



South African  
Pharmacy Council

2022

**SOUTH AFRICAN PHARMACY COUNCIL  
ANNUAL REPORT**



# **SOUTH AFRICAN PHARMACY COUNCIL – GENERAL INFORMATION**

<b>Country of Incorporation and Domicile</b>	South Africa
<b>Nature of Business and Principal Activities</b>	Statutory health council established as the pharmacy industry regulator
<b>Registered Office</b>	591 Belvedere Street Arcadia Pretoria 0083
<b>Business Address</b>	591 Belvedere Street Arcadia Pretoria 0083
<b>Postal Address</b>	Private Bag X40040 Arcadia Pretoria 0007
<b>Bankers</b>	Standard Bank of South Africa
<b>Independent Auditors</b>	MNB Chartered Accountants Incorporated Chartered Accountants (SA) Registered Auditor
<b>ISBN</b>	978-0-6397-7201-1 (print) 978-0-6397-7202-8 (digital)

# PRESENTATION TO THE MINISTER: ANNUAL REPORT 2022

Minister of Health

It is our pleasure to submit the Annual Report on the activities of the South African Pharmacy Council for the period of 1 January 2022 – 31 December 2022, in terms of the Pharmacy Act, 53 of 1974.



MR MD PHASHA  
PRESIDENT



MR VM TLALA  
REGISTRAR/CEO

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# FOREWORD BY THE PRESIDENT OF COUNCIL

At the start of the Council term, which is in its fifth year and, with this report, completes its penultimate reporting period, Council adopted as its vision ensuring “Accessible quality pharmaceutical services for all” by the end of its term. Ensuring expanded accessibility to Pharmacy as a profession and access to the services it offers for communities and other healthcare professionals has been a core driver of all actions undertaken by Council over the past four years.

While we have become synonymous with clean governance and the highest level of financial prudence, illustrated by yet another unqualified audit opinion from our external auditors for the 2022 financial year, it is important that such meticulous governance systems also produce pragmatically grounded results – especially as it relates to the vision, mission, and strategic objectives of Council. In the next few paragraphs, I look back, in highly summarised form, at the progress made towards achieving the strategic plan targets and objectives we pronounced at the start of Council’s term and provide a status report as at the end of 2022.

In our quest to ensure there are enough pharmacies producing, distributing, and dispensing medicines, medical devices and other pharmaceutical services, we have recorded 2 368 facilities across the sectors of pharmacy during the first four years of the Council term. More than 700 of these facility licences were recorded in 2022 alone.

Furthermore, we have, through the splendid work of skills development providers (SDPs) and higher education institutions (HEIs), produced 3 584 Bachelor of Pharmacy (BPharm) graduates and 9 546 qualified Pharmacist’s Assistants, at the Basic and Post-Basic levels. In the same short four years, amongst other achievements, we have also registered 3 121 post-Community Service Pharmacists, recorded permits for 225 Primary Care Drug Therapy Pharmacists, and issued 2 661 training premises approvals for new Pharmacist Intern and Pharmacy Support Personnel practical training facilities (pharmacies) and those whose approvals lapsed within the Council term, in order to ensure the continued production of highly skilled pharmacy professionals to meet the nation’s health care needs.

At the start of term, Council committed to achieving 10 strategic objectives through 85 strategies, which were to be tracked through 188 key performance indicators. As at the end of 2022, 81,9% of the indicators have been achieved, 14,3% are in progress, 2,7% are not yet achieved, and 0,5% are partially achieved. While, in hindsight, we recognise that the 2019-2023 strategic plan was very bold, we are proud of the higher-than-average achievement rate thus far and are highly confident that we will finalise all in-progress and not-yet-achieved indicators by the end of our term.

Expanding access to primary health care has been a salient theme of most of the strategies adopted by Council for its term. To this end, we have reviewed various existing expanded scopes and introduced new programmes in response to South Africa’s unique healthcare needs. To increase the accessibility of supplementary training for Primary Care Drug Therapy and to align competency standards with current practice, we have reviewed the Primary Care Drug Therapy Competency Standards, Scope of Practice, and qualification accreditation criteria.

Another focus area, which was inspired by, amongst others, the high teenage pregnancy rate in the country, which is indicative of a need to increase access to family planning services, was the review and implementation of a scope of practice, competency standards and qualification accreditation criteria for family planning services delivered by pharmacists. This was implemented through the promulgation of Board Notice 314 of 2022.

Lastly, amongst other programmes detailed further in this annual report, we have introduced Pharmacist-Initiated Management of Antiretroviral Therapy (PIMART). PIMART has continued to be the subject of litigation during the year under review. However, as you read this annual report, the North Gauteng High Court has ruled in favour of the implementation of PIMART; however, the litigants have filed an application for leave to appeal the judgement.

We congratulate the profession on robustly leading a campaign to change Council's fee determination framework, which culminated in the publication of the Regulations relating to fees payable to the South African Pharmacy Council, 2022 at the end of the reporting period. The profession, through lobbying the Ministry of Health and the public participation process, capped future annual fee adjustments at the rate of headline consumer inflation. This makes pharmacy the only profession subject to such a limit amongst the regulated health professions.

While I wish to indicate that, over the four years of the Council's term, we have not increased fees above inflation and have had one year wherein we left the fees unchanged, I also wish to call upon the profession to ensure that future fee determinations are mindful of the need to keep both Pharmacy as a profession and the Office of Council sustainable, and are not at the cost of the profession's advancement.

I also wish to commend the 14 377 (2021: 13 321) colleagues who complied with CPD regulations by submitting the required six (6) CPD entries by the closing date. Our CPD compliance rate was 90,1% for the year in review. Council provided a four (4) month grace period for the 9,9% of our colleagues who did not record their entries by the end of 2022. Even this year, I encourage colleagues, especially those who have not yet found their way around continuing professional development, to consult the Office of Council for assistance and guidance.

Over the past three years, Council has developed several support mechanisms and tools, including recorded masterclasses that may be viewed by pharmacy professionals in their own time, a CPD guidance document and a CPD Blog answering common questions about CPD, amongst others. Lifelong learning should be viewed for what it is – a tool that any professional should take advantage of in order to sustain their competence and the currency of their knowledge and skills, especially in a rapidly changing practice environment such as ours.

In line with our legislative mandate to protect the right of the South African public to quality pharmaceutical care and safeguard the good image of the profession, Council conducts inspections across all sectors of Pharmacy. Between, January and December 2022, we managed to conduct inspections in 2 053 facilities. These inspections included monitoring, training, disciplinary and new pharmacy inspections.

The disciplinary committees of Council processed 1 585 matters: with the Committee for Preliminary Investigations addressing 1 086 cases (255 of which were CPD non-compliance matters), Committee of Informal Inquiry processing 471, and the Committee of Formal Inquiry presiding over 28 matters.

This annual report details the results of a collective labour of the minds and hands of a people rallying behind the shared dream of delivering Accessible quality pharmaceutical services for all by the end of 2023.

On behalf of the 24-member Council collective, who have always passionately inspired and guided the Office of the Registrar towards delivering on our legislative mandate and strategic objectives, I wish to express our gratitude and good working relations which this Council enjoyed with all staff in the Office, the Honourable Minister of Health and all in the employ of the Ministry, the members of executive councils (MECs) and the departments they lead across the nine provinces, all statutory health councils, including the Health Professions Council of South Africa (HPCSA), South African Nursing Council (SANC), Council for Medical Schemes (CMS), other regulators/partners within the health and education sectors, Health and Welfare Sector Education Training, Chemical Industries Education &

Training Authority (CHIETA), Wholesale and Retail Sector Education and Training Authority (W&RSETA), the South African Health Products Regulatory Authority (SAHPRA), Office of Health Standards Compliance (OHSC), Quality Council for Trades and Occupations (QCTO), Council on Higher Education (CHE), and the South African Qualifications Authority (SAQA).

Our work in various areas would also not yield results without the support and partnership of law enforcement agencies, organised pharmacy – comprising associations of both professionals and facility owners, and each member of our noble profession.

Lastly, I would like to congratulate Council, the staff of the Office of the Registrar and the officials in the Ministry of Health on moving for the first time away from the paper Council election and voting system to the new electronic Council election and voting system, which is progressive and indeed showing that Council is not stagnant over the years.

As our term of office is coming to a close, I would like to take this opportunity to thank my fellow Council members to have entrusted me with the humble responsibility to lead this Council and the profession at large. I further would like to wish the incoming Council a great term of office as I have no doubt that the flag of the pharmacy profession will continue to fly high under their leadership.

Mr Mogologolo Phasha  
**President**  
South African Pharmacy Council



# REGISTRAR/ CEO'S 2022 OVERVIEW

This reporting period (2022) is the current Council collective's fourth year in office, this thus not only implies that 2023 is an election year, but it also calls upon Council and its Office to undertake a frank assessment of performance against strategic plan targets as set out at the beginning of the Council term.

While a complete picture of the true performance of Council over its term will reflect in the 2023 Annual Report, it is safe to declare that this looks like one of the most successful Council terms yet. Despite the challenges met, progress towards achieving strategic objectives has been at a rate faster than the norm. The President's foreword to this Annual Report provides a summary of the progress thus far. In the next few paragraphs, I provide an abridged highlight of the work carried out in 2022, further details are provided in the pages that follow.

## **Maintaining clean governance and ensuring financial prudence**

It is with great pleasure that we announce yet another clean audit opinion. The clean audit opinion we received for the 2022 financial year is the 14th in an unbroken series of unqualified opinions from Council's external auditors. Clean governance has been embedded into the day-to-day operations of the Office of Council, and ethical and morally acceptable conduct woven into the very fibre of our corporate culture.

Under the competent guidance of the 24-member Council collective, we continue to practise the highest level of financial stewardship, while ensuring that the activities to achieve Council's mandate are adequately resourced within the constraints of our unique financial environment. The liquidity ratio increased from 1,80 in 2021 to 1,99 in 2022, representing an appreciation of 0,29 year-on-year. Non-current assets depreciated 7,8% year-on-year in 2022, largely due to depreciations in "property, plant, and equipment" and "investment property". However, total assets appreciated 17,9% year-on-year over the same period largely due to an appreciation in current assets. The rate of the annual change in total assets was 3,5% higher than the previous year's change of 14,4%.

## **The advent of regulated fee determination**

Some within the profession have called for a regulated fee adjustment regime and have successfully lobbied the Ministry of Health to make this a reality. On 2 December 2022, the Honourable Minister of Health promulgated the Regulations relating to fees payable to the South African Pharmacy Council (hereafter "Fees Regulations") through GNR. 2827 in the Government Gazette. The fees for 2023 onwards are thus to be set in line with these regulations, capped at the rate of headline consumer inflation and be subject to publication for comment and input for a period of 30 days. This makes pharmacy the only profession whose fees are determined in this manner among the statutory health professional councils in South Africa.

Council has always been mindful of inflationary pressures and had set fee adjustments at rates lower than inflation for the past several years. However, Council has always done so after careful consideration of the various factors connected to delivering on its mandate, advancing the pharmacy profession, and protecting the profession's dignity. The introduction of the Fees Regulations places this responsibility on the profession and prevents any fee adjustments above inflation even when such may be necessary and in the best interest of the profession. As such, it is important that the profession consider each fee increase against the operational needs of Council and the need to avoid shortfalls as this may threaten the sustainability of Council and the pharmacy profession itself.

It is also important that the profession religiously ensures the accumulation of surplus funds during favourable years so as to absorb possible future higher-than-inflation expenditure growth pressures and such emergencies as litigation and/or disasters, as we have seen with the court battle regarding Pharmacist-Initiated Management of Antiretroviral Therapy. Such a surplus-building culture will ensure that Council and the profession are sustainable and do not need to start borrowing money to fund operational activities.

## Universally acceptable standards

In terms of Section 3 of the Pharmacy Act, 53 of 1974, Council has a duty to set, review, control and ensure the continuous maintenance of universally acceptable standards for pharmacy education and training, professional conduct, practice, and registration. In pursuit of the advancement of Pharmacy, national health care objectives, alignment to national legislation and international best practice, Council continuously updates existing standards and develops new standards.

In 2022, Council published competency standards for various categories of pharmacy professionals registerable with itself. These included standards defining the competencies required of pharmacy support personnel, pharmacists providing immunisation services as well as pharmacists providing family planning services.

Published in May 2022 through Board Notice 276 of 2022, the Competency standards for pharmacy support personnel sought to define competencies expected of the three cadres of pharmacy support personnel, that is, the Pharmacist's Assistant (Basic), Pharmacist's Assistant (Post-Basic), and Pharmacy Technician.

As evidenced during the COVID-19 pandemic, pharmacists play a pivotal role in the uptake and rollout of immunisation services in various communities across South Africa. To ensure that this service by pharmacists continues within an updated and clearly defined competency framework, Council published the Competency standards for pharmacists providing immunisation services, together with the connected scope of practice and supplementary training accreditation criteria, in April 2022 through Board Notice 241 of 2022.

Against a national backdrop of teenagers younger than 14 years of age giving birth to at least 4 000 babies annually, amongst other factors, Council published the Competency standards for pharmacists providing family planning services through Board Notice 314 of 2022.

## Safeguarding the rights of the public to pharmaceutical care that complies with universal norms, maintaining the dignity and integrity of the profession

In pursuit of Council's objects as spelt out in Section 3, sub-sections (c), (d), and (g), more than 2 053 premises inspections were conducted throughout the country in 2022, this equates to a 19,7% year-on-year decrease in inspections conducted. The national rate of compliance to Good Pharmacy Practice (GPP) as measured through the achievement of Grades A & B inspection outcomes declined 7% year-on-year, from 77,4% in 2021 to 70,4% in 2022, with 1 377 and 68 pharmacy facilities achieving Grade A and B inspection outcomes respectively.

Matters processed by Council's disciplinary committees increased by 67% year-on-year, from 949 matters in 2021 to 1 585 cases in the current reporting period (2022). Of these, 26,6% (422 cases) were either CPD non-compliance or intern examination irregularities.

## Ensuring the attainment of Human Resource for Health 2030 targets

The total volume of successful registration applications processed by the Office of the Registrar increased by 19,8% year-on-year, from 10 401 in 2021 to 12 464 in 2022.

A large number of new applications was from Learners (Basic and Post-Basic Pharmacist's Assistants) at 3 357 (or 26,9%). These were followed by Qualified Basic and Post-Basic Pharmacist's Assistants (2 179 or 17,5%), Tutors (1 916 or 15,4%), Responsible Pharmacists (1 266 or 10,2%), Pharmacy Students (1 036 or 8,3%), Pharmacist Interns (951 or 7,6%), Community Service Pharmacists (851 or 6,8%), and Pharmacists After Community Service (840 or 6,7%). Applications from Pharmacy Technicians (PT), PT Trainees, Assessors and Moderators collectively amounted to 0,6% (68) of all new registrations in 2022. As at the end of 2022, there were 17 702 pharmacists, including community service pharmacists, and 19 309 Pharmacist's Assistants, including Pharmacy Technicians registered on the Post-Basic level, on Council's consolidated register.

## Appreciation

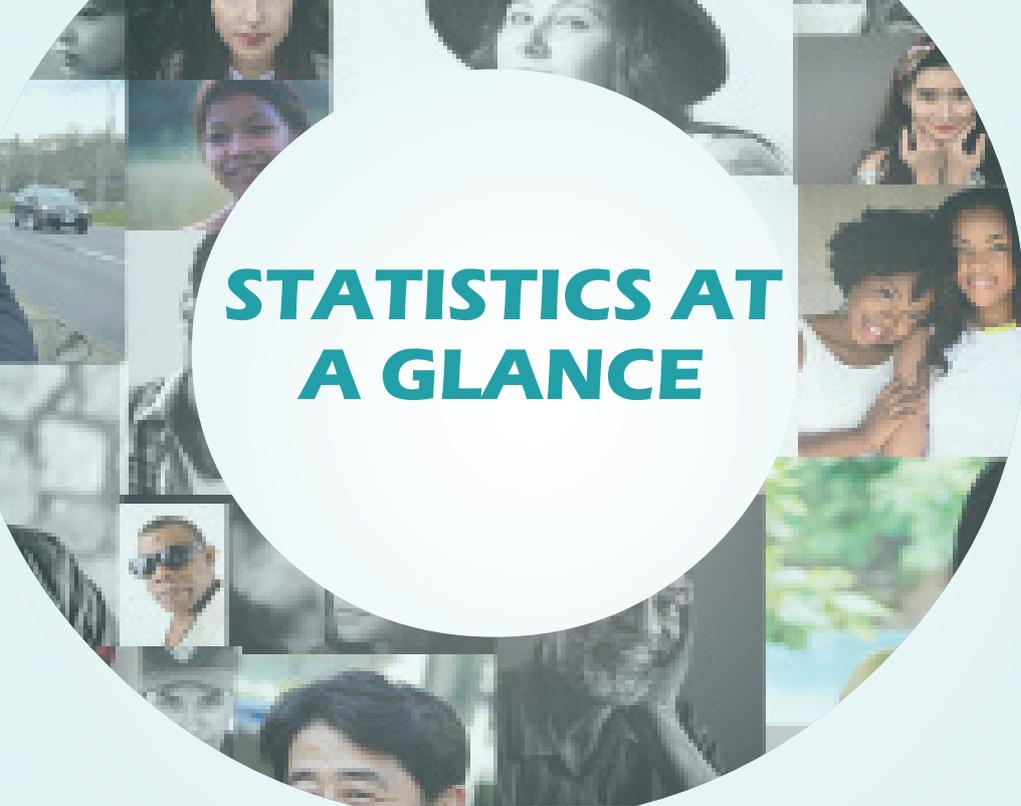
Delivering Accessible quality pharmaceutical services for all would be nothing more than a pipe dream without the continued support of various stakeholders who ably partner with Council continuously on various programmes, projects, and other initiatives. I thank the Ministry of Health, including the Department and its competent staff complement, whose cooperation and support have propelled Council's work towards success throughout the year.

Members of executive councils (MECs) across South Africa's nine provinces, as well as the departments they lead, and municipalities directly offering pharmaceutical services, are at the coalface of pharmacy in action – delivering on the right to health care as enshrined in Section 27(1)(a) of the Constitution of the Republic of South Africa.

Our counterparts in the regulatory environment, including, but not limited to, the South African Health Products Regulatory Authority (SAHPRA), South African Nursing Council (SANC), Health Professions Council of South Africa (HPCSA), Office of Health Standards Compliance (OHSC), Council for Medical Schemes (CMS), Quality Council for Trades and Occupations (QCTO), Council on Higher Education (CHE), South African Qualifications Authority (SAQA), Health and Welfare Sector Education and Training Authority (HWSETA), Wholesale and Retail Sector Education and Training Authority (W&RSETA), Chemical Industries Education and Training Authority (CHIETA), serve as competent collaborators and partners in Council's legislative mandates and our shared responsibility towards the achievement of national health imperatives.

The profession in its entirety, associations of pharmacies, pharmacists, and other professional and industry formations, have been at the core of our work towards ensuring accessible quality pharmaceutical services for all.

VM Tlala  
**Registrar/CEO**  
South African Pharmacy Council



# STATISTICS AT A GLANCE

## Education

Table 1 shows the number of registered Pharmacist's Assistants (Learner Basic) and (Learner Post-Basic) on the register, and those who were registered as of 31 December 2022.

**Table 1: Number of Learner Basic and Post-Basic registered in the year 2022**

	Learner Basic	Learner Post-Basic
Total Number Registered as at 31 December 2022	4 021	2 240
Number Registered in 2022	2 187	1 485

Every year, the Education Department liaises with the nine (9) schools of pharmacy to register and progress learners from first year through to fourth year. Table 2 below illustrates the number of first-, second-, third- and fourth-year students per university. In 2022, there were a total of 4 191 registered students on the Council register, whereby 1 092 (26.06%) were first-year students, 1 065 (24.41%) were second-year students, while there were 957 (22.83%) third-year students and 1 077 (25.70%) fourth-year students.

**Table 2: Number of students per university**

	University	First-Year	Second-Year	Third-Year	Fourth-Year
1	Nelson Mandela University	85	105	145	141
2	North-West University	187	180	189	258
3	Rhodes University	196	182	130	184
4	Sefako Makgatho Health Sciences University	72	71	74	36
5	Tshwane University of Technology	80	70	49	40
6	University of KwaZulu-Natal	115	112	100	127
7	University of Limpopo (Turfloop Campus)	84	80	74	63
8	University of the Western Cape	134	167	129	125
9	University of Witwatersrand	139	89	67	103
	<b>Total</b>	1 092	1 065	957	1 077

There has been a gradual increase in the number of interns registering from 2020 to date. As the pharmacy technician course was halted until the promulgation of the legislation, the number of Pharmacy Technician trainees has dropped substantially since 2020.

**Table 3: Number of persons registered in 2020-2022**

Category of persons	2022	2021	2020
Pharmacist Interns	951	909	895
Pharmacist's Assistants (pharmacy technician trainees)	32	10	109

## Continuing Profession Development

**Table 4: Comparative CPD compliance status between the 2020, 2021 and 2022 cycles**

Compliance status	2020		2021		2022	
	Number	Percentage	Number	Percentage	Number	Percentage
Compliant	12 484	87,48%	14 462	91,34%	14 377	90,12%
Non-Compliant	1 786	12,52%	1 372	8,66%	1 576	9,88%
<b>Grand Total</b>	<b>14 270</b>	<b>100%</b>	<b>15 834</b>	<b>100%</b>	<b>15 953</b>	<b>100%</b>

Compliance with the *Regulations relating to Continuing Professional Development* in 2022 was at 90,1%, with 14 377 pharmacists submitting their six (6) entries before the cut-off date. The CPD compliance rate was slightly less than in 2021 (91,3%).

**Table 5: Tutor compliance status**

Tutors	Number		Percentage	
	2021	2022	2021	2022
Non-Compliant	161	271	4%	7,77%
Compliant	4 322	3 216	96%	92,23%
<b>Grand Total</b>	<b>4 483</b>	<b>3 487</b>	<b>100%</b>	<b>100%</b>

In 2022, 92% of tutors complied with CPD requirements by the compliance cut-off date, this was slightly lower than during the same period in 2021, where 96% had complied with CPD requirements by the cut-off date.

**Table 6: Responsible Pharmacist compliance status**

RPs	2021		2022	
	Number	Percentage	Number	Percentage
Non-Compliant	312	8%	307	15,28%
Compliant	3 519	92%	1 702	84,72%
<b>Grand Total</b>	<b>3 831</b>	<b>100%</b>	<b>2 009</b>	<b>100%</b>

In 2022, CPD compliance by Responsible Pharmacists was at 85%, with 1 702 Responsible Pharmacists complying with the *Regulations relating to Continuing Professional Development*.

## Practice

The tables below depict the number of inspections conducted per province, the number of inspections per sector and per type, together with a pictorial view of the grades obtained following these inspections on the classification of inspection findings.

**Table 7: Inspections per province**

Province	No. of Inspections
Eastern Cape	180
Free State	93
Gauteng	653
KwaZulu-Natal	364
Limpopo	127
Mpumalanga	170
North West	112
Northern Cape	54

Western Cape	300
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During the reporting period, Council conducted 2 053 inspections across South Africa. Four-fifths (80%) of these inspections were conducted in the following five (5) provinces: Gauteng (653), KwaZulu-Natal (364), Western Cape (300), the Eastern Cape (180) and Mpumalanga (170).

