

# ANNUAL REPORT | 2016



South African  
Pharmacy Council



**Seated:** Chairperson CPI: Mr Tshuba Solomon Rasekele; Chairperson Education: Prof Roderick Bryan Walker; Chairperson CII: Mr Rajatheran Moodley (Sham); Chairperson Health: Mr Vusi Cornelias Dlamini; Chairperson Practice: Ms Jacqueline Ann Maimin; President: Prof Manoranjenni (Mano) Chetty; Vice President: Mr Douglas James Heaslet Defy; NDoH Representative: Mr Gavin Steward Steel; Treasurer: Ms Nocawe Portia Thipa; Chairperson CPD: Dr Panjasaram Naidoo (Vassie); Registrar\CEO: Mr Amos Tokolo Masango

**Standing:** Mr Johannes Stephanus du Toit; Ms Josephine Winley Herbert; Prof Shirley-Anne Inez Boschmans; Ms Rachel Verity Wrigglesworth; Mr Charles John Cawood; Ms Helen Catherine Hayes; Mr Mathys Jacobus Snyman; Mr Johannes Albertus Raats; Dr (Adv) Nazreen Shaik-Peremanov; Ms Claudette Norina Jasson; Mr Hezron Tshepo Mphaka; Mr Panajiotaki George Kyriacos  
**Absent:** Mr Ayanda Soka, Ms Letty Mahlangu

# SOUTH AFRICAN PHARMACY COUNCIL ANNUAL REPORT 2016

## Minister of Health

In terms of the Pharmacy Act, 53 of 1974, it is a pleasure to submit the Annual Report on the activities of the South African Pharmacy Council for the period 1 January 2016 to 31 December 2016.



PROF M CHETTY  
PRESIDENT



TA MASANGO  
REGISTRAR



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## VISION

Sustainable quality pharmaceutical services for all

## MISSION STATEMENT

We exist to:

- protect the public by improving health outcomes
- assist in promoting access to sustainable quality pharmacy services by embracing the use of innovation and technology
- ensure quality pharmaceutical services by developing, enhancing and upholding universally acceptable education and practice standards through stakeholder engagement
- promote the dignity of the profession through professional ethics and conduct, and ongoing competence

## 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



## PRESIDENT'S MESSAGE

The year 2016 was a very fruitful one for the South African Pharmacy Council, with the various committees and the Office of the Registrar showing dedication and motivation to achieve the goals for the year and promptly working on the additional tasks that presented themselves. The details of the achievements and challenges are presented in this report, with some of the highlights listed below:

- **Facilitation of the improvement in access to medicines by developing good practice guidelines for innovative methods of medicine delivery**

Under the leadership of Minister of Health Dr Aaron Motsoaledi, the National Department of Health proposed and implemented various innovative methods to improve the access to medicines, especially of patients on chronic medication. Measures to reduce the congestion at public health pharmaceutical facilities were also introduced. The Council reviewed these proposed practices and provided guidelines to ensure the quality and safety of the medicines and information to patients would not be compromised.

- **Implementation of online registration and payment systems**

To improve the service to pharmacists and pharmacy-related personnel, online registration and payment systems were implemented. This has been very successful, despite the occasional glitch. There is a commitment to improve these systems and provide a problem-free experience to all Council customers.

- **Evaluation of the peer review grading system for pharmacies in the public and private sectors**

Grading of pharmacies following inspection visits was introduced in 2013. In 2016, this process, together with the grading criteria, was reviewed. It is hoped that the review will improve the activities of the Council team responsible for monitoring the adherence to good pharmacy practice guidelines.

- **Improvements to the Council buildings**

With the growing numbers of pharmacists, pharmacies, training institutions and pharmacy support personnel in the country, the number of personnel in the Office of the Registrar, as well as the number of Council committee and task team meetings, have increased. The current premises have not been expanded to accommodate these changes. Council's approval to renovate the premises by increasing the office space and meeting venues was welcomed in 2016. These changes are scheduled for 2017.

- **A successful 2<sup>nd</sup> National Pharmacy Conference**

This conference brought together almost 1 000 delegates from different disciplines of pharmacy who are interested in 'shaping the future of pharmacy'.



Prof Manoranjenni Chetty  
President

Presentations from overseas and local experts, together with a good social programme, offered excellent opportunities for discussions and debates. Ideas and opinions expressed at the conference will assist Council in some of its future activities. An important item on the agenda was the conferring of national pharmacy awards in different categories. The awards ceremony offers the opportunity to acknowledge and recognise the excellent work that pharmacists are doing in various practice settings.

One area of concern for Council is the difficulties that the academic institutions are experiencing in the training of pharmacists. Limited funding, declining staff numbers and the problems associated with attracting appropriately qualified staff to fill vacant positions are among their challenges.

Improving customer care services remains a priority for Council. A work study was conducted in 2016 and activities in 2017 will be guided by the outcomes of this study. A task team of councillors has also been established to focus on this issue.

Registrar Amos Masango has been reappointed for a period of three years. We thank him for his service to the Council and for agreeing to continue holding office for a further three-year period.

I would like to thank the staff of the Office of the Registrar and the dedicated councillors who have contributed to a successful 2016.

## National Pharmacy Conference



## REGISTRAR'S MESSAGE

The year 2016 was an important year for the South African Pharmacy Council.

It marked the councillors third year in office and the annual report features the activities and actions taken during the period under review. Council's progress is measured by the achievements in terms of the strategic objectives the councillors determined at the beginning of their tenure in 2014, and the operational activities that are finalised at the first Council meeting of each year.

### Achievements in 2016

I note a few of our many successes and undertakings in 2016.

#### (a) Council and committee meetings

Council and its various committees held meetings, as prescribed by the Pharmacy Act, to deliberate on issues and make decisions, thereby serving the public and the profession as required.

#### (b) 2<sup>nd</sup> National Pharmacy Conference

The much-anticipated 2<sup>nd</sup> National Pharmacy Conference dominated the scene in October 2016, and the conference surpassed the highly commended inaugural conference held in 2013. The Minister of Health attested to this by saying Council was the only statutory Council that has organised such successful conferences. He stated he would be advising the other statutory bodies to follow our example.

The conference was for pharmacy in South Africa, and topics were thoroughly researched and planned to cover topical issues that could guide future policies for pharmacy in the country. The conference encouraged discussion and debate on issues affecting pharmacy today, both nationally and internationally, and served to update the profession on the latest developments in healthcare. We think we achieved our goal admirably. Some of the profound keynote addresses and presentations delivered at the conference can be found on our website and others in *e-Pharmaciae*.

#### (c) Corporate affairs

On corporate issues, the Office of the Registrar continued to manage and keep the assets of Council intact through the application of policies developed for the purpose. To accommodate the growth of our organisation, Council approved a plan to provide more office space, renovate the existing boardroom and create additional conference facilities at the main office building. The renovations are due to commence early in 2017.

To maintain our presence as a prominent leader in healthcare issues, we attended national and international conferences to share and benchmark,



**Amos Masango**  
Registrar/CEO

where appropriate, on important issues relating to the profession.

**(d) Communication**

Our communication with the profession improved greatly during the year and we made recognisable strides. Our members are now able to request Council's banking details, personal login details and financial statements through the IPO PBX self-help functionality. Most applications are online and we recorded an increase in the use of the secure login site and the online payment functionality. The number of visitors to the public website also increased.

We, however, still need to work hard on our client relations, specifically the manner in how we handle queries, record them, refer them to technical departments and finalise them within the stipulated timeframes. This is a work in progress and additional plans to improve the situation will be implemented in 2017.

**(e) Education and training**

During the year under review we monitored and accredited higher and further education training providers according to plan. Two new qualifications for pharmacy support personnel were approved for wider consultation. We cooperate well with quality councils in terms of the National Qualifications Framework (NQF) Act.

**(f) Pharmacy practice**

On the pharmacy practice front, a number of minimum standards were approved for implementation. The *Minimum standards for the selling of HIV self-screening test kits* were approved and published for comment in December. Through this standard, pharmacists will be guided on how to address pertinent issues and concerns relating to HIV self-screening.

We continued with the inspection of pharmacies and recorded an increase in the number of inspections. This is attributed to the appointment of additional inspectors, who received on-going training in how to approach the new challenges they faced in their work. We recommended the issuing of permits, exemptions and licence applications as per our mandate. Most qualifying pharmacists are now

able to apply for primary care drug therapy (PCDT) permits. We also processed applications for the installation of remote automated dispensing units (RADU).

**(g) Students and interns**

As has become the norm over the years, we ensured that our first and fourth year pharmacy students were adequately informed about the requirements of the profession. We introduced the first year students to the Pharmacy Act, the objectives of Council and the registration requirements, and provided the fourth year students with in-depth information on the internship process.

A few of our endeavours included conducting meetings and activities related to the internship year, holding tutor/intern workshops in all provinces between February and April 2016, setting preregistration examination papers, and organising preregistration examination workshops. Professional examinations for pharmacy professionals with qualifications obtained outside South Africa were conducted in May and October 2016. Our register for pharmacists, pharmacy support personnel and pharmacies showed a steady growth in 2016.

**(h) Financial affairs**

The financial position of Council remained on a sound footing during 2016 and we ensured our expenses stayed within budget. Council's budget is guided by the five-year strategic plan, and budget performance reports were presented at all Council and committee meetings during the year. The Audit Committee, which enhances Council's oversight role, continued its excellent work in 2016.

The details of our 2016 activities are noted in the annual report, and our overall performance during the year can be described as solid. We will continue to build on our successes as we move into 2017, whilst keeping an eye on the issues in our strategic plans that are lagging behind.

I wish to thank all the members, our councillors, our President and the entire staff complement at the Registrar's Office for the successes we achieved in 2016. I know we will all agree that we worked hard to carry out our mandate.



## COUNCIL – ROLE AND RESPONSIBILITIES

The South African Pharmacy Council (SAPC) is an independent statutory body established in terms of the Pharmacy Act, 1974 (Act No. 53 of 1974, as amended) to regulate the pharmacy profession. The SAPC is vested with statutory powers of peer review and embraces as its objectives those outlined in the Pharmacy Act.

The SAPC (hereinafter referred to as Council) is responsible for its own funding and endorses the principles contained in the King IV Report on Corporate Governance for South Africa. The principles form part of the councillors' responsibilities and are embedded in the Charter for Councillors. Councillors are required to familiarise themselves with both the objectives of Council as outlined in the Pharmacy Act and the responsibilities in the Charter for Councillors.

Council is representative and consists of 25 members of which the South African Minister of Health appoints 16 and nine are elected by pharmacists.

### Objectives and functions of Council

In terms of the Pharmacy Act, 53 of 1974, Council has the following objectives:

- Assist in the promotion of the health of the population of the Republic of South Africa.
- Advise the Minister of Health or any other person on any matter relating to pharmacy.
- Promote the provision of pharmaceutical care which complies with universal norms and values, in both the public and private sectors, with the goal of achieving definite therapeutic outcomes for the health and quality of life of a patient.
- Uphold and safeguard the rights of the general public to universally acceptable standards of pharmacy practice in both the public and private sectors.
- Establish, develop, maintain and control universally acceptable standards 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 Act
  - o the professional conduct required of persons to be registered in terms of the Act
  - o the control of persons registered in terms of the Act by investigating in accordance with the Act complaints or accusations relating to the conduct of registered persons.



