This would facilitate the registration of South African students completing the PharmD programme at GMU and enable them to practise in South Africa.
- The possibility of the Ministry of Health sponsoring South African students for PharmD studies at GMU.
- Establishing a GMU branch in South Africa to offer the PharmD and other medical and allied health programmes.

A Council delegation consisting of Mr OMB Pharasi (President), Mr TA Masango (Registrar) and Mrs HN Masiza (Senior Manager: Professional Standard and Accreditation) visited GMU between 3 and 9 July 2012. The report of the visit was presented to the Education Committee and a copy sent to the National Department of Health.

## International Pharmaceutical Federation (FIP) Conference

Mr OMB Pharasi (President) and Mr TA Masango (Registrar) attended the centenary celebration of the International Pharmaceutical Federation (FIP) in Amsterdam, the Netherlands during October 2012.

## Corporate governance

In terms of Corporate Governance, all Council members are obliged to apply their minds and exercise discretion in carrying out the duties required of them as part of Council's decision-making processes. The committees of Council, appointed in terms of Section 4 (o) of the Act, consider and discuss matters relevant to their committees and provide recommendations for Council's consideration. Council makes resolutions based on the recommendations received from the Committees. To promote transparency and ensure the actions taken in the execution of its duties are observable to the profession and the general public, Council publishes its resolutions as a standard feature in every edition of *Pharmaciae*.

For purposes of Corporate Governance, and as an indicator thereof, the attendance registers for the 2012 Council and committee meetings are statistically represented in the following tables:

Date of meeting	Total number of members	Present on both days	Attending one day	Absent
February 2012	25	23	1	1
May 2012	24	21	0	3
July 2012	24	17	1	6
October 2012	24	18	1	5

Table 1: Council

Date of meeting	Total number of members	Present	Absent
12 April 2012	9	8	1
30 August 2012	9	9	0
7 September 2012 (Teleconference)	9	5	4
29 Nov 2012	9	9	0

Table 2: Executive Committee

Date of meeting	Total number of members	Present	Absent
12 March 2012	8	6	2
4 June 2012	8	7	1
12 November 2012	8	7	1

Table 3: CPD Committee

Date of meeting	Total number of members	Present	Absent
13 March 2012	13	12	1
5 June 2012	13	11	2
11 September 2012	13	10	3
13 November 2012	13	11	2

Table 4: Education Committee

Date of meeting	Total number of members	Present	Absent
14 March 2012	17	12	5
6 June 2012	16	14	2
12 September 2012	16	12	4
14 November 2012	16	11	5

Table 5: Practice Committee

Date of meeting	Total number of members	Present	Absent
15 March 2012	6	4	3
7 June 2012	6	5	1
13 September 2012	6	1	1
15 November 2012	6	4	2

Table 6: Health Committee

Date of meeting	Total number of members	Present	Absent
29-30 March 2012	8	5: day one 4: day one	4: day one 5: day two
18-19 July 2012	8	7: day one 3: day two	1: day one 5: day two
7-8 November 2012	8	7: day one 7: day two	7: day one 1: day two

Table 7: CII Committee

Date of meeting	Total number of members	Present	Absent
17-18 April 2012	4	4	0
14-15 August 2012	5	4	1
21-22 November 2012	5	4	1

Table 8: CPI Committee

## Corporate social investment

As part of its social responsibility programme Council adopted Wozanibone Secondary School in Boschkop, Tshwane (Pretoria). The school is a no-fee-paying farm school with approximately 401 learners. The majority of the parents are unemployed and the school has extremely limited resources.

By adopting the school, Council will be able to enhance the tuition of learners through improving the working conditions of the teachers.

In so doing, learners will receive exposure to the pharmacy profession, which may entice some of them to consider pharmacy as a career. The school is rich in potential for the grooming of future pharmacists.

The Office of the Registrar donated 20 steel cabinets and 10 boxes of printing paper for use during the 2012 year-end examinations. On 30 November 2012 the Office of Registrar, as part of a team-building exercise and to contribute towards the structural improvement of the school assisted with renovations, e.g. painting, tiling and repairing broken windows.

## Human Resources

### Launch of human resources plan for pharmacy

On 24 February 2012 Council launched its comprehensive Pharmacy Human Resources Plan for South Africa. All pharmacy stakeholders, including professional organisations, heads of pharmacy schools, heads of pharmaceutical services, the registrar of the Medicines Control Council and the National Department of Health, were invited to the launch which was held at the Saint George Hotel in Irene, Pretoria. The plan was discussed and debates held with stakeholders to draft a way forward.

The campaign could well influence learners towards considering a career in the pharmacy profession.

In support of pharmacy education, Council would like this campaign to be taken up countrywide by all 4,500 pharmacies on the registers.

### Seminar on human resources in pharmacy

On 24 September 2012 the Office of the Registrar organised a pharmacy human resources seminar at the Protea Hotel in Centurion. The seminar included key participants from the pharmacy profession and relevant national government departments such as science and technology, trade and industry, higher education and training, and health.

### Nurture a pharmacist campaign

Council embarked on its 'Adopt a School - Nurture a Pharmacist Campaign' in October 2012 and adopted Wozanibone Secondary School (see above under social investment). While the main focus of this campaign is to contribute towards the betterment of the community within which Council conducts its business, it also provides Council with an opportunity to increase interest in the pharmacy profession among the learners.



## Professional Affairs and Standards

### CPD, Licensing, Pre-registration and Registration



South African  
Pharmacy Council

*"It is never too late  
to be what you  
might have been"*  
- George Eliot



Mojo Mokoena  
Senior Manager: CPD, Licensing,  
Pre-registration and Registrations

In line with the strategic focus areas the department is responsible for improving or upholding turnaround time in processing registrations of persons and organisations, and promoting pharmaceutical care through participation in CPD.

In addition, the department achieves its mandate through providing secretarial support to the Health and CPD Committees, including promoting CPD and keeping and maintaining a register of persons and organisations.

The report for CPD, Licensing, Pre-registration and Registration is in line with the achievement of activities outlined in the operational plans developed to carry out Council's strategic objectives for 2012.

#### Strategic focus area

The activities of the Continuing Professional Development and Registrations Department are focused on three strategic objectives of Council:

- 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.
- Promote the provision of pharmaceutical care which 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.
- Uphold and safeguard the rights of the general public to universally acceptable standards of pharmacy practice in both the public and private sectors.



Dr Panjasaram (Vassie) Naidoo  
Chairperson: CPD Committee

## CPD Committee

The Continuing Professional Development (CPD) Committee met on three occasions in 2012 with Dr P Naidoo as the chairperson. During this period the CPD online recording system, the review of the guidance document for CPD to align with the new CPD recording system, and the criteria for accreditation of CPD courses, were considered.

The report on the CPD pilot project conducted in 2009 was finalised and approved by Council. The new CPD online recording system was finalised and went live on 10 February 2012.

The *Guidance document for CPD for persons registered with Council* was previously developed to provide the profession with insight on Council's vision of CPD. The Committee is reviewing the document in line with the CPD online recording system and the CPD regulations. The CPD Committee will present the final document to Council in 2013 upon publication of the *Regulations relating to CPD for persons registered with Council*.

Council made a few amendments to the document during the year under review. Council previously resolved that all providers of short courses be accredited and registered with the Department of Higher Education and Training.

The CPD Committee is in the process of finalising the *Criteria for approval of short courses/learning programmes for CPD* for Council's approval and implementation in 2013.



Sibongile Mthiyane  
Chairperson: Health Committee

## Health Committee

### Activities of the committee

The Health Committee, chaired by Ms S Mthiyane, met on four occasions in 2012.

In 2012 the Health Committee managed twelve cases. Of these, one case was new, one was referred to a legal committee of Council, and one was closed.

The Health Committee made recommendations to Council that two respondents remain suspended under Section 2 of the *Regulations relating to the management of a person registered in terms of the Pharmacy Act, 1974, unfit to practise for reasons other than unprofessional conduct*.

At the end of 2012 the Health Committee had nine cases that required further investigation and/or monitoring to be performed in 2013.

### Health Committee projects

Council expressed its concern over the number of members referred to the Health Committee on allegations of being unfit to practise due to their physical and mental health status and/or challenges.

In an effort to uphold and safeguard the rights of the general public to universally acceptable standards of pharmacy practice in both the public and private sectors, the Health Committee was requested to conduct research on the physical and mental health status of the profession.



South African  
Pharmacy Council



South African  
Pharmacy Council  
in collaboration with  
**HATFIELD**  
*en/lede*  
Christian School

**Adopt a School - Nurture a  
Pharmacist Campaign:  
Online-School  
Project**

## Pre-registration year for interns

### Information sessions for students at the eight accredited universities

Eight information sessions were held for 4th year BPharm students, one at each pharmacy school. The purpose was to ensure that students understand the role of Council and the registration requirements which include, amongst others, annual fee payments. Final year students were informed of the requirements relating to registration as pharmacist interns and introduced to the pre-registration evaluation process.

At some universities presentations were delivered to 2nd and 4th year students.

### Pre-registration evaluation workshops

The Office of the Registrar conducted a train-the-trainer workshop in January 2012. The workshop was conducted over a period of two days and was attended by facilitators of the tutor/intern workshops, pre-registration examiners, assessors of CPD entries (previously, the assessors of intern portfolios), including moderators for both CPD and pre-registration examinations.

During the workshop feedback on the pre-registration evaluation for 2011 was provided. Input on the CPD online recording system, assessment of CPD entries submitted by pharmacist interns, and the preparation for the 2012 tutor/intern workshops was provided by the Office of the Registrar.

Ten tutor/intern workshops were conducted during February and April 2012 in all provinces. A total of five pre-registration examinations workshops were conducted in July 2012. The workshops served to inform the tutor and pharmacist interns on how to be successful in ensuring competence during the internship year. Below is a table of the breakdown of the attendance per venue.

Venue	Interns	Tutors	Total
Middelburg	15	10	25
Pretoria	45	11	56
Bloemfontein	9	3	12
Johannesburg	97	31	128
Polokwane	54	16	70
Potchefstroom	60	20	80
Durban	89	19	108
Kimberley	6	5	11
Cape Town	40	17	57
Port Elizabeth	49	13	62
<b>Total</b>	<b>464</b>	<b>145</b>	<b>609</b>

Table 9: Tutor/intern workshop attendance per venue in 2012

## Appointment of the examiners and moderators for pre-registration examination

The Office of the Registrar advertised the positions for pre-registration examiners and moderators for pharmacist interns online in May 2012. A total of four sector specific examiners and four moderators from Council accredited providers were appointed in the same year.

### Pre-registration evaluations results

The pre-registration evaluation consists of an open-book examination, submission of online CPD entries (previously intern portfolio) and progress reports. Every intern is required to pass the pre-registration evaluation (i.e. examination, portfolio or competence in CPD and have a favourable progress report from the tutor) prior to registration as a pharmacist for the purpose of community service. Tutors for interns registered in 2012 used the online submission of progress reports and interns submitted their CPD entries online. Both of the two online processes were finalised in 2012. Two different formats of pre-registration examinations were conducted in March, August and October 2012, with the addition of a special examination in January 2013. Interns registered in 2012 had to submit CPD entries online and write the new format of the examination, which consisted of Paper 1 (40 marks and a 60% pass mark) and Paper 2 (60 marks and a 50% pass mark). Interns registered prior to 2012 were given an option to either write the old format paper and submit a portfolio, or submit CPD entries and write the new format of the examination. Table 10 below shows the results of the old pre-registration examination.

Exam Dates	No. of interns who wrote the exam	No. of interns who passed the exam	Pass rate
January 2012	26	5	20%
March 2012	48	25	52%
August 2012	22	5	23%
October 2012	4	2	50%

Table 10: Pre-registration examination results written in 2012 (old format)

Of the 356 interns who wrote Paper 1 on 17 August 2012, 79% passed with  $\geq 75\%$ , and nine failed, The pass mark for this paper was 60%. A new pre-registration examination format was introduced and written in August and October 2012.

	August 2012		October 2012	
Number of interns who wrote	356	100%	67	100%
Number of interns who passed	347	97%	56	83.58%
Number of interns who failed	9	3%	11	16.42%

Table 11: Paper 1 results for August and October 2012 (new pre-registration examination format)

	Section A & B Community	Section A & C Institutional	Section A & D Manufacturing	Total
Number of interns who wrote	79	266	11	356
Number of interns who passed	78	249	11	338
Number of interns who failed	1	17	0	18

Table 12: Paper 2 results for August 2012 (new pre-registrations examination results)

	Section A & B Community	Section A & C Institutional	Section A & D Manufacturing	Total
Number of interns who wrote	24	49	3	76
Number of interns who passed	23	42	3	68
Number of interns who failed	1	17	0	18

Table 13: Paper 2 results for October 2012 (new pre-registrations examination results)

## CPD Guidance document for pharmacist interns and the intern manual

The Office of the Registrar developed a CPD guidance document for interns in 2012. The purpose of this document is to inform interns on the requirements for CPD competence, the assessment criteria and how feedback will be conveyed.

The interns' manual was reviewed to include CPD assessment and some of the Council's decision. In 2012 the intern manual and the guidance document were made available online.

## Recognition of foreign person's qualification

### Evaluation of credentials for foreign qualified persons

The evaluation assess if candidates may sit for the examination prescribed by the Act to register with Council. Professional examinations, consisting of four papers, were held in July and October 2012.

Thirty-one applicants were evaluated by the Education Committee and the recommendations were as follows:

- Four candidates be registered as learner post-basic pharmacist's assistants and complete six months in-service training while completing a module in Pharmacy Law and Ethics with an approved provider.
- Twenty-three candidates be allowed to register as pharmacist interns subject to passing the professional examinations, completing a minimum of 12-months internship and passing the pre-registration evaluation.
- Four candidates be allowed to register as pharmacists subject to passing the professional examinations, completing a minimum of six-months internship and passing the pre-registration examinations.
- One application was declined by the Education Committee as it did not meet the requirement for registration.

Below is a summary report for applications received in 2011 and 2012.