**Table 8: Number of inspections per sector of pharmacy**

Sector of Pharmacy	No. of Inspections
Community Pharmacy	1 537
Hospital (Institutional)	338
Manufacturing Pharmacy	92
Wholesale Pharmacy	86

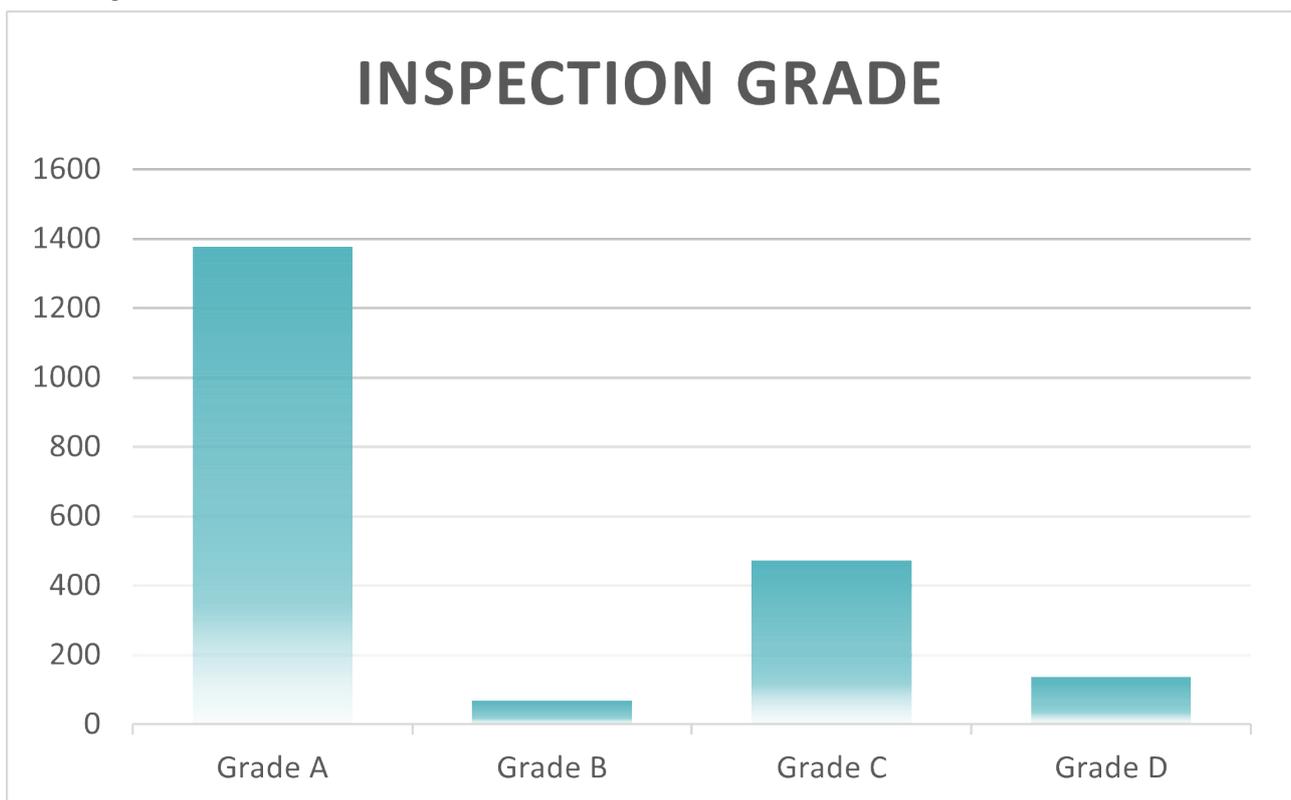
Most of the inspections were conducted in community pharmacies (1 537 or 75%), followed by hospital (institutional) pharmacies (338), manufacturing (92) and wholesale pharmacies (86).

**Table 9: Number of inspections per type**

Type of Inspections	No. of Inspections
Disciplinary	41
Full line Wholesaler/Manufacturer	5
Monitoring	1 406
New Premises	423
Re-Inspection	57
Training	119
Wholesale/Manufacturer (No Stock)	2

Most of the inspections conducted in 2022 were monitoring inspections (1 406). Council also undertook 423 new premises inspections, 119 training inspections, and 41 disciplinary inspections.

**Figure 1: Overall grades obtained in 2022**



# ABOUT THE ANNUAL REPORT

This 2022 Annual Report of the South African Pharmacy Council (SAPC) presents the financial and performance information of the SAPC over the 2022 financial year.

The annual report presents reporting information that fulfils reporting requirements in line with the King IV Code governance principles (Principles 1-16).

## Report layout

The report is divided into six main subcategories, namely:

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

## Reporting period

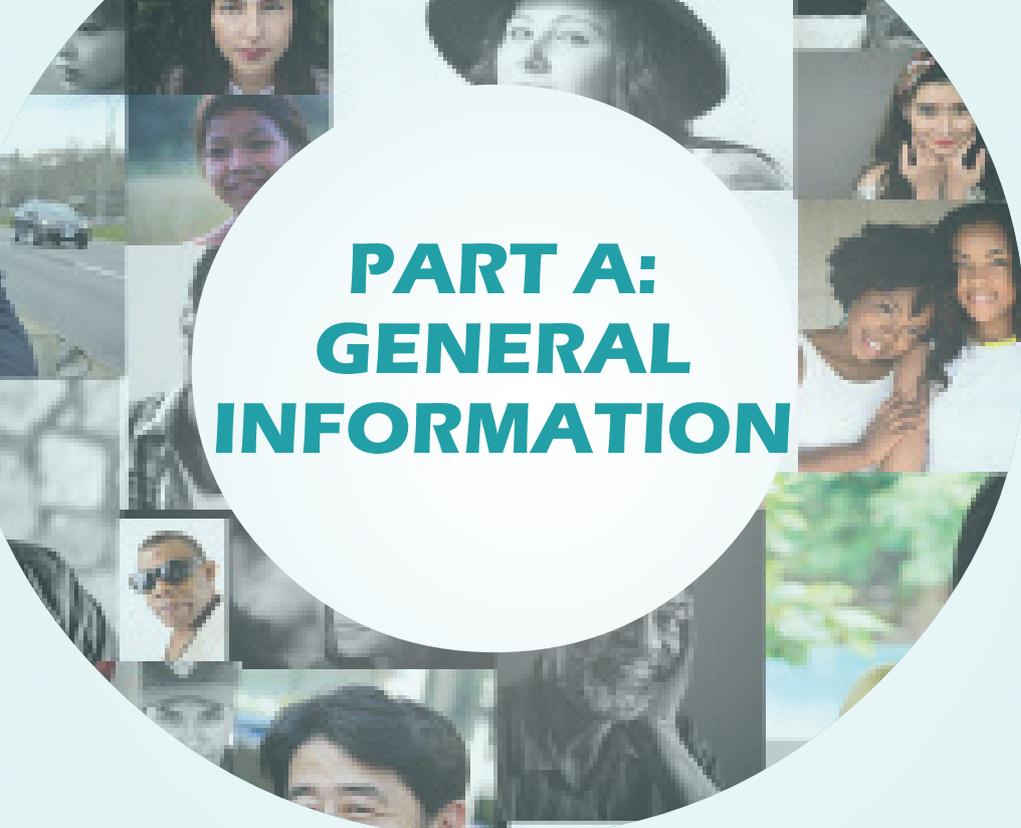
The information contained herein relates to the work of the SAPC for the period 1 January 2022 – 31 December 2022.

## Availability of report

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

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**Full name:** Annual Report of the South African Pharmacy Council, 2022



# PART A: GENERAL INFORMATION

## Organisational Purpose

### Vision

Accessible quality pharmaceutical services for all.

### Mission

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

This will be achieved by:

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

### Core Values

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

## Council's Role & Responsibilities

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

The SAPC is responsible for its own funding and endorses the principles contained in the King IV Code on Corporate Governance (2016). These principles form part of the councillors' responsibilities and are embedded in the Charter of Good Practice of the South African Pharmacy

Council for Councillors, together with key policies of the Council. Councillors are required to familiarise themselves with both the objectives of Council as outlined in the Pharmacy Act and their responsibilities as outlined in the Charter for Councillors.

## Objectives and Functions of Council

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

- Assist in the promotion of the health of the population of the Republic of South Africa.
- Advise the Minister of Health or any other person on any matter relating to pharmacy.
- Promote the provision of pharmaceutical care which complies with universal norms and values, in both the public and private sectors, with the goal of achieving definite therapeutic outcomes for the health and quality of life of a patient.
- Uphold and safeguard the rights of the general public to universally acceptable standards of pharmacy practice in both the public and private sectors.
- Establish, develop, maintain and control universally acceptable standards for:
  - o pharmaceutical education and training;
  - 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 Pharmacy Act;
  - o the professional conduct required of persons registered in terms of the Pharmacy Act; and
  - o the control of persons registered in terms of the Pharmacy Act by investigating in accordance with the Pharmacy Act complaints or accusations relating to the conduct of registered persons.
- Promote transparency to the profession and the general public in achieving its objectives, performing its functions, and executing its powers.
- Maintain and enhance the dignity of the pharmacy profession and the integrity of persons practising the profession.

## Composition of the Council

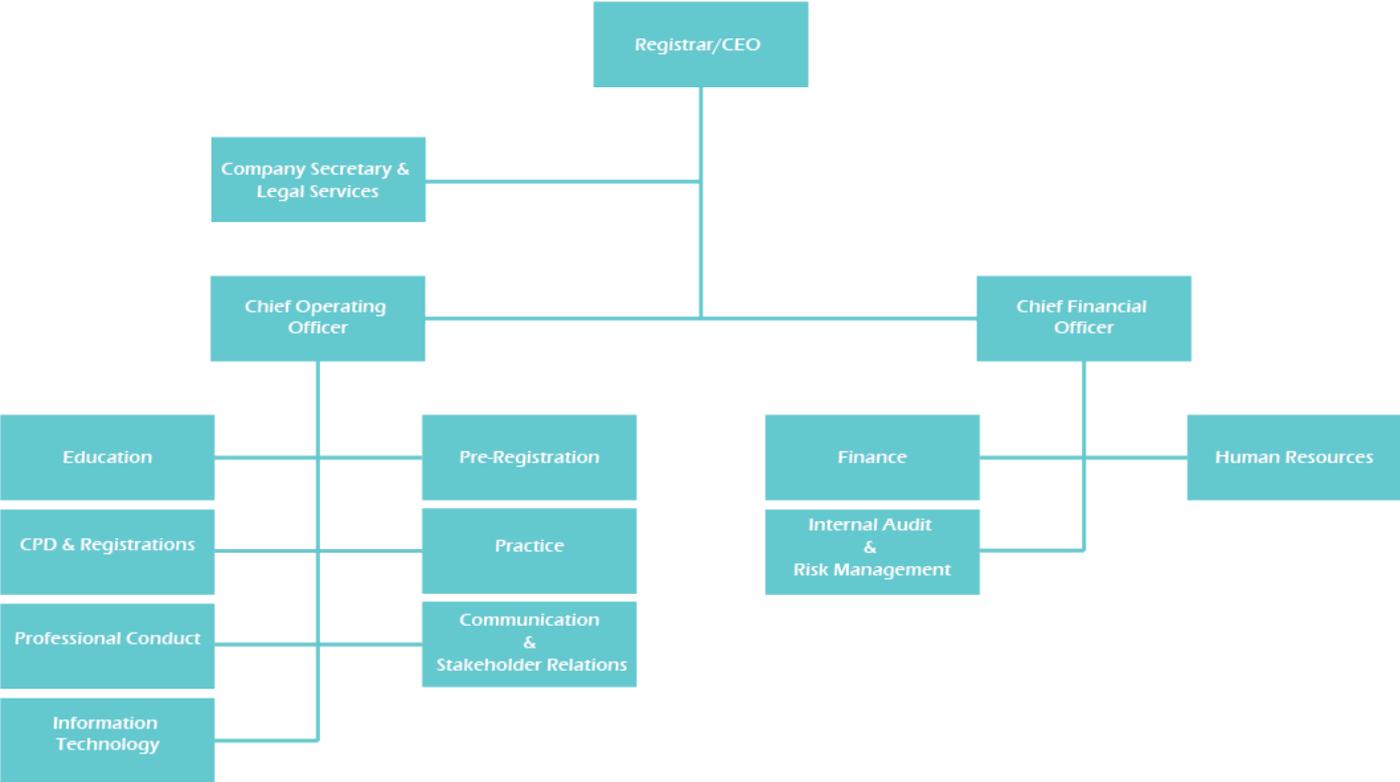
The Council is comprised of twenty-five (25) members who are elected or appointed from various sectors of the pharmacy profession with an appropriate balance of knowledge, skills, experience, diversity, and independence, for it to discharge its governance role and responsibilities objectively and effectively.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

## Council Members 2022

Mr Mogologolo David Phasha	President
Ms Nelly Boitumelo Molongoana	Vice-President
Mr Tshegofatso Daniel Moralo	Treasurer
Prof. Yahya Essop Choonara	Chairperson: Education Committee
Ms Jacqueline Ann Maimin	Chairperson: Practice Committee
Mr Ayanda Soka	Chairperson: CPD Committee
Prof. Moliehi Matlala	Chairperson: Pre-registration Committee
Ms Mmapaseka Steve Emily Letsike	Chairperson: Health Committee
Mr Johannes Stephanus du Toit	Chairperson: Committee of Preliminary Investigation
Dr Margaritha Johanna Eksteen	Chairperson: Committee of Informal Inquiries
Ms Khadija Jamaloodien	National Department of Health Representative
Ms Pakama Pateka Tandokazi Dlwati	
Ms Helen Catherine Hayes	
Ms Josephine Winley Herbert	
Mr Pieter Johannes Kilian	
Prof. Sarel Francois Malan	
Ms Moitsoadi Sarah Mokgatlha	
Prof. Natalie Schellack	
Dr (Adv.) Nazreen Shaik-Peremanov	
Ms Tlou Mavis Shivambu	
Mr Mosiuoa Shadrack Shuping	
Prof. Ilse Truter	
Ms Christina Aletta Venter	
Prof. Petrus de Wet Wolmarans	

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

# SAPC FUNCTIONAL ORGANOGRAM



## Core Functions

### Registrar (Chief Executive Officer)

The Registrar, as accounting officer with delegated overall control of the Office of Council, is responsible for:

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

### Chief Operating Officer

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

### Chief Financial Officer

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

### Company Secretary and Legal Services

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

## Education and Training Department

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

### Pre-Registration Department

- (a) Develop, review, and manage the internship process (ensure compliance with registration requirements, Tutor/Intern workshops, 4th year students empowerment workshops, assessment requirements (exam, CPD and progress reports);
- (b) Develop, review, and manage the traineeship process (ensure compliance with registration requirements, pharmacy support personnel (PSP) information empowerment workshops, assessment requirements – exam, and progress reports);
- (c) Development and review of accreditation criteria for foreign-qualified persons, including professional examinations;
- (d) Develop policies that direct the activities of pre-registration;
- (e) Develop and review the Code of Conduct for invigilators, examiners, assessors and moderators;
- (f) Develop and review guidelines, manuals and criteria documents for the interpretation and implementation of standards as well as the application of tools (e.g., internship manuals);
- (g) Develop specification documents for online systems and continuously review these processes as part of quality assurance;
- (h) Regularly validate processes, systems and procedures through performance assessment and the identification of stumbling blocks; and
- (i) Serve as secretariat for the Pre-Registration Committee and Task Team.

### CPD and Registrations Department

- (a) Develop and review standards for CPD and Registrations;
- (b) Development and review of accreditation criteria for persons;
- (c) Develop policies that direct the activities of CPD and Registrations;
- (d) Development and review of accreditation tools (questionnaires and applicable application forms) for registered persons;
- (e) Develop and review Code of Conduct for assessors and moderators;

- (f) Develop and review guidelines, manuals and criteria documents for the interpretation and implementation of standards as well as the application of tools (e.g., internship manuals);
- (g) Develop specification documents for online systems and continuously review these processes as part of quality assurance;
- (h) Manage the monitoring and compliance process for CPD and Registrations (appoint and train assessors and moderators for CPD, perform participation data analysis, evaluate and produce reports, and give feedback);
- (i) Manage and maintain the accreditation of all registered persons (students, interns, pharmacy support personnel, pharmacists, specialists, PCDT, assessors and moderators);
- (j) Regularly validate processes, systems and procedures through performance assessment and the identification of stumbling blocks; and
- (k) Serve as secretariat for the CPD Committee, Health Committee, and Task Teams.

### Practice Department

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

### Professional Conduct Department

- (a) Enforce compliance with all pharmacy legislation, and in particular the acts and omissions for which the Council may take disciplinary action, the code of conduct for registered persons, and standards;
- (b) Receive and process complaints from members of the profession and the public;
- (c) Investigate complaints against registered persons and facilities in terms of Section 39 of the Pharmacy Act and the *Regulations relating to the conduct of inquiries in terms of Chapter V of the Pharmacy Act*;
- (d) Support registered persons to maintain their capability, competency and suitability to practice;
- (e) Review and revise legislation, policies and systems related to professional conduct;
- (f) Develop and review the standards of enforcement of

- legislative provisions;
- (g) Provide advisory services on all legal enquiries related to professional conduct matters; and
- (h) Serve as secretariat for the Registrar's Review Panel, the Committees of Preliminary Investigation, Informal Inquiries and Formal Inquiries.

### Communication and Stakeholder Relations Department

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

### Human Resources Department

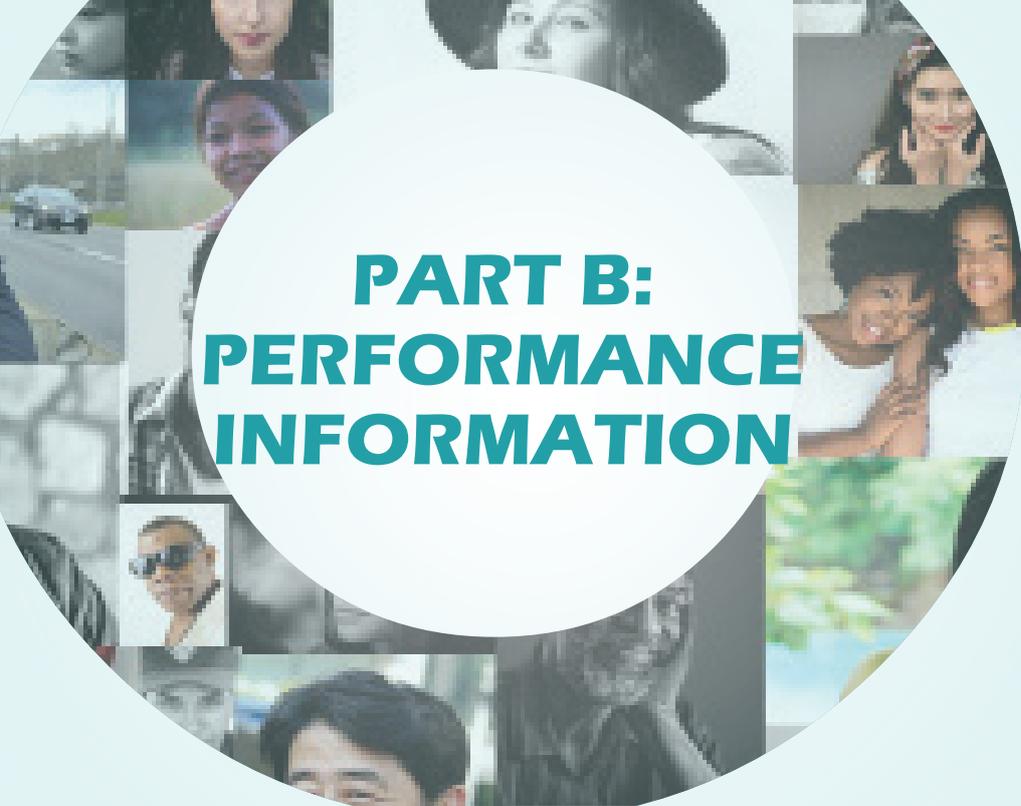
- (a) Ensure fair recruitment and selection processes that remove unfair discrimination by ensuring that the employment patterns stabilise the operations in the various departments, and supporting Employment Equity and Affirmative Action;
- (b) Provide training and development that intends to improve competency levels;
- (c) Ensure compliance with all labour laws and occupational health and safety requirements;
- (d) Ensure a labour relations platform and develop policies and conditions that seek to help employment relations work better;
- (e) Provide payroll administration that ensures that the sum of financial records of salaries of employees, bonuses, withholdings, and deductions are carried out timely and accurately;
- (f) Ensure the development of systems and modules that enhance best HR practice relating to the retention and remuneration of employees; and
- (g) Secretariat for the Bargaining Council and REMCO.

### Information Technology (IT) Department

- (a) Align IT objectives and programmes to Council objectives and strategies (computer capabilities that are responsive to the needs of the company's growth and objectives, and define metrics based on overall business objectives);
- (b) Align IT risk management with enterprise-wide risk management (security of the information systems, communication lines, and equipment; back-up and disaster recovery procedures and plans);
- (c) Optimise costs of services through a mix of internal and external resources (recommends approval of IT contracts and SLAs for computing and IT services

and equipment, and interacts with managers on internal and external operations that are impacted by the capture, storage, processing and dissemination of information and optimise and design enterprise processes via IT);

- (d) Evaluate the overall operations of computing and IT functions and recommend enhancements (assess new computing technologies to determine potential value for the company, oversee ongoing improvements and the feasibility of system enhancements and identify emerging information technologies to be assimilated, integrated, and introduced within Council);
- (e) Oversee the development, design, and implementation of new applications and changes to existing computer systems and software packages; and
- (f) Serve as secretariat for the Information and Communications Technology (ICT) Steering Task Team.



## PART B: PERFORMANCE INFORMATION

### Strategic Objective 1

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

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

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

### Strategic Objective 2

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

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

### Legal Enquiries and Legal Opinions

In terms of providing legal support through advice to the profession, the Office of the Registrar provided legal services to the public, the profession, and stakeholders by addressing legal enquiries emanating from various sources,

as well as attending various stakeholder engagements initiated by various departments, committees, Council and the Office of the Registrar. Legal enquiries may cover any variety of questions that pharmacy stakeholders or the public require assistance in answering and addressing. Of particular interest and importance in 2022 legal enquiries included issues pertaining to:

- (a) the validity of electronic prescriptions;
- (b) change in the ownership of pharmacies;
- (c) the emergence of companies growing/producing cannabis APIs submitting applications for pharmacy licences; and
- (d) matters relating to the professional conduct of a registered person.

The Office of the Registrar formally addressed over 100 legal-related enquiries during 2022.

### Input into proposed legislation

The SAPC provides input in respect of legal notices that are published for comment, be it to the Minister of Health or other external stakeholders, when such proposed legislation has or may have an impact on the SAPC or the pharmacy profession. In 2022, the SAPC provided comments in respect of the proposed amendments to the Ethical Rules of Conduct for Practitioners registered under the Health Professions Act, 1974 as published by the Health Professions Council of South Africa. The proposed amendments pertain to the Ethical Rules of the HPCSA relevant to medical practitioners and measures to enable group practise and inclusive health teams that may include pharmacies/pharmacists. The SAPC expressed its support for the amendments.

The South African Health Products Regulatory Authority (SAHPRA) published for comment proposed amendments to the *General Regulations* (2017) under the Medicines and Related Substances Act, 101 of 1965, which relate to content pertaining to compounding. The proposed amendments are a result of the litigation against SAHPRA and other Respondents in respect of the validity of the "compounding" provisions in the *General Regulations*. The SAPC, in order to provide comment herein, has requested a stakeholder meeting with SAHPRA to consider the role of Council in relation to compounding.

## Legislation Proposals

In 2022, the SAPC facilitated the drafting of the proposed amendments to the *Regulations relating to the election of members of the South African Pharmacy Council* (GNR 823, published on 19 June 1998) in order to facilitate electronic voting for Council members in 2023. The SAPC also provided a submission to the Minister of Health of the proposed new *Regulations relating to specialist pharmacists* for publication and comment.

During 2022, the SAPC participated in the consultation to review the comments received by the Department of Health in respect of:

- (a) the proposed *Regulations relating to fees payable to Council*; and
- (b) amendments to the *Regulations relating to pharmacy education and training*, the *Regulations relating to pharmacy practice*, and the *Regulations relating to the registration of persons and maintenance of registers*.

## Recommendations for the issuing of permits in terms of Section 22A (15) of the Medicines Act

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

The SAPC evaluates and makes recommendations on these applications to the Director-General: Health in order to issue these permits. A total of eighty (80) Section 22A(15) permits for PCDT pharmacists were recommended and issued in 2022.

The SAPC participated in the issuing of facility permits for the COVID-19 vaccination programme. The SAPC was appointed to curate all pharmacies that are uploaded on the Master Facility List (MFL). A total of 5363 COVID-19 facility permits have been issued since the start of the process of issuing of facility permits for the COVID-19 vaccination process.

The SAPC considered 10 applications for Section 56(6) designations. Nine were new, and one was a resubmission. Four submissions were supported, and six have not been supported due to insufficient information and/or misaligned information. As a result, the NDoH submitted the designation guidelines that are sent to applicants for input to be provided by the committee, in order to receive guidance on what other information the NDoH must request from applicants who wish to have their organisations designated as health-rendering organisations.

## Strategic Objective 3

*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.*

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

## Development of the competency standards for Pharmacy Support Personnel

The Office of the Registrar collated comments received from stakeholders and the final competency standards for pharmacy support personnel were published on 27 May 2022 for implementation as Board Notice 276 of 2022.

The competency standards were developed to inform the knowledge, skills and attributes pharmacy support personnel should have to be able to practise effectively within the South African health environment. These competency standards were derived from the scopes of practice of the different categories of pharmacy support personnel (i.e., Pharmacist's Assistant (Basic), Pharmacist's Assistant (Post-Basic), and Pharmacy Technician). They were also intended to guide the development of a learning programme to ensure that pharmacy support personnel are equipped with the appropriate competencies for practice.

## Development of the competency standards for pharmacists providing immunisation services

The Office of the Registrar collated comments received by stakeholders in respect of the competency standards for a pharmacist providing immunisation services following the publication for comment of Board Notice 100/2021, which also contained the scope of practice of a pharmacist providing immunisation services and the criteria for accreditation/approval of the curriculum of an immunisation and injection technique and delivering immunisation services.