**Douglas Defty**  
Vice President



**Nocawe Thipa**  
Treasurer

- 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.
- Coordinate the activities of Council and its committees, give guidance to the Office of the Registrar, and provide oversight on risk management and financial controls.
- Improve internal efficiency and effectiveness through improved customer care relations and service delivery, and investigation of alternative sources of funds.
- Build a pipeline of highly skilled staff to meet Council's mandate through training, implementation of performance management and retention of key personnel.

### Governance structure

The Council is the custodian of the management and control of the profession and its meetings are public. Management and various committees support Council in carrying out its mandate.

#### Council members

The president presides over Council meetings and is supported by the vice president and the treasurer, all of whom are elected from members of Council by majority vote for a period of five years. The registrar is the secretary for Council. The councillors elected for the term 2014 to 2018 are:

Prof Manoranjenni Chetty	President
Douglas James Heaslet Defty	Vice President
Nocawe Portia Thipa	Treasurer
Vusi Cornelias Dlamini	Chairperson Health Committee
Rajhtheran Moodley	Chairperson Committee of Informal Inquiries
Jacqueline Ann Maimin	Chairperson Practice Committee
Dr Panjasaram Naidoo	Chairperson CPD Committee
Tshuba Solomon Rasekele	Chairperson Committee of Preliminary Investigation
Prof Roderick Bryan Walker	Chairperson Education Committee
Gavin Stewart Steel	Representative of the National Department of Health
Prof Shirley-Anne Inez Boschmans	
Charles John Cawood	
Johannes Stephanus du Toit	
Helen Catherine Hayes	
Josephine Winley Herbert	
Gaobohe Jonas Kgasane	
Panajiotaki George Kyriacos	
Letty Mahlangu	
Hezron Tshepo Mphaka	
Claudette Norina Jasson	
Johannes Albertus Raats	
(Adv) Dr Nazreen Shaik-Peremanov	
Matthys Jacobus Snyman	
Ayanda Soka	
Rachel Verity Wrigglesworth	

## CORPORATE SERVICES

### Strategic focus area

The activities of the Corporate Services Department focus on five of Council's strategic objectives:

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

### Council meetings

Four Council meetings were conducted in the year under review, in February, May, July and October.

### Executive Committee

The Office of the Registrar facilitated three meetings and four teleconference meetings of the Executive Committee under the chairpersonship of the President, Prof Manoranjenni Chetty.

### Board Notices and Notices

The Office of the Registrar published five Board Notices and a number of Notices during the year under review. They included:

- fees payable to Council in 2017
- amendments and new minimum standards for inclusion in the *Rules relating to good pharmacy practice* (GPP)
- *Rules relating to good pharmacy practice* amendments and new standards for comment
- qualifications for pharmacy support personnel: Occupational Certificate: Pharmacy Technician (PT)
- qualifications for pharmacy support personnel: Diploma Pharmacy Technician
- the outcomes of the Committee of Formal Inquiry hearings published in terms of section 45(2) of the Pharmacy Act, 53 of 1974
- appointment of new Council members.

### Regulations

Council approved the *Regulations relating to the registration of specialist pharmacists* and submitted them to the Department of Health to be published for comment.



**Vincent Tlala**  
Chief Operating Officer

### Management of fixed assets

In addition to the routine management of fixed assets, Council approved the project to renovate and add conference facilities on the third floor of the Council offices. The building consultants (principal agent, quantity surveyor, structural engineer, electrical engineer) have been appointed. The contractor will be appointed in February 2017 and the work will commence on 15 March 2017.

### Strategic plan 2014–2018

A presentation on the 2015 progress based on Council's strategic and operational plans for 2016 was made at the first Council meeting in February 2016.

### Operational plans 2016 and 2017

The Office of the Registrar held a management bosberaad on 19 and 20 November 2016 to discuss operational challenges during 2016 and to plan for 2017.

### National/international conferences

Council appreciated valuable communication opportunities and interaction with pharmacy professionals and public stakeholders via informative exhibitions at major pharmaceutical conferences during 2016:

- 29<sup>th</sup> South African Association of Hospital and Institutional Pharmacists (SAAHIP) Conference, Champagne Sport Resort, Drakensberg, KwaZulu-Natal, 12–13 March 2016
- Dis-Chem National Congress, Birchwood, Gauteng, 13–15 March 2016
- South African Association of Community Pharmacists (SAACP), Birchwood, Gauteng, 13–14 May 2016
- South African Society of Clinical Pharmacy (SASOCP), Protea Marine Hotel, Summerstrand, Port Elizabeth, 9–11 June 2016

- Life Long Learning Conference, Split Croatia, 1–4 July 2016
- Board of Healthcare Funders (BHF), International Conference Centre, Cape Town, 17–20 July 2016
- FIP (International Pharmaceutical Federation), Buenos Aires, Argentina, 28 August–1 September 2016
- 10<sup>th</sup> Annual Clicks Healthcare Conference, Emperors Palace, Johannesburg, 2–4 November 2016.

### Attendance at 2016 meetings

In terms of the principles of corporate governance, and based on the legal principles of administrative law, in exercising its powers and functions the Council and committee members must exercise their discretion in making decisions or providing recommendations to Council. The exercise of discretion must be within the parameters determined by the Pharmacy Act and the relevant regulations thereto. Discretion is defined as the freedom or authority to make judgements and to act as one sees fit.

The committees of Council, appointed in terms of section 4(o) of the Act, consider and discuss matters relevant to their committees as provided for in the various regulations and make recommendations to Council for consideration. Council makes decisions and resolutions in terms of its general functions as detailed in section 4 of the Act, as well as the recommendations provided by the various committees. In order for Council to be transparent to the profession and the public in achieving its objectives and in performing its functions and exercising its powers, Council resolutions are published as a standard feature in each edition of Council's publication *e-Pharmaciae*. The attendance registers for the 2016 Council and committee meetings are statistically represented in the tables below.

Date of meeting	Total number of members	Present on both days	Attending one day	Absent/Apologies
February 2016	24	18	5	1
May 2016	24	20	0	4
July 2016	24	23	0	1
October 2016	25	23	1	1

Table 1: Council meetings

Date of meeting	Total number of members	Present	Absent/Apologies
20 April 2016	10	10	0
14 September 2016	10	7	3
30 November 2016	10	7	3
12 August 2016 (teleconference)	10	9	1
07 December 2016 (teleconference)	10	8	2

Table 2: Executive Committee meetings

Date of meeting	Total number of members	Present	Absent/Apologies
07 March 2016	6	6	0
06 June 2016	6	5	1
15 August 2016	6	6	0
07 November 2016	6	4	2

Table 3: Continuing Professional Development (CPD) Committee meetings

Date of meeting	Total number of members	Present	Absent/Apologies
08 March 2016	12	10	2
Joint meeting Practice & Education 19 April 2016	18	12	6
07 June 2016	12	11	1
16 August 2016	12	12	0
08 November 2016	12	7	5

Table 4: Education Committee meetings

Date of meeting	Total number of members	Present	Absent/Apologies
09 March 2016	12	10	2
08 June 2016	12	11	1
17/18 August 2016	12	11	1
09 November 2016	12	11	1
18 November 2016 (teleconference)	12	7	5

Table 5: Practice Committee meetings

Date of meeting	Total number of members	Present	Absent/Apologies
10 March 2016	5	4	1
09 June 2016	5	5	0
08 September 2016	5	5	0
10 November 2016	5	4	1

Table 6: Health Committee meetings

Date of meeting	Total number of members	Present	Absent/Apologies
23/24 February 2016	5	5	0
19/20 July 2016	5	5	0
01 November 2016	5	5	0
01 December 2016	5	5	0

Table 7: Committee of Informal Inquiries meetings

Date of meeting	Total number of members	Present	Absent/Apologies
03/04 May 2016	6	6	0
23/24 August 2016	6	6	0
22/23 November 2016	6	5	1

Table 8: Committee of Preliminary Investigations meetings

Date of meeting	Total number of members	Present	Absent/Apologies
15 March 2016	3	3	0
06/07 July 2016	3	3	0

Table 9: Committee of Formal Inquiries meetings

Date of meeting	Total number of members	Present	Absent/Apologies
05 May 2016	7	6	1
02 August 2016	7	5	2
03 November 2016	6	5	1

Table 10: Audit Committee meetings

Date of meeting	Total number of members	Present	Absent/Apologies
19 April 2016	8	7	1
22 June 2016	8	6	2
29 November 2016	8	8	0

Table 11: Trustees Committee meetings

Date of meeting	Total number of members	Present	Absent/Apologies
12 September 2016	10	9	1
28 November 2016	10	9	1
29 November 2016	10	9	1

Table 12: Bargaining Committee meetings

Date of meeting	Total number of members	Present	Absent/Apologies
19 April 2016	6	5	1

Table 13: Remuneration Committee (REMCO) meetings



## COMMUNICATION AND STAKEHOLDER RELATIONS

### Strategic focus area

The activities of the Communication and Stakeholder Relations (CSR) Department focus on four of Council's strategic objectives:

- Assist in the promotion of the health of the population of the Republic of South Africa.
- Advise the Minister of Health or any other person on any matter relating to pharmacy.
- Promote transparency to the profession and the general public (corporate governance).
- Provide managerial and administrative support to the Office of the Registrar.

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

### CSR work study

In May 2016, Work Dynamics (Pty) Ltd conducted a systematic analysis of the present method of carrying out identified functions in the CSR Department to improve efficiency. The exercise was in response to an audit by the internal auditors. Time measurement and resource allocation were based on more than 158 different statistical and informational reports drafted and provided by the Senior Manager: CSR and Manager: Stakeholder Relations. The compilation and facilitation of the required information placed an additional, unexpected workload on the department.

The recommendations of the CSR Work Study will be implemented in 2017.

### Corporate communication

#### 2<sup>nd</sup> National Pharmacy Conference – Shaping the Future

Pharmacy made its presence known in the coastal city of Durban during the 2<sup>nd</sup> National Pharmacy Conference held between 21 and 24 October 2016.

#### Organising committee

The organising committee comprised:	
Mr Amos Masango	Registrar
Mr Vincent Tlala	Chief Operating Officer
Mr Voster Himbotwe	General Manager: Finance
Ms Elmari Venter	Project Manager
Ms Hlone Masiza	Programme
Ms Debbie Hoffmann	Contracts
Ms Mojo Mokoena	Social Events



**Elmari Venter**

Senior Manager: Communication and Stakeholder Relations

In addition to the responsibilities of project manager, the Senior Manager: CSR was tasked with the public relations and marketing section of the conference, including overseeing the activities of the conference and event management company, Scatterlings Conference & Events (Pty) Ltd. Promotional activities included:

- branding, announcements and invitations
- public relations and communication
- media liaison
- press kits
- delegate packs
- photographer
- banners and signage
- website
- sourcing registrations.

The 2<sup>nd</sup> National Pharmacy Conference Golf Day was held at the Durban Country Club on 20 October 2016.