	Applications received	Pharmacists	Pharmacist's Assistants
2011	38	36	2
2012	31	27	4

Table 14: Summary of applications for evaluation of credentials for foreign qualified persons

	Number of papers			
	Pharmacology & Toxicology	Pharmacy Practice & Admin	Pharmacy Law & Ethics	Pharmaceutics & Chemistry
2011	27	23	25	35
2012	43	36	40	47

Table 15: Number of candidates who wrote different professional examination papers

In 2011 the guidelines for the recognition of foreign qualifications were reviewed to include the International English Language Testing System (IELTS) certificate for all applicants to prove proficiency in English.

## Registration of persons

### Finalise, implement and monitor the development of online application forms to improve the registration process

The unit was successful in finalising nine of the fifteen online processes planned for development. The finalised online processes were communicated to the profession in the *Pharmaciae* and at conferences. A training manual for the use of these processes is available online.

- online exam bookings (interns)
- recording of CPD entries (interns)
- pre-registration evaluation results (interns)
- progress reports for interns and pharmacist's assistants
- resignation as a responsible pharmacist
- resignation as a tutor
- responsible pharmacist
- pharmacist for the purpose of community service
- student registration.

The profession makes full use of the first six processes. Some of the online interaction manager processes were reviewed to align them with changes taking place within the organisation to improve the registration process.

Consequently, all standard operating procedures were revised, including training of staff to acquaint them with the implemented process changes to improve service delivery, quality and both turnaround and response time in the registration process.

The register system was finalised and fully implemented. In 2013 the unit will continue to maintain the system to ensure proper reporting, database integrity, efficient capturing and data maintenance.

Registration with the Council in terms of the Act is a pre-requisite for practising as a pharmacy professional. It is a criminal offence to practise as a pharmacy professional without registering with Council. Names of all registered persons and organisation can be accessed by the public on the SAPC website. Table 16 below indicates the various categories of persons registered between January 2011 and December 2012.

Category of registered persons	Registered in 2011	Registered in 2012
Pharmacist's assistant learner (basic and post-basic)	917	3149
Pharmacist's assistant (basic and post-basic)	1121	1557
Student (mostly 2nd year)	747	705
Pharmacist intern	412	442
Community service pharmacist	372	397

Table 16: Newly registered persons January 2011 to December 2012

In 2012, high levels of application forms for learner basic and learner post-basic pharmacist's assistants were processed owing to the accreditation of additional providers to offer the qualifications. The Council maintains a register of specialists and currently two categories are registered, namely pharmacokinetics and radio pharmacy. Table 16 indicates the total number of persons who were active in Council registers in 2012 compared with 2011.

Category of registered persons	Active by 2011	Active by 2012
Pharmacist's assistant learner (basic and post-basic)	3760	5274
Pharmacist's assistant (basic and post-basic)	4640	5526
Student (mostly 2nd year)	3161	2260
Pharmacist intern	631	616
Community service pharmacist	434	459
Pharmacist	12596	13031
Specialist pharmacist	12	12
Total active persons in the register	21290	26994

Table 17: Total registered persons who were active in 2011 and 2012

Data integrity evaluation was done for the register of pharmacist students and interns in 2012. A number of persons in these registers were removed as they did not meet the requirements. In general, a slight increase in the total number of persons registered occurred in all other registers as indicated in Table 17 above.

Figure 1 below indicates the distribution of pharmacists and pharmacist support personnel per province, with most pharmacists concentrated in Gauteng and Western Cape.

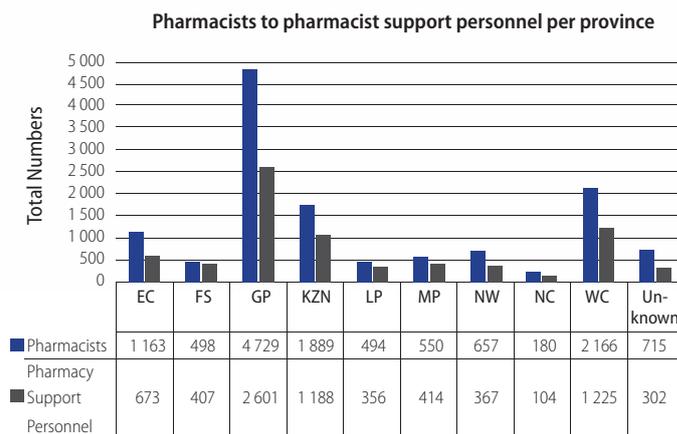


Figure 1: Distribution of pharmacists and pharmacist support personnel per province

## Registrations of organisations

### Registrations of various categories of organisations

According to the register of organisations there were 22 providers registered in 2012 whilst 4,593 pharmacies were registered with Council. Anyone who obtains a licence in terms of the *Regulations relating to the ownership and licensing of pharmacies* is legally obliged to record the pharmacy with Council before providing any pharmaceutical services, and to do so within 30 days of receiving the licence from the Director-General of Health.

Table 18 below shows the total number of pharmacies by category registered in 2012 compared with 2011.

Facilities by category	2011	2012
Community	3039	3124
Consultant	14	15
Manufacturing	263	267
Private Institutional	257	257
Public Institutional	640	641
Wholesale Pharmacy	286	289
<b>Total</b>	<b>4499</b>	<b>459</b>

Table 18: Total number of pharmacies recorded in 2012 compared with 2011

## Opened and closed

A summary of the open and closed pharmacies in 2011 and 2012 indicates that fewer pharmacies closed in 2012. More pharmacies are required, especially in the rural areas, to meet the needs of the public.

Facilities by category	2011		2012	
	Opened	Closed	Opened	Closed
Community	103	31	83	26
Consultant	0	1	0	0
Manufacturing	10	3	3	2
Private Institutional	8	1	4	4
Public Institutional	3	4	7	3
Wholesale	11	9	3	5
Total	135	49	100	40

Table 19: Total number of pharmacies opened and closed in 2012 compared with 2011

Persons or organisations interested in opening, relocating and/or changing ownership of a pharmacy must first apply for a new pharmacy licence from the Department of Health. Once a licence has been issued the owner must within 30 days record the licence, together with the responsible pharmacist (RP), with the Council. A pharmacy recording certificate, owner and RP certificate will thereafter be issued as proof of registration of the pharmacy.

## Maintenance of registers of various categories of persons and pharmacies

Section 14 of the Act entitles Council to keep, correct and maintain registers of persons and a recording of licensed premises. Regular updates are performed on the register system when members of the profession interact with the Council's office. All application forms were reviewed to ensure they provided the necessary information to update the registered persons contact details. Commencing early in 2012, Council's message at all conferences and workshops was to encourage the profession to update their contact details online.

During the period under review, 340 pharmacist's assistants (all sub-categories) and 329 pharmacists were erased from the registers for non-payment of fees. Only 38 erasures were voluntary requests across all categories of registered persons.

The erasures as a result of non-payment of annual fees of learners and tutors poses a huge threat to the in-service training of those learners as Council will not recognise their training and assessments performed during the period of erasure. Although it is a requirement that all registered persons pay their annual fees, Council constantly requests members of the profession to pay their fees on time.

The introduction of online payments through the SAPC website alleviated some of the challenges regarding invoices and payments of annual fees. Registered persons were able to raise invoices on the site and pay annual fees online.

Other projects carried out by the unit to ensure data integrity included correcting registration dates of pharmacists, especially those who applied as tutors during the year under review, updating the identity or passport numbers, registering of pharmacists or pharmacist's assistants who qualified for reduced fees, removing all students and interns who were registered prior to 2008 but who left the profession without informing Council, and updating the registration status of all categories of pharmacist's assistants for the National Learner's Records Database report to SAQA. Most of these projects will continue in the next financial year to ensure that Council ultimately boasts a comprehensive and reliable database.

## Continuing professional development

### Promotion of continuing professional development

Council is obliged by the Act to uphold and safeguard the rights of the general public to universally acceptable standards of pharmacy practice in both the public and private sectors. It is Council's intention to ensure the members of the profession enhance their competence in practice. In assessing CPD compliance, competency is not measured, but it is Council's expectation that the ultimate outcome of CPD compliance will improve competency.

Information on CPD was only imparted partially during the tutor/intern workshops and various conferences in 2012. The Office of the Registrar will schedule CPD workshops for the profession in 2013.

### Regulations relating to CPD for persons registered with Council

The *Regulations relating to CPD for persons registered with Council* were drafted and submitted to the Minister of Health in 2011 for implementation. The regulations were published for comment between 12 May and 12 August 2011 and thereafter submitted to the minister for implementation.

The Council awaits the publication of the *Regulations relating to CPD for persons registered with Council*. The Office of the Registrar is in communication with the Director-General of Health for the finalisation and publication of the regulations.



Vuyo Makoena  
Senior Manager: Monitoring Compliance  
and Professional Conduct

## Monitoring Compliance and Professional Conduct

### Strategic focus area

The activities of the Practice Department are focused on three strategic goals of Council:

- Promote the provision of pharmaceutical care which 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.
- 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 of practice in the various categories of persons required to be registered in terms of the Act, as well as the promotion of the provision of pharmaceutical care.



Cyril Shabalala  
Chairperson: Practice Committee

### Practice Committee

Four Practice Committee meetings were held in 2012 and chaired by Mr Cyril Shabalala. The following are some of the issues finalised:

- Board Notice 35: Minimum standards for pharmacy premises, facilities and equipment, specific amendments to Section 1.2.2 "Another business or practice in a pharmacy or a pharmacy in another business", 1.2.11.5 references and 2.29 "Products which may not be sold in a pharmacy".
- Minimum standards for dispensing medicines or scheduled substances on a prescription from an authorised prescriber.
- Approval of tutors and premises for training of pharmacist interns and pharmacist's assistants.
- Training restrictions in different categories of pharmacies, presentation on the minimum standards for courier pharmacies and the minimum standards for distribution, transport and storage of substances requiring cold chain.
- Amendments to the *Good Pharmacy Practice* (GPP) standards pertaining to minimum standards for pharmacies providing mobile pharmaceutical services.

## Monitoring of providers of pharmacy education and training

The plan for monitoring providers of education in the Higher Education and Training (HET) and Further Education and Training (FET) bands in 2012 included planned visits to four FETs and three HETs. The institutions visited were:

- S Buys Training and Development Academy (Pty) Ltd
- Pharmacy Healthcare Academy (Pty) Ltd
- Health Science Academy (Pty) Ltd

In general, the FETs were found to be compliant with the requirements of providing education and training as set out in the *Regulations relating to pharmacy education and training*.

The inspection of the HETs was deferred to 2013 to either give the institutions adequate time to prepare for the visits, or because planned accreditation visits had been arranged.

## Monitoring of pharmacies

Initiatives undertaken in 2012 to promote GPP standards included:

- Publication of articles on pharmacy practice in the *Pharmaciae*. The articles encompassed introducing technology to inspections to monitor and ensure high compliance, and the minimum standards for the use of automated dispensing units (ADUs) to improve efficiency and access to pharmaceutical services.
- Participation at and addressing conferences and seminars on pertinent pharmaceutical services delivery issues. The following were attended:
  - o ICPA conference: 14–16 September 2012
  - o IPAP Pharmaceutical Working Group: 20 September 2012
  - o The Patient Safety seminar: 26–28 September 2012.

## Promoting compliance with Good Pharmacy Practice in both the private and public sectors

Council endeavours to inspect every pharmacy at least once in two years. This has been a challenge over the past few years due to resource constraints. Following the introduction of the online inspection system there has been a great improvement in the number of inspections conducted.

In 2012 a total of 2,129 inspections were carried out compared with the 944 and 706 for the same period in 2011 and 2010 respectively.

Province	2010	2011	2012	Total
Eastern Cape	41	52	123	216
Free State	14	52	96	162
Gauteng	255	327	568	1150
KwaZulu-Natal	57	119	282	458
Limpopo	19	37	34	90
Mpumalanga	31	33	145	209
North West	30	43	109	182
Northern Cape	26	14	42	82
Unknown	131	130	487	748
Western Cape	102	137	243	482
<b>Total</b>	<b>706</b>	<b>944</b>	<b>2129</b>	<b>3779</b>

Table 20: Number of pharmacies inspected per province in 2012 compared with 2010 and 2011

In comparison with the previous two years, the inspections performed in 2012 more than doubled. Credit for this is attributable to the implementation of the pilot project and a successful implementation of the online project.

Council observed from the inspection results there were a number of areas that needed attention to ensure compliance with GPP standards for effective delivery of quality pharmaceutical services. Interventions to address these ranged from publishing compliance articles in the *Pharmaciae*, addressing workshops and seminars, and enforcing disciplinary measures on pharmacists who were found to be non-compliant.

## Approval of premises for the purpose of training pharmacist interns and pharmacy support personnel

A total of 633 pharmacy premises were approved for training purposes in 2012. It is Council policy to approve pharmacy premises for a period of between one and three years, based on the compliance levels of the pharmacy. The majority of approvals were finalised as a result of monitoring inspections in comparison with previous years where approval was largely reliant on training inspections.

Province	2010	2011	2012	Total
Eastern Cape	47	42	28	117
Free State	38	27	39	104
Gauteng	190	316	169	675
KwaZulu-Natal	89	90	82	261
Limpopo	37	26	24	87
Mpumalanga	40	31	39	110
North West	46	45	30	121
Northern Cape	11	12	9	32
Unknown	131	86	121	338
Western Cape	102	137	243	482
<b>Total</b>	<b>725</b>	<b>802</b>	<b>633</b>	<b>2160</b>

Table 21: Approval of pharmacy premises for purposes of training in 2012 compared with 2010 and 2011

## Recommending the issuing of permits, exemptions and licence applications

An average of 50 permit applications in terms of section 22(A) of the Medicines and Related Substances Act, 101 of 1965, from a variety of healthcare professionals, were presented at each of the three Practice Committee meetings in 2012.

The permit applications pertaining to PCDT were not resolved with the National Department of Health (NDoH). The list of medicines and conditions/diseases was finalised and presented to the NDoH. A CPD PCDT workshop was finalised and offered to relevant pharmacists.

The Director-General of Health recommended the issuing of an average of 50 licences per month.