The competency standards were developed to inform what knowledge, skills and attributes a pharmacist should have to be able to practise the additional scope of practice. They were also intended to guide the development of short courses to ensure that pharmacists are equipped with the appropriate competencies for practice.

Pharmacists who successfully complete a Council accredited short course may apply for a permit in terms of Section 22A(15) of the Medicines Act from the Director-General: Health following the registration of their completion certificate with Council. A concession was granted to pharmacists who previously completed non-accredited short courses on immunisation and injection techniques to apply for Section 22A(15) permits without needing to register their completion certificate with Council. Pharmacists were required to provide proof of competence in immunisation and injection techniques as part of the application for a Section 22A(15) permit. The permit would allow pharmacists to administer adjunct medicines to treat adverse reactions following the administration of vaccines, that a pharmacist may not be permitted to administer as part of their normal scope of practice.

The competency standards were published as part of Board Notice 241 of 2022 for implementation on 22 April 2022.

## Development of competency standards for a pharmacist providing family planning services (reproductive health)

The Office of the Registrar collated comments received by stakeholders in respect of the competency standards for a pharmacist providing family planning following the publication for comment of Board Notice 180/2021, which contained the scope of practice for a pharmacist providing family planning services and the criteria for accreditation/approval of family planning (reproductive health) learning programme.

The competency standards were developed to inform the knowledge, skills and attributes a pharmacist should have to be able to practice the additional scope of practice. They were also intended to guide the development of short courses to ensure that pharmacists are equipped with the appropriate competencies for practice.

Pharmacists who successfully complete a Council accredited short course may apply for a permit in terms of Section 22A(15) of the Medicines Act from the Direct-General: Health following the registration of their completion certificate with Council.

The competency standards were published as part of Board Notice 314/2022 for implementation on 5 August 2022.

### Competency standards for specialists in pharmacy

The Office of the Registrar developed the draft competency standards for specialists in pharmacy which includes, the registration categories of Radiopharmacy, Industrial Pharmacy, and Clinical Pharmacy. The development of the last competency standards for Public Health and Management Pharmacy is pending. The purpose of the competency standards is to set out the competencies required for pharmacists to become specialists in pharmacy and whose specialisations will be registrable with Council.

A Task Team for the Development of Competency Standards for Specialist Pharmacists was constituted following approval of the composition of the Task Team by Council. The Task team discussed the Terms of Reference and the competency standards for pharmacists providing industrial pharmaceutical services but could not finalise the competency standards for pharmacists providing industrial pharmaceutical services.

These competency standards will be finalised in 2023. The registration of all the categories of specialists in pharmacy are currently not provided in law and the draft *Regulations relating to specialist pharmacists* are awaiting publication for comment by the Minister of Health. The commencement of the development of these competency standards is in anticipation of the publication of the said Regulations. Once the proposed regulations have been published for implementation, the competency standards will become implementable as part of the operationalisation of the Regulations.

### Strategic Objective 4

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

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

### Inspection of pharmacies

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

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

**Table 10: Pharmacy inspection grading**

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

In 2022 a total of 2 053 inspections were conducted. These included monitoring, training, disciplinary and new pharmacy inspections. Out of the 2 053 inspections conducted, 1 377 were Grade A, 68 were Grade B pharmacies, 472 were Grade C pharmacies and 136 were Grade D pharmacies.

### Approval of pharmacy premises for the purposes of training

In order for a pharmacy to be approved for the purposes of training Pharmacist Interns and pharmacy support personnel (learners), such pharmacy must obtain a minimum of a Grade B inspection outcome, where there are only minor shortcomings. By the end of 2022, 717 premises were approved for the training of Pharmacist Interns and pharmacy support personnel.

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

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

In 2022, Council resolved to remove seventy-six (76) pharmacies from its registers. The review panel held six (6) meetings in 2022, where 54 pharmacies were reviewed and served at the Practice Committee together with the twenty-two (22) approved in November 2021.

### Legal Support

In conducting the business of the SAPC, and to ensure universally acceptable standards of pharmacy, which include local and international legal benchmarking, it is necessary for the SAPC to ensure that the actions of the organisation are carried out in a manner that is lawful and duly authorised, procedurally fair and reasonable. In this regard, legal support services were provided by way of legal opinions drafted where such matters were of direct or indirect relevance to pharmacy and pharmacy services. These included issues relating to:

- (a) the impact of the judgement in the matter between the Association of Compounding Pharmacists of South Africa (ACPSA) and the South African Health Products Regulatory Authority (SAHPRA), in respect of anticipatory compounding; and
- (b) the issue of appointing an acting Responsible Pharmacist pending the permanent employment of a Responsible Pharmacist.

## Strategic Objective 5

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

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

### Develop and Review Qualifications

#### Bachelor of Pharmacy (BPharm) (Higher Education Qualifications Sub-Framework)

Due to the fact that the Bachelor of Pharmacy (BPharm) qualification was last reviewed in 2010, in 2018, the SAPC,

in collaboration with the Council on Higher Education (CHE), started the process to review the BPharm qualification standard. One of the objectives of reviewing standards is to ensure that the National Qualifications Framework (NQF) level descriptors of the qualifications remain current and appropriate with respect to qualifications awarded by higher education institutions. The amended Bachelor of Pharmacy qualification standard was approved by Council in July 2022.

#### Qualifications for pharmacy support personnel (Occupational Qualifications Sub-Framework)

The SAPC is currently evaluating applications from applicants wishing to offer the Occupational Certificate: Pharmacist's Assistant (Basic) and the Occupational Certificate: Pharmacist's Assistant (Post-Basic). It is envisaged that there will be a provider approved to deliver learning programmes on the occupational certificates in 2023.

#### Work-Based Learning

Qualifications for pharmacists and pharmacy support personnel require students and learners to complete work-based learning (WBL). The SAPC identified that different higher education institutions implement WBL differently, depending on their experience with workplaces, locations and resources. There is also an additional requirement that learners enrolled for pharmacy support personnel qualifications should complete their experiential learning in all sectors of pharmacy practice. The implementation of the requirements of the qualifications requires detailed planning and consultation with stakeholders.

The SAPC is developing the Guidance Document for Work-Based Learning. It is envisaged that the WBL guidance document will be finalised in 2023.

### Develop and Review Good Pharmacy Education Standards (GPES)

#### GPES - Occupational Qualifications Sub-Framework (OQSF)

The Good Pharmacy Education Standards - OQSF were published on 3 July 2020. In 2022, the GPES – OQSF were amended to include the definition of teaching contact time, including the ratio between real-time contact and pre-recorded material. In addition, the accreditation criteria were amended to include the requirement for proof of language editing of applications.

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

The Guidance document for registration of learners during the teach-out period of the previously registered qualifications for Pharmacist's Assistants, with the qualification registration end date being 30 June 2023 was approved. The guidance document outlines what the Skills Development Providers are permitted to do during the teach-out period in terms of registration of learners.

## Development and review of criteria for the accreditation/approval of registered providers and courses

In 2022, the following criteria for accreditation/approval of curricula were published for implementation:

### Criteria for accreditation/approval: Primary Care Drug Therapy

The Criteria for the accreditation/approval of a curriculum for a Primary Care Drug Therapy (PCDT) course was approved by the SAPC. In order to facilitate the application of more providers, the SAPC has distributed the Criteria for accreditation/approval of a curriculum for a Primary Care Drug Therapy (PCDT) course to all HEIs that are already accredited by Council to request them to consider developing supplementary training courses on PCDT.

### Criteria to Accredit a Generic Short Course for Pharmacists in Immunisation and Injection Techniques and Delivering Immunisation Services.

The SAPC identified the need for pharmacists to be trained as vaccinators and be skilled in practical immunisation and injection techniques. This is in line with the National Department of Health's Strategic Plan 2020/2021 - 2024/2025, specifically to increase life expectancy from birth, reduce infant and child mortality rates, and achieve the sustainable development goal of ensuring healthy lives and promoting wellbeing for all at all ages. Secondly, to ensure sufficient workforce capacity to vaccinate the entire South African population.

The SAPC developed the criteria to accredit a generic short course for pharmacists in immunisation and injection techniques and delivering immunisation services.

The SAPC has distributed the Criteria to Accredit a Generic Short Course for pharmacists in immunisation and injection techniques and delivering immunisation services. Two providers, Nelson Mandela University (NMU) and the Health Science Academy (HAS), have already been approved.

### Criteria for the Accreditation of Family Planning (Reproductive Health) Learning Programme

The National Development Plan (NDP) and the Sustainable Development Goals, especially Goal 3.7, call for South Africa to "ensure universal access to sexual and reproductive healthcare services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes" (National Health Strategic Plan, 2020-2025).

Further to this, South Africa has experienced a high number of teenage pregnancies, with 4 042 babies registered in 2021 alone being born to children younger than 14 years of age, and teenagers aged from 15 to 19 years being mothers to 138 662 babies registered in the same year (Recorded live births, 2021, Statistics South Africa). This scenario alone is indicative of a dire need to expand access to primary reproductive health care services so as to ensure that young children are not robbed of their education and development opportunities through teenage pregnancy and the early onset of motherhood. It is against this backdrop that Council has developed Criteria for the accreditation of family planning (reproductive health) learning programmes.

Pharmacists who have completed the supplementary training on family planning (reproductive health) and have obtained a permit in terms of Section 22A(15) of the Medicines Act, may be allowed to prescribe and administer medicines for family planning (reproductive health) and perform consultations with patients at a pharmacy or in an approved setting.

The Office of the Registrar has distributed the Criteria for Accreditation of Family Planning (Reproductive Health) learning programme to all Higher Education Institutions accredited by the South African Pharmacy Council to request that they consider developing supplementary training courses to train pharmacists on providing Family Planning Services (Reproductive Health Services). Applications are yet to be received.

### Standard for Tutor Training Programmes

The quality of internships and in-service training is dependent on the tutor. In order to provide consistency in the internship and in-service training experience it is, therefore, essential that tutors are suitably qualified, experienced, and prepared for their role as mentors, role models and educators of interns and pharmacy support personnel.

Council approved the Standard for Tutor Training Programmes.

## Manage the monitoring and compliance process for pharmacy education

The following monitoring visits of providers in pharmacy education and training were conducted in 2022:

**Table 11: Higher Education Institutions visited**

Name of Institution	Qualification	Outcome of evaluation
Sefako Makgatho Health Sciences University	Bachelor of Pharmacy	Full accreditation after shortcomings addressed
Tshwane University of Technology	Bachelor of Pharmacy	Provisional accreditation
University of KwaZulu Natal	Bachelor of Pharmacy	Full accreditation
University of Western Cape	Bachelor of Pharmacy	Provisional accreditation

**Table 12: Skills Development Providers visited**

Name of Institution	Qualification	Outcome of evaluation
Sefako Makgatho Health Sciences University - Pharmacy TDP	1. National Certificate: Pharmacist's Assistant: Community, Institutional, Wholesale (NQF Level 3) 2. Further Education and Training Certificate: Pharmacist's Assistant: Community, Institutional (NQF Level 4)	Full accreditation
SBuys	1. National Certificate: Pharmacist's Assistant: Community, Institutional, Manufacturing, Wholesale (NQF level 3). 2. Further Education and Training Certificate: Pharmacist's Assistant: Community, Institutional, Manufacturing, Wholesale (NQF Level 4)	Full accreditation

### Accreditation of short courses

In 2022, three (3) institutions were accredited to deliver the dispensing course, (i.e. Health Advance Institute, SBuys and Health Science Academy). In addition, the short course on the Safe Handling of Healthcare Waste was also approved.

Two (2) institutions were accredited to provide the Immunisation and Injection technique short course.

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

In terms of Section 13(1) of the Pharmacy Act, a person may not practise the scope of practice of a pharmacist, pharmacy student, Pharmacist Intern or a Pharmacist's Assistant unless they are registered with the SAPC.

### Registration of Persons

The SAPC registers persons in the different categories of registered persons and maintains the register of persons.

The majority of applications for registration received during 2022 were submitted online, which resulted in improved turnaround times and improved quality of data.

**Table 13: Number of new registrations in 2022, and the total number of persons active on the Register**

Category of persons	No. registered in 2022	Total No. active
Pharmacy students	1 036	4 602
Pharmacist Interns	951	1 407
Community Service Pharmacists	851	873
Pharmacists (after completion of community service)	840	16 829
Assessors and Moderators	25	382
Tutors	1 916	5 649
Responsible Pharmacists	1 266	4 614
Pharmacist's Assistants (Basic and Post-Basic)	2 179	18 867
Pharmacist's Assistant Learners (Basic and Post-Basic)	3 672	6 265
Pharmacy Technician (Post-Basic)	21	442
Pharmacy Technician trainees	32	100

### Develop, review and manage the internship process

The Intern and Tutor Manual was reviewed to incorporate the 2022 pre-registration evaluation schedules and the latest Council resolutions, i.e., guidelines for the remote conducting of the examinations.

### Registration Examinations

The table below summarises the various registration-related examinations conducted by the SAPC in 2022, indicating the number of candidates who took each examination as well as the pass rate.

**Table 14: The Results of Examinations conducted by Council in 2022**

Category	Type of exam	Date of exams	No. of candidates	Pass rate
Interns	Pre-reg exam 1	04/05 March 2022	61	80,33%
	Pre-reg exam 2	05/06 August 2022	466	92,92%
	Pre-reg exam 3	25/26 October 2022	265	86,79%
	Supplementary exam 1	23 February 2022	05	80,00%
	Supplementary exam 2	10 June 2022	07	57,14%
Foreign qualified persons	Professional exams			
	Applied Pharmacy Practice in a Legal Framework	16 May 2022	09	44,44%
	Applied Pharmaceutics and Pharmaceutical Chemistry	18 May 2022	11	9,09%
	Applied Pharmacology and Toxicology	20 May 2022	10	20,00%
	Applied Pharmacy Practice in a Legal Framework	03 October 2022	14	64,29%
	Applied Pharmaceutics and Pharmaceutical Chemistry	05 October 2022	11	18,18%
	Applied Pharmacology and Toxicology	07 October 2022	11	27,27%
	Pre-registration restoration exam	12 August 2022	02	50,00%
Former BPharm students	EISA for Pharmacist's Assistant	05/06 May 2022	08	87,50%

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

The Office of the Registrar received several requests for extra time from examination candidates, which necessitated the need to develop a policy to address such requests. The requests had varying reasons, and consistency in approving or denying such requests was required. Council approved the Policy on extra time for Examinations Conducted by the South African Pharmacy Council.

The Policy for Examinations Conducted by the South African Pharmacy Council was updated to incorporate the process for approval of examination results.

#### **Development and review of accreditation criteria for foreign-qualified persons**

Persons who obtained qualifications in pharmacy outside of the Republic of South Africa and who wish to be registered as pharmacists in South Africa are required to write a professional examination. The Guidelines for persons who hold qualifications in pharmacy obtained outside the republic, the Guidelines to the South African Professional Examinations for pharmacists with foreign qualifications, and the Checklist for application by candidates with foreign qualifications requiring registration as a pharmacist or pharmacy support personnel in South Africa were reviewed to incorporate the relevant Council resolutions, including the requirement for the university to submit the curriculum in the specification approved by the SAPC and for candidates to submit a completed consent form for verification of their South African Qualifications Authority (SAQA) Certificate of Evaluation.

The Education Committee is responsible for evaluating curricula received from applicants who have obtained their Bachelor of Pharmacy (BPharm) degrees outside South Africa. The purpose of this evaluation is to determine if the submitted qualification curriculum is equivalent to the BPharm which is offered in South Africa. During 2022, there were seven (7) qualifications evaluated by the SAPC. Qualifications in pharmacy and curricula from the following universities were evaluated:

- (a) National University of Lesotho
- (b) University of Kinshasa
- (c) The Maharaja Sayajirao University of Baroda
- (d) University of Zimbabwe
- (e) Jimma University Pharmacy School
- (f) University of Oriente Republic of Cuba
- (g) Hubei University of Technology

The SAPC implemented the first remote professional examinations in May 2022. This allowed candidates in other countries to sit for the examination while in their own country. Workshops were conducted for candidates prior to the examination to orientate them on the remote/online examination platform and take them through the guidelines and code of conduct for the examination.

## Development and review of accreditation criteria for persons

### Restoration requirements and processes for pharmacists who have been removed from the register

On 3 July 2020, the SAPC published the *Restoration requirements and process for pharmacists who have been removed from the register* for implementation. The purpose of the documents was to define the process and requirements that pharmacists who have been removed from the register must meet prior to being reinstated in the SAPC's registers. Three categories based on the period of removal were determined to be 13 to 36 months, 37 to 60 months and more than 60 months. Amongst other requirements, pharmacists who have been removed for 13 to 36 months were required to submit four (4) CPD entries as part of their application for restoration, while those removed for 37 to 60 months and more than 60 months were required to submit six (6) CPD entries. The SAPC approved that pharmacists who have been removed from the register from 13 to 36 months where the requirement for restoration was four (4) CPD entries be amended to require six (6) CPD entries. The relevant correction was provided in Board Notice 277/2022.

### Certificates of Good Standing

Certificates of Good Standing are applied for by persons registered with the SAPC who wish to apply for registration in another country. The purpose of the Certificate of Good Standing is to provide confirmation that such persons are or were registered with the SAPC (and the reason for their deregistration), confirmation of qualifications obtained by the registered person, proof of any additional training such as internship, and proof that the registered person has no disciplinary and/or professional conduct matters against them. The SAPC issued 103 Certificates of Good Standing to applicants during 2022, all of whom were Pharmacists, which includes South African citizens and non-South African citizens who qualified in South Africa.

**Table 15: Year on year comparison related to the number of Certificates of Good Standing issued**

2019	2020	2021	2022
82	78	90	103

In terms of the Certificates of Good Standing issued in 2022, the following information is noted:

- In terms of gender, 67% of the applicants were female;
- In terms of population group, 22% of the applicants were Asian, 43% were Black Africans and 35% were White;
- 95% of the applicants obtained their Bachelor of Pharmacy Qualification in South Africa; and
- The top five countries to which the applicants indicated as the country of destination are, 23 to Canada, 19 to Australia, 19 to England, 17 to Ireland and nine (9) to New Zealand.

In comparison, the SAPC received twenty-three (23) applications from persons who had qualified outside of South Africa. Of the twenty-three (23) applications, twelve (12) applicants are South African citizens who qualified predominantly in India.

## Section 26 Certificates

Section 26 of the Pharmacy Act provides that a certificate issued by the Registrar is proof of registration or non-registration of a person or a pharmacy. In 2022, Section 26 Certificates were issued to pre-May 2003 pharmacies as proof of registration. Section 26 certificates are also issued to various law enforcement agencies as documented evidence that persons who are subject to criminal and other types of investigations are registered or are not registered with the SAPC. In such instances, Section 26 Certificates are issued to support potential charges against persons practising the scope of practice of a pharmacist without being registered. The Registrar provided fifty-two (52) certificates of registration or non-registration, in terms of Section 26 of the Pharmacy Act.

**Table 16: Year on year comparison related to the issuing of Section 26 Certificates**

2019	2020	2021	2022
169	31	58	52

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

### Licensing and recording of pharmacies

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

In 2022, the SAPC evaluated 785 GPP recommendation cases for pharmacy licence applications for the Director-General: Health (DG) to issue the relevant pharmacy licences. This includes applications for new pharmacies and the relocation and/or change of ownership licence applications for existing pharmacies. There are other processes where GPP recommendations are issued to the DG to reissue a licence; these include change in trading title, change of address without relocation, and change of name of owner (not change of ownership). A total of 229 of these GPP recommendations were completed.

In 2022, the SAPC recorded a total of 730 licences issued by the DG. Although GPP recommendations were submitted to the NDoH, not all licences were then issued or recorded immediately with SAPC. The variance in recommendations and recordings may be a result of various factors, such as the NDoH not issuing the licence, the licensing process not being finalised within the same year or the applicant deciding not to move forward with opening a pharmacy, amongst other reasons.

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

Section 22 of the Pharmacy Act provides that any pharmacy that was registered as at 30 April 2003 was deemed to be licenced. Such pharmacies are referred to as pre-May 2003 pharmacies. Pre-May 2003 Pharmacy owners and Responsible Pharmacists were reminded to submit a survey to the Office of the Registrar requesting that they confirm the following:

- If the physical address of the pharmacy reflecting on the SAPC register is correct as per the actual physical address of the pharmacy; and
- If the pharmacy is still owned by the same owner as reflected on the SAPC register.

As a result, the Office of the Registrar is receiving applications for pharmacy licences for some pre-May 2003 pharmacies where there was neither a change of address nor a change of ownership. In these cases, the process of obtaining a pharmacy licence is without any cost to the applicant. To date, 118 applications have been completed and licences recorded. In progress, which includes engagement with owners and awaiting the issue of the licences by the DG, are 166 cases. There are still 314 owners who have not submitted the survey or application.

### **Criteria for the evaluation of another business in a pharmacy or a pharmacy in another business (Rule 1.2.2)**

Following the publication of Board Notice 70 of 2021, in 2022 the Criteria for the evaluation of another business in a pharmacy or a pharmacy in another business was developed and approved by Council.

### **Section 37 Applications**

In terms of Section 37 of the Pharmacy Act, a pharmacy may continue to be operated by an executor of a deceased estate, or a trustee or liquidator of a liquidated/sequestered estate for a period of twelve (12) months following the death of the owner or the estate being placed in liquidation, or until the change of ownership can be affected in terms of Section 22 of the Pharmacy Act. In 2022, the Office of the Registrar facilitated ten (10) applications from Executors of deceased estates in terms of Section 37.

### **Registration of Responsible Pharmacists**

Responsible Pharmacists are registered in terms of Section 22(4) of the Pharmacy Act, which states that “A pharmacy shall, subject to such conditions as may be prescribed, be conducted under the continuous personal supervision of a pharmacist, in accordance with good pharmacy practice as determined in the rules made by the council.” A total of 776 Responsible Pharmacists were registered by 21 November 2022.

*5.4 Establish, develop, maintain and control universally acceptable standards of professional conduct required of persons to be registered in terms of this Act.*

In terms of Section 39(4) of the Pharmacy Act, Council is required to appoint assessors to assist the Committee of Formal Inquiry, which is attended to annually at the first Council meeting each year. Council approved the Criteria for the appointment of Legal Assessors for the Committee of Formal Inquiry Hearings and Appeals.

Council also approved the Guidelines for investigations, the collection of evidence, and the imposing of sanctions in October 2022.

In 2022, as part of the support of registered persons to maintain their capability, competency, and suitability to practise, there were two (2) cases that were referred to the Health Committee by the Committee of Preliminary Investigation.

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

### **Enforce compliance of standards (perform prosecutorial services)**

The Registrar is mandated, in terms of the *Regulations relating to the Conduct of Inquiries held in terms of Chapter V of the Pharmacy Act*, to investigate complaints of unprofessional conduct against pharmacists, pharmacies

and pharmacy support personnel, which mandate has been delegated to the Professional Conduct Department.

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

In terms Section 39 of the Pharmacy Act, the SAPC shall enquire into any matter that is brought to the attention of the Council, or any complaint, charge or allegation of improper or disgraceful conduct against any person registered in terms of the Pharmacy Act. The Office of the Registrar received and processed the following complaints in 2022:

- (i) 432 complaints from members of the public;
- (ii) 87 internally investigated handover complaints;
- (iii) 124 complaints from the Pre-Registration Department regarding the Interns who assisted each other during the pre-registration practice exam; and
- (iv) 470 complaints from the Continuous Professional Development (CPD) Committee in respect of Responsible Pharmacists and tutors who failed to comply with the *Regulations relating to Continuous Professional Development* in respect of the submission of continuous professional development entries for 2021.

In respect of investigating complaints relating to the fronting of Responsible Pharmacists, either by employing a pharmacist employed by a state pharmacy to be a Responsible Pharmacist of a community pharmacy (which is prohibited by law) or by employing old pharmacists who are 75+ to be Responsible Pharmacists while they are not physically present at the pharmacy.

### **Strategic Objective 6**

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

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

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

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

### **Strategic Objective 7**

*Maintain and enhance the dignity of the pharmacy profession.*

### **International Benchmarking and Conference Reports**

Council undertook an international benchmarking exercise with the intent of reviewing registration requirements for foreign-qualified persons who may have not practised pharmacy in their country of qualification. This was largely due to South Africans pursuing pharmacy qualifications in foreign countries, then prior to practising as pharmacists

in their countries of training, returning to South Africa to seek registration to practise. This benchmarking exercise enabled Council to make resolutions that have resulted in improved efficiencies in the evaluation of foreign-qualified persons' applications to be registered.

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

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

Council hosted six (6) workshops for Pharmacists Interns and their Tutors throughout 2022, in addition to these a workshop aimed at preparing the Pharmacist Interns for their year of Community Service was held. To promote compliance with Good Pharmacy Practice (GPP) standards, three (3) GPP workshops were held with Responsible Pharmacists. Some of these are further elaborated upon in Part E: Stakeholder Engagement of this report.