A total of 1 062 delegates registered for the conference, with a final attendance figure of 912 delegates. The conference boasted a host of national and international speakers. South African Minister of Health Dr Aaron Motsoaledi, Minister of Finance Pravin Gordhan, and Fawzia Peer, the Deputy Mayor of eThekweni Metro, delivered keynote addresses.

The 'Evening with the Stars' gala dinner, where industry professionals from both the private and public sectors were honoured for their excellence in pharmacy, was held at the Durban ICC on Saturday, 22 October 2016.

Registrar Amos Masango, in his opening address, informed delegates that Council had selected recipients in the categories of 'Pioneer Pharmacy Professional' and 'Pioneer Pharmacy Facility' based on their commitment to ensuring sustainable pharmaceutical services for all South Africans. The awards, which initially were incorporated in the Department of Health's National Health Recognition Awards before Council decided to present them independently, have grown over the past six years and have built a national network of pharmacy professionals across various pharmaceutical sectors.

Prof Praneet Valodia from the Western Cape was the overall winner in the Professional Award category. He was recognised for his contribution and strong record of accomplishment in healthcare innovation.

Other awardees included Lorinda Cloete, Private Institutional Pharmacist Award; Caroline de Beer, Public Institutional Pharmacist Award; Maria Zulu, Post-Basic Pharmacist's Assistant Award; and Blenerhassit Eager, Community Pharmacist Award.



Staff at the SAPC exhibition stand on 23 October 2016: Kgomotso Ntemane (IT Technician), Ms Refilwe Mutlane (Manager: Supply Chain Management); Ms Thelma Nkosi (Committee Clerk); Ms Elmari Venter (Senior Manager: CSR); Mr Vincent Tlala (Chief Operating Officer); Ms Letty Mathebe (PA: COO)



From left to right: Prof Praneet Valodia, overall winner in the Professional Pioneer Award category; Maria Zulu, Post-Basic Pharmacist's Assistant Award; Blenerhassit Eager, Community Pharmacist Award; Amos Masango, SAPC Registrar/CEO; Lorinda Cloete, Private Institutional Pharmacist Award; Caroline de Beer, Public Institutional Pharmacist Award; Prof Manoranjenni Chetty, SAPC President



From left to right: Amos Masango, SAPC Registrar/CEO; Brian Pillay, Responsible Pharmacist, RK Khan Hospital Pharmacy; Prof Manoranjenni Chetty, SAPC President

The RK Khan Hospital, based in Chatsworth, Durban, took top honours in the Pioneer Pharmacy Facility category for their unique Decongestion Project, which enables patients to collect chronic medicines from alternative pick-up points in the community.

Clicks Pharmacy – Key West received the Community Pharmacy Award and Life Fourways Hospital the Private Institutional Pharmacy Award.

After four days of stimulating presentations, talks and lively discussions, President Chetty concluded the conference by presenting the recommendations submitted from the commissions.

All presentations delivered at the conference are published on the conference website with links thereto published on the social media pages and the SAPC website. The conference presentations have been compiled into a report that is available on request from the Office of the Registrar.

### Corporate communication opinion poll

The overall satisfaction of Council’s communication with professionals during 2016 was rated as 73% excellent/good, 21% average and 6% poor (Figure 1).

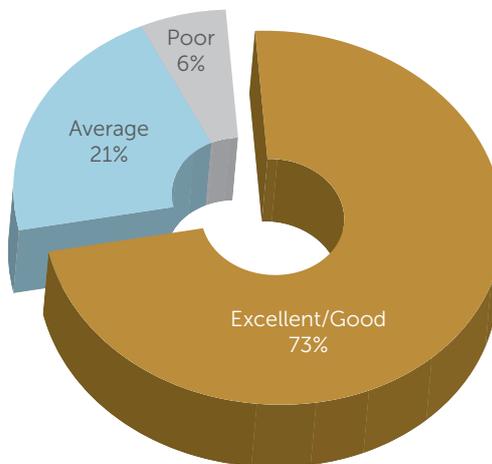


Figure 1: Corporate communication opinion poll: 2016

### SAPC IP PBX self-help functionality

The self-help functionality on VOIP-PBX, which was introduced in 2014 to enhance customer service experience when telephoning Council, enables customers to interactively request their login passwords on the secure site, their individual financial statements and Council’s banking details. Table 14 shows all the types of transaction requests recorded in 2015, and the requests from January to October in 2016.

Type of transaction requests	Number of users	
	2015	2016
Council’s banking details	1 145	880
Login passwords	202	139
Financial statements	1 413	1 160

Table 14: Usage of Council’s IP PBX self-help functionality in 2015 and between January and October 2016

### SAPC website

The website recorded a total of 891 126 sessions during 2016, with new visitors comprising 26.3% of the number. The secure login site recorded an increase of 72% logins (308 311 in 2016 compared with 179 718 in 2015). The public website recorded 5 510 494 page views, indicating an increase of 34.37% when compared with the same period in 2015.

Recorded logins by category	2016
Provider/employer administration	8 058
SAPC – organisations	4 031
SAPC – registered persons	12 081

Table 15: Logins recorded per category in 2016

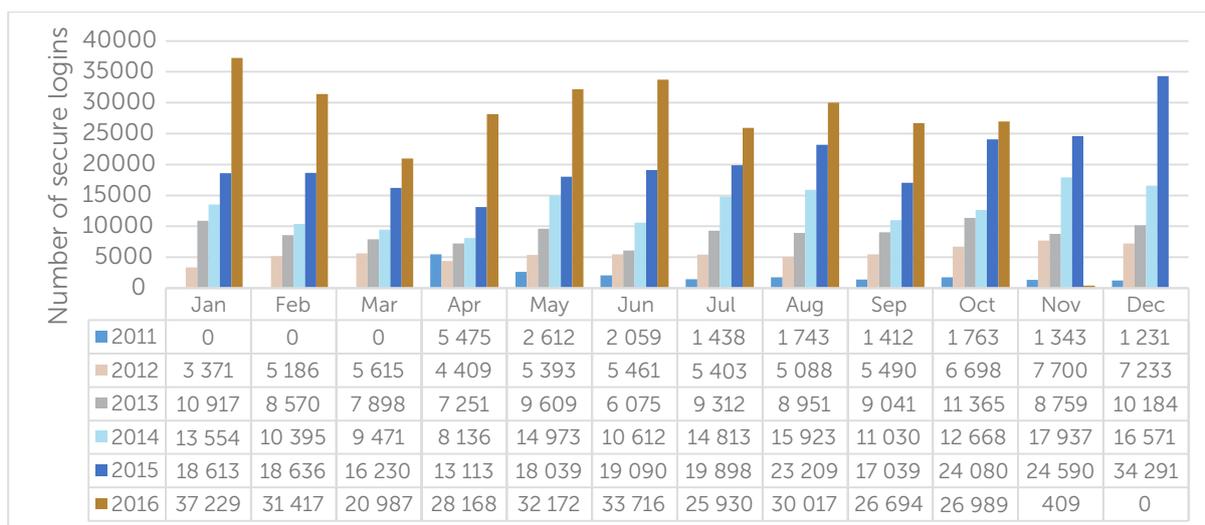


Figure 2: Secure logins recorded on Council's website (1 January 2011 to 12 October 2016)

### Website functionality opinion poll

The overall satisfaction of Council's website during 2016 was rated 69% excellent/good, 12% average and 19% poor (Figure 3).

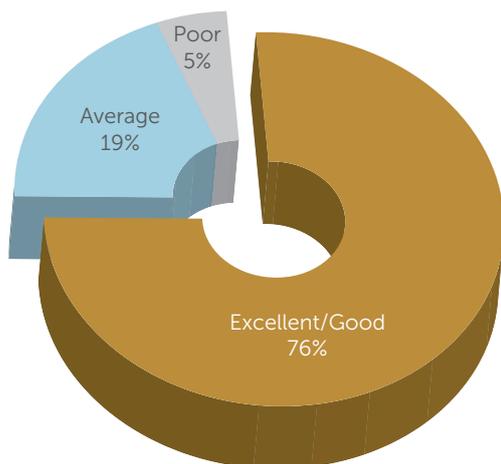


Figure 3: Overall satisfaction rating of Council's website in 2016

### Online application and payment functionality

#### Online payments

During 2016, online payment transactions totalled R3 096 604.83, an increase of more than 19% for the same period in 2015. A total of 2 225 pharmacy professionals used the online payment functionality.

#### Online applications

The online completion and submission of the majority of applications became mandatory from December 2014. A breakdown of the online submission of applications during 2016 is shown in Table 16.

Category of application	Number of applications	
	2015	2016
Approval of premises to train interns and assistants	123	541
Approval of tutor for the purposes of training	605	1 362
Preregistration examination	10	19
Registration as a community service pharmacist	137	327
Registration as a pharmacist intern	118	345
Registration as a pharmacy technician trainee	18	43
Registration as a pharmacy technical assistant trainee	2	3
Registration as a responsible pharmacist	395	584
Resignation as a responsible pharmacist		432
Schedule inspection/evaluation of a pharmacy for purposes of approval for training	352	641
Pharmacist's assistant learner basic	1 312	1 594
Pharmacist's assistant learner post-basic	1 537	1 342
Pharmacy technical assistant student	16	

Table 16: Number of online applications submitted in 2016

## Online registration opinion poll

The overall satisfaction of Council's online registration processes during 2016 was rated 68% excellent/good, 12% average and 5% poor (Figure 4).

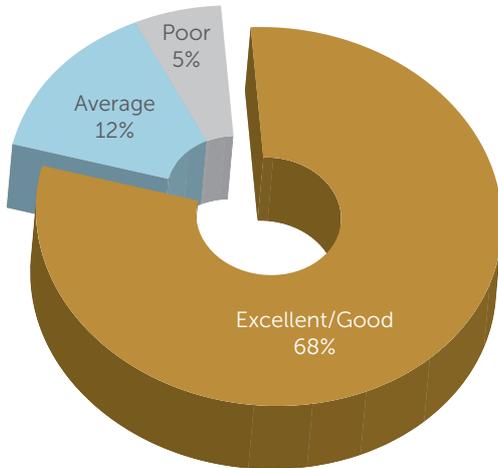


Figure 4: Overall satisfaction rating of Council's online registration processes in 2016

## Instant messaging and e-messages

- **SMS automated messages sent from the website and the register system:** A total of 10 649 752 083 SMSs were sent out, an increase of 51% for the same period in 2015.
- **SMS campaigns:** A total of 96 545 SMSs were sent out in 2016. They included automated responses from the dashboard, 11 different bulk SMS campaigns, and customised SMSs from Customer Care.
- **Bulk email campaigns:** A total of 21 different bulk e-campaigns were conducted during 2016, reaching 48 647 pharmacy professionals.

## Public and media relations

### Media interactions

The Office of the Registrar released a number of topical press statements in 2016.

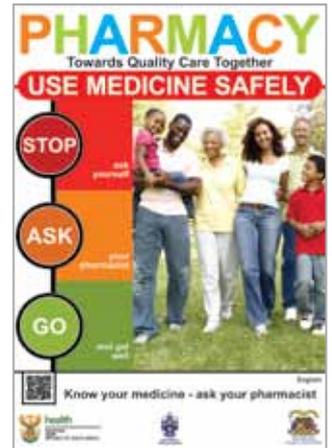
The CSR's media objectives were to promote the 2<sup>nd</sup> National Pharmacy Conference and to disseminate information relating to National Pharmacy Week.