## Professional conduct

During 2012 the Registrar's Complaint Review Panel (RCRP) handled 100 complaints. Some, where Council did not have jurisdiction, were referred to various organisations. Figure 2 below shows recommendations made by the RCRP.



Figure 2: Recommendations by the RCRP in 2012



Keith Johnson  
Chairperson: CPI

### Committee of Preliminary Investigations (CPI)

The committee handled at least 258 cases during its three meetings in 2012. The committee was chaired by Mr K Johnson.

The graph below represents the referral of cases to other disciplinary committees of Council.

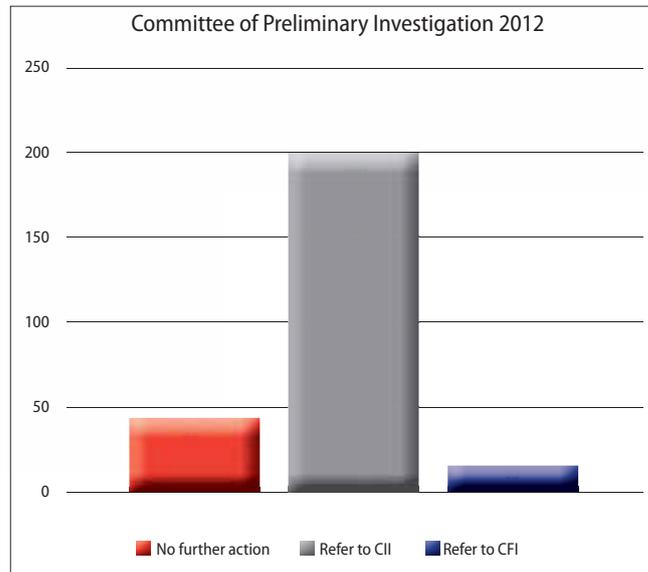


Figure 3: Cases handled by CPI in 2012



Palesa Santho  
Chairperson: CII

### Committee of Informal Inquiry (CII)

The committee handled 158 cases of misconduct in the year 2012, ranging from:

- confirmation of fines from CPI
- reduction of fines from CPI
- withdrawals.

The graph below represents the actions taken by the CII in dealing with the cases presented before it in 2012. The committee was chaired by Ms P Santho.



Figure 4: Cases handled by CII in 2012

## Committee of Formal Inquiry (CFI)

A total of seven cases were finalised between January 2012 and October 2012. It is a legal requirement that the names of people found guilty by the CFI be published in the *Government Gazette*. The cases were also published in the *Pharmaciae*. A guilty verdict handed down by the CFI becomes a record against the person.

The following people were found guilty by the CFI in 2012.

Name	Contravention
R Roopen	1. Dispensing error (Ethical Rule 4)
TK Mabitsela	1. Conducting a pharmacy without a pharmacist (Regulation 22 published under the Pharmacy Act, 53 of 1974) 2. Failure to supervise pharmacy support personnel and dispensing error (Ethical Rule 18 and 4)
TH van Tonder	1. Dispensing error (Ethical Rule 4 (a)) 2. Dispensing medicines without a valid prescription (Section 22A (5) (b) of the Medicines and Related Substances Act, 101 of 1965) 3. Failure to supervise pharmacy support personnel (Ethical Rule 18)
V van Westhuizen	1. Keeping and dispensing expired medicines (Ethical Rule 4 (a)) 2. Failure to comply with Good Pharmacy Practice standards
JEC May	1. Conducting a pharmacy without a pharmacist (Regulation 22 published under the Pharmacy Act, 53 of 1974) 2. Allowing unregistered persons to perform the scope of practice of a pharmacist (Ethical Rule 4 and 18) 3. Failure to label medications appropriately (Ethical Rule 3) 4. Prepacking of unregistered medicines (Regulation 8 of Act 101)
GL du Toit	1. Failure to supervise pharmacy support personnel and dispensing error (Ethical Rule 18 and 4) 2. Failure to keep a record of all Schedule 1 and 2 medicines (Regulation 11 of the Medicines and Related Substances Act, 101 of 1965) 3. Promoting the sale of potentially addictive medicines (Ethical Rule 23) 4. Acting as a wholesaler without a valid licence (Section 22C (1) (b) of Medicines and Related Substances Act, 101 of 1965) 5. Failure to comply with Good Pharmacy Practice standards
BJ Gelant	1. Conducting a pharmacy without a pharmacist (Regulation 22 published under the Pharmacy Act, 53 of 1974) 2. Allowing unregistered persons to perform the scope of practice of a pharmacist (Ethical Rule 4 and 18) 3. Failure to comply with Good Pharmacy Practice standards

Table 22: People found guilty by the CFI in 2012



*Hlonelikhaya Masiza*  
Senior Manager: Professional Accreditation  
and Standards

## Professional Accreditation and Standards

### Strategic focus area

The activities of the Pharmacy Education and Training Department are focused on one strategic objective of Council, i.e. planning, organising and providing guidance in establishing, developing and maintaining universally acceptable standards in pharmacy education and training.

In line with this strategic focus area the department is responsible for managing all actions aimed at:

- declaring a person competent prior to registration
- accreditation and approval of providers and courses in terms of the Pharmacy Act, 53 of 1974 and the SAQA Act, 58 of 1995
- promoting quality among constituent providers of pharmacy education and training
- managing all Education, Training and Quality Assurance (ETQA) related functions
- generating standards for pharmacy-related qualifications
- managing education and training-related projects as well as providing secretarial services to the Education Committee.



*Dr Shirley-Anne Boschmans*  
Chairperson: Education Committee

### Education Committee

The Education Committee met four times in 2012 and the meetings were chaired by Dr Shirley-Anne Boschmans.

The Education Committee discussed, among others, the following topics: interns who attempted the pre-registration examination more than once without success between 2008 and 2011; specialities in pharmacy; volunteers for pharmaceutical services; implementation of the revised BPharm curriculum; harmonisation of learning programmes within the context of pharmacy education; development of a qualification for a pharmacy general assistant (PGA).

Many actions arose from the committee meetings and all were executed with the exception of the following:

- different modes of training pharmacy technical assistants (PTAs) and pharmacy technicians (PTs)
- the criteria for evaluating the modes of training
- approaching the universities of technology to offer the PTA and PT qualifications.

## Accreditation of providers

Accreditation visits in 2012				
	Provider	Date conducted	Accreditation report	Approved
1	North West University PCDT	1 March 2012	Complete and available	Yes
2	Cape Peninsula University of Technology	8 March 2012	Complete and available	Yes
3	PEI	11 April 2012	Complete and available	Yes
4	University of Pretoria	25 April 2012	Complete and available	Yes
5	Gulf Medical University, Dubai	3–6 July 2012	Complete and available	Yes
6	Quad Pharma	20 August 2012	Complete and available	Yes
7	Pharmacy School of Namibia, Health Professions Council of Namibia (HPCN)	3–5 September 2012	Complete and available	Yes by HPCN
8	Pharmagenius	24 October 2012	Complete and available	Yes

Table 23: Accreditation visits conducted in 2012

Monitoring visits in 2012			
Provider	Date of visit	Monitoring visit report	Approved
SBuys Training Academy	20 June 2012	Complete and available	Yes
University of Limpopo	11-12 October 2012	In progress	No

Table 24: Monitoring visits conducted in 2012

## Accreditation of courses

- PCDT update workshop curriculum was approved.
- Out of the 28 courses (including the BPharm curriculum), 13 were accredited.

## Development of pharmacy education standards

- The document titled *A report on a visit to a Higher Education Institution Providing Qualifications for Pharmacy Technical Assistants (PTA) and Pharmacy Technicians (PT) in terms of Section 34 of the Pharmacy Act (Act no 53 of 1974)* was approved and will be used by providers to apply for accreditation and for monitoring visits.
- Curriculum outlines for PTA and PT qualifications were drafted.
- Curriculum for the authorised pharmacist prescriber qualification was drafted.

- Criteria for temporary registration of foreign qualified pharmacists for voluntary/volunteer service were approved.
- Criteria for the accreditation/approval by the South African Pharmacy Council of a curriculum leading to the awarding of a BPharm degree were finalised.
- First draft of the qualifications for the pharmaceutical sales representatives was compiled.
- First draft of the qualification for the pharmacy general assistants was compiled.

## Development of pharmacy practice standards

### The following standards were finalised:

- Minimum standards relating specifically to courier pharmacies.
- Minimum standards for the procurement, storage and distribution of thermolabile pharmaceutical products.

### Generation of CPD standards

Criteria for accreditation of CPD courses were approved.

### Promotion of quality amongst providers

A meeting of the heads of pharmacy schools was held on 17 May 2012 to discuss various issues affecting higher education and training.

## Legal Services and Company Secretary



Debbie Hoffmann  
Senior Manager: Legal Services & Company Secretary

### Strategic Focus Area

2012 saw the establishment of the Legal Services and Company Secretary (LS&CS) Department, with the department being headed by the Senior Manager: Legal Services and Company Secretary reporting directly to the Registrar.

Being a newly established department the year was influenced largely by defining and establishing the scope of the work of the department and the job descriptions of the staff/potential staff. As a result a number of focus areas for the LS&CS Department were identified for review and implementation in 2013.

### Council's compliance with and within the statutory and regulatory framework

#### Council's input into proposed national legislation and policy

Council identified the need to improve its input into proposed legislation and policies that could potentially impact on Council, both directly and indirectly. 2012 was a year that saw a substantial output of proposed legislation by the South African Nursing Council and the Medicines Control Council, as well as proposed policies by various education bodies, including the Department of Higher Education and Training. The LS&CS Department was instrumental in distributing the proposed legislation and policies, collating and formulating Council's input thereto. Of significant importance, Council's comments and input included:

- Comments to the Minister of Health in respect of the proposed Nursing Council's Regulations pertaining to the keeping and supply et al of medicines.
- Comments and recommendations to the Minister of Health pertaining to the Medicines and Related Substances Amendment Act, which has a direct effect on the pharmacy profession and the Council.
- Comments, concerns and input to the Minister of Higher Education and Training pertaining to the Green Paper for *Post-School Education and Training*, as well as the proposed National Qualification Sub-Frameworks for the Quality Councils.

#### Publication of Board Notices under the Pharmacy Act

In addition to the annual publication of Board Notices pertaining to the fees payable to Council, in 2012 the LS&CS Department facilitated the publication of the Good Pharmacy Practice standards relating to the disposal and destruction of medicines and the amended standards relating to pharmacy premises, in particular a pharmacy within another business.

### Provision of legal support and legal administration

#### Certificates of good standing

The Council provides, on application, certificates of good standing for persons registered with Council. The certificate is normally required by regulatory bodies outside of South Africa who perform similar or the same regulatory functions as the Council. While the Council provides the service to such applicants, the statistics compiled as a result of issuing certificates of good standing can be used as a single indicator when looking at the human resources in pharmacy and the potential skills drain in the profession to other countries. In total, Council, under the Registrar, issued 48 certificates of good standing. For statistical purposes the top five destinations for such certificates are presented in the table below.

Destination	Number
United Kingdom	13
Namibia	8
Canada	7
Australia	6
USA	5

Table 25: Certificates of good standing issued to top five destinations



South African Pharmacy Council

*"Isn't it nice to think that tomorrow is a new day with no mistakes in it yet?"  
- LM Montgomery*

It is intended that the data captured in 2011, 2012 and 2013 be analysed in 2013 to determine the following trends in potential human resources movement:

- male/female ratio
- applicants from African countries, including RSA
- reasons for the application, be it for dual registration in another country, temporary relocation or emigration.

#### **Certificates pertaining to proof of registration**

Section 26 of the Pharmacy Act provides that a certificate signed by the Registrar will be proof that a person or pharmacy is or is not registered or recorded under the provisions of the Act. It is therefore often required in legal proceedings, be it civil or criminal, that the Registrar is required to provide proof of registration certificates. In 2012 a total of 25 certificates were issued under section 26.

#### **Legal enquiries**

The LS&CS Department provides a service to the public, being often the profession and stakeholders, by attending to and answering enquiries pertaining to legal issues. During 2012 the LS&CS Department addressed 117 legal enquiries that covered almost every aspect of legislation pertaining to the pharmacy profession, directly or indirectly. Only the most prevalent topics are listed herein:

- Issues pertaining to the future education and training of pharmacist's assistants in the new pharmacy support personnel cadres
- Responsibilities and functions of the responsible pharmacist
- Licensing of pharmacies, issues and procedures
- Advertising of scheduled medicines
- Schedule 6 medicines – issues relating to the theft thereof and register keeping.

## **Litigation**

The Senior Manager LS&CS is required to represent Council or coordinate all litigation matters on behalf of Council. In this regard the Senior Manager provided assistance to Council in one matter related to a human resources issue, referred to the CCMA, and coordinated on behalf of Council the briefing of legal representation and all other actions required to oppose a Rule 53 of the High Court Rules Application for review, which matter was still *sub judice* at the end of 2012.

## **Corporate conduct**

The drafting and implementing of contracts and policies are integral in the management of corporate conduct. In this regard the LS&CS Department was instrumental in ensuring that 19 service level agreements, of which nine were new service level agreements and the remainder the renewal or revision of existing agreements, adhered to the required standard of corporate conduct in the best interests of the Council. In addition the LS&CS Department provided input and comment to 11 new proposed corporate policies.

# Human Resources



*“Our lives begin to end the day we become silent about things that matter”  
- Martin Luther King Jr.*



John Mashishi  
Manager: Human Resources

## Strategic focus area

The activities of the HR Department are focused on one strategic objective of Council, which is to provide managerial and administrative support to the Office of the Registrar.

In line with this strategic focus area the HR Department is responsible for:

- human resources management
- ensuring total quality management (TQM) in all activities relating to planning, organising, co-ordinating and providing guidance across the full spectrum of HR
- the effective administration of payroll for all Council employees and consultants
- providing secretariat services to the Bargaining Committee.

## Employment equity

There was a significant improvement regarding employment equity within Council, however the equity level was not achieved when the Council staff demographics are compared with the breakdown of the national population. (See the tables below for ease of reference). This is particularly evident with people of Indian and Coloured descent and people living with disabilities.