### **Fostering GPP compliance in pharmacy premises**

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

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

### **Guiding the profession on emerging practice issues**

Council issued four (4) professional and/or practice advisories to the profession. These sought to address various issues including how to handle prescriptions from prescribing nurses, the handling of medicines by unregistered and/or unqualified persons within the pharmacy value chain, as well as guidance on dispensing medication in line with Section 22A(6) of the Medicines and Related Substances Act, 101 of 1965. Further to the advisories issued directly to the profession, the *e-Pharmaciae* was also used as a vehicle to communicate practice guidelines/advice.

## **Strategic Objective 8**

*Coordinate the activities of Council and its Committees.*

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

In 2022, the Council held four (4) ordinary meetings. Together with the key issues considered by the various committees of the SAPC, established in terms of Section 4(o) of the Pharmacy Act, as detailed in Part C hereunder, the Council also considered the following matters:

(a) Litigation against the SAPC in terms of the publication

of Board Notice 101 of 2021 in respect of pharmacists providing PIMART services;

- (b) Proposed amendments to the *Regulations relating to the election of members to the South African Pharmacy Council*, which will enable the election of Council members in 2023 to be conducted by way of an online election system. These proposed amendments were submitted to the Minister of Health for publication for comment;
- (c) Publication of the *Rules relating to services for which a pharmacist may levy a fee* in respect of the fee amounts for 2022;
- (d) Unregistered facilities and persons handling medicine, such as the Post Office;
- (e) A request made to Council to join in litigation as an *Amicus Curiae*;
- (f) The impact of the judgment in the matter of Solidarity Trade Union and medical practitioners (in private practice) versus the Minister of Health, in respect of the Certificate of Need under the National Health Act;
- (g) The reports of the meetings held with the various provincial MECs;
- (h) Financial matters, including the publication of the *Regulations relating to fees payable to Council* (GNR 2827, published on 2 December 2022), as well as the annual investments of the SAPC and the budget for 2023;
- (i) Risk management; and
- (j) Human Resources matters.

**Table 17: Attendance of members of the Council in 2022**

Council	15 Feb	16 Feb	17 Feb	18 May	19 May	27 Jul	28 Jul	12 Oct	13 Oct	% of meetings attended
	Ordinary			Ordinary		Ordinary		Ordinary		
Total number of attendees per meeting	23	23	24	20	21	21	23	20	19	90%

Comprehensive Attendance Reports for Council and the committees were prepared for 2022, with detailed comparison attendance for all meetings, of all members, for 2019 -2022.

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

## Strategic Objective 9

*Improve internal efficiency and effectiveness.*

In terms of the SAPC's Strategic Plan 2019-2023, the SAPC aims to improve internal efficiency and effectiveness through improved systems, customer care relations and service delivery.

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

### Higher Education Institutions Sub-Framework (HEQSF)

The Office of the Registrar is in the process of developing an online system for the submission and evaluation of providers and courses. The online accreditation/monitoring platform allows continuous online submissions of the required information from Higher Education Institutions (HEIs).

Phase 1 was completed in 2022 where the submitted information from the self-assessment form of the HEIs is stored and readily accessible to both the HEIs and the Office of the Registrar. The submitted information is evaluated by an SAPC delegation when conducting accreditation/monitoring visits to HEIs.

### Skills Development Providers (SDPs)

New qualifications for Pharmacist's Assistants were approved and a process to accredit providers to offer these qualifications was approved. Council also approved the checklist used to evaluate that the application is complete (i.e. all the required documents are submitted by the applicant). To increase the efficiency of the new process for accreditation of programmes for Pharmacist's Assistants and online process submission and evaluation of these programmes, the specification for online accreditation/monitoring visit (OQSF) was developed and submitted to the developer.

The reporting template for the accreditation/monitoring of the SDPs developed in 2020 was reviewed in 2022, where the teaching and learning template was developed to optimise the evaluation of the delivery of the learning.

A biannual reporting template used to assist the SAPC in monitoring the delivery of learning programmes during the COVID-19 pandemic was reviewed to be an ongoing requirement for SDPs to ensure that the delivery of the learning programmes for Pharmacist's Assistants is not compromised. The SDPs continued to submit their six-monthly reports for 2022 as stipulated, which were approved by the SAPC.

### Regular validation of the processes

Developed workshop content for the training of providers who have submitted their material for application to be accredited to offer the Occupational Certificate: Pharmacist's Assistant (Basic) and the Occupational Certificate: Pharmacist's Assistant (Post-Basic). This was done to familiarise the providers with the process to improve the submission of correct documents and reduce the turnaround time for processing the applications.

### Pharmacy Internship

The Intern and Tutor Manual, which outlines all the essential information for Pharmacist Interns to successfully navigate their internship such as the pre-registration requirements for Pharmacist Interns, was updated with the 2022 pre-registration evaluation schedules and the latest Council decisions. The manual was published on the SAPC website together with the 2022 intern/tutor and pre-registration examination workshop presentations.

### Pre-registration examinations for Pharmacist Interns

The Guidelines for examiners and moderators of the intern pre-registration examinations were reviewed to incorporate examinations scheduled for 2022.

Pre-registration examinations for 2022 were successfully conducted online/remotely in March, August and October. The Office of the Registrar conducted pre-registration examination workshops virtually in May 2022 to prepare the Pharmacist Interns for the examinations. The Office of the Registrar further conducted compulsory practice examinations in January, June, July and August 2022 to provide Interns with an opportunity to experience the online/remote examination conditions.

## **Pre-registration examination for restoration of pharmacists**

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

Council, in July 2020, approved the format for the pre-registration restoration examination for pharmacists who have been removed, either voluntarily or involuntarily, from the register for a period of sixty (60) months or more. The pre-registration restoration examination was conducted remotely in August 2022 for two pharmacists undergoing restoration, of which one passed.

## **Professional Examination**

Upon approval by the Committee, candidates with qualifications in pharmacy obtained outside South Africa are required to write and pass the professional examination before they can be registered as Pharmacist Interns to undergo internship and comply with the applicable pre-registration requirements.

Council appointed examiners and moderators from the universities approved by Council to provide the Bachelor of Pharmacy programme, for their expertise in pharmacology, pharmaceuticals, pharmaceutical chemistry and pharmacy practice, law and ethics to set professional examination papers in their respective subjects for 2022.

Professional examinations for 2022 were held remotely for the first time in May and October. To prepare candidates for the remote examinations, the Office of the Registrar introduced workshops for candidates to explain the examination procedures, demonstrate access and how to navigate the examination platform, as well as provide an overview of the examination.

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

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

The EISA for Pharmacist's Assistants (Post-Basic) was conducted as part of the recognition of prior learning requirements for eight (8) former BPharm students who had completed their second year of study only.

## **Specialist Pharmacists**

Currently, there are two (2) categories of specialist pharmacists registered with Council, namely pharmacokinetics and radiopharmacy. Council has approved the Criteria for the evaluation of radiopharmacy specialist applications and the Checklist for evaluation of applications for registration as a radiopharmacy specialist pharmacist.

## **Develop and review guidelines, manuals, and criteria documents relating to the pre-registration of persons**

The Guidelines for examiners and moderators of the intern pre-registration examination, professional examination and PSP EISAs were reviewed in 2022.

The Intern and Tutor Manual was reviewed to incorporate the 2022 pre-registration evaluation schedules and the latest Council decisions.

The Guidelines for persons who hold qualifications in pharmacy obtained outside the republic and the Guidelines for the South African Professional Examinations for pharmacists with foreign qualifications were reviewed in 2022.

The current Guidelines for registration of Bachelor of Pharmacy graduates as Pharmacist's Assistants (Post-Basic) did not address requests such as pursuing further studies not relating to pharmacy or a process for graduates who did not wish to register as Pharmacist Interns. The guidelines were amended to incorporate various scenarios. The amended guidelines were approved by Council.

## **Guidelines for interns who have successfully completed all pre-registration requirements and are awaiting pharmaceutical community service commencement or placement**

The Office of the Registrar has facilitated the review and amendment of the Guidelines for interns who have successfully completed all pre-registration requirements and are awaiting pharmaceutical community service commencement or placement. The guidelines were developed as a stop-gap measure to allow Pharmacist Interns who have successfully completed internship and are awaiting placement and commencement of community service to practice the scope of practice of a Pharmacist's Assistant (Post-Basic) for a limited period. The guidelines were only applicable to Pharmacist Interns who had applied for community service placement and excluded Pharmacist Interns who voluntarily delayed their registration as Community Service Pharmacists.

The Office of the Registrar received requests from Pharmacist Interns who requested permission to practise the scope of a Pharmacist's Assistant (Post-Basic) and delay their registration as Community Service Pharmacists due to various reasons such as the pursuit of a post-graduate qualification, personal reasons, etc. The requests prompted the need to review the guidelines. The reviewed guidelines were approved by the CPD Committee and Council. The Office of the Registrar has subsequently developed the process and the application form to implement the approved guidelines.

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

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

The Office of the Registrar reviewed the change of designation from non-practising to practising application process. The purpose of the review was to have separate application forms for pharmacists who apply to change their designation from non-practising to practising following their voluntary designation as non-practising and for pharmacists who apply to change their designation from non-practising to practising following involuntary designation to non-practising due to non-compliance with CPD requirements.

## **Application for the reassessment of intern CPD entries**

The Office of the Registrar reviewed the application form for the reassessment of Pharmacist Interns' CPD entries. The purpose of the review was to add the list of all competency standard numbers to make it easier for the applicant to select the correct competency standards that they would like to apply for review. The review also

assisted the Office of the Registrar to allocate the correct entry to CPD assessors and moderators for review.

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

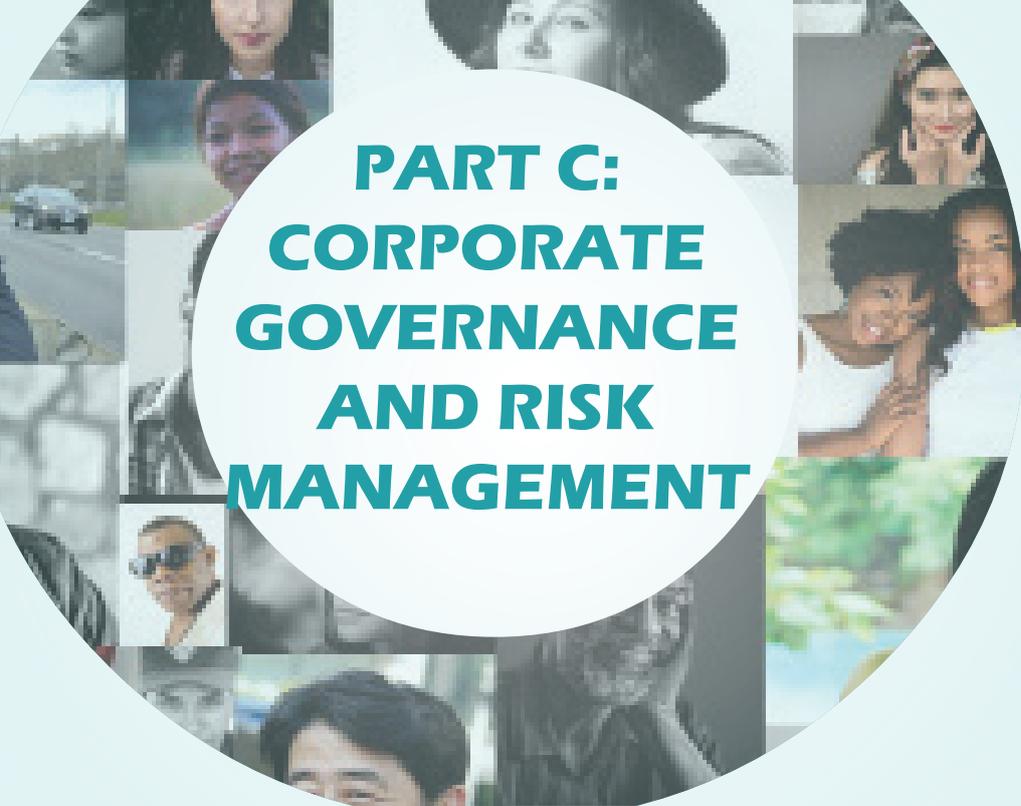
The CPD user interface was revised to allow pharmacists to select the year they would like their CPD entries to be allocated under. The reporting matrix was revised to provide information on CPD compliance status relating to multiple CPD compliance years. Pharmacist's CPD entries were reallocated to the correct CPD compliance years based on the dates of submission of the CPD entries. Following the amendments of the CPD user interface and the reporting matrix, the Office of the Registrar implemented automated CPD reminders which are sent to Pharmacists every two (2) months. The reminders contain CPD submission progress to date which are based on individual pharmacists' CPD.

### **Strategic Objective 10**

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

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

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



# PART C: CORPORATE GOVERNANCE AND RISK MANAGEMENT

## Corporate Governance

The King IV Report and Code, 2016 defines corporate governance as, “the ethical and effective leadership by the governing body towards the achievement of the governance outcomes that include an ethical culture, good performance, effective control and legitimacy”. The governing body is the structure that has primary accountability for the governance and performance of the organisation. In terms of the Pharmacy Act, the governing body of the SAPC is the Council. Part C of this Annual report sets out the SAPC’s accountability in terms of Corporate Governance and Risk Management.

## Delegation of Authority

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

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

In 2022, Council, together with the Office of the Registrar, continued to manage the terms of reference in respect of the relevant committees of Council, as well as the terms of reference of the task teams of Council and task teams

established under the various committees of Council. The purpose of this function is to ensure the accurate monitoring of the delegation of the functions of Council in terms of Section 4(o) of the Pharmacy Act.

In 2022, the Council approved the Delegation Policy of the Council, which takes into consideration the combination of delegation formally provided for in the Pharmacy Act, the *Regulations relating to the appointment and business of office-bearers and committees of the council, meeting procedures and the manner in which the accounts of the council shall be kept* (GNR. 215, published on 3 February 1978, as amended), the Terms of Reference for Committees and Task Teams, and various strategic Charters and policies. In addition, the Delegation of Authority (DoA) Policy defines the levels and limits of authority delegated to Committees and individual roles/positions acting on behalf of Council, relating to or in connection with, any action, matter or transaction executed on behalf of Council or affecting Council or its affairs, assets, property (moveable or immovable), and/or its interests.

## Corporate Governance training

The first meeting of Council each year is identified for purposes of reporting in terms of Corporate Governance as well as the necessary training of Council members. At its meeting in February 2022, Council considered and reviewed the organisation’s strategic planning, considered the Management Report for 2021 and noted the Operational Plans for 2022. In terms of training, KNB Consulting provided training to Council members on Conflict of Interest, as well as confidentiality.

Staff training on corporate governance is conducted as part of employee orientation, and all new employees employed in 2022 underwent such training. However, it has been identified that there is a need to formalise staff training on corporate governance, and to recommend the need for staff orientation when persons within the organisation have been promoted, as the focus of the original training may be different now that the person has been promoted or changed positions within the organisation.

## Compliance

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

In terms of Section 18(1) of PAIA read together with Regulation 6, Council did not receive any applications for information in 2022.

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

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

In terms of providing data for research purposes, the Office of the Registrar has provided data to fifteen (15) researchers in pharmacy in 2022.

In terms of Section 5 of the Promotion of Administrative Justice Act, 3 of 2000 (PAJA), the Council received one request for reasons in terms of their actions, as a result of the publication of Board Notice 180/2021, pertaining to a Pharmacist providing Family Planning Services. It was noted that the request for reasons was denied as the Board Notice in question was published for comment purposes only and had not resulted in any final action from the Council.

## Policy Review

The resolution to review policies at least once during a term of office was set aside in 2021 by Council, whereby in terms of best practice, policies should be reviewed at least every three (3) years, with an exception in terms of IT policies that should be reviewed more frequently due to the constant changes and developments in terms of ICT. In order to ensure that the SAPC follows a regulated review of policies it was necessary for the SAPC to develop and implement a robust strategy for the development, implementation and review of policies. In 2022 Council approved the Policy: Document Guide on the Management of Policies. Pursuant to the purpose of the policy the following processes were introduced in 2022:

- (i) the formal creation of a Policy Register for the organisation, which identifies active policies, the department or unit responsible for the policy, the implementation date, version control and review

dates. In some cases, it has been identified that there was a need to change the policy owner in line with the revised organogram of the organisation;

- (ii) review dates for all policies were tabled in the Policy Register. However, it was noted that due to the volume of policies that require review, in line with the Document Guide on Policy Management, the review of certain policies was prioritised, and if need be, a special ARC meeting will be held in 2023 for purposes of policy review only.

The following strategic policies were revised by the Council in 2022:

- (a) Succession and Career Pathing Policy;
- (b) Leave Policy;
- (a) Fraud Policy;
- (b) Whistleblowing Policy;
- (c) Risk Management; and
- (d) Work from Home Policy.

The following strategic new policies were approved for implementation by the Council in 2022:

- (a) Policy: Document Guide on the Management of Policies;
- (b) Reserve Fund Policy;
- (c) Cash and Bank Policy;
- (d) Delegation of Authority;
- (e) Criteria for the Appointment of Legal Assessors for the Committee of Formal Inquiries and Appeals Committee of Council;
- (f) Guideline for the Investigation, Collection of Evidence and Imposing of Sanctions;
- (g) Compliance Communication Strategy 2022-2023; and
- (h) Reputation Management Strategy 2022-2023.

## Code of Conduct for Independent Contractors

The Code of Conduct for each category of Independent Contractors governs the relationships between the contractor and the SAPC, colleagues, employees, and the pharmacy profession. It further covers the required ethical conduct of the independent contractor and the performance of their duties.

### Code of Conduct for Evaluators and Verifiers

The development and implementation of the Code of Conduct for evaluators of learning programmes was completed in 2022. This Code serves as a guideline to evaluators of learning programs as to what is expected of them from an ethical point of view. Compliance with this Code of Conduct is expected to enhance professionalism and ensure confidence with the Council and the providers.

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

The contracts for independent contractors (invigilators, examiners, assessors and moderators), which include the relevant Codes of Conduct and confidentiality clause were reviewed in 2022 and signed by all examiners and moderators.

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

### Code of Conduct for CPD Assessors and Moderators

The Code of Conduct for Assessors and Moderators of CPD for Interns was reviewed in 2022. No substantive changes were made to the Code of Conduct. The Code of Conduct governs the relationships between assessors/

moderators and the SAPC, colleagues and staff members, and the pharmacy profession. It further covers the conduct of assessors/moderators and the performance of their duties.

### **Code of Conduct for Council Inspection Officers**

The Code of Conduct for Council Inspection Officers was reviewed in 2022. No substantive changes were made to the Code of Conduct. The Code of Conduct governs the relationships between inspection officers and the SAPC, colleagues and staff members, and the pharmacy profession. It further covers the conduct of inspection officers and the performance of their duties.

### **Council Inspection Officers**

Section 38A of the Pharmacy Act provides for the appointment of officers to inspect pharmacy premises. In 2022, the Office of the Registrar facilitated four (4) meetings/training workshops, as well as an Inspectors' Lekgotla, which was held over two (2) days. The importance of the training is to ensure that Inspection Officers are made aware of their role as Inspection Officers, the ethical expectations in their individual conduct and in their relationship with the profession, and in doing so enhance the professionalism and ensure confidence in the SAPC and the pharmacy profession. During these workshops, updates on the SAPC Inspection Application functionality, inspection questionnaires and Council expectations from inspectors were discussed. In addition, inspection officers highlighted practice concerns and trends picked up during the inspections and these were discussed as recommendations to the Practice Committee. Thirty-seven (37) inspection officers have been appointed for 2022.

A list of Council inspection officers was updated to include officers appointed in 2022 and such list is available on the SAPC website for easy access by the profession.

### **Assessors and moderators for Internship CPD**

The SAPC appointed five (5) additional assessors and one (1) moderator in respect of the Internship CPD programme, bringing the total number of assessors to seventeen (17) and six (6) moderators respectively. At the time of the appointments, there were 1 032 Pharmacist Interns registered with Council. The purpose of the appointments was to reduce the ratio of assessors to interns from 1:86 to 1:64.5 which is closer to the ideal ratio of 1:50. The reduced ratio has a positive impact on the quality of assessments. The ratio of moderators to the number of assessors was also reduced to promote the quality of moderation. This resulted in assessors and moderators meeting CPD assessment and moderation deadlines and less enquiries from Interns who questioned the quality of assessments. Training of the new assessors and moderators was conducted. CPD participation reports were shared with the Pre-registration Committee on a quarterly basis.

### **SAPC Committees**

Section 4 of the Pharmacy Act provides the general powers of the SAPC necessary for the organisation to achieve the objects for which it has been established and the purpose of achieving such objects. Section 4(o) specifically provides for the power of the SAPC to appoint committees. The Council shall have the power to appoint any committee it may deem necessary and to delegate any of its powers to any such committee and to prescribe the conditions of such delegation, including the power to subdelegate any delegated power to any member of its staff or officer duly appointed in terms of the Pharmacy Act.

The Council committees consider and discuss matters relevant to their portfolios as provided for in various regulations and provide recommendations to Council for consideration. Council makes decisions in terms of its general functions as contained in Section 4 of the Pharmacy Act, in consideration of the recommendations provided by various committees.

The Council, at its first meeting each year, elects the chairpersons and members of the Executive Committee, the Education, Pre-registration, Practice, Continuing Professional Development and Health Committees, as well as the Committee of Preliminary Investigations and Informal Inquiries. Chairpersons and committee members of the Appointments Committee, the Audit and Risk Committee, the Remuneration and Reimbursement Committee, and the Bargaining Council are elected for a period of three (3) or five (5) years as per the various committee Charters.

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

The details which follow provide the composition and the work of each committee and their various task teams for 2022.

## Executive Committee of Council (EXCO)

The Executive Committee for 2022 comprised of the following members.

Mr Mogologolo David Phasha	President
Ms Boitumelo Nelly Molongoana	Vice-President
Mr Tshegofatso Daniel Moralo	Treasurer
Prof. Yahya Essop Choonara	Chairperson: Education Committee
Ms Jacqueline Ann Maimin	Chairperson: Practice Committee
Mr Ayanda Soka	Chairperson: CPD Committee
Prof. Moliehi Matlala	Chairperson: Pre-registration Committee
Ms Mmapaseka Steve Emily Letsike	Chairperson: Health Committee
Mr Johannes Stephanus du Toit	Chairperson: Committee of Preliminary Investigation
Dr Margaritha Johanna Eksteen	Chairperson: Committee of Informal Inquiries
Ms Khadija Jamaloodien	National Department of Health Representative

EXCO assumes the following fundamental responsibilities as provided in terms of Regulation 13 of the *Regulations relating to the appointment and business of office-bearers and committees of the council, meeting procedures and the manner in which the accounts of the council shall be kept* (GNR. 215 of 3 February 1978) (“*Regulations relating to office-bearers*”):

- matters which, in the opinion of the President, require urgent attention;
- matters relating to registers, staff and the administration of the Council office and finances;
- matters which fall within the terms of reference of other committees that require urgent attention; and
- matters which fall outside the terms of reference of other committees of Council.

Such acts performed by EXCO or any decision taken by EXCO shall be of force and effect unless they are set aside by Council at the next Council meeting.

In terms of Section 49(2) of the Pharmacy Act, the Minister of Health, if it is deemed to be in the public interest, in consultation with EXCO, and without the recommendation of Council, may:

- make regulations relating to any of the matters referred to in Section 49(1),
- amend or repeal any existing regulations; and
- amend or repeal any existing rules made in terms of the Pharmacy Act

In terms of governance, the attendance record for the Executive Committee is presented as follows:

**Table 18: Executive Committee of Council attendance**

EXCO	13 Apr	09 May	14 Jul	25 Aug	14 Sep	06 Oct	30 Nov	% of meetings attended
	Ordinary	Special	Special	Special	Ordinary	Special	Ordinary	
Total number of attendees	8	8	10	6	11	8	11	81%

EXCO, under the chairpersonship of the President of Council, held three (3) ordinary meetings and four (4) special meetings, and addressed the following issues:

- The financial reports for each quarter, including income and expenditure progression and year-on-year comparisons;
- The risk reports for each quarter, with particular emphasis on the Strategic Risk, completed risk controls, slow progress on risk management and missed targets;
- Matters relating to the administration of the SAPC Pension Fund and the transition to a general umbrella pension fund;
- Human Resources matters, including the approval of sabbatical leave, the investigation into extended leave for cultural purposes, job evaluations and salary benchmarking for the entire organisation, and other matters pertaining to remuneration;
- Review of strategic IT policies;
- Legislation implementation and amendments in respect of the *Regulations relating to the fees payable to Council* and the *Regulations relating to the election of members of the South African Pharmacy Council*;
- Litigation against the Council;
- Approval of service providers, in respect of recommendations by the Tender Committee; and
- Infrastructure development, including the appointment of the Infrastructure Development Task Team, the approval and appointment of the Infrastructure Project Plan Coordinator; the process of re-zoning the property situated in Hatfield and the construction of the general-purpose conference facilities at the Arcadia office.