Media coverage of over R1 million was secured by HIPPO Communications, the company appointed to handle media liaison at the conference. The Office of the Registrar responded to conference queries and various other media enquiries from national newspapers.

### National Pharmacy Week

National Pharmacy Week, which is celebrated annually in September, once again provided pharmacists with an opportunity to champion the profession and draw attention to the role they play in improving the health and wellbeing of the people of South Africa.

National Pharmacy Week was celebrated between 5 and 11 September 2016 and the profession enthusiastically adopted the theme 'Use Medicine Safely'. Council received numerous reports and photographs of the varied and successful activities the profession organised to connect and interact with their communities.



## Publications and posters

Two editions of *e-Pharmaciae* were published online in 2016. Outlined below is an analytics table for the July digital edition. Market research shows that with each bulk e-campaign, only 30% of emails are opened. The July 2016 *e-Pharmaciae* beat this market ratio by 3%.



Analysis	July 2016 analytics
Emails sent	29 322
Emails opened	33.02%

Table 17: Analysis of *e-Pharmaciae*s opened in 2015 and 2016

## Internal communication

Council sent internal e-notes to employees to communicate news, operational updates and upcoming events.

## Stakeholder relations

### Stakeholder opinion poll

Council obtained an excellent/good service delivery rating of 33% and a poor rating of 43%. Pharmacy professionals who rated Council's service as average comprised 24% of the total poll (see Figure 5).

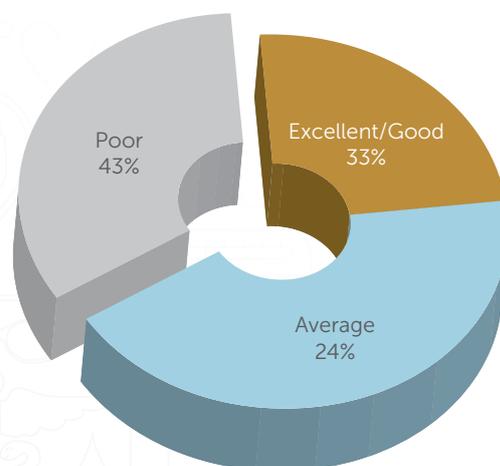


Figure 5: Service delivery rating in 2016

## Contact Centre

The Contact Centre received 70 660 incoming calls and serviced 88.7% of the calls during the period under review. Of the 19 126 cases received, 84% (16 045) were created online and 16% (3 081) manually. The centre also managed to create 2 990 (97%) of the 3 081 manual cases. The improved online web functionality and self-help telephony service, and the profession's usage thereof, led to a decrease in the number of incoming manual cases, rendering Council's optical character recognition (OCR) system redundant.

## Customer Care Centre (front desk and pre-audit)

The unit validated 3 919 applications during 2016, almost 56% less than in the same period in 2015. Of the total number of applications, 3 662 (93%) complied with Council's requirements and were, after validation, escalated to the technical department for immediate processing. A total of 257 (7%) applications required a follow up for outstanding documentation. The Office of the Registrar attended to 2 795 walk-in customers. The number of incoming manual applications that required validation decreased by more than 51% in 2016.

## Logistics Centre

The online processing of documents gained momentum during 2016, with the unit scanning 1 231 documents and uploading 28 538 certificates and proof of deliveries on the register system. The unit was required to manually document only 91 cases. A total of 1 501 grading certificates were printed, scanned and couriered. A further 15 893 certificates and registration documents were printed. A total of 18 868 items were couriered and 4 837 items posted by normal mail.

## ID registration card

Council's registration cards carry an ID photo of the member and are fitted with security and barcode features. From printing to couriering, the issuing process is in-house, which simplifies the handling of communication queries. A total of 21 142 ID registration cards were issued in 2016 for, inter alia, pharmacy students, learner basic assistants, basic assistants, learner post-basic assistants, post-basic assistants, pharmacist interns, community service pharmacists and pharmacists.



## EDUCATION

### Strategic focus area

The activities of the Education Unit focus on five of Council's strategic goals:

- 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 the private sectors, with the goal of achieving definite therapeutic outcomes for the health and quality of life of a patient.
- Establish, develop, maintain and control universally acceptable standards in pharmaceutical education and training.
- Coordinate the activities of Council and its committees.

### Education Committee

The Education Committee, chaired by Prof Rod Walker, held four meetings in 2016. The committee made the following recommendations, which Council approved:

- (a) A joint meeting of the CPD and Education Committees be organised to review the format and process used for the professional examination.
- (b) The online CPD system be modified to permit tutors to verify the CPD entries of their interns prior to submission by the intern.
- (c) The Office of the Registrar investigate alternative ways of sampling CPD entries that have been assessed for moderation to expedite the release of results without compromising the rigour of the moderation process.
- (d) Assessors be required to provide the intern and the tutor with adequate feedback and reasons for assigning a not yet competent status to the CPD entry to permit remedial action to be undertaken efficiently.
- (e) Permit the current manner in which feedback from the assessor is made available to the intern in the interim while the system is being modified to allow tutors to verify intern CPD entries prior to submission.
- (f) The terminology for the CPD steps depicted in the CPD cycle and the assessment criteria not be changed, but a broader explanation of such terms be provided by the Office of the Registrar for consideration by the CPD Committee and feedback in respect of these discussions be provided to the Education Committee.
- (g) The Office of the Registrar provide examiners and moderators with the latest resources to avoid



**Hlonelikaya Masiza**

Senior Manager:  
Professional Affairs (Education)



**Prof Roderick Walker**

(Chairperson: Education Committee)

inaccuracies that the committee noted whilst evaluating some of the practice-related questions in the examination papers.

- (h) The task team developing the qualifications for midlevel workers deliberate and provide a general definition for work experience that must consider all qualifications accredited by Council.
- (i) The Registrar hold a meeting with the chief executive officer (CEO) of the Quality Council for Trades and Occupations (QCTO) to discuss and finalise the process for the accreditation/approval of providers and learning programmes for pharmacy to avoid duplications of processes.
- (j) Conduct a monitoring visit to the current accredited provider of the Primary Care Drug Therapy (PCDT) course to assess compliance and to review the course as part of the benchmarking exercise.
- (k) Voluntary withdrawal of the accreditation status of Pharmagenius Academy as a provider of the National Certificate: Pharmacist Assistance (Community) and the Further Education and Training Certificate: Pharmacist Assistance (Community) be accepted and approved.
- (l) Investigate a professional doctorate further by monitoring international trends in respect of such programmes in other countries.
- (m) The task team for the development of the accreditation/monitoring visit tool investigate an approach to dealing with curriculum change as part of the development of the monitoring tool.
- (n) A meeting of the task team drafting the qualifications for pharmacy technicians be arranged to develop a process and requirements for registration of foreign qualified pharmacy technicians.
- (o) The Practice Committee be required to consolidate the published good pharmacy practice (GPP) standards from Board Notices and update the entire GPP manual to enable examiners, moderators, interns and tutors to access the latest information.
- (p) A resolution was taken that the legal status for pharmacy technician (PT) trainees be that of the learner post-basic pharmacist's assistant for the purpose of completing their traineeship until the legislation has been amended and published for implementation.

### Accreditation/monitoring visit instrument for the Higher Education Qualifications Sub Framework (HEQSF)

Council is developing an accreditation/monitoring visit instrument based on good pharmacy education (GPE) standards. This instrument will be piloted in 2017 during the planned monitoring visits.

### Qualifications

- (a) The Office of the Registrar, together with the QCTO and the Health and Welfare Sector Education Training Authority (HWSETA), facilitated meetings of pharmacy stakeholders to draft the qualification for midlevel workers in the QCTO format. Council approved the qualification for wider consultation at its meeting of 11/12 May 2016.
- (b) EXCO (the executive committee) approved the Diploma: Pharmacy Technician for wider consultation on 30 November 2016.
- (c) Council approved the Master of Pharmacy in Industrial Pharmacy qualification for narrow consultation during its meeting of 11/12 May 2016.

### Criteria and guidelines

- (a) The criteria for appointment of panel members for accreditation/monitoring visits to higher education and training (HET) providers were drafted and approved by Council.
- (b) EXCO approved the scopes of practice, tasks and responsibilities of pharmacy support personnel in April 2016.

### Cooperation with other quality councils

- (a) Council submitted intent to be the Assessment Quality Partner (AQP) to the QCTO. Council is in the process of submitting the application.
- (b) Council submitted a request to the QCTO for Council to continue accrediting pharmacy-related qualifications and was granted the Quality Assurance Partner (QAP) status for the current qualifications (termed legacy qualification by the QCTO).
- (c) Council participated in the workshop of the Council on Higher Education (CHE) regarding a document titled 'Towards a national framework: The roles and responsibilities of the CHE and professional councils regarding the accreditation of professional programmes and related quality assurance functions'.

**Accreditation/monitoring visits to HET providers**

Monitoring visits were conducted at the following institutions:

- University of Limpopo between 26 and 28 July 2016
- A preliminary visit to North-West University for the monitoring of the PCDT course.

Council approved the reports on the visits and these providers are to continue to offer their pharmacy-related programmes.

Accreditation visits were conducted at the following institutions:

- Sefako Makgatho Health Sciences University (SMU) between 20 and 24 June 2016
- Tshwane University of Technology (TUT) between 22 and 26 August 2016.

Council approved the reports on the visits and these providers are to continue to offer their pharmacy-related programmes. Council will continue visiting these two providers until the first graduates are produced.

**Accreditation/monitoring visits to providers of occupational certificates (qualifications for pharmacy support personnel)**

The monitoring visits were conducted at the following institutions:

- S Buys Academy on 12 April 2016

- Pharmacy Health Academy (PHA) on 20 and 21 September 2016
- Public Health Institute of South Africa (PHISA) on 29 and 30 August 2016, after the institution had relocated.

In addition, visits were conducted at Kheth’impilo and Medipost to investigate the implementation of the agreements they have with S Buys Academy.