A new Employment Equity Plan with numerical goals was developed and will be operational from 2013–2018. Labour movements were engaged to make analysis and inputs and ongoing efforts will ensure that all future appointments are geared towards achieving the targets. Labour movements will form part of monitoring the implementation process and Council will make special efforts to employ suitably qualified, disabled candidates.

### Breakdown of the Council workforce 2012

The employment level as per race groups and gender in the South African Pharmacy Council is as follows:

African		Coloured		Indian/Asian		White	
Male	Female	Male	Female	Male	Female	Male	Female
23	35	0	2	0	1	0	9
58		2		1		9	
83%		3%		1%		13%	

Table 26: Breakdown of SAPC workforce in 2012

Human Resources staff members participating in Council's 'Adopt a School – Nurture a Pharmacist' social responsibility campaign



## Employment equity table showing Council staff demographics as at 31 October 2012

Occupational Levels	Male				Female				Foreign Nationals		Total
	A	C	I	W	A	C	I	W	Male	Female	
Top management	2	0	0	0	0	0	0	0	1	0	3
Senior management	2	0	0	0	2	0	0	2	0	0	6
Professionally qualified and experienced specialists and mid-management	5	0	0	0	4	0	1	1	0	0	11
Skilled technical and academically qualified workers, junior management, supervisors, foremen, and superintendents	3	0	0	0	9	0	0	3	0	0	15
Semi-skilled and discretionary decision making	8	0	0	0	19	2	0	2	0	0	31
Unskilled and defined decision making	1	0	0	0	0	0	0	0	0	0	1
<b>TOTAL PERMANENT</b>	<b>21</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>34</b>	<b>2</b>	<b>1</b>	<b>8</b>	<b>1</b>	<b>0</b>	<b>67</b>
Temporary employees	2	0	0	0	1	0	0	1	0	0	4
<b>GRAND TOTAL</b>	<b>23</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>35</b>	<b>2</b>	<b>1</b>	<b>9</b>	<b>1</b>	<b>0</b>	<b>71</b>

Table 27: Staff demographics as at 31 October 2012

## Employee development and training

The skills training in the year under review was offered mostly to managers and supervisors. Financial assistance towards studies was afforded to a number of employees furthering their studies in 2012.

The HR Department complied with the Skills Development Act in adhering to the development and submission of the workplace skills plan and annual training report to the relevant SETA. This compliance qualified the Office of the Registrar to claim the levy paid towards skill development. The skills training was offered as per the table below:

Course description	Category	No. of attendees
Performance management	Management	21
Project management	Management	21
Communication strategy	Management	1
Effective management skills	Supervisors	15
Call centre operation	Staff	2

Table 28: Skills training offered in 2012

Financial assistance towards studies was afforded as per the table below:

Under/Postgraduate	Category	No. of beneficiaries
DBL/MBL	Management	2
BComm Science	Management	1
BComm Science	Staff	1
LLB	Staff	2
ND Office Management	Staff	1
Advance Programme SCM	Staff	1
Programme Customer Management	Staff	1
Bookkeeping Certificate Course	Staff	2
ICDL	Staff	1
Total	Staff	12

Table 29: Breakdown of study assistance offered in 2012

## Employee recruitment and retention

In the year under review a number of appointments were made. Some of the positions intended for 2012 were held in abeyance to avail resources for other, needier departments. This was carried out within the limits of the budget and time frames.

The table below illustrates the status of the positions in the various departments.

No. of positions	No. of positions filled	Filled in 2012	Vacant
<b>Corporate Services</b>			
6	5	0	1
<b>Human Resources</b>			
3	2	0	1
<b>Information Technology</b>			
4	2	1	2
<b>Finance</b>			
13	12	2	1
<b>Communications &amp; Stakeholder Relations</b>			
29	24	4	5
<b>Professional Affairs &amp; Standards</b>			
28	24	6	4
<b>GRAND TOTAL</b>	<b>TOTAL</b>	<b>TOTAL</b>	<b>TOTAL</b>
<b>83</b>	<b>69</b>	<b>13</b>	<b>14</b>

Table 30: Status of positions in the various departments

The filling of positions was put on hold and the departments relied on sessional employment during peak periods.

## Employee wellness

Council acknowledged the need to strengthen the employee wellness programme and requested service providers offering focused and comprehensive employee assistance programmes to look solely at employee assistance. Healthi Choices was selected to provide this service and implementation of the programme will commence in 2013.

## Employee compensation, incentives and performance recognition

Council remunerates employees in terms of the Remuneration Policy and rewards performance that exceeds the expected level as contained in the Performance Policy and Guidelines. The table below reflects the recognition afforded to staff per department for the period 2012.

Department	No. of employees	No. awarded recognition
Communications & Stakeholder Relations	23	10
Finance	12	12
Monitoring, Compliance and Professional Conduct	11	9
Professional Standards and Accreditation	5	4
CPD, Licensing, Pre-registrations and Registrations	10	9
Information Technology	3	3
Corporate Services	5	5
Human Resources	2	2
<b>Total</b>	<b>71</b>	<b>52</b>

Table 31: Breakdown of recognition



Elmari Venter  
Senior Manager: Communications &  
Stakeholder Relations

## Strategic focus area

The activities of the Communications and Stakeholder Relations Department are focused on four strategic objectives of Council:

- 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 transparency to the profession and the general public (corporate governance).
- Provide managerial and administrative support to the Office of the Registrar.

In line with the above strategic focus areas, the department is responsible for public relations, media relations, general communication and publication-related activities for both internal and external stakeholders. In addition the department is responsible for managing the Council's customer and logistics services.

## Communications and Stakeholder Relations

### Communications

The Communications and Stakeholders Relations (CSR) Department predominantly uses interactive communication portals to communicate with registered professionals, e.g bulk e-mails and smses containing information on various issues, including progress in terms of applications submitted. A statistical overview is shown on page 36 in terms of the use of these communication channels.

### Instant messaging and E-messages

A total of 38,577 smses were sent via the dashboard. These included standard operational acknowledgements in terms of incoming applications, progress and mailing thereof. Other sms campaigns from the sms portal included tutor/ intern communication, examination results, etc.

A total number of 63,284 e-mails were sent to pharmacy professionals to inform them about, inter alia, patient information rights, health recognition awards, national pharmacy awareness week, use of pharmacy automated dispensing units, annual fees, new online web functionality, 2013 National Pharmacy Conference and vacancies.

*Opposite page: CSR staff members participating in Council's 'Adopt a School – Nurture a Pharmacist' social responsibility campaign*



## Council's new ID registration card

Council launched its new five-year ID registration card, a first for health statutory councils, in 2011. The cards boast security and barcode features with ID passport photos. From printing to couriering, the process is in-house, which simplifies the handling of communication queries. A total of 3,233 ID registration cards for, inter alia, pharmacy students, learner basic assistants, basic assistants, learner post-basic assistants, post-basic assistants, pharmacist interns, community service pharmacists and pharmacists were issued in 2012.

## Website

Council's website recorded 72,293 visitors in 2012. Online web functionality introduced the submission of online inspection reports, applications and payments. Data shows that 77% of hits rated the website as 'pretty cool' (see Figure 5 below). The secure side of the website has an average of 4,610 logins per month. Web tutorials that have been drafted assist pharmacy professionals in the use of the online functionality.

In 2012 registered persons were, for the first time, able to apply online for registration as responsible pharmacists (RPs), pharmacist interns and community service pharmacists.

Registered professionals are now able to register on [www.sapc.za.org](http://www.sapc.za.org) and maintain and update their personal details, upload their ID photos, make online credit card payments, submit online progress reports, update CPD activities, download annual fee invoices or receipts, and submit online applications as tutors. RPs may resign online and people may apply for voluntary removal.

## Website functionality opinion poll

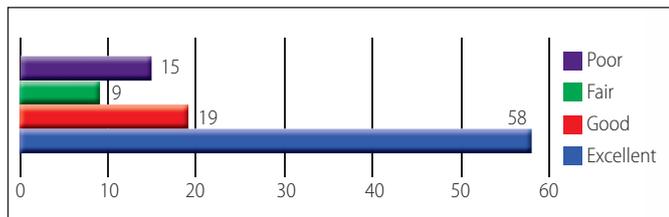


Figure 5: Web online functionality and login rating in 2012

## Service delivery opinion poll

In the period under review the majority of customers rated the service 'excellent' or 'good' (see Figure 6 below). Measures have been put in place to improve the 'fair' or 'poor' service ratings.

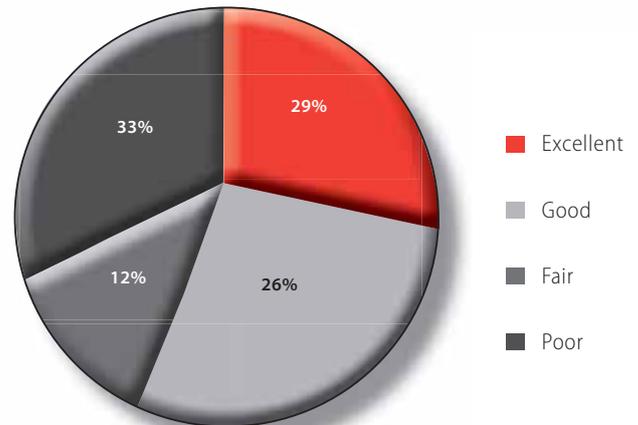


Figure 6: Service delivery rating on website in 2012

## Internal communication

The following campaigns were initiated and celebrated as special internal communication projects for the period under review:

- On 9 April 2012 the office had a 'one day without shoes' campaign where staff members donated shoes. Staff members spent the whole day without shoes.
- As part of honouring National Women's Day, the Registrar gave permission for the Office to close at 15:30 on 8 August 2012.
- A mid-year team building exercise was held on 30 August at Fountains Valley in Pretoria. Participants were divided into three groups – CSR (green team), Professional Affairs (yellow team) and Corporate Service (blue team). Sponsored T-shirts were presented to each team.
- On 30 August 2012 a career guidance campaign was held at Council's adopted school, Wozanibone Secondary School.

## Public and media relations

### Engaging with professional organisations

Council enjoyed valuable communication opportunities via informative exhibitions at four major pharmaceutical conferences during 2012:

- The 26th South African Association of Hospital Institutional Pharmacists (SAAHIP): 25–28 March 2012
- Pharmaceutical Society of South Africa (PSSA) conference: 29 May–1 June 2012
- Independent Community Pharmacy Association conference: 15–16 September 2012
- Gauteng Pharmaceutical Conference: 14–15 September 2012
- 6th Clicks Pharmacy Conference: 20–22 November 2012.

## National pharmacy awareness week

The overall theme, 'Towards Quality Care Together', was well supported during the 2012 Pharmacy Week, with a focus on the concerted sub-theme that every patient should know their medicines. This tied in well with the Department of Health's national core standards, and Council's vision of ensuring quality pharmaceutical service to all the people in South Africa.

The sub-theme '**Know your medicine**' encouraged patients to make sure they know and understand the medicines that pharmacists dispense to them. Patients are responsible for finding out from the pharmacists, before they leave the pharmacy, what the medication is intended to do and what side effects they might experience.

The article "**Together, the pharmacist and his/her patient can achieve the optimum pharmaceutical care results!**" was published during the campaign and the office was flooded with pharmacy week reports and photos which were published in *Pharmaciae*.

The Office of the Registrar attended the Pharmacy Week launch in Atteridgeville, Pretoria on Saturday, 1 September 2012, and the Limpopo Pharmacy Week launch on 3 September 2012. Various radio interviews were held and Council's President, Mr Bada Pharasi, represented the profession in an e.tv interview about pharmacy week.

## Publications

Information on the activities of Council, important Council resolutions and articles on a diversity of issues were available to all persons on the register through the official publication, *Pharmaciae*.

Two editions of *Pharmaciae* were produced during 2012 and, for the first time, the publication was outsourced, in terms of advertising, editing, design and layout, to the company E\_Doc. Although it was anticipated that this initiative could result in an annual cost saving of over R120 000 on printing and mailing expenditure, it did not work out as expected. This was essentially due to the procurement of advertisement sales secured through E-Doc. The Office of the Registrar will consider other options so that all publications and printed media are dealt with comprehensively.



## Media interactions

A number of topical press statements were released and the Office of the Registrar responded to these and other media queries from national newspapers. The Registrar represented the office during a Carte Blanche interview and the President during a morning interview on e.tv.

Council does not have a separate budget for public relations campaigns, but cognisance was taken of the importance of celebrating awareness days, public education and awareness campaigns. A budget for awareness campaigns and public information was considered when the 2013 budget was drafted. The official media spokespersons for Council are the Registrar and the President.

## Customer care contact centre

### Service delivery audit

A service delivery audit was conducted in April 2012 and the findings highlighted a few recommendations that are being attended to.

### Customer care (Pre-audit centre)

The pre-audit centre notifies customers instantly of the receipt of their documents or outstanding documents required for registration via sms or e-mail. This system assists customers with tracking their registration enquiries, follow-ups and progress in respect of their applications.

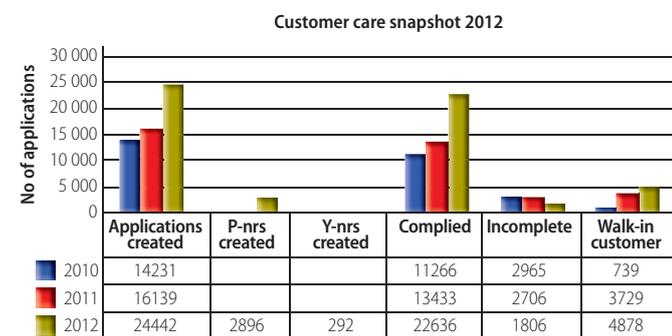


Figure 7: Individual dashboard applications created and processed in 2012

During 2012 the Customer Care Contact Centre validated 41% more individual applications than in 2011, a total of 24,442 applications as indicated in Figure 7. A customer care officer validated an average of 19.8 applications per day.