## Education Committee

The Education Committee for 2022 comprised of the following members:

Prof. Yahya Essop Choonara	Chairperson
Dr Margaritha Johanna Eksteen	
Ms Josephine Winley Herbert	
Prof. Sarel Francois Malan	
Prof. Moliehi Matlala	
Ms Matsoadi Sarah Mokgatlha	
Prof. Natalie Schellack	
Dr (Adv.) Nazreen Shaik-Peremanov	
Ms Tlou Mavis Shivambu	
Prof. Ilse Truter	

In terms of governance, the attendance record for the Education Committee is presented as follows:

**Table 19: Education Committee attendance**

Education	24 Jan	14 Mar	13 Jun	22 Aug	07 Nov	% of meetings attended
	Special	Ordinary	Ordinary	Ordinary	Ordinary	
Total number of attendees per meeting	9	9	10	7	10	87%

In 2022, the Education Committee, under the chairpersonship of Prof. YE Choonara, held five (5) meetings, of which four (4) were ordinary meetings and one (1) special meeting. The Education Committee, in terms of its Terms of Reference and the Delegation of Authority Policy, considered the following matters of importance:

- (a) the approval of the Criteria to accredit a generic short course for pharmacists in immunisation and injection techniques;
- (b) the amendments to the GPES (OQSF) include an amendment to the definition of Teaching Contact Time, as well as the decision that the ratio between real-time contact and pre-recorded material be 3:1 (for every three hours of recorded materials, a minimum of one hour of real-time contact is held);
- (c) the requirement that applications for the accreditation of learning programmes must include proof of language editing;
- (d) the evaluation of curricula from foreign universities submitted by applicants for registration with qualifications obtained outside of South Africa;
- (e) the approval of the Criteria for the accreditation of family planning (reproductive health) learning programme;
- (f) the continuous review of the six-monthly reports as required from SD Providers;
- (g) the development of a checklist for documents to be submitted by applicants for the accreditation of pharmacy support personnel programmes;
- (h) the review and approval of monitoring visit reports in respect of:
  - (i) S Buys
  - (ii) Health Science Academy
  - (iii) Pharmacy Healthcare Academy
  - (iv) Pharmacy Training and Development Project – Sefako Makgatho Health Sciences University
  - (v) Rhodes University
  - (vi) University of Limpopo
  - (vii) University of the Witwatersrand
  - (viii) Tshwane University of Technology
  - (ix) University of Kwazulu-Natal
  - (x) University of the Western Cape
  - (xi) Sefako Makgatho Health Sciences University
- (j) the approval of the short course, “Safe Handling of Healthcare Waste”;
- (k) the accreditation of a short course, Dispensing of Medicines by Healthcare Professionals – Pharmacy Development Academy;
- (l) the accreditation of the Immunisation and Injection Technique Course by the Nelson Mandela University;
- (m) the accreditation of the Immunisation and Injection Technique Course by the Health Science Academy;
- (n) the approval for implementation of the revised Qualification Standard for the Bachelor of Pharmacy as provided by CHE;
- (o) the development of the Guidance document for registration of learners during the teach-out period of the previously registered qualifications for Pharmacist’s Assistants with the qualification registration end date being 30 June 2023;
- (p) the Criteria for the accreditation/approval of a curriculum of a PCDT course;
- (q) the approval of a mapping template to evaluate foreign qualifications and process for the evaluation of foreign curriculum;
- (r) the registration end-date of the National Certificate: Pharmacist’s Assistance (Basic) and Further Education and Training Certificate: Pharmacist’s Assistance (Post-Basic) which SAQA extended by two (2) years. As a result, the SD Providers were provided with letters and certificates indicating the extension of their accreditation as providers; and
- (s) the appointment of two (2) task teams to assist the Education Committee, in respect of the evaluation of foreign curricula and radiopharmacy, and the review of the Work-based Learning Guidance Document.

## Pre-registration Committee

The Pre-registration Committee for 2022 comprised of the following members:

Prof. Moliehi Matlala	Chairperson
Prof. Yahya Essop Choonara	
Ms Mmapaseka Steve Letsike	
Prof. Sarel Francois Malan	
Ms Matsoadi Sarah Mokgatlha	
Dr (Adv.) Nazreen Shaik-Peremanov	
Ms Tlou Mavis Shivambu	
Mr Mosiuoa Shadrack Shuping	
Ms Christina Aletta Venter	

In terms of governance, the attendance record for the Pre-registration Committee is presented as follows:

**Table 20: Pre-Registration Committee attendance**

Pre-Registration	15 Mar	14 Jun	31 Aug	08 Nov	% of meetings attended
	Ordinary	Ordinary	Ordinary	Ordinary	
Total number of attendees per meeting	9	8	9	8	85%

In 2022 the Pre-Registration Committee, under the chairpersonship of Prof. M Matlala, held 4 (four) ordinary meetings. The Committee, in terms of its Terms of Reference and the Delegation of Authority Policy, considered the following matters of importance:

### Recognition of foreign qualifications

The Committee approved applications from candidates with foreign qualifications who wish to be registered as Pharmacists and Pharmacy Technicians.

The Committee had to decline candidates who obtained a Bachelor of Engineering: Pharmaceutical Engineering wishing to be registered as Pharmacists as their curriculum was not for a Bachelor of Pharmacy degree.

The Committee identified the need for the Office of the Registrar to conduct benchmarking to investigate the requirements that may be put in place for foreign-qualified applicants who have not practised in the country where the qualification was obtained or who had a gap in practice experience prior to application for the evaluation of their foreign qualifications. The Committee reviewed the benchmarking report and recommended that:

- (a) applicants with foreign qualifications who wish to be registered as pharmacists in South Africa be approved to undergo six (6) months of internship if:
  - (i) they have provided proof of internship and have worked as a pharmacist in their country of origin for a minimum of two (2) years; or
  - (ii) they have not provided proof of internship but have proof that they have more than five (5) years of continuous experience as a pharmacist in a community or institutional pharmacy in their country of origin.
- (b) applicants with foreign qualifications who wish to be registered as pharmacists in South Africa be approved to undergo twelve (12) months of internship if:
  - (i) they have not provided proof of internship and have less than a minimum of two (2) years of work experience as a pharmacist in their country of origin; or
  - (ii) they have provided proof of internship but have not provided proof of work experience as a pharmacist in their country of origin.

The process of evaluation of the BPharm qualifications of foreign-qualified persons was lengthy and has led to a considerable backlog of applications. South African citizens studying abroad would return home after completion of their studies and not be able to earn an income practising in the pharmacy sector prior to being competent in the professional examination. With this in mind, the Pre-registration Committee recommended that these candidates be permitted to practise the scope of practice of a Pharmacist's Assistant (Post-Basic) once successful in the Applied Pharmacy Practice in a Legal Framework paper whilst awaiting the outcome of their curricula evaluation. The resolution was also applied to candidates who were refugees, asylum seekers and those who had acquired permanent residency.

The Committee reviewed the preliminary examination results for the professional examinations written in May and October 2022, as well as the moderator's report, and recommended for questions to either be removed or retained in the examination paper prior to the finalisation and release of results.

### Pre-registration examination for Pharmacist Interns

The Committee reviewed the pre-registration preliminary examination results for March 2022 as well as the moderator's report and recommended for questions to either be removed or retained in the examination paper prior to the finalisation and release of results.

The Committee discussed the unprofessional conduct by interns during the June 2022 pre-registration practice examination where Interns participated in a WhatsApp group entitled “Pre-Reg Exam 2022”.

### Pre-Registration Examination for Pharmacy Support Personnel

The online External Integrated Summative Assessment (EISA) was conducted in May 2022 as part of the recognition of prior learning for eight (8) former BPharm students registered as Pharmacist’s Assistants (Learner Post-Basic). The Committee reviewed the preliminary examination results, as well as the moderator’s report, and recommended for questions to either be removed or retained in the examination paper prior to the finalisation and release of results.

### Pre-registration Examination

The Committee considered the reports of the Pre-Registration Examination Task Team which included the questions flagged in the statistical analysis and made recommendations on the reworking and reuse of these questions in 2023, and the input into the pre-registration examination workshops held in May 2022 which were facilitated by two (2) examiners and moderators.

The Pre-registration Committee has requested that security measures used in the Pre-registration Examination be considered and to investigate additional security measures.

### Professional Examination Task Team

The Committee considered the reports of the Professional Examination Task Team, which included the questions flagged in the statistical analysis and made recommendations on the review or removal of questions in the examination paper and/or question bank.

### Pharmacy Support Personnel Pre-Registration Examination Task Team

The Committee considered the reports of the Pharmacy Support Personnel Pre-Registration Examination Task Team, which included the input into the EISA workshop held in April 2022 for the former BPharm students. The workshop was facilitated by one (1) of the examination moderators.

### Practice Committee

The Practice Committee for 2022 comprised of the following members:

- |                               |             |
|-------------------------------|-------------|
| Ms Jacqueline Ann Maimin      | Chairperson |
| Ms Pakama Dlwati              |             |
| Mr Johannes Stephanus du Toit |             |
| Ms Khadija Jamaloodien        |             |
| Mr Tshegofatso Daniel Moralo  |             |
| Ms Tlou Mavis Shivambu        |             |
| Mr Mosiuoa Shadrack Shuping   |             |
| Mr Ayanda Soka                |             |
| Prof. Ilse Truter             |             |
| Ms Christina Aletta Venter    |             |
| Prof. Petrus de Wet Wolmarans |             |

In terms of governance, the attendance record for the Practice Committee is presented as follows:

**Table 21: Practice Committee attendance**

Practice	19 Jan	16 Mar	03 May	15 Jun	10 Aug	24 Aug	09 Nov	% of meetings attended
	Special	Ordinary	Special	Ordinary	Special	Ordinary	Ordinary	
Total number of attendees	10	11	6	11	9	10	8	84%

In 2022, the Practice Committee, under the chairpersonship of Ms JA Maimin, held seven (7) meetings, of which four (4) were ordinary meetings and three (3) were special meetings. The Committee, in terms of its Terms of Reference and the Delegation of Authority Policy, considered the following matters of importance:

- Dispensing of full packs of medicine instead of the prescribed quantity of medicine: a communique was released to the profession regarding the legislative requirements relating to when and how a pharmacist may sell a quantity of scheduled medicine that is greater or less than the quantity prescribed or ordered.
- Prescribing nurses: pharmacies may dispense any prescription written by a nurse provided that the facility and the nurse are designated in terms of Section 56(6) of the Nursing Act, 33 of 2005, and such pharmacy is able to validate the designation and the prescription.
- Responsible Pharmacists/Deputy regulatory pharmacists working remotely: to develop standards must further investigate and draft rules pertaining to the requirement of direct personal supervision and to the provision of pharmaceutical services in no-stock manufacturing, wholesale and consultant pharmacies.
- Pharmacy Inspections
  - The inspection cycle: According to the Pharmacy Inspections and Guide to Compliance document: if a pharmacy is inspected during the first half of the year, i.e., between January and June, then the applicable

term is calculated from the year in which the inspection is conducted. If a pharmacy is inspected during the second half of the year i.e., between July and December, the applicable term is calculated from the following year. It was held that the inspection cycle be kept as it is being applied currently.

- (ii) Announcing inspections: it was approved that the pre-COVID approach for monitoring inspections be reinstated, i.e., monitoring inspections are not announced prior to being conducted.
- (e) Minimum standards for substances with potential for overuse, misuse and abuse: The SAPC has noted and received concerns about the apparent lack of control over the dispensing by community pharmacies and distribution by whole pharmacies of substances with potential for overuse, misuse and abuse. The matter has been referred to the task team appointed to develop standards to develop the Minimum standards for substances with a potential to be overused, misused and abused.
- (f) Designations in terms of Section 56(6)(d) of the Nursing Act: The NDoH requested that the SAPC provide input into the designation guideline in terms of further information required and also recommend to the Director General: Health any additional conditions to the template that may be applicable.
- (g) Section 22A(15) Permits: The review of reports on Good Pharmacy Practice (GPP) recommendations for the Director-General: Health to issue pharmacy licences, and Section 22A(15) permits issued in terms of the Medicines and Related Substances Act, 101 of 1965.
- (h) Scopes of practice: The following scopes of practice were approved by the Committee:
- PCDT
  - Family planning
  - Immunisation
- (i) the Development of Standards: Inspection questionnaire for PHC Clinic dispensaries: The inspection questionnaire was approved by Council, however, the implementation of the inspection questionnaire has been held in abeyance pending the finalisation pertaining to the registration of PHC clinic dispensaries.

## Continuing Professional Development Committee

The Continuing Professional Development (CPD) Committee for 2022 comprised of the following members:

Mr Ayanda Soka	Chairperson
Ms Pakama Dlwati	
Ms Josephine Winley Herbert	
Mr Pieter Johannes Kilian	
Ms Jacqueline Ann Maimin	
Prof. Petrus de Wet Wolmarans	

In terms of governance, the attendance record for the CPD Committee is presented as follows:

**Table 22: CPD Committee attendance**

CPD	27 Jan	17 Mar	9 May	20 Jun	25 Aug	10 Nov	% of meetings attended
	Special	Ordinary	Special	Ordinary	Ordinary	Ordinary	
Total number of attendees per meeting	5	5	4	5	4	5	86%

In 2022, the CPD Committee, under the chairpersonship of Mr A Soka, held six (6) meetings, of which four (4) were ordinary meetings and two (2) were special meetings. The Committee, in terms of its Terms of Reference and the Delegation of Authority Policy, considered the following matters of importance:

- (a) the Committee considered and approved the competency standards for a pharmacist providing immunisation services, a pharmacist providing family planning services and a pharmacist providing Primary Care Drug Therapy for implementation;
- (b) the Committee monitored the annual CPD participation and compliance by pharmacists;
- (c) the Committee provided recommendations to Council in respect of the change in designation of pharmacists who had not complied with the CPD requirements for 2021 and who were not Responsible Pharmacists and/or tutors;
- (d) the Committee provided recommendations to Council to refer all Responsible Pharmacists and/or tutors for disciplinary investigation for failing to comply with the CPD requirements for 2021;
- (e) the Committee considered appeals from pharmacists who were designated as non-practising due to failure to comply with 2020/2021 CPD requirements;
- (f) the Committee recommended the approval of the terms of reference of the task team for the development of competency standards for specialists in pharmacy, which task team would report back to the Committee in 2023; and
- (g) the Committee considered and approved the amended guidelines for interns who have successfully completed internship and who are awaiting placement or commencement of community service.

## Health Committee

The Health Committee for 2022 comprised of the following members:

Ms Mmapaseka Steve Letsike Chairperson  
 Ms Pakama Pateka Tandokazi Dlwati  
 Mr Johannes Stephanus du Toit  
 Ms Helen Catherine Hayes  
 Ms Moitsoadi Sarah Mokgatlha  
 Mr Tshegofatso Daniel Moralo  
 Prof. Natalie Schellack

In terms of governance, the attendance record for the Health Committee is presented as follows:

**Table 23: Health Committee attendance**

Health	29 Mar	23 Jun	01 Sep	09 Sep	03 Nov	% of meetings attended
	Ordinary	Ordinary	Ordinary	Special	Ordinary	
Total number of attendees	5	7	7	7	6	91%

In 2022, the Health Committee, under the chairpersonship of Ms MSE Letsike, held five (5) meetings, of which four (4) were ordinary meetings and one (1) was a special meeting. The Health Committee is established to consider cases relating to the management of persons who may be unfit to practice for reasons other than unprofessional conduct.

In 2022, the Health Committee supported sixteen (16) members of the profession, of which thirteen (13) cases were carried forward from 2021, and 3 (three) new cases were referred to the Health Committee in 2022. Six (6) cases were recommended for closure due to the members being deemed fit to practice or failing to comply with the resolutions of the Health Committee or due to information received by the Committee that the member(s) had passed away.

The Health Committee commissioned a study to investigate factors that influence employee wellness and an enabling working environment. The study was commissioned due to the trends observed by the Health Committee relating to pharmacy professionals under the support of the Health Committee, where issues of physical and mental wellness were identified. The Health Committee sought to establish whether the working environment of pharmacy professionals contributed to the perceived prevalence of mental health challenges and/or physical conditions of the professional. The study will be conducted to amongst others, advise employers on effective ways to support health professionals to maintain their fitness to practise and how to make the work environment a healthy and conducive environment for work and productivity.

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

### Registrar's Complaints Review Panel (RCRP)

In terms of the *Regulations relating to the conduct of inquiries in terms of Chapter V of the Pharmacy Act*, the Registrar has been delegated the function of investigating the complaints and allegations received by the SAPC, and where there is no prima facie evidence of misconduct or unprofessional conduct, the Registrar may decide that no further action be taken in the investigation. In discharging his functions in terms of Regulation 3 of the *Regulations relating to the conduct of inquiries in terms of Chapter V of the Pharmacy Act* the Registrar has established an internal review panel, namely the Registrar's Complaint Review Panel (RCRP). In 2022, the Registrar convened one (1) RCRP meeting and finalised thirty-four (34) cases as per the below table.

**Table 24: Recommendations of the RCRP**

Meeting	Total number of cases	No further action	Held over or further investigation	CII	CFI	Health Committee
Nov 2022	34	30	4	0	0	0

### Committee of Preliminary Investigation (CPI)

The Committee of Preliminary Investigation for 2022 comprised of the following members:

Mr Johannes Stephanus du Toit Chairperson  
 Ms Helen Catherine Hayes  
 Ms Mmapaseka Steve Letsike  
 Ms Jacqueline Ann Maimin  
 Ms Moitsoadi Sarah Mokgatlha  
 Prof. Natalie Schellack

In terms of governance, the attendance record for the CPI is presented as follows:

**Table 25: Committee of Preliminary Investigation attendance**

CPI	09 Mar	10 Mar	04 May	05 May	19 Jul	20 Jul	22 Jul	27 Sep	28 Sep	21 Nov	22 Nov	% of meetings attended
	Ordinary		Ordinary		Ordinary		Special	Ordinary		Ordinary		
Total number of attendees per meeting	5	5	6	6	7	7	5	5	6	5	5	81%

In 2022, the Committee of Preliminary Investigation (CPI), under the chairpersonship of Mr JS du Toit, held six (6) meetings, of which five (5) were ordinary meetings and one (1) was a special meeting. The CPI reviewed a total of 1 086 matters against pharmacists, pharmacy support personnel and owners.

The number of cases and the recommendations of CPI for 2022 are detailed below per meeting, noting that the September special meeting addressed the cases pertaining to the irregularities by Pharmacist Interns in the practice pre-registration examination, and the large number of cases in the November meeting which included the Responsible Pharmacists and tutors who had failed to comply with their requirements in respect of CPD:

**Table 26: Recommendations of the CPI**

Meeting	Total number of cases	No further action	Held over or further investigation	CII	CFI	Health Committee
March 2022	136	60	32	24	19	1
May 2022	131	53	43	29	6	0
July 2022	146	63	34	33	15	1
July 2022 (Special)	134	14	1	115	4	0
September 2022	183	68	74	21	20	0
November 2022	356	33	278	35	10	0
Total	1 086	291	462	257	74	2

**Table 27: Year-on-year analysis of the total CPI case numbers**

2018	2019	2020	2021	2022
373	390	498	519	1 086

**SUMMARY OF COMMITTEE OF PRELIMINARY INVESTIGATIONS FINDINGS FOR 2022****Table 28: Follow-up matters – 232**

No further action	Recommend CII (Fine)	CFI	Health Committee	Held over/referred back
89	42	35	0	66

**Table 29: Dispensing matters – 195**

No further action	Recommend CII (Fine)	CFI	Health Committee	Held over/referred back
71	68	9	0	47

**Table 30: GPP matters – 83**

No further action	Recommend CII (Fine)	CFI	Health Committee	Held over/referred back
28	7	24	1	23

**Table 31: Medical scheme matters – 22**

No further action	Recommend CII (Fine)	CFI	Health Committee	Held over/referred back
10	1	1	0	10

**Table 32: Service delivery matters – 104**

No further action	Recommend CII (Fine)	CFI	Health Committee	Held over/referred back
63	24	1	1	15

**Table 33: Pre-registration (intern) matters – 124**

No further action	Recommend CII (Fine)	CFI	Health Committee	Held over/referred back
5	115	4	0	0

**Table 34: CPD 2021 non-compliance matters - 210**

No further action	Recommend CII (Fine)	CFI	Health Committee	Held over/referred back
0	0	0	0	210

**Table 35: CPD 2020 non-compliance matters – 45**

No further action	Recommend CII (Fine)	CFI	Health Committee	Held over/referred back
0	0	0	0	45

**Table 36: Re-referrals CPD non-compliance matters - 43**

No further action	Recommend CII (Fine)	CFI	Health Committee	Held over/referred back
0	0	0	0	43

**Table 37: Other matters– 18**

No further action	Recommend CII (Fine)	CFI	Health Committee	Held over/referred back
15	0	0	0	3

### Committee of Informal Inquiries (CII)

The Committee of Informal Inquiries for 2022 comprised of the following members:

Dr Margaritha Johanna Eksteen                      Chairperson  
 Ms Josephine Winley Herbert  
 Mr Pieter Johannes Kilian  
 Mr Tshegofatso Daniel Moralo  
 Dr (Adv.) Nazreen Shaik-Peremanov

In terms of governance, the attendance record for the CII is presented as follows:

**Table 38: Committee of Informal Inquiry attendance**

CII	23 Feb	24 Feb	05 Jul	06 Jul	16 Nov	17 Nov	% of meetings attended
	Ordinary		Ordinary		Ordinary		
Total number of attendees per meeting	5	5	5	5	5	5	100%

In 2022, the Committee of Informal Inquiries, under the chairpersonship of Dr MJ Eksteen, held three (3) ordinary meetings. In these meetings, the CII reviewed a total of 471 cases.

Table 39: Findings of the CII

Meeting	Total number of cases	Appearance	Consent Orders	Referred to CFI	Held over for further investigation	No further action	Amounts
February 2022	173	16	157	0	0	0	R295 000 (fines) R590 251 (cost orders)
July 2022	141	22	38	58	13	10	R185 500 (fines) R156 452 (cost orders)
November 2022	157	16	140	0	1	0	R250 000 (fines) R501 358 (cost orders)
Total	471	54	335	58	14	10	R730 500 (fines) R1 248 061 (cost orders)

Table 40: Year-on-year analysis of the total number of CII cases

2019	2020	2021	2022
55	80	174	471

Table 41: Nature of the contraventions/charges reviewed by CII

	Contraventions	Frequency of occurrence
(i)	CPD non-compliance	228
(ii)	Pre-Reg Interns Examination irregularities	114
(iii)	Dispensing errors	62
(iv)	Ethical Rule 10 (bringing the profession into disrepute)	20
(v)	Failure to act in the best interest of the patient	14
(vi)	Failure to supervise PSP	10
(vii)	Dispensing expired medicine	7
(viii)	Failure to register a Responsible Pharmacist	7
(ix)	Breach of confidentiality	3
(x)	GPP shortcomings	3
(xi)	Failure to furnish advice to a patient/caregiver	1
(xii)	Dispensing without a valid prescription	1
(xiii)	Incorrect labelling	1
(xiv)	Failure to record S1 & S2 sales	1
(xv)	Substitution of medicine on a prescription without permission	1
(xvi)	Incorrect advertising	1
(xvii)	Dispensing medicines in a manner that promotes the abuse and/or misuse of medicine	1

## Committee of Formal Inquiries (CFI)

By Council resolution, all Council members are available to sit as a member of a Committee of Formal Inquiry, excluding members of the Committee of Preliminary Investigation, or members of the Committee of Informal Inquiry if the matter was heard by the Committee of Informal Inquiries. All CFI hearings have three (3) Council members and an external legal assessor to constitute the committee for the matters placed on the roll per sitting of a CFI.

Council, in terms of Regulation 3(c)(i)(ii) of the *Regulations relating to the conduct of inquiries*, ought to appoint a Pro Forma Complainant, when the matter is referred to the CFI. In terms of the Delegation of Authority Policy, the Office of the Registrar is permitted to appoint the Pro Forma Complainant, who acts as a prosecutor for matters referred to CFI.

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

In 2022, the following Council members sat at various CFI hearings, duly assisted by the below-mentioned legal assessors:

Prof. M Matlala Council member  
 Mr TD Moralo Council member  
 Ms PPT Dlwati Council member  
 Ms CA Venter Council member  
 Mr D Siwela Legal Assessor  
 Mr L Nyathela Legal Assessor

In 2022, the CFI held five (5) meetings, during which 28 cases were finalised. In terms of the finalised cases, 25 Respondents were found guilty by the CFI where penalties and cost orders were imposed. In three (3) cases the Respondents were found not guilty.