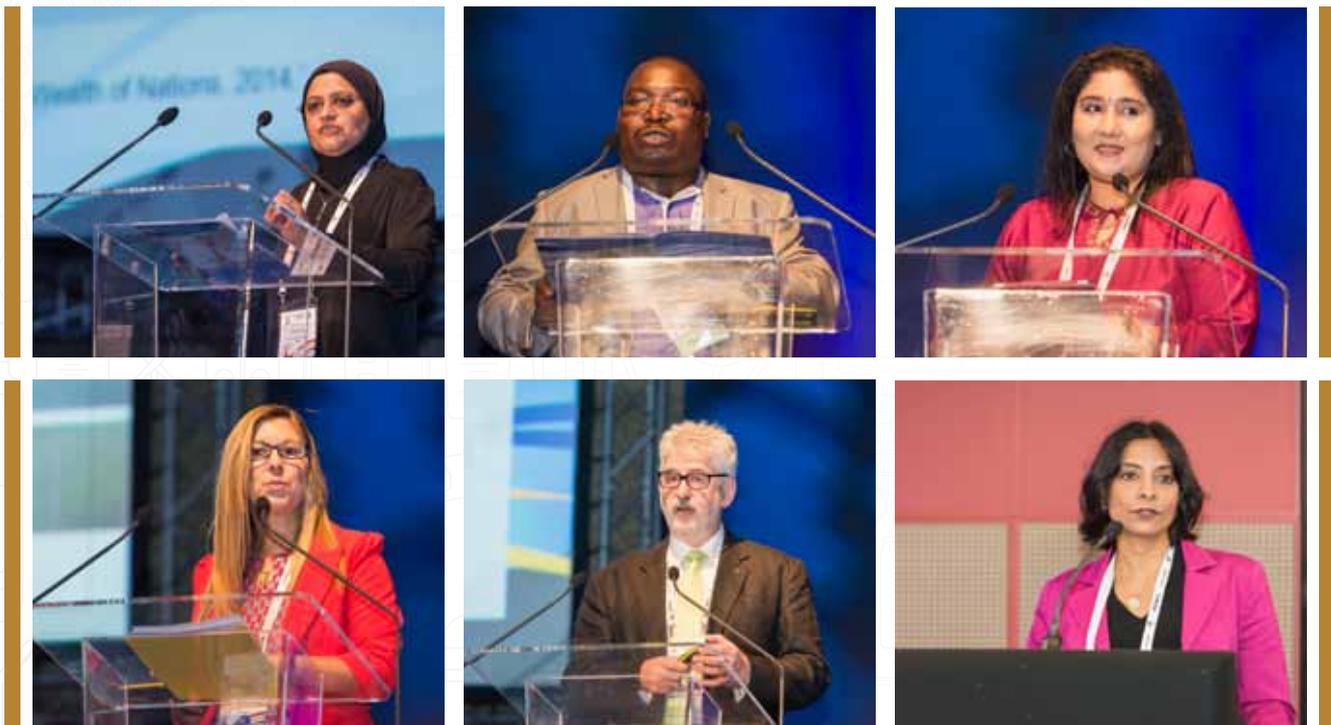
**Accreditation of courses**

- The Dispensing Course for Health Professionals from S Buys Academy was approved.
- The Dispensing Course for Healthcare Professionals from Health Science Academy (Pty) Ltd (HSA) was approved.
- Mpilo Royal College of Health Education was accredited/approved as a provider of the qualification National Certificate: Pharmacist Assistance (Institutional Pharmacy).
- Health Science Academy was approved as a provider of the Further Education and Training Certificate: Pharmacist Assistance (Wholesale).

**Heads of pharmacy schools meeting**

The following recommendations were made at the meeting on 26 May 2016:

- the assessment pages for students’ CPD entries be finalised
- the academic staff be given access to their students’ CPD entries to assess them.





**Mojo Mokoena**  
Senior Manager  
Professional Affairs (Practice)

## PRACTICE

### Strategic focus area

The activities of the Professional Affairs, Practice Unit focus on four of Council's strategic goals:

- Promote the provision of pharmaceutical care, which complies with universal norms and values in both the public and the private sectors, with the goal of achieving definite therapeutic outcomes for the health and quality of life of a patient.
- Uphold and safeguard the rights of the general public to universally acceptable standards of pharmacy practice in both the public and private sectors.
- Establish, develop, maintain and control universally acceptable standards of practice in the various categories of persons required to be registered in terms of the Pharmacy Act, as well as the promotion of the provision of pharmaceutical care.
- Establish, develop, maintain and control universally acceptable standards of practice in the professional conduct required of a person registered in terms of the Pharmacy Act.

### Practice Committee

The Practice Committee held six meetings and two teleconferences with Ms Jackie Maimin presiding as chairperson.

The committee approved the following minimum standards for implementation:

- Minimum standards for community/institutional pharmacies providing pharmaceutical services via websites.*
- Minimum standards for community/institutional pharmacies providing pharmaceutical services from a mobile unit.*
- Minimum standards for the procurement, storage and distribution of thermolabile pharmaceutical products (Board Notice 50 of 2015) was amended.*
- Minimum standards for the performance of HIV tests was amended.*
- Minimum standards for pharmacy premises, facilities and equipment was amended.*
- Minimum standards for institutional (public) pharmacy operating a remote automated dispensing unit (RADU).*

The *Minimum standards for the sale of HIV self-screening test kits* was approved by Council and published for comments.



**Jackie Maimin**  
Chairperson: Practice Committee

Other documents approved by the committee included:

- (a) The requirements and conditions for the evaluation of alternative models for the delivery of chronic medication to patients in both the public and private sectors.
- (b) Good inspection guidelines.
- (c) Criteria for the appointment of inspectors.
- (d) Amendments to the inspection questionnaires.
- (e) Criteria for evaluation of change of ownership.
- (f) Criteria for approval of another business or practice in a pharmacy.

### Promoting compliance with good pharmacy practice in both the private and public sectors

One of Council's strategic goals is upholding and safeguarding the rights of the public to universally acceptable standards of pharmacy practice in both the public and private sectors. This is achieved by inspecting all pharmacies licensed in terms of section 22(1) and recorded in accordance with provisions of section 22(2) of the Pharmacy Act. Council is empowered in terms of section 22(6) to perform inspections at premises in which the business of a pharmacy is carried out and to provide reports on the findings to the Director-General of Health and the person who submitted the application for a licence.

In 2016, the number of inspectors increased from 15 to 26. As at 1 November 2016, 1 626 inspections had been conducted and pharmacies graded compared with the 851 conducted in 2015 (i.e. up to 23 October 2016).

The Office of the Registrar conducted three meetings with inspectors; on 19 January (for new inspectors), 16 March and 18 July 2016. The Inspectors Bosberaad was held on 20 and 21 October 2016 prior to the 2<sup>nd</sup> National Pharmacy Conference.

In addition, two special meetings with selected inspectors were conducted on 28 April and 31 May 2016 to revise/amend inspection questionnaires.

### Inspection grading

In 2015, Council requested North-West University to research and evaluate the current grading status of pharmacies. The university was provided with a report on all the inspections conducted between 2013 and 2015 in all the sectors of pharmacy. The study population included all registered pharmacies that had been inspected (community, private and public institutional, wholesale and manufacturing pharmacies). The general objectives of this study were to:

- (a) identify the current grading status of inspected pharmacies stratified by sector, province and type of inspection

- (b) determine the compliance of inspected pharmacies, according to the different sections, with good pharmacy practice guidelines
- (c) evaluate the weightage given to the questions in the different sections of the questionnaire by the different pharmacy sectors
- (d) evaluate the current grading status with possible changes in the weightage given to the questions in the different sections of the pharmacy sectors' inspection questionnaires.

The university delivered a draft report to the Practice Committee in August 2016. In October 2016, Council appointed a task team to work closely with the university to assess the report objectively and in depth. The results of this study will affect the way in which pharmacies are graded. It is envisaged that the final report will be released in 2017.

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

A total of 729 pharmacy premises had been approved for training purposes by 16 November 2016.

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

The Office of the Registrar received 158 applications for permits in November 2016. These permits were for processing and issuing in terms of section 22A (15) of the Medicine Act and included applications from nurses, paramedics and pharmacists (PCDT).

Consensus for the issuing of PCDT permits was reached with the Medicines Control Council (MCC) and the National Department of Health (NDoH). An online application for the registration of PCDT and permits for pharmacists was developed.

The Office also processed applications pertaining to internal changes in a pharmacy and the installation of automated dispensing units.

A total of 495 applications for licences were evaluated. Of these, 390 were recommended to the NDoH for the issuing of licences and 105 were declined.

## Licence Applications

A total of 489 licence applications were evaluated, 384 recommended to the NDoH for the issuing of the licenses and 105 not recommended.

GPP Type	Another business or practice in a pharmacy	Application for licence	Automated Dispensing Unit (ADU)	Change of Ownership	Change of ownership and trading title	Change of Trading title	Internal Change	Name change of Juristic Person (only)	New	Relocation	Relocation and trading title	Grand Total
Not Recommended	1			13	8	3	10		51	15	4	105
Recommended		1	2	43	36	18	22	1	201	47	13	384
<b>Grand Total</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>56</b>	<b>44</b>	<b>21</b>	<b>32</b>	<b>1</b>	<b>252</b>	<b>62</b>	<b>17</b>	<b>489</b>

Table 18: Spread of licence applications per GPP type (recommended and not recommended)

Table 19 provides details of licence application types per province that were recommended to NDoH in 2016.

Province	Another business or practice in a pharmacy	Application for licence	Automated Dispensing Unit (ADU)	Change of Ownership	Change of ownership and trading title	Change of Trading title	Internal Change	Name change of Juristic Person (only)	New	Relocation	Relocation and trading title	Grand Total
Eastern Cape				4	1	2	1		16	3		27
Free State					1				8			9
Gauteng		1	2	16	16	8	9		69	18	7	146
KwaZulu-Natal				10	3	3	3	1	42	11	1	74
Limpopo				2	4	1	2		16	2	1	28
Mpumalanga				4	3	1			14	3	3	28
North West				2	2		4		11			19
Northern Cape				1					5	1		7
Western Cape				4	6	3	3		20	9	1	46
<b>Grand Total</b>		<b>1</b>	<b>2</b>	<b>43</b>	<b>36</b>	<b>18</b>	<b>22</b>	<b>1</b>	<b>201</b>	<b>47</b>	<b>13</b>	<b>384</b>

Table 19: Spread of recommended licence applications per province

## CPD AND REGISTRATIONS

### Strategic focus area

The activities of the Professional Affairs, CPD and Registrations Unit focus on four of Council's strategic goals:

- Uphold and safeguard the rights of the general public to universally acceptable standards of pharmacy practice in both the public and private sectors.
- Establish, develop, maintain and control universally acceptable standards in pharmaceutical education and training.
- 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.

### CPD Committee

The Continuing Professional Development (CPD) Committee met on four occasions in 2016 with Dr Panjasaram Naidoo as the chairperson. During this period the committee:

- Evaluated a total 36 applications for candidates with qualifications obtained outside South Africa.
- Participated in the Life Long Learning Conference in Croatia.
- Amended the guidelines for persons with qualifications obtained outside South Africa.
- Discussed at each meeting the progress on publication of the CPD regulations by the Department of Health.



**Avril Lewis**  
Senior Manager: Professional Affairs  
(CPD and Registrations)



**Dr Panjasaram (Vassie) Naidoo**  
(Chairperson: CPD Committee)



**Vusi Dlamini**  
Chairperson: Health Committee

**Health Committee**

The Health Committee met on three occasions in 2016 with Mr Vusi Dlamini presiding as the chairperson.

A total of 15 cases were monitored, five of which were opened in 2016.

Tables 20, 21 and 22 summarise the cases managed by the committee during the year under review, from newly opened and closed, gender analyses and types of cases managed in comparison with the cases in 2013, 2014 and 2015.