The number of complete applications submitted in 2012, 'complete' meaning applications that complied with Council's requirements, showed a 33% improvement. From the total number of applications submitted in 2012, 93% complied with Council's requirements and were, after validation, escalated to the technical departments for immediate processing. A total of 1,806 applications were followed-up for outstanding documentation. This total excluded the non-dashboard documents.

The Office of the Registrar received 24% more walk-in customers for speed desk registrations in 2012 compared with the same period in 2011. The service delivery opinion poll that was conducted indicated that 81% rated the service received as either 'excellent' or 'good'.

## Call centre

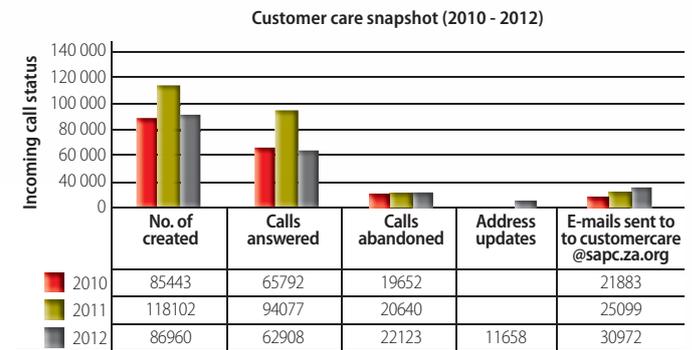


Figure 8: Call Centre snapshot 2010 to 2012

After 2011 the incoming calls status stabilised. Of significance is the 19% increase in e-mail traffic to Council's official e-mail address suggesting stakeholders prefer this to voice communication. Of the incoming calls, 56% of callers received 'queue' when they phoned in. The contact centre managed to achieve a service level of 41%.

## Logistics centre

The primary responsibilities of this unit include: scanning and imaging of all documents received; creating 35% of all new applications received and mailing cases on the dashboard; mailing and courier services; printing and binding of all authorised documentation; controlled access to all electronic and hardcopy records, including archiving and/or off-site storage of all records.

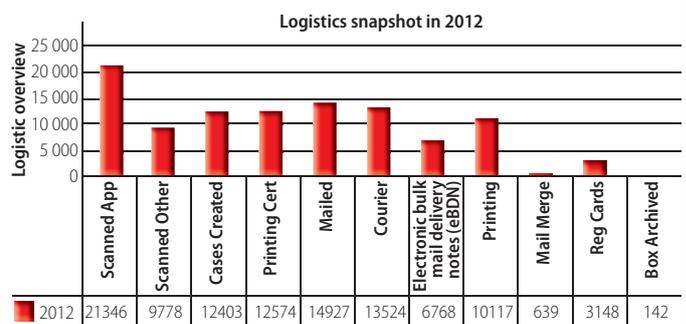


Figure 9: Logistics snapshot in 2012

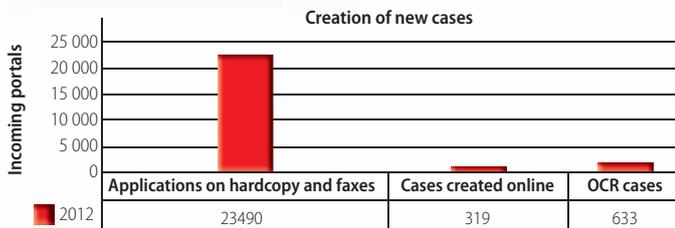


Figure 10: Comparison of cases to be created manually vs online character recognition (OCR) cases

After the implementation of the new organisational structure in December 2011, the CSR management expressed concern that the skills level of three of the four logistic clerks allocated to the logistic operations were inadequate to meet the service level demands of the unit.

This unit is the entry and exit point of all service delivery traffic in terms of creating cases, printing and mailing/couriering. The service delivery audit identified the time frames of this unit as a risk factor and Council's operational comments in terms of 'lost documents' were also raised.

### 2013 National Pharmacy Conference

The South African Pharmacy Council announced it would be hosting the 1st National Pharmacy Conference for Pharmacists in South Africa on 23–26 June 2013, at Sun City, North West Province.

Preliminary concept, branding, planning and appointment of a Conference and Event Co-ordinating company were done in the year under review.

## Public Education & Awareness Campaign

### Patient Rights and Responsibilities

In 2012 council embarked on a Patient Education Campaign to inform patients of their rights in terms of the *National Patient Rights Charter*, patients' responsibilities and to encourage the public to consult with pharmacists. This information campaign focused concertedly on the quality of care and service every patient is entitled to receive from a pharmacist, and on teamwork between a pharmacist and his/her patient.

The purpose of this campaign was to convey the message to the patient/public informing them that they have a right to comment on the quality of the pharmaceutical service they receive whether good or bad, and also to educate them about their responsibilities in a pharmacy. It is mandatory for every community and public/private institutional pharmacy in South Africa to conspicuously (visibly) display the two posters shown below. These posters, *Patient responsibility in a pharmacy* and *Patient rights in a pharmacy*, should be placed at the dispensary so patients can read them while waiting to be attended to. A dedicated e-mail address, [patient.rights@sapc.za.org](mailto:patient.rights@sapc.za.org), was also created for patients and public stakeholders to lodge their compliments and complaints, in terms of service delivery, with Council.



*“Success is not final,  
failure is not fatal:  
it is the courage  
to continue that  
counts”  
- Winston Churchill*



*Thabo Litabe  
Senior Manager: Information Technology*

## Strategic focus area

The activities of the Information Technology Department are focused primarily on one strategic objective of Council, to provide managerial and administrative support to the Office of the Registrar.

In line with this strategic focus area the department directs and manages computing and information technology strategic plans, policies, programmes and schedules for business and finance data processing, computer services, network communications, and management of information services to accomplish corporate goals and objectives.

## Connectivity

In terms of connectivity, the office is using ADSL and Diginet line. Both ADSL and Diginet lines are configured to work as failover to each other in the event of one line failure. The Office uses ADSL for internet browsing, e-mail and VPN. Diginet is dedicated for application services to allow communication between the SAPC internet website and the internal register system for any transaction on the SAPC internet website.

During the year 2012 an assessment was done on both lines which initiated change on both lines. Due to the cost on ADSL, it was imperative to change ADSL capped to ADSL uncapped, unshaped. This allows the office to use the same quality of ADSL service at less cost.

## Information Technology

The Diginet line was upgraded from 512KB to 1024K silver line to improve service performance. This line was over-utilized which resulted in poor service performance. Improvement on the line has improved user experience on the register systems. Council will consistently monitor these lines and adjust accordingly.

ADSL business monthly usage (1 July 2012 – 31 December 2012)				
Date	Uploaded (GB)	Downloaded (GB)	Net Transfer (GB)	Total Transfer (GB)
July 2012	12.659	35.291	47.950	47.950
August 2012	16.171	61.449	77.620	125.570
September 2012	15.117	56.482	71.599	197.170
October 2012	19.864	83.172	103.037	300.206
November 2012	26.676	38.803	65.480	365.686
December 2012	8.473	22.922	31.395	397.081

*Table 32: ADSL business monthly usage July – December 2012*

## IT policies

During 2012 the following IT policies were developed and approved:

- Change management policy: to standardise the methods and procedures used for efficient and effective handling of all IT changes.
- Project management policy: to ensure proper project management of all IT projects.
- Physical and environmental security policy: to establish a set of requirements that defines the minimum level of physical and environmental security for all the IT system facilities to safeguard information resources.
- Backup policy: to ensure that data it is not lost and can be recovered in the event of a natural disaster, intentional destruction of data, equipment failure and/or accidental loss of data.

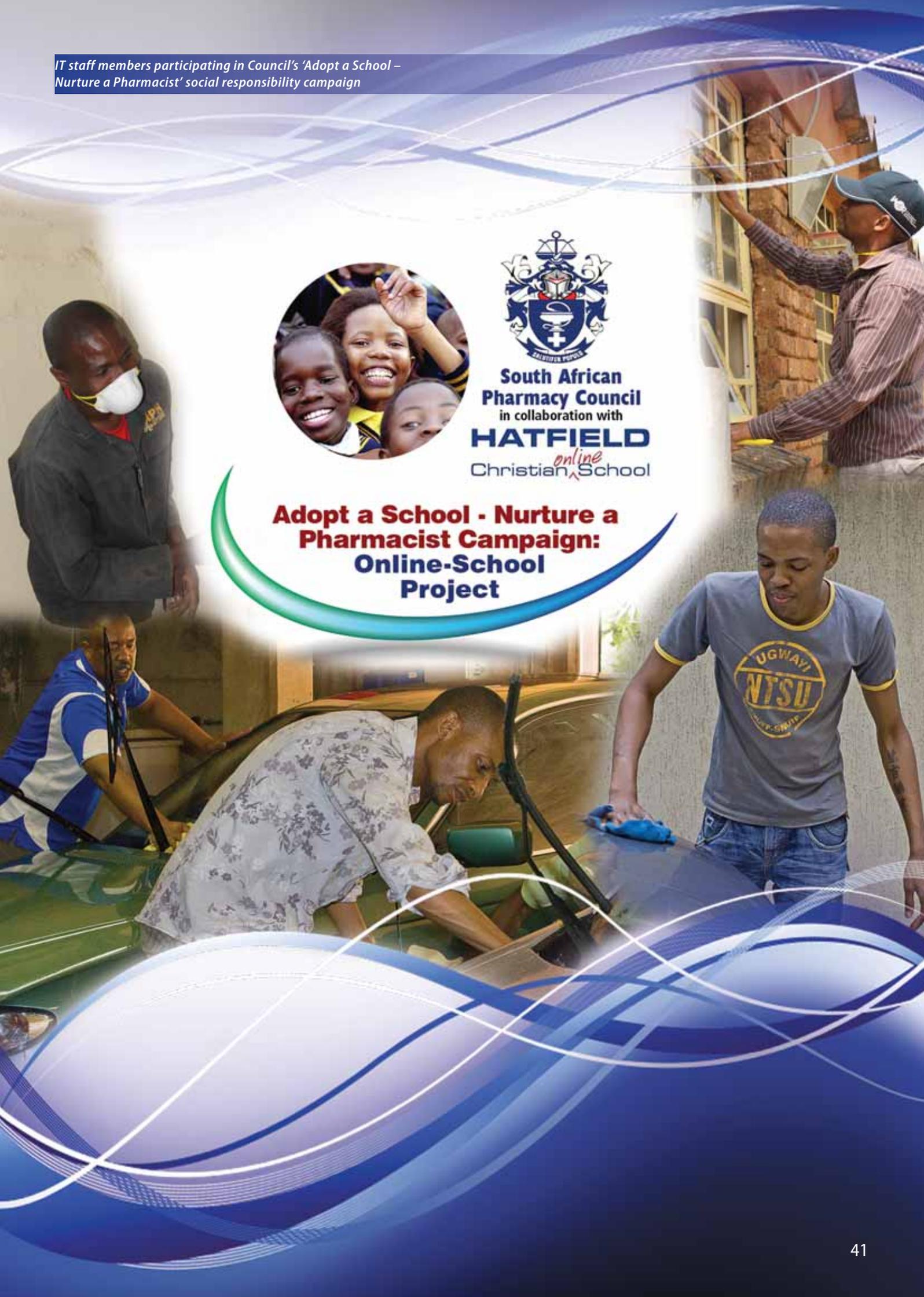
The above policies will be reviewed during 2013. Existing policies will be reviewed and all other required policies will be developed during 2013.

IT staff members participating in Council's 'Adopt a School – Nurture a Pharmacist' social responsibility campaign



South African  
Pharmacy Council  
in collaboration with  
**HATFIELD**  
*online*  
Christian School

**Adopt a School - Nurture a  
Pharmacist Campaign:  
Online-School  
Project**



## Programming, hardware and software

### Dashboard system

During the year 2012 developments were performed on the dashboard system to enhance its functionality as illustrated in the table below.

No further developments are envisaged on the dashboard system for 2013, however, continuous maintenance on dashboard will continue.

No.	Descriptions	Dept	Status (%)	Date completed	Status descriptions
1	Add Robot / SLA	Corporate Services	95%	N/A	Further functionality developments still required and will be finalised during the year 2013
2	Save sent smses under interactions tab	Corporate Services	100%	27 September 2012	Live
3	Allow sending of case number in sms	Corporate Services	100%	27 September 2012	Live
4	CLR SQL procedure for OCR	Customer Service & Public Relations	100%	7 August 2012	Live

Table 33: Developments on dashboard in 2012

### Register system

During the year 2012 there were programming developments required on the register system to enhance register system functionality. The table below illustrates the status of all the developments performed.

No.	Descriptions	Dept	Status (%)	Date completed	Status descriptions
1	Development of the online CPD assessment functionality	CPD, Pre-registration and Registration	100%	September 2012	Live
2	Changes to the register were made in the areas of clinics/satellite pharmacies and authorities to address regulations more effectively and provide increased efficiency and control	CPD, Pre-registration and Registration	95%	N/A	Final changes were required and the system will be ready for final testing in 2013
3	Integration of Scubed and register system to allow online claims	Human Resources	95%	N/A	Final changes were required and the system will be ready for final testing in the 2013
4	CPD business rules	CPD, Pre-registration and Registration	100%	August 2012	Live
5	Document management system on the register system	Finance	100%	September 2012	Live
6	Employee satisfaction survey	Human Resource	100%	September 2012	Live

Table 34: Developments on the register system in 2012

## Hardware

During the year 2012 the following hardware was procured as illustrated in the table below.