**Table 42: Nature of the contraventions reviewed by CFI**

	Contraventions	Frequency of occurrence
(i)	Allowing unregistered persons access to medicine	10
(ii)	No pharmacist present in the pharmacy	9
(iii)	GPP shortcomings	9
(iv)	Dispensing errors	5
(v)	Failllure to supervise PSP	5
(vi)	Failure to record patient details when dispensing medicines	5
(vii)	Fronting of Responsible Pharmacists	4
(viii)	Pre-Reg Interns Examination irregularities	4
(ix)	Medical Aid irregularities	2
(x)	Ethical Rule 10 (bringing the profession into disrepute)	1
(xi)	Dispensing medicines in a manner that promotes the abuse and/or misuse of medicine	1
(xii)	Dispensing expired medicines	1
(xiii)	Failure to label medicines	1
(xiv)	Failure to notify SAPC of change of ownership	1

**Table 43: Year-on-year analysis of the total number of CFI cases**

2019	2020	2021	2022
25	2	5	28

## Appointments Committee

The Appointments Committee for 2022 comprised of the following members:

Mr Mogologolo David Phasha	President
Ms Boitumelo Nelly Molongoana	Vice-President
Mr Tshegofatso Daniel Moralo	Treasurer
Mr Vincent Mpoye Tlala	Registrar (ex officio)

The Appointments Committee is established to consider, and where necessary, to advise Council on the appointment of the Executive Management, i.e. the Registrar/CEO, the COO and the CFO. In addition, the Committee is further required to appoint independent committee members of the Audit and Risk Committee and the Remuneration and Reimbursement Committee.

There were no Executive Management or independent committee member appointments made during 2022.

## Remuneration and Reimbursement Committee (REMCO)

The Remuneration and Reimbursement Committee (REMCO) for 2022 comprised of the following members:

Mr Craig Raath	Chairperson (External member)
Mr Victor Sakala	External member
Adv. Motlatso Josephine Ralefatane	External Member
Ms Tlou Mavis Shivambu	Council member
Prof. Sarel Francois Malan	Council member

In terms of governance, the attendance record for REMCO is presented as follows:

**Table 44: REMCO attendance**

REMCO	22 Mar	16 Aug	23 Sep	31 Oct	% of meetings attended
	Ordinary	Ordinary	Special	Ordinary	
Total number of attendees	5	5	5	4	95%

REMCO is established in line with the principles of the King IV Code and is identified as a Committee of Council in terms of Section 4(o) of the Pharmacy Act. It was set up to regulate the determination of remuneration, cost-of-living adjustment, and rewards and benefits for management employed by the SAPC, the reimbursement and honorarium of Council members, and to regulate the reimbursement of committee members who are not Council members.

In 2022, REMCO, under the chairpersonship of Mr C Raath, held four (4) meetings, of which three (3) were ordinary meetings and one (1) was a special meeting. REMCO, in terms of its Charter and the Delegation of Authority Policy, considered the following matters of importance:

- (a) job evaluations and salary benchmarking for both management and non-management employees, where the recommended adjustments were made in respect of the report;
- (b) the Cost-of-Living Adjustment and pay progression for management; and
- (c) the Review of the REMCO Charter.

## Bargaining Council

In 2022, the Bargaining Council comprised of the following Council members and Employer members:

Ms Boitumelo Nelly Molongoana	Chairperson (Vice-President)
Mr Tshegofatso Daniel Moralo	Treasurer
Prof. Natalie Schellack	Council member
Mr Vincent Mpoje Tlala	Registrar/CEO

The Bargaining Council was established to deal with matters of mutual interest between the employer and employees (parties), such as conditions of employment, employment policies, salary negotiations, etc.

In 2022, the Bargaining Council under the chairpersonship of Ms BN Molongoana held four (4) ordinary meetings. The Bargaining Council, in terms of the Collective Agreement and the Delegation of Authority Policy, considered the following matters of importance:

- (a) the revision of leave policy to accommodate sabbatical leave and leave of absence for cultural or religious practices;
- (b) the revision of the work from home (WFH) policy to deal with prolonged requests and remote working from other provinces;
- (c) the introduction of a compulsory funeral cover for employees;
- (d) the Cost-of-Living Adjustment for non-managerial employees;
- (e) job evaluations and salary benchmarking for both management and non-management employees; and
- (f) other matters of mutual interest.

## Trustees Committee

During the reporting period, the Trustees Committee comprised of the following Trustees and Office Bearers:

### Employer representatives

Mr MD Phasha (Chairperson)  
Mr TD Moralo  
Mr VM Tlala  
Ms MS Letsike (Alternate)

### Employee representatives

Mr NJ Mashishi  
Ms MM Mokoena  
Mr D Nkuna  
Ms F Ngoveni (Alternate)

### Principal Officer

Mr SG Ntsomi

### Administrator

Sanlam Employee Benefits

### Valuator

Ms L Langner

### Auditors:

Geysers & Du Plessis

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

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

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

## Ad Hoc Committees (In Terms of Policies)

### Tender Committee

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

In line with the policy, the Tender Committee presided over purchases above the value of R500 000.

In 2022, Tender Committees were constituted to hold three (3) meetings. The committee dealt with the appointment of service providers as per the Tender and Procurement Policy for the following services:

- (a) Procurement of online Backup and Disaster Recovery Solution
- (b) Hygiene Solution for the office
- (c) Infrastructure Development coordinator
- (d) Hand-to-hand courier services
- (e) Additions to the 3rd floor at Arcadia offices

## Risk Management

Council has the ultimate responsibility for the control and oversight of the SAPC's risk management, and it has delegated to management the implementation and execution of effective risk management. The Audit and Risk Committee (ARC) assists the Council in discharging its risk governance oversight responsibilities. The Council governs risks in a way that supports the organisation in setting and achieving its strategic objectives.

In line with the Policy on Risk Management, risks are managed through the systematic identification, analysis, and evaluation of actual and potential risks and the development and implementation of measures to counter those risks. Risk Management is essentially made up of four (4) stages – risk identification, risk analysis, risk evaluation and risk treatment. The Policy on Risk Management is reviewed and recommended by the Audit and Risk Committee to the Council for approval on a regular basis (every 3 years).

The annual management risk identification workshop was held in January 2022. The draft Risk Register resulting from the workshop was reviewed by the Audit and Risk Committee and presented to Council in February 2022 for input and approval.

The Strategic Risk Register for the year 2022 was approved by Council with the following top risks-

- (a) litigation due to the nature of the functions of the organisation in the ordinary course of business;
- (b) collusion/bribery between/of employees, inspectors and service providers/customers;
- (c) cyber attacks and infiltration of networks; and
- (d) incongruence between legislation and the national needs in respect of the pharmacy profession.

The Operational Risk Register for the year 2022 was approved by Council with the following top risks-

- (a) facilities operating as a pharmacy whilst not registered with Council;
- (b) poor customer relations;
- (c) damage and theft of company assets and harm to personnel;
- (d) inappropriate utilisation of IT resources;
- (e) disruption in operations;
- (f) poor connectivity to the network while working from home;
- (g) reliance on third-party IT service providers;
- (h) poor integrity of the data in the Register system; and
- (i) Pharmacist Interns submitting CPD activities that are not authentic.

In order to mitigate reputational risk, the Office of the Registrar, through CSR, has managed to implement a reputation management programme based on a Reputation Management Strategy, that emphasises the monitoring of risk, the management of the SAPC reputation and the implementation of reputation-building and reputation-mitigating actions within all operational areas and service points, in order to sustain positive relations with stakeholders. The strategy is supported by a reputation intelligence tool and an Annual Stakeholder Feedback Survey and Communication Audit, implemented with effect from 2022.

To further support compliance with registration requirements and good practice standards, CSR also developed and implemented a Compliance Communication Strategy, with the first actions implemented in 2022, in line with Council resolution.

## Internal Audit

The Internal Audit Function derives its mandate from the Internal Audit Charter. The Internal Audit Charter is reviewed and recommended for approval to the Council by the Audit and Risk Committee (ARC) annually. The Internal Audit Function reports directly to the ARC. A Risk-Based Three-Year Rolling Strategic Internal Audit Plan and the One-Year Internal Audit Operational Plan were approved by the ARC and carried out for 2022.

During 2022, the Internal Audit Function was outsourced to an independent audit firm, Rain Chartered Accountants (Rain). Rain attended all ARC meetings and reported on the adequacy of internal controls. Internal controls were considered adequate with minor improvements recommended in some areas. During the year under review, six (6) audit reviews, as per the approved One-Year Internal Audit Operational Plan, and one (1) ad hoc review were completed:

**Table 45: Audit reviews completed**

No.	Name of the audit	Audit Conclusion
1	Human Resources Management	Adequate
2	Communication and Stakeholder Relations	Adequate
3	Information & Communication Technology	Inadequate
4	Governance and Compliance	Adequate
5	Financial Management	Good/Satisfactory
6	Follow up on the findings raised by the Internal Auditors and External Auditors during the 2021 audits	67% Resolved
		12% Partially Resolved
		10% Not Resolved
7	Ad-hoc: Review of the controls management would implement to address Credit Card Fraud and Payroll Fraud that occurred at SAPC	Adequate*

\*Provided recommendations and agreed upon corrective measures are implemented

**Table 46: Audit conclusion key**

<b>Good/Satisfactory</b>	Items identified in the report are of a housekeeping nature and, if implemented, would further strengthen the overall control environment.
<b>Acceptable</b>	An adequate control framework is in place, but improvements are needed in certain key control activities. The findings identified in the report require management attention however, there is reasonable assurance that risks are being managed and objectives should be met.
<b>Inadequate</b>	Identified weaknesses may result in material risk exposure within the institution.
<b>Weak/Unsatisfactory</b>	The control environment is poor, and urgent management attention is required to address the situation.
<b>Significantly weak</b>	Unacceptable situation, urgent executive management intervention is required to address the situation.

## Audit and Risk Committee

The Audit and Risk Committee consisted of six (6) members appointed in terms of the Audit and Risk Committee Charter, four (4) independent members drawn from outside the Council, and two (2) members of Council. The Audit and Risk Committee for 2022 comprised of the following members:

Ms Masesi Malope	Chairperson (External member)
Mr Samuel Kubushi	External member
Ms Lethogonolo Noge-Tungamirai	External member
Mr Faizal Docrat	External member
Mr Mosiuoa Shadrack Shuping	Council member
Ms Christina Aletta Venter	Council member

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

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

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

In terms of governance, the attendance record for ARC is presented as follows:

**Table 47: Audit and Risk Committee attendance**

ARC	03 Feb	22 Apr	10 Aug	03 Nov	% of meetings attended
	Special	Ordinary	Ordinary	Ordinary	
Total number of meetings attended	5	6	6	6	96%

The ARC, under the chairpersonship of Ms M Malope, held four (4) meetings in 2022, of which three (3) were ordinary meetings and one (1) was a special meeting. The committee dealt with the following matters:

- (a) review of Financial Performance (quarterly);
- (b) approval of the risk register and quarterly monitoring of progress report;
- (c) review and approval of Annual Financial Statements;
- (d) review of new and old policies;
- (e) review of internal audit reports per the audit plan;
- (f) approval of the internal audit plan for 2023;
- (g) approval of the engagement letter and audit plan for external auditors;
- (h) monitoring of IT governance and activities through the ICT Task Team; and
- (i) monitoring of compliance with laws and regulations.

## Report of the Audit and Risk Committee

We are pleased to present our report for the financial year ended 31 December 2022.

### Purpose of the annual report

This annual report captures in summary form the activities of the Audit and Risk Committee (the Committee) for the financial year 2022, accounting how the Committee has performed, met its terms of reference, key priorities and executed its oversight function.

### Audit and Risk Committee members and attendance

The Committee meets at least three times per annum in accordance with its terms of reference.

The Committee held three regular meetings and one special meeting during 2022 financial year. The Committee reported to Council after each meeting. The names of the members and attendance at meetings is recorded in table below:

**Table 48: Audit and Risk Committee members**

Name of member	Number of meetings attended during 2022
Ms Masesi Malope (Chairperson)	4
Mr Faizal Docrat	4
Ms Letlhogonolo Noge-Tungamirai	4
Mr Samuel Kubushi	4
Mr Shadrack Shuping	3
Ms Christina Venter	4

### Audit and Risk Committee responsibility

The responsibilities of the Committee are set out in its terms of reference. The Committee assists Council in fulfilling its oversight responsibility by serving as an independent and objective party to oversee the establishment and maintenance of an effective system of internal control within Council. The Committee monitors and strengthens the objectivity and credibility of Council's financial reporting process and internal control systems. It supports and appraises the audit efforts of the external auditors and the internal audit function and provides an open avenue of communication between the external auditors and the internal audit function. The Committee ensures there are effective internal audit arrangements in place, reviews the work programmes and findings of internal and external audits, and reviews Council's corporate governance and risk management measures.

The Audit and Risk Committee reports that it has complied with its responsibility arising from the International Financial Reporting Standards appropriate to Council. Compliance with a number of the key responsibilities is evidenced by the following actions:

- Regular review and monitoring of the corporate risk registers, with appropriate challenge to the proposed controls and risk scoring;
- Receive reports on progress against internal and external audit plans.
- Agree the external audit annual fee and work plan.
- Agree the internal audit annual work plan and fee.
- Review of legal and ethical compliance.
- Review financial and governance policies in line with best practice.
- Assess the Committee's annual performance in line with its terms of reference.
- Review of financial reporting.

### Internal and external auditors

The internal audit function during the year under review was undertaken by Rain Chartered Accountants, with MNB Chartered Accountants serving as the external auditors.

The internal auditors attended all Committee meetings and the external auditors attended by invitation or when items needed to be presented. The auditors assured the Committee of their independence and ethical conduct in the discharge of their functions.

### Effectiveness of internal control

The internal control system is effective, as the reports from the internal auditors, and the Audit Report on the 2022 annual financial statements from the external auditors record no material non-compliance with prescribed policies and procedures. The unqualified audit achieved for the year is evidence of the efficiency and effectiveness of internal controls.

### Evaluation of financial statements

The Committee has:

- (a) reviewed the audited annual financial statements;
- (b) reviewed external audit management letter and management responses; and
- (c) reviewed significant adjustments resulting from the audit.

### Going concern basis of accounting

The Committee is satisfied that Council is in a sound financial position to continue operations for the foreseeable future and, accordingly, the financial statements are prepared on a going concern basis.

### Risk management

Management has implemented internal control processes for identifying, evaluating and managing significant risks to the achievement of Council's objectives. The Committee is satisfied that the measures are effective in mitigating the identified risks.

### Irregularities and supply chain management

There were no reports of suspicious actions relating to irregularities or non-adherence to supply chain management policies.

The Committee concurs, accepts the external audit conclusions on the annual financial statements, and is of the opinion that the audited financial statements be accepted and read together with the external audit report.

We thank management for their dedication and support, and for making the environment conducive for the Committee to effectively discharge its responsibilities.



Ms ME Malope  
Chairperson of the Audit and Risk Committee

## IT Governance and Performance

The SAPC continues to make investments in IT infrastructure and systems. As a result of these investments, our operating environment is more efficient, secure and reliable.

### IT Governance

The IT Governance Framework and the Governing Charter were reviewed to include an independent member from the Audit and Risk Committee (ARC) as well as an additional ARC member who is also a Council member. The ICT Steering Task Team is now in place and had its inaugural meeting in July 2022, with the appointment of Mr Fasal Docrat as the Chairperson, and the focus point of enhancing the SAPC's ICT infrastructure and operations. The key focus areas for the ICT Steering Task Team included:

- **IT Disaster Recovery Solution:** Ensuring that the office sourced a suitable IT Disaster Recovery solution, indicating their commitment to ensuring business continuity in case of any IT-related emergencies or disruptions.
- **Internet Stability and Upgrades:** The task team recognized the importance of stable internet connectivity for the office and supported the efforts to upgrade existing lines to improve the efficiency and reliability of SAPC's internet infrastructure.
- **Reviewing Service Offerings:** The task team has been reviewing the service offerings provided by contracted IT service providers, indicating their intention to ensure that the SAPC receives quality services and value for money from its IT service providers.
- **Oversight on IT Projects:** The task team took up the responsibility of providing oversight on IT projects, actively monitoring and guiding the implementation of IT initiatives to ensure their successful completion and alignment with set goals.
- **Audit and Risk:** The team has been involved in conducting audits and risk assessments related to the organisation's IT systems and operations. This highlights their focus on identifying potential vulnerabilities, addressing them, and ensuring compliance with relevant regulations and standards.
- **Cybersecurity:** The task team has recognized the importance of fostering cybersecurity measures, indicating their commitment to protecting sensitive information, mitigating cybersecurity risks, and promoting a secure IT environment.

Overall, the ICT Steering Task Team's 2022 activities reflect a comprehensive approach to managing and improving SAPC's IT capabilities while addressing critical areas such as disaster recovery, internet stability, service quality, project oversight, audit and risk, cybersecurity, and operational efficiency.

### IT Assets and Software

Having computing equipment that meets modern performance and reliability standards is crucial to efficient and effective service delivery. No less than 25 computers were purchased in 2022 to replace out-of-warranty laptops. Complying with software license agreements is important to ensure that we are using the right software which is properly licensed in order to continue receiving support and updates. Licenses were effectively renewed for

systems such as Symantec Endpoint Protection, Antivirus, Microsoft, Track-It, Adobe Creative, Adobe Acrobat Standard, TeamViewer Corporate, 3CX, and AccPac.

### Cyber Security

Cyber intrusions are increasingly becoming common and a major threat to organisations. The Office of the Registrar is constantly keeping an eye out for any potential threats to our systems and addressing any vulnerabilities as soon as they are identified. Over and above the normal maintenance and support of our security apparatus, a workshop on Cyber Security was organised to sensitise staff on cyber security and to create awareness on what to look out for.

A vulnerability scan and penetration test were conducted to detect and rectify any vulnerabilities. The findings were presented to the IT Steering Task Team and remedial actions are being taken to address the vulnerabilities.

### Disaster Recovery and Continuity

Council finalised the appointment of an experienced company in the field of Disaster Recovery to provide a back-up and disaster recovery solution (DRS) for all our servers and data environment. The project has been set for completion in 2023. At the completion of the project, all servers and data will be replicated in the offsite DR platform and a high level of redundancy will be achieved.

### Stable Connectivity

The primary line that provides internet connectivity to the SAPC offices was upgraded to 1 000Mbps in the second quarter of 2022. This was essential to provide for the growing demand for connectivity and to allow for a more stable and reliable internet experience for internal and external users.

### The IT Helpdesk

Central to IT support is the IT service desk that is manned to coordinate all the IT support requests coming from the internal user community and external clients. The helpdesk has recorded a significant increase in the number of requests as compared to the previous year. A total of 5 268 new requests were logged and resolved on the helpdesk system.

### System Development

System development and delivery activities have been undertaken in the past year to improve business operations and customer experience. There were more than 18 requests for change (RFCs) initiated during the last year. The RFCs were addressed and deployed to the production environment.

- (a) The specification for the online accreditation/monitoring visit to SDPs was submitted to the developer in August 2022 to initiate development. The process is ongoing, to create a digital quality management system.
- (b) Since SAPC examinations are written remotely (online), it was imperative to develop better communication channels for candidates and invigilators. For this reason, the specification for the online chat functionality between invigilators and the exam candidates, as well as the push notification for the online examination platform was developed. Development was completed, tested and implemented.
- (c) Previously, research proposals submitted by academic Pharmacist Interns were received manually

or via email by the Office of the Registrar. In order to ensure these were correctly recorded and received, the specification for the online submission of research proposals and achieved master's degrees by academic Pharmacist Interns was developed. Development was completed, tested and implemented.

- (d) In order to improve turnaround times for applications and support Council's aim of "going green" and becoming paperless, the previously manual submission process of applications by foreign-qualified persons was reviewed. The specification for the online application for foreign-qualified persons was developed. Development was completed, tested and implemented.
- (e) Specification for online evaluation of applications received from foreign-qualified persons was developed. Development was completed, tested and implemented for the Office of the Registrar, as well as for the Pre-registration Committee members, including members who are non-pharmacists.
- (f) Specification for the online exam booking for the professional and pharmacy support personnel examinations was developed. Development was completed and tested. Specification for a case to be created through the dashboard process was also developed to align to the register system. The online exam booking for the professional examination was implemented.
- (g) Specification for the remote conducting of professional and pharmacy support personnel examinations was developed. Development was completed, tested and implemented.
- (h) Specification for the incorporation of statistical analysis results conducted for online examinations was developed. Development has been completed and testing is in progress.
- (i) Specification for a case creation through a dashboard process for applications from Pharmacist Interns who have completed 365 days but were unsuccessful in the pre-registration examination, and requesting to work as Pharmacist's Assistants was developed. Development was completed, and the process was tested and implemented.
- (j) Specifications for the virtual remote proctoring were developed. The Office of the Registrar has held meetings with three (3) service providers. The service providers were also given an opportunity to demonstrate the proctoring system to staff members involved with the examinations. A pilot test is being arranged with the service providers, whereafter the service provider who met all the requirements as per the specification will be appointed.
- (k) Specification for online application process for BPharm graduates unable to find employment as interns or delaying internship to be registered as Pharmacist's Assistants was developed. Development was completed, tested and implemented.
- (l) Specifications for changes to be made to the CPD system for pharmacists. The purpose of the changes was to allow pharmacists the ability to allocate their CPD entries to a particular year, to view their submitted entries with ease and to improve the office administration of CPD entries submitted by pharmacists. The changes were implemented.
- (m) Specifications to amend the confirmation of registration process. The purpose of the change was to automate the process for the request of the confirmation of

registration document where registered persons will be able to obtain the confirmation of registration letter in real-time at a click of a button. The changes were implemented.

- (n) The Office of the Registrar also met with the National Department of Health (NDoH) and a software developer to finalise the process of developing the online system for the issuing of licences in terms of Section 22 of the Pharmacy Act by the Director-General. In addition, updated specifications have been submitted to the developers of the SAPC Register System to improve the GPP evaluation pages and ownership pages.

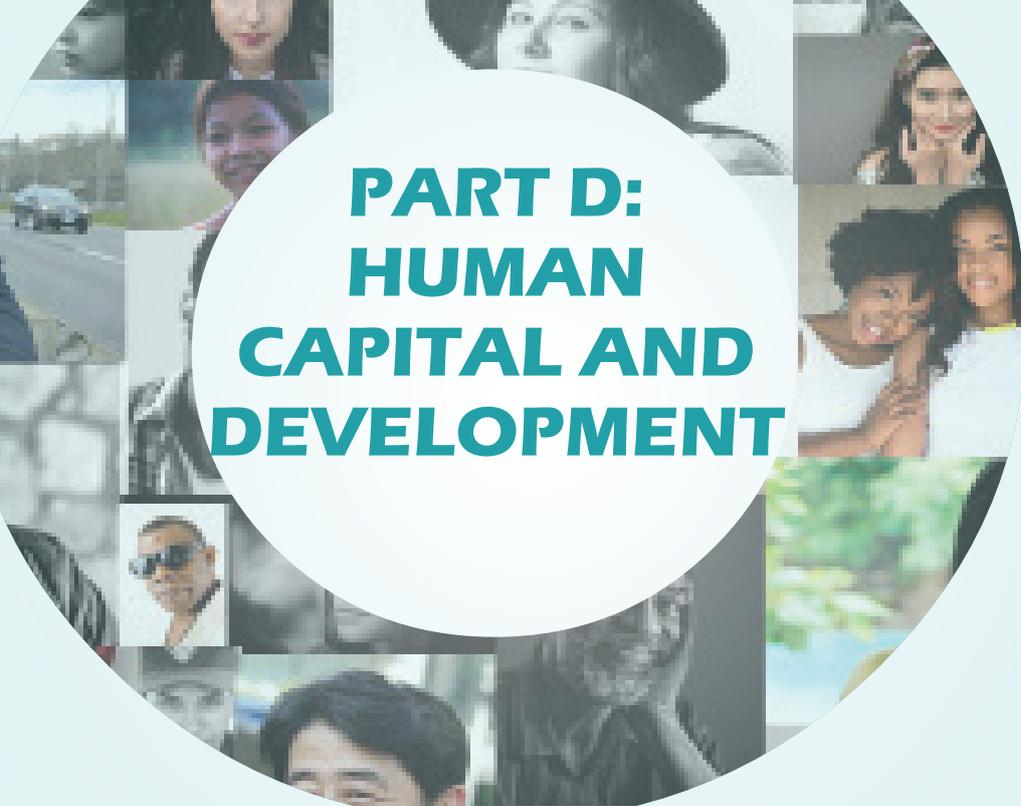
### Pharmacy Inspection Tool (Inspection questionnaires) and grading of pharmacies

The inspection officers continue to conduct inspections using the mobile Inspection App on Android devices or the web version on laptops, whilst ensuring the stability of the mobile App, and making necessary updates when required. A new version of the mobile App has been launched on Android. The inspection questionnaires have been updated to prepare for the 2023 inspection cycle, and this awaits EXCO approval. Responsible Pharmacists submitted self-inspections by 1 May 2022, and webinars were held in March 2022 to train Responsible Pharmacists to submit these self-inspections.