Year	New	Managed	Closed
2013	4	15	4
2014	1	13	1
2015	5	18	8
2016	5	15	6

Table 20: Newly opened and closed cases

Gender	Males	Females
2013	10	5
2014	8	5
2015	10	8
2016	10	5

Table 21: Managed cases by gender

Year	Alcohol	Mental/physical illness	Prescription and street drug abuse
2013	2	8	5
2014	0	8	5
2015	1	8	7
2016	2	9	4

Table 22: Different categories of cases

**Setting up the infrastructure for the delivery of pharmacy-related learning**

**Student information sessions and intern workshops**

Council conducted information sessions with first and fourth year students at all accredited universities in 2016. The purpose of the sessions with the first year students was to introduce them to the Pharmacy Act, the objectives of Council, registration requirements and website functionalities they need to use to register and communicate with the Office of the Registrar. At the fourth year student information sessions, students received guidance on the internship process and information on the web pages that are crucial during the internship period.

The Office of the Registrar conducted the following meetings and activities regarding the internship preregistration evaluation processes:

- (a) meeting with assessors/moderators for a feedback session and a train the trainer meeting during February 2016
- (b) tutor/intern workshops held in all provinces between February and April 2016
- (c) meetings with the task team in February and May 2016 to approve the preregistration examination papers
- (d) preregistration examination workshops held in all provinces
- (e) three preregistration examinations conducted in March, July and October 2016
- (f) professional examinations conducted in May and October 2016
- (g) panel of experts appointed to assist Council with reviewing the competency standards for pharmacists with the intention of developing a concept document for Council’s consideration
- (h) task team appointed to review the concept document developed by the panel of experts prior to Council’s approval
- (i) meetings with panel of experts to develop the concept document held in April, July and August
- (j) meetings with the task team to review the concept documents developed by the panel of experts held in August and November 2016

- (k) meeting held in April 2016 with the task team that Council appointed to review the internship programme
- (l) examiner appointed for the preregistration examination, community sector
- (m) meetings with heads of pharmaceutical services in Northern Cape and Western Cape held in April and May 2016
- (n) meeting with the head of pharmaceutical services for the South African National Defence Force (SANDF) held in March 2016
- (o) meetings with heads of corporate group Clicks held in May 2016.

The following online applications regarding the recording of pharmacies were developed:

- new pharmacies
- change of ownership
- change of ownership and trading title
- relocation
- relocation and change of trading title.

The online applications for the preregistration and professional examinations were reviewed.

**Preregistration examinations**

In 2016, three preregistration examinations were written, in March, July and October. Table 23 provides a summary of the total number of interns who wrote papers 1 and 2 between 2014 and 2016.

Examination date	Interns who wrote paper 1			Interns who wrote paper 2		
	2014	2015	2016	2014	2015	2016
February/March	71	44	77	53	48	99
July/August	504	513	674	515	516	658
October	93	125	265	163	225	234

Table 23: Interns who wrote the preregistration examination in 2014, 2015 and 2016

Interns taking the preregistration examination for the first time are advised to write both papers, but they can opt to write only one paper. Interns who fail one paper are expected to rewrite only the paper they failed. This explains the discrepancies in the number of interns

who wrote papers 1 and 2 for the same examination. In addition, some interns were writing a paper for the second or third time. Table 24 gives a summary of the results of the preregistration examination between 2013 and 2016.

Preregistration examination results	2013	2014	2015	2016
Interns who wrote the examination	649	780	823	1 138
Interns who passed the examination	485	502	584	766
Interns who failed the examination	164	278	240	372
% pass rate	74,73%	64,39%	70,95%	67,31%

Table 24: Preregistration examination results between 2013 and 2016

**Recognition of foreign qualifications**

In February 2014, Council resolved that the Education Committee hand over the evaluation of applicants with foreign qualifications to the CPD Committee. During the period under review, the CPD Committee

evaluated 36 applications. Table 25 shows the number of applications received from foreign qualified persons in 2016 compared with the numbers received in 2013, 2014 and 2015.

	Applications received	Pharmacists	Pharmacist's assistants
2013	34	32	2
2014	39	38	1
2015	55	52	3
2016	36	32	4

Table 25: Summary of applications for evaluation of credentials for foreign qualified persons

Upon evaluation by the committee, pharmacists with foreign qualifications are required to pass the professional examination, register as interns and undergo an internship and pass the preregistration examinations. Pharmacist's assistants may be required to register as learners, undergo in-service training and complete a module in pharmacy law and ethics through an approved provider.

Professional examinations, which comprise four papers, were held in May and September 2016. The four papers were pharmacology and toxicology, pharmacy practice and administration, pharmacy law and ethics, and pharmaceuticals and pharmaceutical chemistry.

Candidates	Pharmacology & Toxicology				Pharmacy Practice & Administration				Pharmacy Law & Ethics				Pharmaceuticals & Pharmaceutical Chemistry			
	2013	2014	2015	2016	2013	2014	2015	2016	2013	2014	2015	2016	2013	2014	2015	2016
Who wrote the examination	35	58	57	30	25	45	45	28	38	65	59	34	44	45	62	43
Passed	17	44	50	18	25	42	40	27	23	45	41	25	32	35	40	29
Failed	18	14	7	12	0	3	5	1	15	20	18	9	12	10	22	14

Table 26: Professional examination results between 2013 and 2016

### Registration of persons and organisations

On 11 November 2016, the register recorded a total number of 38 606 active persons on the database.

Category of registered persons	2013	2014	2015	2016
Pharmacist's assistants learner basic	4 285	3 684	3 343	3 144
Pharmacist's assistants basic	1 242	1 939	4 402	4 084
Pharmacist's assistants learner post-basic	1 898	1 961	2 468	2 248
Pharmacist's assistants post-basic	5 534	6 576	7 571	9 349
Students (mostly 2 <sup>nd</sup> year)	2 545	3 235	4 232	4 070
Pharmacist interns	715	804	869	1 058
Community service pharmacists	424	547	619	649
Pharmacists	13 321	13 391	13 529	13 992
Specialist pharmacists	12	12	12	12
<b>Total</b>	<b>29 976</b>	<b>32 149</b>	<b>37 045</b>	<b>38 606</b>

Table 27: Active persons in the Council register between 2013 and 2016

Facilities by category	2013	2014	2015	2016
Community	3 041	3 003	3 082	3 192
Consultant	13	12	11	11
Institutional (private)	255	266	274	287
Institutional (public)	639	639	646	651
Manufacturing	248	251	256	268
Wholesale	249	228	228	234
<b>Total</b>	<b>4 445</b>	<b>4 399</b>	<b>4 497</b>	<b>4 643</b>

Table 28: Active pharmacies as per register per category between 2013 and 2016

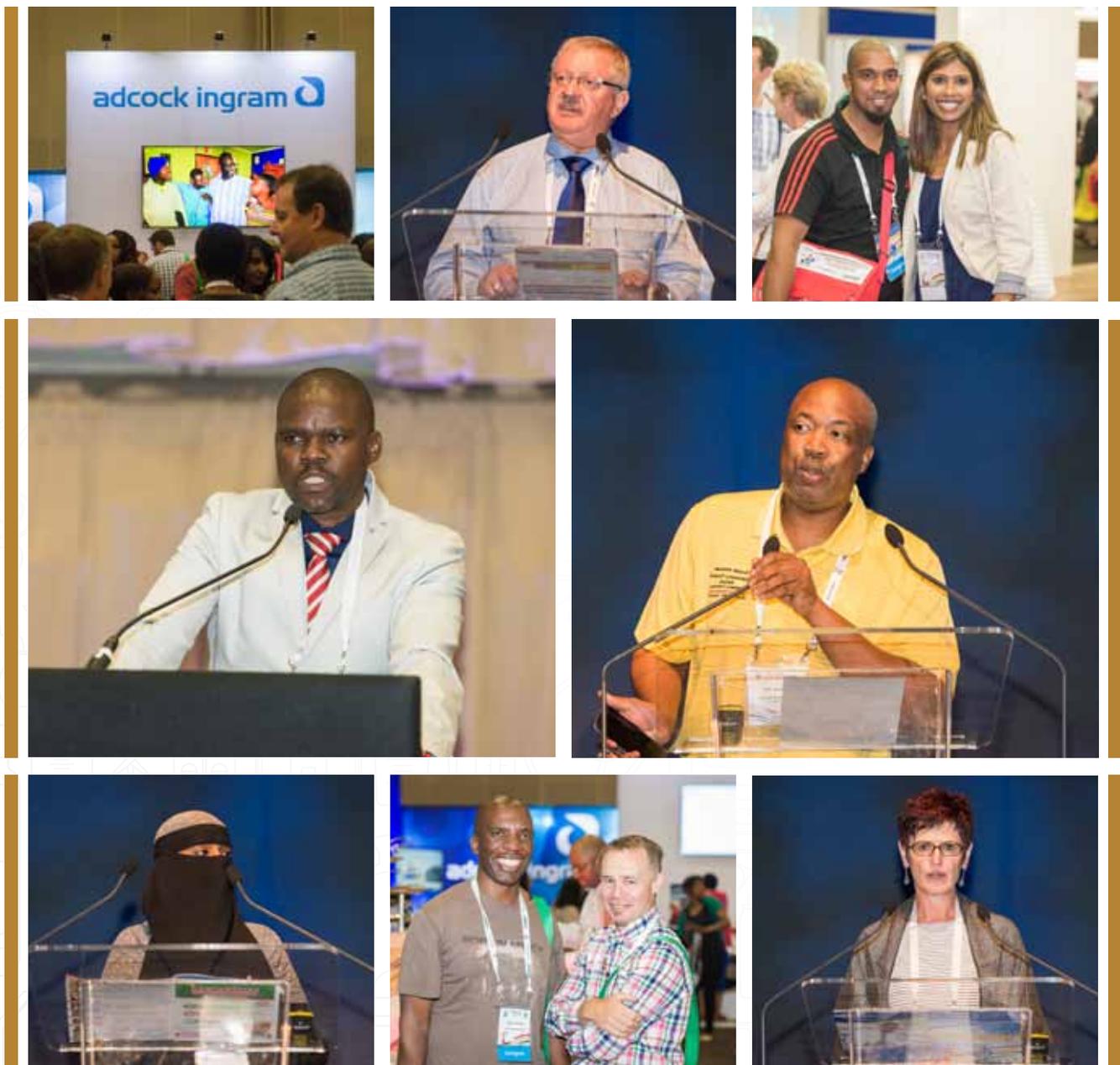
Tables 27 and 28 indicate a steady growth in the number of pharmacies, pharmacists and pharmacy support personnel. The reason for the decreased numbers in 2013 and 2014 was due to the high number of pharmacies removed from the register after inspections revealed the facilities were not operating or were not located at the

recorded addresses. Those pharmacies were classified as Grade D, meaning they did not exist. Pharmacy owners and responsible pharmacists of Grade D pharmacies that were later discovered to have relocated without informing Council were referred to Council's legal unit. In 2015, the situation seemed to stabilise.

Table 29 provides a summary of the distribution of the different categories of pharmacies per province in 2016.