Descriptions	Quantity	Purpose	Department
Blades servers	2	To upscale server infrastructure for future growth and to decommission absolute servers that are due for an upgrade	IT
HP Proliant ML350 G8 server	1	To decommission the old firewall server that is due for an upgrade	IT
HP 20 inch monitors	20	To replace old faulty monitors	All departments where there was a need
HP 19 inch monitors	5	Additional monitors to allow dual display	2 x Finance 3 x CSR
HP desktops	13	Replacement of all old lenovo desktops that were due for an upgrade	Customer Service and Public Relations
Laptops	8	Replacement of old CEO laptop, replacement of desktops of secretariats and one laptop for a new manager	CEO Finance MCPC PSA CPD
Small office storage server	1	To allow additional space on the register system to accommodate high volume of data that does not require high speed storage	IT
HDD 900GB for servers	4	To have additional space for file server	IT
DDR memory for servers	4	To increase functionality of blade enclosure for failover	IT
Additional data cartridge for backups	5	To increase cartridges	IT

Table 35: Hardware procurements in 2012

## Software purchases and upgrades

### Purchases

The following software was procured during the 2012 financial year:

- Microsoft Office 2010 standard x 37
- Microsoft Project 2010 x 1
- Microsoft Visio 2010 x 1
- Manage-engine service desk plus (IT helpdesk system) – annual subscription.

### Upgrades

The following upgrades were done during the 2012 financial year:

- Adobe CS3 to Adobe CS6
- Symantec backup exec 2010 to Symantec backup exec 2012
- Symantec endpoint protection 11 to Symantec endpoint protection 12.1

*"If you're not staying on top of your money, you are putting your financial well-being at risk"*  
- Suze Orman

## Financial Management



Voster Himbotwe  
General Manager: Finance

- Provision of managerial and administrative support for the sustainability of Council as a going concern.

In line with the above strategic focus areas the Office of the Registrar ensures efficient and effective management of Council's financial resources, fixed assets and coordination of risk management in line with best practice.

This entails actively managing the affairs of Council indicated below.

### Strategic focus area

Financial Management Report is focused on two strategic objectives of Council:

- Promotion of transparency to the profession and the general public.



Mr T Boltman  
Chairperson: Audit Committee

It appraises the internal audit function and the audit efforts of the external auditors and provides a channel of communication between the external auditors, the internal audit unit and senior management.

The committee consists of five members appointed in terms of the Audit Committee Charter, three of whom are from outside the organisation, namely Mr T Boltman (chairperson), Mr C Kneale and Advocate MJ Ralefatane.

The two Council members are Ms L Osman and Mr K Johnson. In 2012, three meetings were arranged for the Audit Committee in line with the Audit Committee Charter.

### Coordination of standing committees of Council

#### Audit Committee

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



Bada Pharasi  
Chairperson: Trustees Committee (Board)

## Trustees Committee (Board)

The Board oversees the functioning of the SA Pharmacy Council Pension Fund (the Fund) which is a separate legal entity to SAPC. During the period under review amendments to the Fund rules for a defined contribution structure were approved by the Financial Services Board (FSB) and the South African Revenue Service (SARS). The three-year statutory valuation and audited financial statements of the Fund were submitted and approved by FSB.

The Fund general and governance information is as follows:

**Principal Officer:**

Mr V Himbotwe

**Administrator:**

ABSA Consultants and Actuaries (Pty) Ltd

**Valuator:**

Ms Venter

**Auditors:**

Geyster & Du Plessis

**Investment manager:**

Old Mutual

**Employer representatives:**

Mr OMB Pharasi (Chairperson)

Mr MS Choma

Mr TA Masango

Dr P Naidoo (Alternate)

**Employee representatives:**

Ms DG Hoffmann

Mr NJ Mashishi

Ms MM Mokoena

Mr D Nkuna (Alternate)

## Promotion of transparency to the profession and the general public

The core values of Council embrace the principles of good corporate governance, as contained in the King III Report on Corporate Governance for South Africa.

## Councillors

Council members meet four times annually and are responsible for 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 the King recommendations. The president holds a non-executive office. Council members set the overall policy for the organisation and make decisions on matters of strategic importance.

## Financial Statements

Council members are responsible for the preparation of annual financial statements that fairly present the financial position of the organisation and the results of its operations and cash flow information for the year then ended. The auditors, Ngubane & Co. Chartered Accountants Inc., are responsible for independently auditing and reporting on these financial statements. Their report is presented on pages 52-71. In preparing the financial statements the Council applied judgment and estimates, and adhered to the International Financial Reporting Standard for Small and Medium-sized Entities (IFRS for SMEs).

## Audit Committee

The Audit Committee is an independent committee established to provide oversight and additional assurance on the reliability and integrity of both financial and non-financial activities of Council. The Audit Committee is satisfied that the annual financial statements fairly present Council's financial position and recommended that Council members approve the annual financial statements. Their report is presented on page 48.

## Code of conduct

Council is committed to an exemplary standard of business ethics and transparency in all its dealings with stakeholders. Both Council members and employees are bound by a code of conduct. Conflict of interest is avoided during Council meetings. Gifts received, if accepted, are entered into a gift register in line with good corporate governance.

## Provision of managerial and administrative support for the sustainability of Council as a going concern

### Financial performance and position

Year	2008	2009	2010	2011	2012
Current assets (R)	18,834,545	13,370,580	7,862,340	9,443,139	15,358,998
Current liabilities(R)	13,706,069	15,132,491	11,112,746	12,317,016	18,049,632
Liquidity ratio	1.37	0.88	0.71	0.77	0.85
Income (R)	23,634,045	28,080,796	32,258,854	37,049,391	39,160,954
Expenditure(R)	23,769,404	28,042,607	32,075,207	36,814,079	41,109,098
Total comprehensive income for the year [Surplus/(deficit)](R)	(135,359)	38,189	183,647	235,312	(1,948,144)

The financial statements were audited by Ngubane & Co. Chartered Accountants Inc. and reviewed by the Audit Committee. The financial statements present fairly, in all material respects, Council's financial position, financial performance and cash flows for the year ended 31 December 2012 in accordance with IFRS for SMEs and the requirements of the Pharmacy Act, 53 of 1974.

Total assets grew by 26.75% on account of an increase in current assets in the form of receivables from members, cash, bank balances and short-term deposits leading to a liquidity ratio growth of 10.99%. Current liabilities increased by 46.54% on account of trade payables arising from advance payments of annual fees by members of the profession due at the beginning of the year 2013.

The growth of 5.7% in income was counteracted by the corresponding higher increase in employee-related costs on implementation of new organisational structures to improve service delivery, inspection costs for volume monitoring inspections conducted, and impairments on assets. New measures to improve revenue in line with cost of services will be implemented in the year 2013.

## Budgetary control

The budget compilation for the year 2012 was based on the 2013 Strategic Plan approved at the 12/13 October 2011 Council meeting. Budget performance reports were presented to executive management, the Executive Committee, the Audit Committee and the Council. At various committee meetings respective budget performance reports formed part of the agenda.

## Supply chain management

Council has adopted a proactive stance towards black economic empowerment. Procurement policies of Council are in support of government policy for the general good in addressing past imbalances. The prospective list of suppliers was updated. The adjudicating committee and tender committee presided on purchases above the value of R30 000 and R300 000 respectively.

## Business risk and internal controls assurance

A risk focused internal audit plan for the three years ending 31 December 2014 was developed by internal audit and approved by the Audit Committee. The internal audit function was outsourced to independent auditors, SAB&T Chartered Accountants Inc (SAB&T). SAB&T attended Audit Committee meetings to report on adequacy of internal controls implemented by management. Internal audit conducted the following assurance services and reported to the Audit Committee:

- service delivery, registrations and inspections;
- human resources management; and
- financial management.



*Finance staff members participating in council's 'Adopt a School – Nurture a Pharmacist' Social Responsibility campaign*



**South African  
Pharmacy Council**  
in collaboration with  
**HATFIELD**  
*online*  
Christian School

**Adopt a School - Nurture a  
Pharmacist Campaign:  
Online-School  
Project**

# Report of the Audit Committee

We are pleased to present our report for the financial year ended 31 December 2012.

## Audit Committee Members and Attendance

The Audit Committee consists of the members listed hereunder and meets at least three times per annum in accordance with its terms of reference.

Name of Member	Number of meetings attended 2012
Mr Trevor Boltman (Chairperson)	2
Mr KA Johnson	3
Ms L Osman	2
Adv. M Ralefatane	3
Mr CD Kneale	2

## Audit Committee Responsibility

The Audit Committee reports that it has complied with its responsibility arising from the International Financial Reporting standards appropriate to the Pharmacy Council. The Audit Committee also reports that it has adopted formal terms of reference as its audit committee charter, has regulated its affairs in compliance with this charter and has discharged all its responsibilities as contained therein.

## Effectiveness of Internal Control

The system of internal control is effective as the reports of the Internal Auditors, the Audit Report on the 2012 annual financial statements and management letter of Ngubane & Company Incorporated Chartered Accountants have not reported any material or non-compliance with prescribed policies and procedures.

## Evaluation of Financial Statements

The Audit Committee has:

- (a) reviewed and discussed with Ngubane & Company Incorporated Chartered Accountants and the Accounting Authority the audited annual financial statements;
- (b) reviewed Ngubane & Company Incorporated Chartered Accountants' management letter and management responses; and
- (c) reviewed significant adjustments resulting from the audit.

The Audit Committee concurs with and accepts the conclusions of Ngubane & Company Incorporated Chartered Accountants on the annual financial statements and is of the opinion that the audited financial statements be accepted and read together with the report of Ngubane & Company Incorporated Chartered Accountants.



**Mr T Boltman**

Chairperson of the Audit Committee

05 June 2013

## Financial Statements for the year ended 31 December 2012

### General Information

Country of incorporation and domicile	South Africa
Nature of business and principal activities	Pharmacy industry regulator
Members	Mr OMB Pharasi (President) Ms L Osman (Vice President) Mr MS Choma (Treasurer) Mr S Ramasala Mr CJ Cawood Mr CB Shabalala Mr DJH Defty Dr JC Gouws Ms ME Sclanders Mr KA Johnson Mr L Moshiga Ms TL Mulovhedzi Ms PB Santho Prof. AGS Gous Prof. CM Dangor Prof. DW Oliver Ms SEN Skweyiya Ms SI Boschmans Ms S Mthiyane Mr MC Joubert Mr HT Mphaka Dr P Naidoo Mr W Jordaan Ms N Makunzi Mr JT Meakings
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 Limited Investec Bank Limited
Auditors	Ngubane and Company (JHB) Inc. Chartered Accountants (S.A.)

The reports and statements set out below comprise the financial statements presented to the members:

<b>Index</b>	<b>Page</b>
Councillors' Responsibilities and Approval .....	51
Independent Auditors' Report.....	52
Councillors' Report.....	53 - 54
Statement of Financial Position .....	55
Statement of Comprehensive Income .....	56
Statement of Changes in Equity.....	57
Statement of Cash Flows .....	58
Accounting Policies.....	59 - 61
Notes to the Financial Statements .....	62 - 69

The following supplementary information does not form part of the financial statements and is unaudited:

Detailed Statement of Comprehensive Income .....	70 - 71
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## Councillors' Responsibilities and Approval

The councillors are responsible for the maintenance of adequate accounting records and the preparation and integrity of the financial statements and related information. It is their responsibility to ensure that the financial statements fairly present the state of affairs of the council as at the end of the financial year and the results of its operations and cash flows for the period then ended, in conformity with the International Financial Reporting Standard for Small and Medium-sized Entities. The external auditors are engaged to express an independent opinion on the financial statements.

The financial statements are prepared in accordance with the International Financial Reporting Standard for Small and Medium-sized Entities, requirements of the Pharmacy Act No 53 of 1974 and are based upon appropriate accounting policies consistently applied 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 council and place considerable importance on maintaining a strong control environment. To enable the councillors to meet these responsibilities, the councillors set standards of 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 council and all employees are required to maintain the highest ethical standards in ensuring the council's business is conducted in a manner that in all reasonable circumstances is above reproach. The focus of risk management in the council is on identifying, assessing, managing and monitoring all known forms of risk across the council. While operating risk cannot be fully eliminated, the council 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 financial statements. However, any system of internal financial control can provide only reasonable, and not absolute, assurance against material misstatement or loss. Nothing has come to the attention of the councillors to indicate that any material breakdown in the functioning of these controls, procedures and systems has occurred during the year under review.

The financial statements have been prepared on the going concern basis, since the councillors have every reason to believe that the council has adequate resources in place to continue in operation for the foreseeable future.

The financial statements set out on pages 53 to 71, were approved by councillors on 05 June 2013 and were signed on their behalf by:



Mr OMB Pharasi (President)



Mr TA Masango (Registrar)



Mr MS Choma (Treasurer)

## To the members of South African Pharmacy Council

We have audited the financial statements of South African Pharmacy Council as set out on pages 55 to 71, which comprise the statement of financial position as at 31 December 2012, and the statement of comprehensive income and statement of cash flows for the year then ended, the notes, comprising a summary of significant accounting policies and other explanatory information.

### Councillors' Responsibility for the Financial Statements

The councillors are responsible for the preparation and fair presentation of these financial statements in accordance with the International Financial Reporting Standard for Small and Medium-sized Entities, and requirements of the Pharmacy Act No 53 of 1974, and for such internal control as the councillors determine is necessary to enable the preparation of financial statements that are free from material misstatements, whether due to fraud or error.

### Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with International Standards on Auditing. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements 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 entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of South African Pharmacy Council as at 31 December 2012, and its financial performance and its cash flows for the year then ended in accordance with the International Financial Reporting Standard for Small and Medium-sized Entities, and the requirements of the Pharmacy Act No 53 of 1974.

### Supplementary Information

Without qualifying our opinion, we draw attention to the fact that supplementary information set out on pages 70 to 71 does not form part of the financial statements and is presented as additional information. We have not audited this information and accordingly do not express an opinion thereon.

### Other reports required by the Companies Act

As part of our audit of the financial statements for the year ended 31 December 2012, we have read the Councillor's Report for the purpose of identifying whether there are material inconsistencies between this report and the audited financial statements. This report is the responsibility of the respective preparer. Based on reading this report we have not identified material inconsistencies between this report and the audited financial statements. However, we have not audited this report and accordingly do not express an opinion on this report.

*Ngubane & Co.*  
**Ngubane and Company (JHB) Inc.**  
**Chartered Accountant (S.A)**  
**Director: Ephraem Sibanda**  
**Registered Auditor**  
**Midrand**  
**05 June 2013**

# Councillors' Report

The councillors submit their report for the year ended 31 December 2012.