### SAPC Social Responsibility

#### Corporate Social Investment Policies (outreach programmes)

In July 2022, Council carried out its corporate social investment (CSI) programme at Wozanibone Secondary School. As part of this CSI initiative, Council, together with several stakeholders, donated school supplies, a vegetable garden, refurbished school property and provided learners with much needed items including sanitary towels, toiletries, sleeping bags and rechargeable lamps.



# PART D: HUMAN CAPITAL AND DEVELOPMENT

## SAPC People Management

### Recruitment, Retention and Terminations

Several positions were filled in the period under review, and this includes, Manager Professional Affairs, Communication Practitioner, Communication Officers, Contact Centre Agents, Personal Assistant to COO, IT Interns, Occupational Health Safety Practitioner and Secretarial Support Officer to COO.

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

### Employee training and development

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

Furthermore, skills training to enhance the competence of staff in varied areas was conducted in terms of workplace skills plan. The Skills Development Training Committee convened to reprioritise the training needs as identified by staff and supported by HODs. In summary, a total of 13 skills interventions were implemented in 2022, with a cost implication of R247 630.

### Employee Wellness

Employee assistance was provided through a programme run by Workforce Health. This happens mostly via self-referral by staff members who experience psychosocial challenges (manager referral is also available). The Office also conducted a Wellness Day in October 2022, which was supported by presentations around psychosocial issues as well as health screenings (Old Mutual, Workforce Health), and a bootcamp to test our fitness level and encourage staff to participate in physical exercise.

The Office of the Registrar has developed and maintained internal communication to all employees in order to support operational activities, these include an intranet, Staff WhatsApp, poster and e-Note campaigns in order to communicate key information to Council staff members. In relation to employee engagement, the Office of the Registrar also coordinates the SAPC Women's Day, Men's Imbizo, and the Employee Wellness Day. The Office also organised a general staff annual teambuilding event.

### Occupational Health and Safety (OHS)

The OHS Committee was strengthened to ensure equitable representation. An induction session for all Committee and staff members was conducted. Furthermore, Committee members were trained in all areas of health and safety, viz Incident Investigation, firefighting, SHE Rep, Evacuation, etc.

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

### Oversight Statistics

#### Employment Statistics

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

**Table 49: Employment statistics**

WORKFORCE PROFILE											
Note: A=Africans, C=Coloureds, I=Indians and W=Whites											
Occupational Levels	Male				Female				Foreign Nationals		Total
	A	C	I	W	A	C	I	W	Male	Female	
Top Management	2	0	0	0	1	0	0	0	0	0	3
Senior Management	3	0	0	0	3	0	0	2	0	0	8
Professionally qualified and experienced specialists and mid-management	6	1	0	0	8	0	1	2	0	0	18
Skilled technical and academically qualified workers, junior management, supervisors, foremen, and superintendents	6	0	0	0	19	0	1	4	0	0	30
Semi-skilled and discretionary decision making	9	0	0	0	28	2	0	1	0	0	40
Unskilled and defined decision making	4	0	0	0	5	0	0	0	0	0	9
<b>TOTAL PERMANENT</b>	<b>32</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>76</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>108</b>
Temporary employees	0	0	0	0	0	0	0	0	0	0	0
<b>GRAND TOTAL</b>	<b>32</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>76</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>108</b>





# PART E: STAKEHOLDER RELATIONS

## National Departments

In terms of the Pharmacy Act and the Strategic Objectives of the SAPC, the Minister of Health, Director-General: Health and National Department of Health (NDoH) are identified as critical stakeholders of the SAPC. In this regard the SAPC enjoyed extensive engagements regarding the Regulations relating to fees payable to the South African Pharmacy Council, the various regulations relating to mid-level workers, the introduction/implementation of PIMART, as well as COVID-19 vaccination site permits, amongst others.

On an operational level, the Office of the Registrar's engagement with the NDoH focused on the issuing of permits (Section 22A(15) of the Medicines Act), the licensing for pharmacies registered before 1 May 2003, and the enhancements to GPP evaluation online pages.

## Provincial Departments

As part of the annual stakeholder engagement programme, the Office of the Registrar and Council held a number of meetings with various provincial representatives, as listed below:

- (a) Eastern Cape Provincial Pharmaceutical Services
- (b) Free State Provincial Pharmaceutical Services
- (c) Gauteng Provincial Pharmaceutical Services
- (d) KwaZulu-Natal Provincial Pharmaceutical Services
- (e) Limpopo Provincial Pharmaceutical Services
- (f) Mpumalanga Provincial Pharmaceutical Services
- (g) North West Provincial Pharmaceutical Services
- (h) Western Cape Provincial Pharmaceutical Services
- (i) Northern Cape Provincial Pharmaceutical Services
- (j) Ethekwini Metro
- (k) Department of Correctional Services
- (l) South African National Defence Force Pharmaceutical Services

## Pharmacy Groups and Associations

As part of the stakeholder engagement programme, the Office of the Registrar held a number of meetings with various pharmacy groups and associations, as listed below:

- (a) Alpha Pharm
- (b) Arrie Nel
- (c) Chaz Lotter Business Consultant
- (d) Clicks
- (e) Dis-Chem/The Local Choice
- (f) Kalapeng
- (g) Lenmed Group
- (h) Life Healthcare
- (i) Mediclinic
- (j) Medirite Group
- (k) Netcare
- (l) Pharmacy at Spar
- (m) Van Heerden's Pharmacy Group
- (n) Independent Community Pharmacy Association
- (o) Pharmaceutical Society of South Africa
- (p) South African Association of Pharmacists in Industry
- (q) South African Association of Community Pharmacists
- (r) South African Association of Hospital and Institutional Pharmacists
- (s) South African Society of Clinical Pharmacy

The following matters were discussed at these meetings:

- (a) Standard for Tutor Training Programmes;
- (b) Training of Pharmacy Support Personnel;
- (c) Guidance Document for Registration of Learners During the Teach-out Period of the Previously Registered Qualifications for Pharmacist's Assistants with Registration End Date being 30 June 2023;
- (d) Criteria for accreditation of Family Planning (Reproductive Health) Learning Programme;
- (e) Qualification Standard for Bachelor of Pharmacy;
- (f) Recording of pharmacists who completed a course on Immunisation and Injection Technique and Delivering Immunisation Services;
- (g) Pharmacies without Responsible Pharmacists;
- (h) pharmacy inspections;
- (i) premises approvals;
- (j) Pre-registration examination and workshops for Pharmacist Interns;

- (k) CPD intern feedback sessions and CPD submission deadline;
- (l) Recording of CPD activities by pharmacists;
- (m) Registration of satellite pharmacies and PHC clinics (Institutional Public); and
- (n) Pharmacies not recorded (Institutional Public).

One stakeholder forum meeting was held addressing heads of pharmaceutical services (HOPS) in the public and private sectors, on the latest developments within the profession in the areas of professional conduct, legislation, education and training, pre-registration, CPD and registrations and pharmacy practice.

### The Pharmaceutical Crime Task Group

The Office of the Registrar attended the Pharmaceutical Crime Task Group. The group concentrates on the following issues:

- Hijackings, robberies, and theft of medicines
- Product-related crimes
- Counterfeit medicines
- Feedback from the SAPC and SAHPRA

## Statutory Bodies and Other Organisations

2022 saw a concerted drive by the SAPC, through the Office of the Registrar, to formalise stakeholder relations with various external statutory bodies and organisations. This has resulted in the signing of a number of Memoranda of Agreements between the SAPC and various statutory bodies and other stakeholders.

### Board of Healthcare Funders

The SAPC and the Board of Healthcare Funders (BHF) signed a Memorandum of Agreement to formalise and strengthen future engagements and collaboration on key issues affecting pharmacists and healthcare funders. In acknowledging the valuable roles both the SAPC and BHF play in the South African health sector, it was identified that it would be mutually beneficial to cooperate on initiatives and issues affecting medical schemes, health insurers and their beneficiaries, pharmacists and pharmacies.

### Council for Medical Schemes

The SAPC and the Council for Medical Schemes (CMS) signed a Memorandum of Agreement wherein it identifies the roles and responsibilities of each statutory body and the intention to enhance the relationship between CMS as the regulator of medical schemes and the SAPC as the regulator of pharmacies, pharmacists and pharmacy support personnel on matters of mutual interest and concern.

### The Office of Health Standards Compliance

The SAPC and the Office of Health Standards Compliance (OHSC) entered into a Memorandum of Agreement to establish a framework for a working relationship between the two parties in order to safeguard the well-being of persons receiving health care services in South Africa. In doing so the SAPC and the OHSC agreed to collaborate and cooperate with each other regarding matters of mutual interest in order to coordinate and harmonise their exercise of jurisdiction over health standards and to ensure consistent application of the National Health Act.

### Quality Council for Trades and Occupations (QCTO)

Council is the Assessment Quality Partner (AQP) to conduct the EISA for the new Occupational Certificate: Pharmacist's

Assistant Basic (part qualification), Pharmacist's Assistant (Post-Basic) and the Pharmacy Technician qualifications, and has duly submitted the annual report as well as status reports required by the Quality Council for Trades and Occupations (QCTO) in March, June, September and December 2022.

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

## South African Health Products Regulatory Authority (SAHPRA)

In terms of the MoA signed with SAHPRA, the technical group established held meetings to consider the codeine care initiative, licensing of cannabis sites and non-compliance found during the inspection of pharmacies by SAHPRA and/or SAPC. Of great importance was also the issue of information sharing between the SAPC and SAHPRA. The meeting outcomes were that the parties will share information as quickly as possible to avoid delays in the investigation of complaints. The agreement was that Council will provide information to SAHPRA's law enforcement officers. The information-sharing agreement also includes SAHPRA providing the Office of the Registrar with their investigative report.

## Providers

Council conducted a consultative meeting with Higher Education Institutions (HEIs) in April 2022, and two (2) consultative meetings with Skills Development Providers (SDPs) were held in April and June 2022.

The workshop on the accreditation of learning programmes for Pharmacist's Assistants was held with the Skills Development Providers and for the Office of the Registrar's staff members.

## Public and Media

### Public and Media Relations

In 2022, one media release was issued and seven (7) media enquiries were addressed. Chiefly, the Office of the Registrar provided replies to media enquiries focusing on codeine abuse within the country and its proposed up-scheduling as well as the dispensing of medicines by unregistered persons.

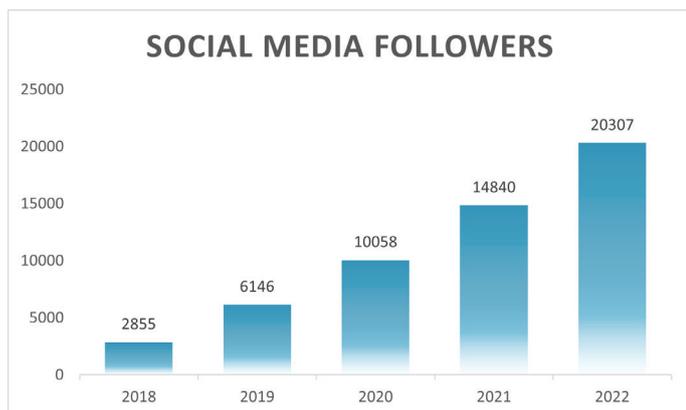
The 2022 Pharmacy Month campaign was rolled out throughout September 2022, with the profession encouraged to engage in outreach activities within their communities. The Pharmacy Month messages were the subject of 28 media coverage items, including interviews, across the country. In this respect, the SAPC had a 14,3% share of voice in all media coverage due to communication efforts by the Office of the Registrar. Furthermore, there were 39 reported outreach activities by the profession in communities and at points-of-care (clinics, hospitals, etc.) throughout South Africa, following the publication of Pharmacy Month material by the Office of the Registrar. About 48,7% of these were community outreach activities including school visits. There were 1 696 717 social media impressions recorded on Pharmacy Month messages throughout September 2022.

### Social & Digital Media

The SAPC is actively engaging stakeholders through the four most popular social networking platforms (Facebook, Twitter, Instagram and LinkedIn) and the world's largest

video network, YouTube. The SAPC has managed to increase its combined social media audience by 36,8%%, from 14 840 followers in 2021 to 20 307 in 2022.

**Figure 2: Social Media Audience Growth**



## Social Media Stakeholder Support

In addition to rolling our awareness and education campaigns, social media was also used to provide stakeholder support and resolve service queries and/or requests. During the year to date, 3 194 queries and service requests were fulfilled through our social media channels (Facebook, Instagram and Twitter).

**Table 50: Social media service queries and requests**

Social Media	Number of queries/service requests fulfilled		
	2020	2021	2022
Facebook	2 597	2 694	2 998
Instagram	147	99	130
Twitter	144	197	66
WhatsApp	2 477	0	0
TOTAL	5 365	2 990	3 194

## Publications

One issue of the *e-Pharmaciae* was published in December 2022. The *e-Pharmaciae* serves as the official mouthpiece of Council, this issue (Volume 9, Issue 1) of the *e-Pharmaciae* comprised updates on Council decisions, operational changes, as well as legislative amendments affecting the profession, including various guidance on compliance with good practice standards.

## Website content management

Registered persons have access to the secure site of the SAPC's public website in order to facilitate a number of online transactions and to manage their information and accounts with the SAPC. Logins to the secure site of the website continued to increase. In 2022, there had been 739 967 logins to the secure site of the SAPC website, a majority of these were made up of logins by registered persons (683 844 or 92,4%), followed by organisations [i.e., pharmacies and pharmacy groups] (36 903 or 5%), and education and training providers/employers (19 220 or 2,6%).

**Table 51: Logins recorded per category**

Recorded logins by category	2019	2020	2021	2022
Provider/Employer Administration	14 110	11 688	13 548	19 220
SAPC - Organisations	7 199	11 648	24 396	36 903
SAPC - Registered Persons	378 830	568 214	595 625	683 844

## Registered Persons

The support of the profession, and to improve engagement with our primary stakeholders (registered persons) remains a fundamental objective of the SAPC.

In 2022, the SAPC undertook various corporate communication activities comprising stakeholder communication and other stakeholder engagement initiatives, including workshops for the profession. Stakeholder communication

efforts comprised of 80 e-Note and SMS campaigns on various operational and professional matters. These included guidance and professional advisories on how the profession should handle prescriptions made by nursing practitioners, the dispensing of full packs of medicines in terms of Section 22A(6) of the Medicines and Related Substances Act, 101 of 1965, encouraging the recording of pre-May 2003 pharmacies and annual fee reminder campaigns, amongst others.

#### **Instant messaging and e-messages**

- SMS campaigns: A total of 369 922 SMSs were sent out during 2022.
- Bulk email campaigns: A total of 80 different bulk e-campaigns were conducted during 2022 to communicate with SAPC stakeholders.

In the year under review, the Office of the Registrar has maintained the CPD Blog, and have also developed and published various products aimed at encouraging CPD compliance including video tutorials and CPD Expert Podcasts. This has resulted in better CPD compliance rates.

The Office of the Registrar held various information sessions with first-year Bachelor of Pharmacy students registered at various higher education institutions in order to explain the processes involved in the registration of students with the SAPC and to clarify any challenges that students may have. The information sessions were held either in person or through virtual platforms.

#### **CRM Stakeholder Relations (surveys on e-mail interactions)**

In June 2022, the Office of the Registrar introduced a survey on its official email address, [customercare@sapc.za.org](mailto:customercare@sapc.za.org). The survey was sent out in response to queries received on this email address from 1 June 2022 to 31 October 2022. The purpose of the survey was to evaluate the satisfaction rating of customers with the levels of service provided by SAPC. The survey consisted of five (5) questions which gave the below results:

- A majority (64%) of emails were responded to within the expected timeframe of 72 hours;
- A majority of the respondents (68%) indicated that the agent handling their query correctly understood the query;
- Approximately half of the respondents (52%) polled indicated that they received the result they required from the specific service interaction being polled;
- Three-quarters of respondents (75%) indicated happiness with the level of the contact centre agents friendliness and professionalism; and
- The overall satisfaction level with SAPC's service delivery was at 57%.

#### **Hosting of information webinars**

The SAPC conducted a number of webinars for the different categories of registered persons:

##### Intern/Tutor Workshops (3)

##### CPD Feedback Workshops (3)

The purpose of the workshops was to assist interns to improve the quality of their CPD entries. The workshops were facilitated by assessors and/or moderators of interns CPD as well as representatives from the Office of the Registrar. The focus of the workshops was to highlight common errors committed by interns when submitting their CPD entries and to advise interns on how to avoid making common errors. Interns were also advised on important elements to consider when capturing CPD entries related

to challenging competency standards. The workshops also provided interns with a platform to pose questions to the presenters and receive responses specific to their individual questions.

##### CPD webinar/Masterclass (4)

The purpose of the CPD masterclasses was to introduce newly registered pharmacists to the SAPC CPD requirements and how to submit CPD entries on the SAPC CPD platform. The workshops were also intended to remind pharmacists regarding SAPC CPD requirements, to address CPD related challenges that pharmacists may have encountered and to highlight the changes that were implemented on the CPD platform. The presentation also included information relating to CPD administration such as the CPD submission deadlines.

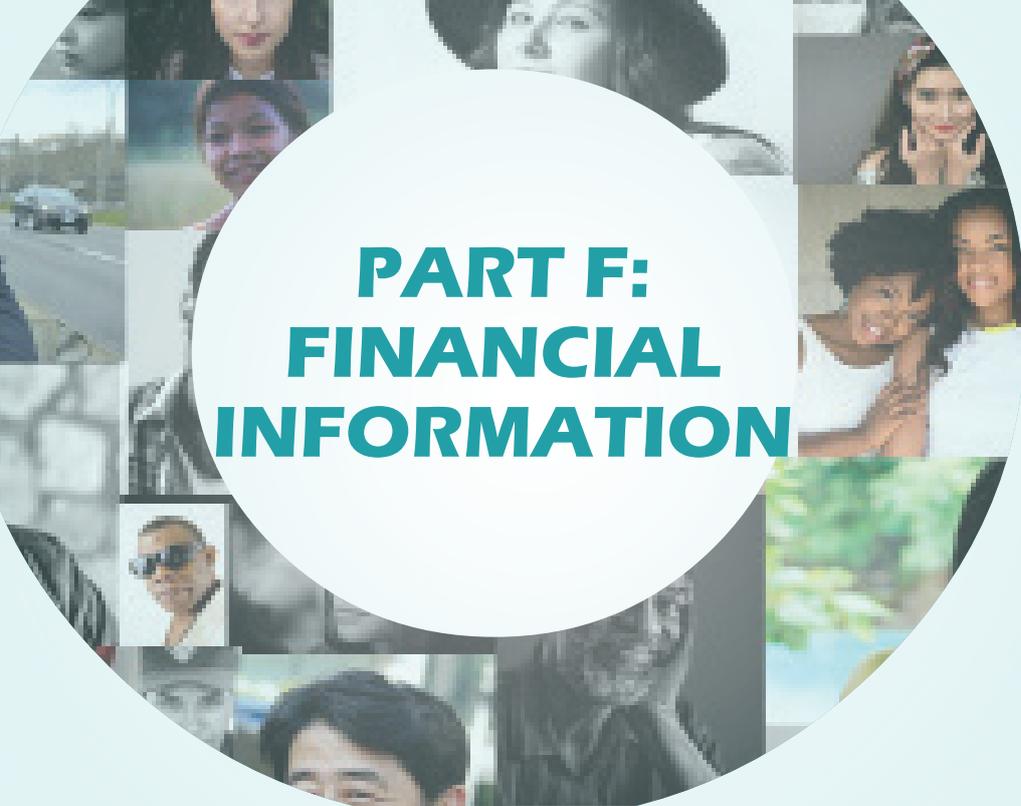
## **International Community**

The President of Council and delegates from Council and the Office of the Registrar attended the 80th World Congress of Pharmacy and Pharmaceutical Sciences (FIBES ) in September 2022. The outgoing president of the International Pharmaceutical Federation (FIP), Mr Dominique Jordan, delivered the opening address and welcomed everybody to the Seville FIP World Congress. More than 2 300 pharmacists, pharmaceutical experts, and educators from 104 countries gathered in person at this year's FIP Congress, for the first time since the beginning of the COVID-19 pandemic. Attendees gathered to share their knowledge and ideas about medicine and related decisions contributing to current science and technology with the aim of better patient care. South Africa was well represented by pharmacists from the community, hospital, academia sectors and several of the professional associations.

The overarching theme of the 80th world congress was "Pharmacy united in the recovery of health care" and it gave pharmacists an opportunity to:

- discuss the challenges presented by the COVID-19 pandemic;
- review the responses to the pandemic by pharmacists in different countries;
- find solutions through shared experiences; and
- create comprehensive plans to better manage health crises in the future.

Based on the attendance of the congress, the delegation reported back to the SAPC on the consideration of inclusion and implementation of emerging services, e.g. telepharmacy, increase in vaccinations services, and changes to healthcare delivery based on lessons learnt during the global pandemic.



# **PART F: FINANCIAL INFORMATION**

Financial Statements for the year ended 31 December 2022



**South African  
Pharmacy Council**  
[www.sapc.za.org](http://www.sapc.za.org)

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

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

Issued 17 May 2023

# South African Pharmacy Council

Annual Financial Statements for the year ended 31 December 2022

## General Information

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<b>Country of Incorporation and Domicile</b>	South Africa
<b>Nature of Business and Principal Activities</b>	Pharmacy industry regulation governed by the Pharmacy Act, 53 of 1974
<b>Registered Office</b>	591 Belvedere Street Arcadia Pretoria 0083
<b>Business Address</b>	591 Belvedere Street Arcadia Pretoria 0083
<b>Postal Address</b>	Private Bag X40040 Arcadia Pretoria 0007
<b>Bankers</b>	Standard Bank of South Africa Investec Bank Limited
<b>Independent Auditors</b>	MNB Chartered Accountants Incorporation Chartered Accountants (SA) Registered Auditor
<b>Level of assurance</b>	These financial statements have been audited in compliance with the applicable requirements of the Pharmacy Act 53 of 1974 and IFRS for SMEs.
<b>Preparer</b>	The financial statements were internally compiled by: Sandiso Ntsomi CA (SA) Chief Financial Officer

# South African Pharmacy Council

Annual Financial Statements for the year ended 31 December 2022

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## South African Pharmacy Council

(Registration Number )

Annual Financial Statements for the year ended 31 December 2022

### Councillors' Responsibilities and Approval

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

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

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

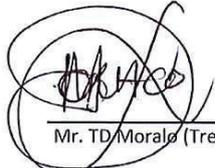
The councillors are of the opinion, based on the information and explanations given by management that the system of internal control provides reasonable assurance that the financial records may be relied on for the preparation of the annual financial statements. However, any system of internal financial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

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

The annual financial statements as set out on pages 8 to 29 were approved by the Council on 17 May 2023 and were signed on their behalf by:

  
\_\_\_\_\_  
Mr. MD Phasha (President)

  
\_\_\_\_\_  
Mr. VM Tlala (Registrar)

  
\_\_\_\_\_  
Mr. TD Moralo (Treasurer)

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## Independent Auditor's Report

*To the Council of the South African Pharmacy Council*

# Report on the Audit of the Annual Financial Statement

## Opinion

We have audited the annual financial statements of South African Pharmacy Council set out on pages 8 to 29, which comprise the statement of financial position as at 31 December 2022, and the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended 31 December 2023, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the financial statements present fairly, in all material respects, the financial position of the South African Pharmacy Council as at 31 December 2022, and its financial performance and cash flows for the year then ended in accordance with International Financial Reporting Standard for Small and Medium-sized Entities and the requirements of the Pharmacy Act 53 of 1974.

## Basis for opinion

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

## Other information

The councillors are responsible for the other information. The other information comprises of the information included in the document titled "South African Pharmacy Council Annual Financial Statements for the year ended 31 December 2022", which includes Councillors Report and Detailed Income Statement. Other information does not include the financial statements and our auditor's report thereon.

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

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with

the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

### **Responsibilities of the councillors for the Annual Financial Statements**

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

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

### **Auditor's responsibility for the audit of the Annual Financial Statements**

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

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

- Identify and assess the risks of material misstatement of the annual financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the organisation's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the councillors.
- Conclude on the appropriateness of the council's use of the going concern basis of accounting and based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the organisation's



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ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the annual financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the council to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the annual financial statements, including the disclosures, and whether the annual financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

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

*MNB Chartered Accountants Inc.*

**MNB Chartered Accountants Inc.**

Chartered Accountant (SA), Registered Auditor

**Engagement Director: Wisani Shirinda**

38 Boerneef Street, Vorna Valley, Midrand, 1864

Date: 05 June 2023

# South African Pharmacy Council

(Registration Number )

Annual Financial Statements for the year ended 31 December 2022

## Councillors' Report

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The councillors present their report for the year ended 31 December 2022.