Pharmacy sectors	EC	FS	GP	KZN	LP	MP	NW	NC	WC	Total
Community	267	148	1 121	527	173	238	204	63	461	3 202
Consultant	0	0	8	1	0	0	0	0	2	11
Institutional (private)	28	16	104	47	9	13	22	6	42	287
Institutional (public)	106	51	81	105	37	41	56	40	136	653
Manufacturing	12	1	206	9	0	1	8	0	32	269
Wholesale	26	7	122	24	7	3	4	3	37	233
Grand Total	439	223	1 642	713	226	296	294	112	710	4 655

Table 29: Distribution of different categories of pharmacies per province in 2016





**Debbie Hoffmann**  
Senior Manager: Legal Services and Professional Conduct

## LEGAL SERVICES AND PROFESSIONAL CONDUCT

### Strategic focus area

The activities of the Legal Services and Professional Conduct (LS&PC) Department focus on four of Council's strategic objectives:

- Establish, develop, maintain and control universally acceptable standards of:
  - o the practice of the various categories of persons required to be registered in terms of the Pharmacy Act
  - o professional conduct required of persons registered in terms of the Pharmacy Act
  - o control over persons registered in terms of the Pharmacy Act by investigating, in accordance with the Act, complaints or accusations relating to the conduct of registered persons
- Promote transparency to the profession and the general public (corporate governance).
- Maintain and enhance the dignity of the profession.
- Coordinate the activities of the disciplinary committees of Council.

In addition, the LS&PC Department provides legal support to the Office of the Registrar and Council.

### Professional Conduct

#### Committee of Preliminary Investigation

Council received a total number of 381 complaints between 1 November 2015 and 31 October 2016. Complaints received in terms of section 39 of the Pharmacy Act, 53 of 1974 were reviewed and addressed.

Mr Solly Rasekele chaired the Committee of Preliminary Investigation (CPI), which reviewed 404 matters and recommended a total of R666 000 in terms of potential fines. Thirty-three of these cases were referred for further investigation. The recommendations for the remainder of the 371 cases are summarised in Table 30.



**Solly Rasekele**  
Chairperson: CPI

Meeting	Total number of cases	Recommendations of the committee				
		No further action	CII	CFI	Health Committee	Proposed fines
November 2015	131	98	22	3	0	R238 000
May 2016	167	114	32	8	2	R254 000
August 2016	106	54	34	4	0	R174 000
<b>Total</b>	<b>404</b>	<b>266</b>	<b>88</b>	<b>15</b>	<b>2</b>	<b>R666 000</b>

Table 30: Recommendations of CPI meetings in 2016

A year-on-year analysis of the total CPI cases is provided in Table 31.

2012	2013	2014	2015	2016
258	239	224	299	407

Table 31: Year-on-year analysis of the CPI cases between 2012 and 2016



### Committee of Informal Inquiries

Mr Sham Moodley chaired the Committee of Informal Inquiries (CII) in 2016. The CII reviewed a total of 95 matters, with confirmed fines to the value of R475 500 and cost orders to the amount of R253 806.

The findings of the CII meetings are summarised in Table 32.

**Sham Moodley**  
Chairperson: CII

Meeting	Number of cases	Appearances	Consent orders	CFI referrals	Amounts	
					Fines	Cost orders
February 2016	29	8	17	4	R142 000	R66 977
July 2016	35	7	24	2	R189 500	R91 652
October 2016	31	6	24	2	R144 000	R95 177
<b>Total</b>	<b>95</b>	<b>21</b>	<b>65</b>	<b>8</b>	<b>R475 500</b>	<b>R253 806</b>

Table 32: Findings of CII cases in 2016

A year-on-year analysis of the total CII cases is provided in Table 33.

2012	2013	2014	2015	2016
158	134	83	87	95

Table 33: Year-on-year analysis of the total CII cases between 2012 and 2016

The CII requested a statistical analysis of the individual charges against respondents and the frequency of such charges. The analysis showed the breakdown of charges

between 2009 and 2015. The top ten charges over the relevant period are summarised in Table 34.

	Transgression	2009	2010	2011	2012	2014	2015	Total
1	GPP shortcomings	49	46	65	29	18	13	220
2	Dispensing error	26	18	23	84	19	14	184
3	Schedule 1 and 2 recording	24	32	44	13	1	7	121
4	Allowing unqualified/unregistered persons to perform the scope of practice of a pharmacist	28	8	46	18	4	9	113
5	Dispensing without a valid prescription/valid order	19	12	23	25	4	10	93
6	Schedule 6 register	10	23	31	12	6	4	86
7	Operating a pharmacy without a pharmacist	16	16	22	15	2	1	72
8	Access to schedule medicine	2	26	16	12	6	5	67
9	Bringing harm to the dignity of the profession (ER10)	3	6	12	27	6	9	63
10	Keeping/dispensing expired medicine	3	8	22	8	7	10	58

Table 34: The top ten charges in CII cases between 2009 and 2015

### Committee of Formal Inquiries

The Committees of Formal Inquiries (CFI) heard and finalised six formal inquiries during 2016. The CFI found three respondents guilty, two respondents not guilty and one respondent was referred to the Health Committee before the imposition of a suitable sentence would be considered. The total value of the fines ordered by the CFI amounted to R80 000 with corresponding cost orders of R38 355.11.

A year-on-year analysis of the total CFI cases is provided in Table 35.

2012	2013	2014	2015	2016
7	1	10	11	6

Table 35: Year-on-year analysis of the total CFI cases between 2012 and 2016

### Provision of legal services and legal administration

#### Legal enquiries and legal opinions

In terms of providing legal support to the profession, the LS&PC Department provided legal services to the public, the profession and stakeholders by addressing legal enquiries emanating from email communication, Council’s website, telephonic enquiries, or by means of other forms of communication. As in previous years, the topics covered in such enquiries varied, ranging from scopes of practice and responsible pharmacists’ duties to authorities being addressed. LS&PC formally addressed a total of 64 legal and legal-related enquiries during 2016.

In addition, LS&PC was present at the 2<sup>nd</sup> National Pharmacy Conference and provided legal advice to the profession on a one-on-one basis, including identifying some of the legal and ethical challenges facing the pharmacy profession. Full details of the input from LS&PC are available in the detailed 2<sup>nd</sup> National Conference Report.

LS&PC provided legal support to the Office of the Registrar and Council by way of six formal legal opinions drafted from requests from Council and/or the Office of the Registrar. These included issues pertaining to the keeping of registers for specified Schedule 5 medicines, the activities of a CPD provider, exemption in terms of section 29 of the Pharmacy Act, the publication of fees by way of a Board Notice, and the circumstances pertaining to the removal from the register of pharmacists.

In addition, LS&PC obtained external legal opinion pertaining to various challenges raised by stakeholders in comment to the publication of Board Notice 49, which included, inter alia, the minimum standards for the remote automated dispensing unit.

**Certificates of good standing**

LS&PC provided 72 Certificates of Good Standing to applicants during 2016, this being just short of a 25% increase in such applications during 2015. The distribution of the requested destinations for the certificates is reflected in Table 36.

Destination Country	
Canada	14
Namibia	13
Australia	9
Zimbabwe	6
United Kingdom	6
New Zealand	6
Botswana	4
USA	4
Zambia	2
Ireland	2
South Africa (local)	1
Hong Kong	1
Germany	1
Rwanda	1
Mozambique	1
Swaziland	1

Table 36: Distribution of Certificates of Good Standing during 2016

During 2016, statistics were generated to reflect the ratio of applicants in terms of gender and South African citizens or non-South African citizens. The results are reflected in Table 37.

Female applicants	Male applicants	Number of certificates issued
50	22	72
South African citizens	Non-South African citizens	
46	26	72

Table 37: Ratio of Certificate of Good Standing applicants during 2016

**Section 26 Certificates**

LS&PC provided 27 Certificates of Registration/Non-registration issued in terms of section 26 of the Pharmacy Act, the purpose of which ranged from personal use to investigations undertaken by the Medicines Regulatory Authority under the National Department of Health, investigations by forensic companies for and on behalf of medical schemes, and matters pertaining to civil litigation.

**Contracts and service level agreements**

LS&PC, in ensuring that Council is bound to and has sufficient legal coverage in terms of its contractual relationship with service providers, saw to the drafting/editing of five new and existing contracts containing service level agreements, five service provider contracts for the 2<sup>nd</sup> National Pharmacy Conference and in excess of 45 sponsorship and exhibitors' contracts.

**Corporate Governance**

LS&PC administered and collated the Council Self-Assessment for 2016.

**Legislation**

**South African Pharmacy Council legislation**

In May 2016, the NDoH, in collaboration with the South African Law Reform Commission, issued a discussion document for statutory health councils in respect of sections within their legislation that were inconsistent with the Constitution or contained sections that had been repealed or were redundant. LS&PC, together with the Legislation Review Task Team, urgently submitted the relevant sections of the Pharmacy Act, 53 of 1974 to the NDoH and the South African Law Reform Commission.

LS&PC assisted in preparing five Board Notices for publication, including the publication of Notices pertaining to the fees payable to Council for 2017, amendments and new minimum standards for implementation to the *Rules pertaining to good pharmacy practice*, the qualifications for the Pharmacy Technician (QCTO) and the revised Diploma for Pharmacy Technician for comment.

**Comments and contributions to proposed legislation published for comment**

LS&PC facilitated the detailed Council comments to the White Paper on National Health Insurance.

## HUMAN RESOURCES

### Strategic focus area

The Human Resources (HR) Department focuses on managing the recruitment and selection of staff, labour relations, transformation in the workplace, occupational health and safety matters, performance management, training and development, and the employee payroll.

### Remuneration Committee (REMCO)

The Remuneration Committee met on 29 November 2016 to consider and recommend the 2017 cost of living adjustment for managerial staff and other matters related to the remuneration of Council staff.

### Bargaining Committee

The Bargaining Committee met twice in 2016 and deliberated on several issues of mutual interest. At the last meeting on 28 November 2016, the committee considered the 2017 cost of living adjustment for non-managerial staff, the amendment of the recognition agreement and the constitution of the Bargaining Committee.

### Employment Equity Committee

The Employment Equity Committee had its last meeting in October 2016 and expressed a need to work towards employment targets as set down in the Employment Equity Plan for 2014–2019. The Office of the Registrar will endeavour to work towards achieving the set objectives and targets.



**John Mashishi**  
Manager: HR

### Breakdown of the Council workforce

The employment level per race groups and gender in Council during 2016 is reflected in Table 38.

	African		Coloured		Indian/Asian		White	
	Male	Female	Male	Female	Male	Female	Male	Female
	21	45	0	2	0	1	0	8
Total	66		2		1		8	

Table 38: Breakdown of SAPC workforce in 2016

### Employee development and training

The workplace skills plan for the year under review was successfully carried out as per Table 39.

Course description	Number of employees
First aid	6
Health and safety representative	13
Occupational Health and Safety Act for management	4
Basic fire fighting	3
Assessor training	2
Operational risk management	1
Advanced Microsoft Excel	24
King IV	1
Life Discovery Master 1 & 2	32

Table 39: Skills training offered in 2016

Professional development continued in 2016. The programmes outlined in Table 40 were partly funded by Council.

Under/Postgraduate	Category	Number of employees
Master of Business Administration (MBA)	Staff	1
Bachelor of Commerce: Communications	Staff	1
Bachelor of Commerce Accounting	Staff	1
Programme in Financial Management	Staff	1
Programme in Supply Chain Management	Staff	1
<b>Total</b>	<b>Staff</b>	<b>5</b>

Table 40: Breakdown of study assistance offered in 2016

The employment equity of Council's staff demographics as at 31 October 2016 is shown in Table 41.