## 1. Review of activities

### Main business and operations

The council is engaged in regulating the pharmacy industry and operates principally in South Africa.

The operating results and state of affairs of the council are fully set out in the attached financial statements and do not in our opinion require any further comment.

## 2. Going concern

The 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.

## 3. Events after the reporting period

The councillors are not aware of any matter or circumstance arising since the end of the financial year that has a material impact on the financial statements.

## 4. Councillors

The councillors during the year and up to the date of this report were as follows:

Name	Changes
Mr OMB Pharasi (President)	
Ms L Osman (Vice President)	
Mr MS Choma (Treasurer)	
Mr S Ramasala	
Mr CJ Cawood	
Mr CB Shabalala	
Mr DJH Defty	
Dr JC Gouws	
Ms ME Sclanders	
Mr KA Johnson	
Mr L Moshiga	
Ms TL Mulovhedzi	
Mr LF Ambler	Member until 15 March 2012
Ms PB Santho	
Prof. AGS Gous	
Prof. CM Dangor	
Prof. DW Oliver	
Ms SEN Skweyiyi	
Ms SI Boschmans	
Ms S Mthiyane	
Mr MC Joubert	
Mr HT Mphaka	
Dr P Naidoo	
Mr W Jordaan	
Ms N Makunzi	
Mr JT Meakings	Appointed 07 December 2012

## **5. Audit Committee**

The audit committee is constituted in terms of the requirements of sound corporate governance practices and operates within that framework. The committee consists of non-executive members of which two are councillors and three are independent professionals with accounting, auditing and legal backgrounds. The committee meets at least three times a year.

The primary responsibility of the committee is to assist the councillors in carrying out their duties relating to the council's accounting policies, internal control systems, financial reporting and practices. The external auditors formally report to the committee on critical findings arising from audit activities.

The committee members during the year were: Mr T Boltman; Mr KA Johnson; Ms L Osman; Advocate M Ralefatane and Mr C Kneale.

## **6. External Auditors**

External auditors of the South African Pharmacy Council are Ngubane & Company (JHB) Incorporated.

Address:

Building 01

Midrand Business Park

563 Old Pretoria Road

Midrand

1685

## Statement of Financial Position as at 31 December 2012

Figures in Rand	Notes	2012	2011 Restated
<b>Assets</b>			
<b>Non-Current Assets</b>			
Property and equipment	2	8 598 024	8 839 949
Intangible assets	3	1 902 302	2 199 927
		<b>10 500 326</b>	<b>11 039 876</b>
<b>Current Assets</b>			
Trade and other receivables	5	8 267 067	3 702 801
Cash and cash equivalents	6	7 091 931	5 740 338
		<b>15 358 998</b>	<b>9 443 139</b>
<b>Total Assets</b>		<b>25 859 324</b>	<b>20 483 015</b>
<b>Reserves and Liabilities</b>			
<b>Reserves</b>			
Retained income		4 270 855	6 218 999
<b>Liabilities</b>			
<b>Non-Current Liabilities</b>			
Finance lease obligation	7	116 837	-
Retirement benefit obligation	4	3 422 000	1 947 000
		<b>3 538 837</b>	<b>1 947 000</b>
<b>Current Liabilities</b>			
Finance lease obligation	7	23 876	-
Trade and other payables	9	16 833 727	11 435 359
Provisions	8	1 192 029	881 657
		<b>18 049 632</b>	<b>12 317 016</b>
<b>Total Liabilities</b>		<b>21 588 469</b>	<b>14 264 016</b>
<b>Total Equity and Liabilities</b>		<b>25 859 324</b>	<b>20 483 015</b>

## Statement of Comprehensive Income

Figures in Rand	Notes	2012	2011 Restated
Revenue	10	37 847 423	35 590 018
Other income	11	921 123	1 010 910
		<b>38 768 546</b>	<b>36 600 928</b>
Operating expenses		(39 245 902)	(35 297 648)
<b>Operating (loss) surplus</b>	12	<b>(477 356)</b>	<b>1 303 280</b>
Investment revenue	13	392 408	448 463
Finance costs	14	(1 863 196)	(1 516 431)
<b>(Loss) surplus for the year</b>		<b>(1 948 144)</b>	<b>235 312</b>
Other comprehensive income		-	-
<b>Total comprehensive (loss) income for the year</b>		<b>(1 948 144)</b>	<b>235 312</b>

## Statement of Changes in Equity

Figures in Rand	Notes	2012	2011 Restated
Opening balance as previously reported		6 048 885	6 048 885
Adjustments			
Prior year adjustments		(65 198)	(65 198)
<b>Balance at 01 January 2011 as restated</b>		<b>5 983 687</b>	<b>5 983 687</b>
Surplus for the year		235 312	235 312
Other comprehensive income		-	-
<b>Total comprehensive income for the year</b>		<b>235 312</b>	<b>235 312</b>
<b>Balance at 01 January 2012</b>		<b>6 218 999</b>	<b>6 218 999</b>
Loss for the year		(1 948 144)	(1 948 144)
Other comprehensive income		-	-
<b>Total comprehensive loss for the year</b>		<b>(1 948 144)</b>	<b>(1 948 144)</b>
<b>Balance at 31 December 2012</b>		<b>4 270 855</b>	<b>4 270 855</b>

## Statement of Cash Flows

Figures in Rand	Notes	2012	2011 Restated
<b>Cash flows from operating activities</b>			
Cash generated from operations	16	4 392 502	1 928 941
Interest income		392 408	448 463
Finance costs		(1 859 559)	(1 516 431)
<b>Net cash from operating activities</b>		<b>2 925 351</b>	<b>860 973</b>
<b>Cash flows from investing activities</b>			
Acquisition of property and equipment	2	(1 077 774)	(654 528)
Sale of property and equipment	2	(275 152)	6 785
Development of intangible assets	3	(357 908)	(1 126 354)
<b>Net cash from investing activities</b>		<b>(1 710 834)</b>	<b>(1 774 097)</b>
<b>Cash flows from financing activities</b>			
Finance lease payments		137 076	-
<b>Total cash movement for the year</b>		<b>1 351 593</b>	<b>(913 124)</b>
Cash at the beginning of the year		5 740 338	6 653 462
<b>Total cash at end of the year</b>	6	<b>7 091 931</b>	<b>5 740 338</b>

# 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 No 53 of 1974. The financial statements have been prepared on the historical cost basis, except for certain financial instruments at fair value, 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, except for the changes set out in note Changes in accounting policy.

### 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.

#### Estimated value of employee benefit plan

Assumptions were made in the valuation of the council's retirement benefit plan. Details of the assumptions and risk factors used are set out in note 4.

#### Other estimates made

The Council also makes estimates for:

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

### 1.2 Property and equipment

Property and equipment are tangible items that:

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

Costs include costs incurred initially to acquire or construct an item of property 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 and equipment, the carrying amount of the replaced part is derecognised.

Property and equipment is carried at cost less accumulated depreciation and any impairment losses.

Depreciation is provided using the straight-line method to write down the cost, less estimated residual value over the useful life of the property and equipment, which is as follows:

Item	Average useful life
Buildings	20 years
Furniture and fixtures	10 years
Motor vehicles	4 years
Office equipment	5 years
Computer software	3 years

Land is not depreciated as it is deemed to have an indefinite life.

The carrying value 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 Intangible assets

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, to their residual values as follows:

Item	Useful life
Computer software	5 years

# Accounting Policies

## 1.4 Financial instruments

### Financial instruments at amortised cost

#### Initial Recognition

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.

#### Trade and other receivables

Trade receivables are measured at initial recognition at fair value, and are subsequently measured at amortised cost using the effective interest rate method. Appropriate allowances for estimated irrecoverable amounts are recognised in profit or loss when there is objective evidence that the asset is impaired. Significant financial difficulties of the debtor, probability that the debtor will enter bankruptcy or financial reorganisation, and default or delinquency in payments are considered indicators that the trade receivable is impaired. The allowance recognised is measured as the difference between the asset's carrying amount and the present value of estimated future cash flows discounted at the effective interest rate computed at initial recognition.

The carrying amount of the asset is reduced through the use of an allowance account, and the amount of the loss is recognised in the statement of comprehensive income within operating expenses. When a trade receivable is uncollectible, it is written off against the allowance account for trade receivables. Subsequent recoveries of amounts previously written off are credited against operating expenses in the statement of comprehensive income.

#### Trade and other payables

Trade payables are initially measured at fair value, and are subsequently measured at amortised cost, using the effective interest rate method.

#### Cash and cash equivalent

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.

## 1.5 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 expense 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.

## 1.6 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.

## 1.7 Employee benefits

### Defined contribution plans

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 the employee.

Employee and employer contributions to defined contribution plans are recognised as an expense in the year in which incurred.

# Accounting Policies

## Defined benefit plans

When it is virtually certain that another party will reimburse some or all of the expenditure required to settle a defined benefit obligation, the right to reimbursement is recognised as a separate asset. The asset is measured at fair value. In all other respects, the asset is treated in the same way as plan assets. In the statement of comprehensive income, the expense relating to a defined benefit plan is presented as the net of the amount recognised for a reimbursement.

Under defined benefit plan, the council has an obligation to provide the agreed benefits to current and former employees. The actuarial and investment risks are borne by the council. For defined benefit plan, the cost of providing benefits is determined using the Projected Unit Credit Method, with actuarial valuations being carried out at each reporting date.

The current service cost in respect of defined benefit plan is recognised as an expense in the year to which it relates.

Actuarial gain or losses are all recognised in the statement of comprehensive income immediately as per the choice of the council. The council chose not to restrict recognition of these gains or losses in terms of the corridor approach.

Past service cost is recognised immediately to the extent that it relates to former employees or to active employees already vested. Otherwise, it is amortised on a straight-line basis over the average period until the amended benefits become vested.

Adjustments relating to retired employees are expensed in the year in which they arise. Deficits arising on this fund, if any, are recognised immediately. The defined benefit obligation recognised in the statement of financial position, if any, represents the present value of the defined benefit obligation as adjusted for unrecognised past service costs (if any) and as reduced by the fair value of plan assets. Any asset resulting from this calculation is limited to past service cost (if any) plus the present value of available refunds and reductions in future contributions to the plan.

## 1.8 Provisions and contingencies

Provisions are recognised when:

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

The amount of a provision is the present value of the expenditure expected to be required to settle the obligation.

Additional disclosure of these estimates of provisions are included in note 8.

Contingencies are disclosed in note 18.

## 1.9 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.

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

## Notes to the Financial Statements

Figures in Rand

2012

2011

### 2. Property and equipment

	2012			2011		
	Cost	Accumulated depreciation	Carrying value	Cost	Accumulated depreciation	Carrying value
Land	600 000	-	600 000	600 000	-	600 000
Buildings	9 673 292	(4 065 231)	5 608 061	9 523 923	(3 582 963)	5 940 960
Furniture and fixtures	1 917 961	(815 182)	1 102 779	1 807 337	(687 225)	1 120 112
Motor vehicles	155 220	(155 219)	1	155 220	(155 219)	1
Office equipment	1 458 389	(868 247)	590 142	1 183 163	(613 792)	569 371
IT equipment	1 924 514	(1 227 473)	697 041	1 709 969	(1 100 464)	609 505
<b>Total</b>	<b>15 729 376</b>	<b>(7 131 352)</b>	<b>8 598 024</b>	<b>14 979 612</b>	<b>(6 139 663)</b>	<b>8 839 949</b>

### Reconciliation of property and equipment 2012

	Opening balance	Additions	Disposals	Depreciation	Total
Land	600 000	-	-	-	600 000
Buildings	5 940 960	149 369	-	(482 268)	5 608 061
Furniture and fixtures	1 120 112	148 814	(2 848)	(163 299)	1 102 779
Motor vehicles	1	-	-	-	1
Office equipment	569 371	280 993	(2 600)	(257 622)	590 142
IT equipment	609 505	498 598	-	(411 062)	697 041
	8 839 949	1 077 774	(5 448)	(1 314 251)	8 598 024

### Reconciliation of property and equipment 2011

	Opening balance	Additions	Disposals	Depreciation	Total
Land	600 000	-	-	-	600 000
Buildings	6 323 183	90 587	-	(472 810)	5 940 960
Furniture and fixtures	1 201 359	74 348	(6 121)	(149 474)	1 120 112
Motor vehicles	16 000	-	-	(15 999)	1
Office equipment	596 371	86 259	(18 922)	(94 337)	569 371
IT equipment	550 527	403 334	(4 309)	(340 047)	609 505
	9 287 440	654 528	(29 352)	(1 072 667)	8 839 949

### Assets subject to finance lease (Net carrying amount)

Office equipment	136 111	-
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### Details of properties

Land and building is situated at 591 Belvedere Street, Arcadia; Pretoria. The title deed number to the property is Erf 1470 Arcadia, Pretoria in the extent of 1708 sqm.

## Notes to the Financial Statements

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### 3. Intangible assets

	2012			2011		
	Cost	Accumulated depreciation	Carrying value	Cost	Accumulated depreciation	Carrying value
Computer software	3 050 984	(1 148 682)	1 902 302	2 693 077	(493 150)	2 199 927

#### Reconciliation of property and equipment 2012

	Opening balance	Additions	Amortisation	Total
Computer software	2 199 927	357 908	(655 533)	1 902 302

#### Reconciliation of intangible assets 2011

	Opening balance	Additions	Amortisation	Total
Computer software	1 304 600	1 126 354	(231 027)	2 199 927

### 4. Retirement benefits

#### Defined benefit plan

As at 01 July 2010 the structure of the council pension fund changed from defined benefit plan to defined contribution plan. The rules of the fund states that a member is entitled to a benefit on the defined contribution basis, with a guarantee that it will not be less than the benefit the member was entitled to on the defined benefit basis.

The Council Pension Fund was established on 1 July 1977. The Rules of the fund were revised with effect from 01 July 2010.

The council is yet to fully fund the defined benefit plan liability that arose before migration to defined contribution plan.