### 1. Review of financial results and activities

#### Main business and operations

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

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

Profit from continuing operations before finance costs and investment revenue amounted to R8 309 519 (2021: R14 530 740) for the current financial period. Financing costs for the period amounted to R6 192 (2021: R3 962) and Investment revenue amounted to R4 748 975 (2021: 2 699 514)

The council declared a net surplus for the year of R13 052 302 (2021: R17 226 292)

### 2. Going concern

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

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

### 3. Events after reporting date

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

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

### 4. Councillors' interest in contracts

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

# South African Pharmacy Council

(Registration Number )

Annual Financial Statements for the year ended 31 December 2022

## Councillors' Report

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### 5. Councillors

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

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

### 6. Independent Auditors

MNB Chartered Accountants Incorporation were the independent auditors for the year under review.

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Statement of Financial Position

	Note(s)	2022	2021
<b>Assets</b>			
<b>Non-Current Assets</b>			
Property, plant and equipment	2	24,674,071	25,808,803
Investment property	3	4,200,000	5,000,000
Intangible assets	4	2,274,824	2,978,621
		<b>31,148,895</b>	<b>33,787,424</b>
<b>Current Assets</b>			
Trade and other receivables	5	18,768,098	19,637,146
Cash and cash equivalents	6	85,348,113	61,348,612
		<b>104,116,211</b>	<b>80,985,758</b>
<b>Total Assets</b>		<b>135,265,106</b>	<b>114,773,182</b>
<b>Equity and Liabilities</b>			
<b>Equity</b>			
Retained earnings		82,852,261	69,799,959
<b>Non-Current Liabilities</b>			
Finance lease liabilities	7	7,760	2,288
<b>Current Liabilities</b>			
Trade and other payables	8	52,358,698	44,951,425
Finance lease liabilities	7	46,387	19,510
		<b>52,405,085</b>	<b>44,970,935</b>
<b>Total liabilities</b>		<b>52,412,845</b>	<b>44,973,223</b>
<b>Total Equity and Liabilities</b>		<b>135,265,106</b>	<b>114,773,182</b>

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Statement of Comprehensive Income

	Note(s)	2022	2021
Revenue	9	118,817,598	111,279,726
Other income	10	346,000	359,814
Operating expenses		(110,854,079)	(97,108,800)
<b>Profit from continuing operations</b>	11	<b>8,309,519</b>	<b>14,530,740</b>
Investment revenue	12	4,748,975	2,699,514
Finance costs	13	(6,192)	(3,962)
<b>Surplus for the year</b>		<b>13,052,302</b>	<b>17,226,292</b>
Other comprehensive income		-	-
<b>Net surplus/ (deficit) for the year</b>		<b>13,052,302</b>	<b>17,226,292</b>

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Statement of Changes in Equity

	Note(s)	Retained earnings	Total equity
<b>Balance at 1 January 2021</b>		<b>46,898,417</b>	<b>46,898,417</b>
Adjustment due to error (note 21)		5,675,250	5,675,250
<b>Balance at 1 January 2021 as adjusted</b>		<b>52,573,667</b>	<b>52,573,667</b>
Other comprehensive income		-	-
<b>Net surplus / (deficit) for the year</b>		<b>17,226,292</b>	<b>17,226,292</b>
<b>Balance at 31 December 2021</b>		<b>69,799,959</b>	<b>69,799,959</b>
<b>Balance at 1 January 2022</b>		<b>69,799,959</b>	<b>69,799,959</b>
Surplus/ (deficit) for the year		13,052,302	13,052,302
Other comprehensive income		-	-
<b>Net surplus / (deficit) for the year</b>		<b>13,052,302</b>	<b>13,052,302</b>
<b>Balance at 31 December 2022</b>	-	<b>82,852,261</b>	<b>82,852,261</b>

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Statement of Cash Flows

	Note(s)	2022	2021
<b>Cash flows from operating activities</b>			
Cash receipts from customers		118,817,598	111,279,726
Cash payments to suppliers and employees		(96,518,924)	(97,925,720)
Cash generated from operations	14	22,298,674	13,354,006
Investment revenue	12	4,748,975	2,699,514
Finance costs	13	(6,192)	(3,962)
<b>Net cash flows from operating activities</b>		<b>27,041,457</b>	<b>16,049,558</b>
<b>Cash flows used in investing activities</b>			
Property, plant and equipment acquired	2	(2,457,693)	(1,685,322)
Intangible assets acquired	4	(573,159)	(772,706)
Proceeds on disposals of property, plant and equipment		50,436	321,698
<b>Net cash flows used in investing activities</b>		<b>(2,980,416)</b>	<b>(2,136,329)</b>
<b>Cash flows used in financing activities</b>			
Finance lease payments		(61,540)	(32,025)
<b>Net cash flows used in financing activities</b>		<b>(61,540)</b>	<b>(32,025)</b>
Net increase in cash and cash equivalents		23,999,501	13,881,204
Cash and cash equivalents at beginning of the year		61,348,612	47,467,408
<b>Cash and cash equivalents at end of the year</b>	6	<b>85,348,113</b>	<b>61,348,612</b>

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Accounting Policies

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### 1. Presentation of financial statements

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

These accounting policies are consistent with the previous period.

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

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

##### Critical judgements in applying accounting policies

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

##### Lease classification

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

##### Key sources of estimation uncertainty

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

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

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

##### Impairment testing

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

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Accounting Policies

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

#### **Investment property valuation**

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

#### **Provisions**

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

#### **Other estimates made**

The council makes estimates for:

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

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

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

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

### **1.2 Property, plant and equipment**

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

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

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

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

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Accounting Policies

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

Item	Depreciation method	Average useful life
Land	Straight line	Indefinite
Buildings	Straight line	20 years
Motor vehicles	Straight line	4 years
Furniture and fittings	Straight line	10 years
Office equipment	Straight line	5 years
IT equipment	Straight line	3 years
Cell phones & tablets (included in office equipment)	Straight line	2 years

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

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

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

### **1.3 Investment property**

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

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

### **1.4 Intangible assets**

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

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

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

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Item	Useful life
Computer software	2 to 5 years

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# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Accounting Policies

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*Presentation of financial statements continued...*

### 1.5 Financial instruments

#### Initial measurement

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

#### Financial instruments at amortised cost

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

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

#### Cash and cash equivalents

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

### 1.6 Leases

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

#### Finance leases - lessee

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

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

#### Operating leases - lessee

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

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Accounting Policies

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

#### 1.7 Impairment of assets

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

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

#### 1.8 Employee benefits

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

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

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

#### 1.9 Provisions and contingencies

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

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

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

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

#### 1.10 Revenue

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

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

Annual fees

Evaluations, re-inspections and fines

Examinations

Registration fees.

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Accounting Policies

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

#### **Interest**

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

#### **Rental Income**

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

#### **1.11 Equity**

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

#### **1.12 Related Parties**

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

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

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

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

#### **1.13 Other income**

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

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Notes to the Annual Financial Statements

2022 2021

### 2. Property, plant and equipment

	2022			2021		
	Cost	Accumulated Depreciation	2022 Carrying Value	Cost	Accumulated Depreciation	2021 Carrying Value
Land	8,600,000	-	8,600,000	8,600,000	-	8,600,000
Buildings	19,115,223	(10,029,423)	9,085,800	18,959,664	(9,170,454)	9,789,210
Motor vehicles	752,893	(598,248)	154,645	752,893	(520,928)	231,965
Furniture and fittings	4,570,541	(2,629,778)	1,940,763	4,134,886	(2,261,367)	1,873,519
Office equipment	3,965,167	(2,750,912)	1,214,255	3,224,225	(1,896,136)	1,328,089
IT equipment	9,163,191	(5,484,583)	3,678,608	7,912,141	(3,926,121)	3,986,020
<b>Total</b>	<b>46,167,015</b>	<b>(21,492,944)</b>	<b>24,674,071</b>	<b>43,583,809</b>	<b>(17,775,006)</b>	<b>25,808,803</b>

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Notes to the Annual Financial Statements

2022 2021

### Property, plant and equipment continued...

#### Reconciliation of property, plant and equipment - 2022

	Opening Balance	Reclassification	Additions	Disposals	Depreciation	Total
Land	8,600,000	-	-	-	-	8,600,000
Buildings	9,789,210	-	155,560	-	(858,970)	9,085,800
Motor vehicles	231,965	-	-	-	(77,320)	154,645
Furniture and fittings	1,873,519	-	443,405	(1,511)	(374,650)	1,940,763
Office equipment	1,328,089	314,622	410,454	(5,635)	(833,275)	1,214,255
IT equipment	3,986,020	-	1,448,274	(9)	(1,755,677)	3,678,608
<b>Total</b>	<b>25,808,803</b>	<b>314,622</b>	<b>2,457,693</b>	<b>(7,155)</b>	<b>(3,899,892)</b>	<b>24,674,071</b>

#### Reconciliation of property, plant and equipment - 2021

	Opening balance	Additions	Disposals	Depreciation	Total
Land	8,600,000	-	-	-	8,600,000
Buildings	10,541,493	-	-	(752,283)	9,789,210
Motor vehicles	266,434	-	-	(34,469)	231,965
Furniture and fittings	2,131,014	46,850	(23,254)	(281,091)	1,873,519
Office equipment	1,447,510	261,410	(8)	(380,823)	1,328,089
IT equipment	4,447,484	1,377,062	(261,327)	(1,577,199)	3,986,020
<b>Total</b>	<b>27,433,935</b>	<b>1,685,322</b>	<b>(284,589)</b>	<b>(3,025,865)</b>	<b>25,808,803</b>

Council performed a reclassification of assets from intangibles assets into property, plant and equipment. Please refer to note 20 for more details.

#### Net carrying amounts of leased assets

Office equipment	52,057	21,024
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# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Notes to the Annual Financial Statements

2022 2021

*Property, plant and equipment continued...*

### Details of properties

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

Land and buildings, Erf/HAT 30, situated at 1019 Francis Baard Street, Hatfield, Pretoria in the extent of 2 552 (two thousand five hundred and fifty two) square meters.

### 3. Investment property

	2022			2021		
	Cost	Decrease in Value	Fair Value	Cost	Decrease in Value	Fair Value
Investment properties	6,833,322	(2,633,322)	4,200,000	6,833,322	(1,833,322)	5,000,000

### Reconciliation of investment property - 2022

	Opening Balance	Additions	Fair Value Adjustment	Total
Investment properties	5,000,000	-	(800,000)	4,200,000

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Notes to the Annual Financial Statements

	2022	2021
<i>Investment property continued...</i>		
<b>Reconciliation of investment property - 2021</b>		
	<b>Opening Balance</b>	<b>Additions</b>
		<b>Fair Value Adjustment</b>
		<b>Total</b>
Investment properties	5,000,000	-
		-
		5,000,000

### Details of investment property

Land and buildings, Portion 1 of Erf 35, situated at 1020 Arcadia Street, Hatfield, Pretoria in the extent of 1931 (one thousand nine hundred and thirty one) square meters. The property is used as communal for students and is earmarked in the long term for office development.

The investment property fair value was evaluated by Van Zyl Professional Associated Property Valuers. The significant assumptions used by the valuer is the highest and best use of the property which was considered to be re-development for the purposes of flats or offices and comparable market value within the area.

#### 4. Intangible assets

	2022			2021		
	Cost	Accumulated Depreciation	Carrying Value	Cost	Accumulated Depreciation	Carrying Value
Computer software	7,550,221	(5,275,397)	2,274,824	7,291,683	(4,313,062)	2,978,621

### Reconciliation of intangible assets - 2022

	Opening Balance	Reclassification	Additions	Depreciation	Carrying Value
Computer software	2,978,621	(314,622)	573,159	(962,334)	2,274,824

### Reconciliation of intangible assets - 2021

	Opening Balance	Additions	Depreciation	Carrying Value
Computer software	2,997,108	772,706	(791,193)	2,978,621

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Notes to the Annual Financial Statements

	2022	2021
<b>5. Trade and other receivables</b>		
Trade receivables	17,471,034	18,663,920
Deposits	95,646	95,646
Value Added Tax (VAT)	445,423	163,913
Other receivables	755,995	713,667
	<b>18,768,098</b>	<b>19,637,146</b>

Included in the trade receivables amount is a provision for doubtful debts amounting to R16 714 509 (2021: R19 129 284).

## 6. Cash and cash equivalents

Cash and cash equivalents consist of:

Cash on hand	6,708	1,314
Bank balances	37,876,268	21,724,218
Short-term deposits	47,465,137	39,623,080
	<b>85,348,113</b>	<b>61,348,612</b>

Details of bank facilities held by the Council are presented below and have an expiry date of 17 December 2023 :

- Overdraft amounting to R1 500 000 for unforeseen emergencies;
- Guarantees by Bank amounting to R50 000;
- Corporate Credit Card, Travel card and/or Garage Card facility by Bank amounting to R550 000;
- Fleet management services amounting to R15 000; and
- Electronic Funds Transfer Services of R6 000 000 and R1 150 000 for Salary Run and Debit Runs respectively.

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Notes to the Annual Financial Statements

	2022	2021
<b>7. Finance lease liabilities</b>		
<b>Minimum lease payment which fall due</b>		
Within one year	46,387	19,510
In second to fifth year inclusive	7,760	2,288
	<u>54,147</u>	<u>21,798</u>
<b>Present value of minimum lease payments</b>	<b>54,147</b>	<b>21,798</b>
Non-current liabilities	7,760	2,288
Current liabilities	46,387	19,510
	<u>54,147</u>	<u>21,798</u>

## 8. Trade and other payables

Trade payables	1,501,773	1,388,141
Income received in advance	46,761,592	39,913,123
Employee leave days	2,923,904	3,596,273
Other payables	1,171,429	53,888
	<u>52,358,698</u>	<u>44,951,425</u>

Other payables consists accruals and payroll related debt.

## 9. Revenue

Annual fees	79,307,057	73,903,143
Evaluation, re-inspection and fines	13,412,592	10,230,531
Examination fees	349,468	359,943
Registration fees	25,748,481	26,786,109
	<u>118,817,598</u>	<u>111,279,726</u>

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Notes to the Annual Financial Statements

	2022	2021
<b>10. Other Income</b>		
Insurance claim received	37,582	204,662
Other income	263,137	118,043
Profit and loss on sale of assets	43,281	37,109
Sponsorship	2,000	-
	<b>346,000</b>	<b>359,814</b>

Other income mainly consists of seta refunds and recycling income.

## 11. Surplus for the year from continuing operations

Operating profit for the year is stated after accounting for the following:

Profit/(loss) on sale of assets	43,281	37,109
Amortisation of intangible assets	962,334	791,193
Depreciation on property, plant and equipment	3,899,892	3,025,865
Employee costs	69,952,094	64,109,597
Research and development	118,552	90,730
Audit fees	212,279	228,797

## 12. Investment revenue

<b>Interest received</b>		
Bank	4,748,975	2,699,514

## 13. Finance costs

Finance leases	6,192	3,962
	<b>6,192</b>	<b>3,962</b>

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Notes to the Annual Financial Statements

	2022	2021
<b>14. Cash generated from operations</b>		
Surplus for the year	13,052,302	17,226,292
<b>Adjustments for:</b>		
Depreciation and amortisation	4,862,226	3,817,058
(Profit)/loss on sale of assets	(43,281)	(37,109)
Investment income	(4,748,975)	(2,699,514)
Finance costs	6,192	3,962
Fair value adjustment	800,000	-
Extraordinary items	93,889	15,379
<b>Changes in working capital:</b>		
Decrease/ (Increase) in trade and other receivables	869,048	(1,535,165)
Increase/ (Decrease) in trade and other payables	7,407,273	(3,436,897)
	<b>22,298,674</b>	<b>13,354,006</b>

## 15. Commitments

### Operational Expenditure

#### Already contracted for but not provided for

- within one year	2,347,056	1,254,092
- in second to fifth year inclusive	1,573,047	-
	<b>3,920,103</b>	<b>1,254,092</b>

This committed expenditure relates to plant and equipment and will be financed by funds internally generated.

#### Finance leases - as lessee (expenses)

- within one year	46,387	19,510
- in second to fifth year inclusive	7,760	2,288
	<b>54,147</b>	<b>21,798</b>

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Notes to the Annual Financial Statements

2022

2021

### 16. Related parties

#### Relationships

Key management personnel are those members having authority and responsibility for planning, directing and controlling the activities of the council. Key management personnel include the councillors, committee members and executive management. Executive management includes the Registrar, Chief Operation Officer and Chief Financial Officer.

#### Related party balances and transactions with persons with control, joint control or significant influence over the council.

Council and sub-committee members, in relation to attendance of meetings-

Allowances	91,072	87,570
Meeting expenses- accommodation	728,289	546,944
Meeting expenses- member fees	1,019,201	475,047
Meeting expenses- locum expenses	2,322	70
Meeting expenses- preparation fees	458,369	169,518
Transport	262,919	48,291
Compensation of executive management	5,744,902	5,656,367

### 17. 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.

### 18. Events after reporting period

There were no adjusting events after the reporting period.

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Notes to the Annual Financial Statements

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2022

2021

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### 19. Financial risk management

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

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

#### Liquidity risk

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

#### Interest rate risk

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

#### Credit risk

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

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# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Notes to the Annual Financial Statements

	2022	2021
<i>Financial risk management continued..</i>		
<b>Fair value of financial instruments</b>		
The carrying amount of the financial assets and liabilities reported in the statement of financial position are considered to approximate their fair value as at 31 December 2022.		
Categories of financial instruments		
<b>Financial assets</b>		
Loans and receivables	<u>104,116,211</u>	<u>80,985,758</u>
Reconciliation to statement of financial position		
Trade and other receivables	18,768,098	19,637,146
Cash	<u>85,348,113</u>	<u>61,348,612</u>
<b>Loans and receivables</b>	<u><b>104,116,211</b></u>	<u><b>80,985,758</b></u>
<b>Financial liabilities</b>		
Financial liabilities measured at amortised cost	<u>52,412,845</u>	<u>44,973,223</u>
Reconciliation to statement of financial position		
Trade and other payables	52,358,698	44,951,425
Finance lease liabilities	<u>54,147</u>	<u>21,798</u>
	<u><b>52,412,845</b></u>	<u><b>44,973,223</b></u>

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Notes to the Annual Financial Statements

2022 2021

### 20. Prior period errors

#### Reclassification of Fixed Assets

Council performed a reclassification of assets from intangibles assets into property, plant and equipment. It was identified that WIP relating to solar installation was incorrectly classified as intangibles in the prior year financials. The error has been corrected in the current year financials, therefore no restatement of prior year figures. The impact of the adjustment is indicated below.

	2022	2021
Property, Plant and Equipment	314,622	
- Cost	- 377,546	-
- Accumulated Depreciation	- (62,924)	-
Intangible Assets	- (314,622)	-
- Cost	- (377,546)	-
- Accumulated Depreciation	- 62,924	-

#### Fixed assets accumulated depreciation

During the process of reviewing assets useful lives, Council identified error of assets at R1 value that are still in use. The error has been corrected through retrospective restatement of the comparative figures in the current reporting period's of the financial statements. The carrying value of fixed assets and retained earnings was increased due to adjustment of accumulated depreciation.

#### Increase in carrying value of the following assets:

Intangible Assets	2,092,326
Buildings	510,431
Motor vehicles	231,959
Computer Equipment	1,968,164
Furniture and Fittings	273,028
Office equipment	599,342
Retained earnings increase	(5,675,250)

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Detailed Income Statement

	Note(s)	2022	2021
<b>Revenue</b>			
Annual fees		79,307,057	73,903,143
Evaluation, re-inspection and fines		13,412,592	10,230,531
Examination fees		349,468	359,943
Registration fees		25,748,481	26,786,109
	9	118,817,598	111,279,726
<b>Other Income</b>			
Insurance claim received		37,582	204,662
Other income		263,137	118,043
Profit on sale of fixed assets		43,281	37,109
Sponsorship		2,000	-
	10	346,000	359,814
<b>Investment income</b>			
Interest received		4,748,975	2,699,514
	12	4,748,975	2,699,514
<b>Expenses (refer to page31)</b>		<b>(110,854,079)</b>	<b>(97,108,800)</b>
<b>Surplus for the year</b>	11	<b>13,058,494</b>	<b>17,230,254</b>
Finance costs	13	(6,192)	(3,962)
<b>Net surplus / (deficit) for the year</b>		<b>13,052,302</b>	<b>17,226,292</b>

# South African Pharmacy Council

Financial Statements for the year ended 31 December 2022

## Detailed Income Statement

	Note(s)	2022	2021
<b>Operating expenses</b>			
Allowances		(91,072)	(87,570)
Auditors' remuneration		(212,279)	(228,797)
Bad debts written off		(7,043,030)	(782,270)
Bank charges		(716,620)	(640,359)
Cleaning, health and safety		(545,313)	(465,131)
Consumables		(175,991)	(73,676)
Depreciation		(4,862,226)	(3,817,058)
Employee costs		(69,952,094)	(64,109,597)
Fair value adjustment		(800,000)	-
Information technology expenses		(6,263,804)	(4,651,119)
Insurance		(840,806)	(791,637)
Internal audit and consultancy		(440,835)	(521,228)
Lease rental on operating lease		(394,463)	(412,734)
Legal expenses		(1,088,397)	(29,759)
Meeting expenses- accommodation		(728,289)	(546,944)
Meeting expenses- catering		(183,962)	(36,537)
Meeting expenses- locum expenses		(2,322)	(70)
Meeting expenses- member fees		(1,019,201)	(475,047)
Meeting expenses- preparation fees		(458,369)	(169,518)
Meeting expenses- transport and travelling		(262,919)	(48,291)
Office expenses		(737,026)	(395,841)
Office transport		(65,699)	(40,404)
Pharmacy education and training		(3,066,734)	(2,683,413)
Pharmacy inspections		(4,075,773)	(5,495,178)
Postage and courier		(1,231,088)	(1,008,158)
Printing and stationery		(393,547)	(580,445)
Provision for doubtful debts		2,414,775	(1,868,212)
Public relations and promotions		(418,805)	(534,595)
Repairs and maintenance		(1,034,724)	(532,371)
Research and development costs		(118,552)	(90,730)
Security		(977,626)	(830,058)
Social responsibility		(11,466)	(26,678)
Telephone and fax		(3,584,298)	(4,053,955)
Travel - overseas		(394,424)	-
Utilities		(1,077,100)	(1,081,420)
		<b>(110,854,079)</b>	<b>(97,108,800)</b>

# ABBREVIATIONS AND ACRONYMS

APN	Access Point Name
ARC	Audit and Risk Committee
AQP	Assessment Quality Partner
AVE	Advertising Value Equivalency
BPharm	Bachelor of Pharmacy
BRC	Broadcast Research Council
CEO	Chief Executive Officer
CFI	Committee of Formal Inquiries
CFO	Chief Financial Officer
CII	Committee of Informal Inquiries
COO	Chief Operating Officer
CPD	Continuing Professional Development
CPI	Committee of Preliminary Investigations
CRM	Customer Relationship Management
CSP	Community Service Pharmacist
CSR	Communication and Stakeholder Relations
DG	Director-General
DoH	Department of Health (when used in provincial context)
EISA	External integrated summative assessments
EPC	Emergency post-coital contraception
EXCO	Executive Committee of Council
FIP	International Pharmaceutical Federation
GEMS	Government Employees Medical Scheme
GPE	Good Pharmacy Education
GPP	Good Pharmacy Practice
HEI	Higher Education Institutions
HEQSF	Higher Education Qualifications Sub-framework
HPCSA	Health Professions Council of South Africa
HR	Human Resources
ICT	Information and Communications Technology
ISBN	International Standard Book Number
IT	Information Technology
MCQ	Multiple choice questions
MEC	Member of the Executive Committee
MFL	Master Facility List
MoH	Minister of Health
MOA	Memorandum of Agreement
NDoH	National Department of Health
OQSF	Occupational Qualifications Sub-Framework
PAIA	Promotion of Access to Information Act
PCDT	Primary Care Drug Therapy
PIMART	Pharmacist-Initiated Management of Antiretroviral Therapy
PIT	Pharmacist Initiated Therapy
POPIA	Protection of Personal Information Act
PSP	Pharmacy Support Personnel
QCTO	Quality Council for Trades and Occupations
RCRP	Registrar's Complaints Review Panel
REMCO	Remuneration and Reimbursement Committee
RP	Responsible Pharmacist
SAHPRA	South African Health Products Regulatory Authority
SAPC	South African Pharmacy Council
SAPS	South African Police Services
SARS	South African Revenue Services
SDP	Skills Development Provider
SETA	Sector Education and Training Authority
SLA	Service Level Agreement
SOP	Standard operating procedure
VPN	Virtual Private Network
YTD	Year to date

## LEGAL REFERENCES

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

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**South African  
Pharmacy Council**

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