The most recent actuarial valuation of the plan assets and the present value of the defined obligations were carried out on 31 December 2012 by Absa Consultants and Actuaries. The present value of the defined benefit obligation and the related current service costs were measured using the Projected Unit Credit Method.

#### Carrying value

Present value of the defined benefit obligation wholly funded	(26 095 000)	(19 888 000)
Fair value of plan assets	22 673 000	17 941 000
	<b>(3 422 000)</b>	<b>(1 947 000)</b>

#### Reconciliation of opening and closing balances of the defined benefit obligation

Opening balance	1 947 000	1 092 000
Contributions by members and transfer values	(3 542 000)	(2 538 000)
Net expense recognised in profit or loss	5 127 000	3 393 000
	<b>3 532 000</b>	<b>1 947 000</b>

## Notes to the Financial Statements

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### Net expense recognised in profit or loss

Current service cost	2 758 000	2 321 000
Interest cost	1 841 000	1 512 000
Actuarial (gains) losses	2 541 000	1 186 000
Expected return on plan assets	(2 013 000)	(1 626 000)
	<b>5 127 000</b>	<b>3 393 000</b>

The above cost for the year are included in payroll costs and interest expense in the statement of comprehensive income.

### Key assumptions used

Assumptions used on last valuation on 31 December 2012.

Discount rates used	8,68%	8,80%
Expected rate of return on assets	10,60%	10,40%
Expected rate of general inflation	5,60%	6,40%
Expected increase in salaries	6,60%	7,40%

Assumptions regarding mortality are based on published tables and are consistent with previous statutory valuations.

### 5. Trade and other receivables

Trade receivables	8 100 654	3 199 060
Deposits	119 180	29 556
Accrued income	47 233	83 797
Prepayment: City of Tshwane	-	390 388
	<b>8 267 067</b>	<b>3 702 801</b>

The councillors consider carrying amounts of the trade and other receivables to approximate their fair values.

### 6. Cash and cash equivalents

Cash and cash equivalents consist of:

Cash on hand	1 090	1 895
Bank balances	3 926 561	3 484 425
Short-term deposits	3 164 280	2 254 018
	<b>7 091 931</b>	<b>5 740 338</b>

The weighted average effective interest rate on short-term deposits is 6.31% (2011 : 7.4%).

## Notes to the Financial Statements

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### 7. Finance lease obligation

Minimum lease payments due		
- within one year	123 294	-
- in second to fifth year inclusive	25 195	-
	148 489	-
less: future finance charges	(7 776)	-
<b>Present value of minimum lease payments</b>	<b>140 713</b>	<b>-</b>
Non-current liabilities	116 837	-
Current liabilities	23 876	-
	<b>140 713</b>	<b>-</b>

### 8. Provisions

Reconciliation of provisions 2012

	Opening balance	Additions	Total
Provision - leave	881 657	310 372	1 192 029

Reconciliation of provisions 2011

	Opening balance	Additions	Total
Provision - leave	813 092	68 565	881 657

### 9. Trade and other payables

Trade payables	877 694	1 861 099
VAT	316 004	223 212
Income received in advance - 2013 fees	15 471 710	9 308 655
Other payables - Department of Health	60 291	41 427
Deposits received	108 028	-
Accrued expenses	-	966
	<b>16 833 727</b>	<b>11 435 359</b>

The councillors consider carrying amounts of the trade and other payables to approximate their fair values.

### 10. Revenue

Annual and registration fees	32 889 690	30 725 744
Examination fees	34 267	138 236
Other revenue	4 923 466	4 726 038
	<b>37 847 423</b>	<b>35 590 018</b>

## Notes to the Financial Statements

Figures in Rand

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### 11. Other income

Sponsorship	250 175	343 999
VAT refund	670 948	242 075
Prepaid expense	-	424 836
	<b>921 123</b>	<b>1 010 910</b>

### 12. Operating (loss) surplus

Operating (loss) surplus for the year is stated after accounting for the following:

#### Operating lease charges

Lease rentals on operating lease - 1

• Contractual amounts	597 001	399 755
Loss (profit) on sale of property and equipment	(280 600)	(22 567)
Legal expenses	106 404	353 946
Amortisation on intangible assets	655 532	231 027
Depreciation on property and equipment	1 314 251	1 072 667
Employee costs	23 627 982	19 303 287
Research and development	215 387	708 128

### 13. Investment revenue

Interest revenue

Bank	392 408	448 463
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### 14. Finance costs

Finance leases	3 637	-
Retirement fund interest	1 841 000	1 512 000
Trade payables	18 559	4 431
	<b>1 863 196</b>	<b>1 516 431</b>

### 15. Auditors' remuneration

Fees	152 952	131 269
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## Notes to the Financial Statements

Figures in Rand

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### 16. Cash used in operations

(Loss) surplus before taxation	(1 948 144)	235 312
<b>Adjustments for:</b>		
Depreciation and amortisation	1 969 783	1 303 694
(Loss) profit on sale of assets	280 600	22 567
Interest received	(392 408)	(448 463)
Finance costs	1 863 196	1 516 431
Movements in retirement benefit assets and liabilities	1 475 000	855 000
Movements in provisions	310 372	68 565
<b>Changes in working capital:</b>		
Trade and other receivables	(4 564 266)	(2 493 923)
Trade and other payables	5 398 369	869 758
	<b>4 392 502</b>	<b>1 928 941</b>

### 17. Commitments

#### Authorised capital expenditure

##### Committed but not contracted

• Property and equipment	2 681 245	1 941 000
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This authorised expenditure relates to property and equipment and will be financed by funds internally generated.

#### Finance leases – as lessee payments

##### Minimum lease payments due

- within one year	123 294	-
- in second to fifth year inclusive	25 195	-
	<b>148 489</b>	<b>-</b>

Finance lease payments represent rentals payable by the council for cellphones and tablets. Leases are negotiated for an average term of two (2) years and rentals are fixed. No contingent rent is payable.

#### Operating leases – as lessee (expense)

##### Minimum lease payments due

- within one year	753 990	67 680
- in second to fifth year inclusive	1 581 261	84 600
	<b>2 335 251</b>	<b>152 280</b>

### 18. Contingencies

There were no material contingent liabilities at year end.

# Notes to the Financial Statements

Figures in Rand

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## 19. Related parties

### Relationships

Key management personnel are those persons having authority and responsibility for planning, directing and controlling the activities of the Council. Key management personnel include the councillors, committee members and the registrar.

### Related party balances and transactions with entities with control, joint control or significant influence over the close corporation

#### Related party transactions

##### Transaction with councillors

Councillors and sub-committee member fees	247 732	222 644
Preparation fees	42 586	45 495
Allowances	163 003	160 396

##### Purchases from (sales to) related parties

Locum fees	73 686	111 659
Transport fees	672 322	605 763

## 20. Prior period errors

Leased printing and copying machines were erroneously capitalised as finance lease assets. Prior year financial statements were restated for the correction of the error. The correction of the error results in adjustments as follows:

### Statement of Financial Position

Property and equipment (finance leased asset)	-	(435 145)
Finance lease liability	-	474 572
VAT liability	-	(231 522)
Opening retained earnings	-	65 197

### Surplus or Loss

Depreciation expense	-	(307 136)
Rental expense	-	497 323
Interest expense	-	(63 289)

## 21. Going concern

The 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.

## 22. Events after the reporting period

There were no adjusting events after reporting date.

## Notes to the Financial Statements

### 23. 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 the senior management under finance policies approved by the council members.

#### 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.

As at 31 December 2012, the carrying values of trade payables, cash and accrued expenses are assumed to approximate their fair values due to the short-term maturities of these financial instruments.

## Detailed Statement of Comprehensive Income

Figures in Rand	Notes	2012	2011 Restated
<b>Revenue</b>			
Annual fees earned and registration fees		32 889 690	30 725 744
Examination fees		34 267	138 236
Other revenue		4 923 466	4 726 038
	10	<b>37 847 423</b>	<b>35 590 018</b>
<b>Other income</b>			
	11	<b>921 123</b>	<b>1 010 910</b>
<b>Gross profit</b>			
<b>Other income</b>			
Interest received	13	392 408	448 463
<b>Expenses (refer to page 24)</b>			
		<b>(39 245 902)</b>	<b>(35 297 648)</b>
<b>Operating (loss) surplus</b>			
Finance costs	14	(1 863 196)	(1 516 431)
<b>(Loss) surplus for the year</b>			
		<b>(1 948 144)</b>	<b>235 312</b>
Other comprehensive income			
		-	-
<b>Total comprehensive (loss) income for the year</b>			
		<b>(1 948 144)</b>	<b>235 312</b>

The supplementary information presented does not form part of the financial statements and is unaudited.

## Detailed Statement of Comprehensive Income

Figures in Rand	Notes	2012	2011 Restated
<b>Operating expenses</b>			
Advertising and promotions		(532 437)	(512 653)
Allowances		(163 003)	(160 396)
Auditors' remuneration	15	(152 952)	(131 269)
Bank charges		(327 067)	(266 601)
Committee meeting expenses		(188 468)	(111 505)
Computer expenses		(1 342 043)	(1 383 331)
Consumables		(87 612)	(78 004)
Council and sub-committee member fees		(247 732)	(222 644)
Curriculum development		(828 010)	(870 632)
Depreciation, amortisation and impairments		(1 969 783)	(1 303 694)
Disciplinary fees		(87 504)	(55 870)
Employee costs		(23 627 982)	(19 303 287)
Entertainment		(20 507)	(4 223)
Legislation review		(47 368)	-
Inspection fees		(2 478 905)	(1 307 345)
Insurance		(177 577)	(128 252)
Lease rentals on operating lease		(597 001)	(399 755)
Legal expenses		(106 404)	(353 946)
Locum fees		(73 686)	(111 659)
Loss on disposal of assets		(280 600)	(22 567)
Office expenses		(1 057 253)	(1 139 129)
Pharmacy practice and CPD		-	(705 922)
Postage		(330 700)	(610 480)
Preparation fees		(42 586)	(45 495)
Printing and stationery		(403 822)	(1 024 599)
Provision for doubtful debts		(1 464 646)	(2 197 881)
Repairs and maintenance		(598 142)	(509 084)
Research and development costs		(215 387)	(708 128)
Security		(227 953)	(104 432)
Subscriptions		-	(440)
Telephone and fax		(484 130)	(536 317)
Training		(63 068)	(111 772)
Transport expenses		(672 322)	(605 763)
Utilities		(349 252)	(270 573)
		<b>(39 245 902)</b>	<b>(35 297 648)</b>

The supplementary information presented does not form part of the financial statements and is unaudited.



South African  
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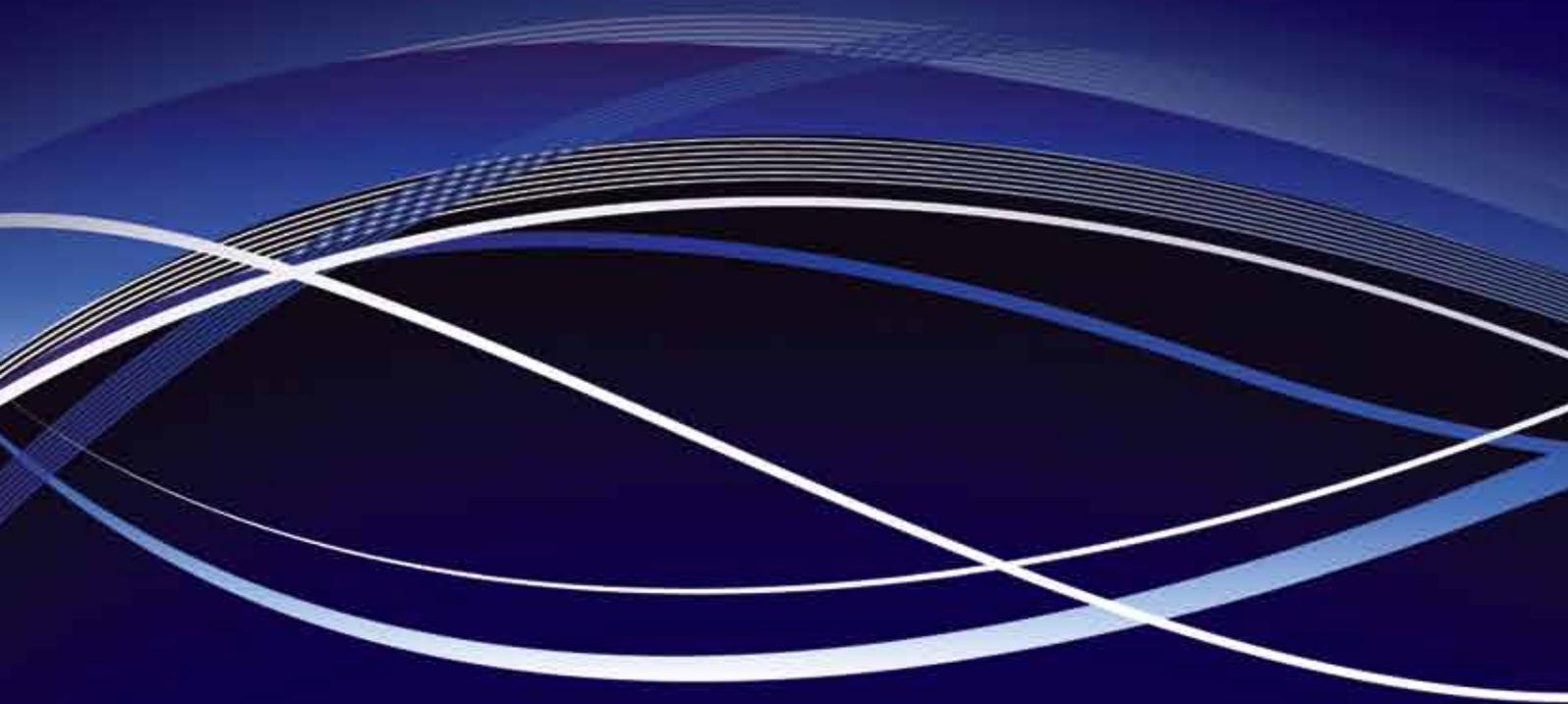
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