Occupational Levels	Male				Female				Foreign Nationals		Total
	A	C	I	W	A	C	I	W	Male	Female	
Top management	2	0	0	0	0	0	0	0	1	0	3
Senior management	1	0	0	0	3	0	0	2	0	0	6
Professionally qualified and experienced specialists and mid-management	5	0	0	0	6	0	1	1	0	0	13
Skilled technical and academically qualified workers, junior management, supervisors, foremen and superintendents	4	0	0	0	12	0	0	3	0	0	19
Semiskilled and discretionary decision making	8	0	0	0	24	2	0	2	0	0	36
Unskilled and defined decision making	1	0	0	0	0	0	0	0	0	0	1
<b>TOTAL PERMANENT</b>	<b>21</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>45</b>	<b>2</b>	<b>1</b>	<b>8</b>	<b>1</b>	<b>0</b>	<b>78</b>
Temporary employees	0	0	0	0	2	0	1	0	0	0	3
<b>GRAND TOTAL</b>	<b>21</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>47</b>	<b>2</b>	<b>2</b>	<b>8</b>	<b>1</b>	<b>0</b>	<b>81</b>

Table 41: Employment equity: staff demographics as at 31 October 2016

### Employee recruitment and retention

The systematic filling of positions was executed and 96% of the staff structure was filled. The remaining 4% will be filled progressively based on the availability of funds. There were frequent resignations and replacements at management level as Council could not match the offers extended to the incumbents. The staff turnover remained at a relatively low level.

### Employee assistance programme

Council's annual employee wellness report states the utilisation rate of health screening services offered at employee wellness events has improved from 11% to

16%. Although this level is satisfactory, ongoing health awareness and education is necessary. Emphasis is placed on promoting healthy lifestyles and raising awareness about topical health issues.

Council's employee assistance programme (EAP) consists of wellness days where employees are able to test their blood glucose levels, blood pressure and body mass index, among others. On these days, professional healthcare workers are invited to talk on pertinent health-related topics.

A wellness day was held on 2 September 2016 and was a resounding success.



## INFORMATION TECHNOLOGY

### Strategic focus area

The focus of the Department of Information Technology is on improving internal efficiency and effectiveness.

The Information Technology (IT) Department is responsible for providing robust, reliable and highly secured technological platforms to enable Council to discharge its fiduciary duties and meet the service needs of stakeholders.

In the year under review, the IT Department continued to invest resources into enhancing the core systems of the business, namely the register, dashboard and the financial management system (AccPacc). Continued focus on the systems means they are tuned for better performance, are efficient and optimised for their much-needed reliability.

The latest desktop environment backs the systems and a high-end network providing fast connectivity housed in a virtualised data centre.

### Hardware

Council's operational processes demand a superior processing computing environment and IT is constantly on the alert to find high-end hardware equipment that is equal to the task. For the reported year, eighteen laptops whose warranties had expired, mostly at senior management level, were replaced. IT support includes servicing computers, inclusive of laptops and related hardware equipment.

### Software

Council uses a range of software across the departments for various functions. The department has a Microsoft Open Value Subscription Education licence subscription for operating systems and office applications that is renewed on an annual basis.

The major systems that are core to the business are:

#### > The register

To improve efficiency and align with the dynamic business processes, the following major changes were implemented on the register during the year under review:

- online licensing development for SAPC/NDoH (Phase 3)
- online system for bookings and recording of examinations
- addition of the standard allowance claim for inspectors and developing a meetings claim form
- online recording of qualifications and applications for the PCDT permit
- developing a functionality to allow questions by category for the GPP process



**Clement Manenzhe**  
Senior Manager: IT

- automated intern/community pharmacist releases once all requirements have been met
- developing a functionality to manage the process for assistants who exceed 30 months
- developing an examination mail merge preview functionality
- developing an online functionality for learners to address change of pharmacy/tutor/provider
- developing a functionality to manage online change of trading title.

#### > The dashboard

There were no new developments introduced to the dashboard but enhancements were made to meet user demands and efficiency. The dashboard continued to be maintained as per the agreement:

- implement new online processes that integrate with the register
- user ability to logon to the dashboard using their Windows usernames
- implement new filtering of assignments by province and provider
- simplify existing processes to ensure only necessary staff are involved
- small enhancements to the 3CX integration.

## > AccPacc

In 2016, AccPacc undertook a major upgrade to what is known today as Sage 300 Ver. 6.3. This was necessitated to keep up-to-date with the latest versions of AccTech supported software, with the added benefits and new features available in the software, to meet the demands of management.

## > ManageEngine

The IT service desk system is a tool IT uses to track and manage all IT-related requests. The tool has been in existence for a while with low utilisation. The technicians were encouraged to capture every request logged, which is evident in the helpdesk statistics shown in Table 42.

Various other licences are used to achieve specific results for telephonic services, CCTV and access control, network and firewall, backup and IT security, managed volume printing, membership cards printing, S-Cubed for HR, e-Workflow for acquisitions as well as APN.

## IT infrastructure

There were no server hardware upgrades; however, warranty for some servers was extended for continued support from the original vendors. An upgrade of the operating system from Microsoft Windows Server 2008 to Server 2012 was completed for all servers. The SQL server was also upgraded to Microsoft SQL 2014 to improve efficiency on the database from which most of the core systems run.

## Server room renovation

The server room floor was raised with antistatic floor and under floor to meet best practice as previously recommended by the Audit Committee.

## Connectivity

Council's network is secure and reliable with little outages. The system minimises disruptions to business operations and its resilience increases end-user

confidence. The network is backed by an 8MB Telkom fibre line with a Neotel failover line of the same capacity.

The corporate APN allows users to connect to the main network remotely for effective and efficient service delivery. A secured Wi-Fi network is in place – laptop users can conveniently connect their devices and are able to work from any part of the building.

## Security

The firewall tool Squid that guards the computing environment from external threats and intruders protects the Council computing network. Other security measures such as antivirus, managed Windows update (WSUS), and email and spam filtering ensure that technological assets continue functioning uninterruptedly and important data remains protected from unauthorised access.

## Business continuity and disaster recovery

In addressing one of the persistent audit findings on risk mitigation on unsuspected business disruption, Council initiated a bidding process to source services for the development of the business continuity plan (BCP). Continuity SA was the preferred bidder and an agreement was entered into towards the end of 2016. The development of the BCP project will be done in three phases as follows:

- development of BCM policy and framework
- development of emergency response
- development of business continuity and IT disaster recovery.

## IT support

IT Service Desk Requests	
Total requests logged	701
Total closed	674

Table 42: IT Service Desk requests in 2016





**Voster Himbotwe**  
General Manager: Finance/CFO

## FINANCIAL MANAGEMENT

During the year under review, the Office of the Registrar ensured efficient and effective management of Council's financial resources and risk management in line with best practice.

The Audit Committee and the Board of Trustees maintained oversight on financial management and governance of the SA Pharmacy Council Pension Fund respectively.

### Strategic focus area

Financial Management focuses on three strategic objectives of Council:

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

### Coordination of standing committees of Council

#### Audit Committee

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

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

The committee consisted of five members appointed in terms of the Audit Committee Charter, three independent members drawn from outside the Council, and two Council members.

During the year, the Audit Committee held three meetings in line with its terms of reference.

The report of the committee is on page 40.

#### Pension Fund Board

Council has a post-employment defined contribution benefit plan, established on 1 July 1977, operated as a separate legal entity in terms of the Pension Funds Act No. 24 of 1956, the South African Pharmacy Council Pension (the Fund).

Under the defined contribution plan, Council's 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.



**Ms NP Thipa**  
(Treasurer)

The benefits payable by the Fund in the future, due to retirements and withdrawals from the Fund, are contributions by members to the Fund and investment returns net of operational expenses. Council's contribution to the plan is charged to the income statement when incurred.

The audited financial statements of the Fund for the period ended 30 June 2016 were approved and submitted to the Financial Services Board.

The Fund general and governance information is as follows:

<b>Employer representatives:</b>
Prof M Chetty (Chairperson)
Ms NP Thipa
Mr TA Masango
Ms H Hayes (Alternate)
<b>Employee representatives:</b>
Mr NJ Mashishi
Ms MM Mokoena
Mr D Nkuna
Ms F Ngoveni (Alternate)
<b>Principal Officer:</b>
Mr V Himbotwe
<b>Administrator:</b>
ABSA Consultants and Actuaries (Pty) Ltd
<b>Valuator:</b>
Ms L Langner
<b>Auditors:</b>
Geyser & du Plessis
<b>Investment manager:</b>
Old Mutual

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

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

### Councillors

Council members meet four times annually and are responsible for preparing financial statements, monitoring executive management, and exercising control over the organisation's activities. The roles of the president and the chief executive officer are separate in accordance with good practice. The president holds a non-executive office. Council members set the overall policy for the organisation and make decisions on matters of strategic importance.

### Financial statements

Council members are responsible for the preparation of annual financial statements that fairly present the financial position of the organisation and the results of its operations and cash flow information for the year then ended. The auditors, Rakoma and Associates Inc, are responsible for independently auditing and reporting on the financial statements. The auditors are appointed for a period of three years and are independent. Their report is presented on page 46. In preparing the financial statements, Council applied judgment and estimates, and adhered to International Financial Reporting Standards for Small and Medium-sized Entities (IFRS for SMEs).

### Audit Committee

The Audit Committee is an independent committee established to provide oversight and additional assurance on the reliability and integrity of both financial and non-financial activities of Council. The Audit Committee was satisfied that the annual financial statements for the year 2016 fairly present Council's financial position and recommended that Council members approve the annual financial statements. The report of the committee is on page 40.

### Code of conduct

Council is committed to an exemplary standard of business ethics and transparency in all its dealings with stakeholders. Both Council members and employees are bound by a code of conduct. Any conflict of interest is declared and affected members recuse themselves during deliberations at Council meetings. Gifts received, if accepted, are declared in line with good corporate governance.

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

### Financial performance indicators

Description	2012	2013	2014	2015	2016
Current assets (R)	15 358 998	12 239 586	27 565 715	42 201 431	52 658 066
Current liabilities(R)	18 049 631	19 813 974	31 330 234	42 598 178	43 320 999
Liquidity ratio	0.85	0.62	0.88	0.99	1.22
Income (R)	39 160 954	54 144 362	62 436 396	64 899 419	78 807 935
Expenditure(R)	41 109 098	54 191 014	57 522 292	61 747 959	71 277 271
Total comprehensive income for the year [Surplus/(deficit)](R)	(1 948 144)	(46 652)	4 914 104	3 151 460	7 530 664

Table 43: Financial performance indicators

### Financial position

Assets grew by over 15.06% because of an increase in current assets. Current assets were made of accounts receivable, cash on hand, and short-term deposits on the back of fees for the year 2017 received in advance.

Total equity and liabilities grew in line with assets. Equity on account of surplus for the year amounting to R7 530 664, and liabilities in respect of income received in advance from membership fees paid by pharmacies and pharmacists that were due on 2 January 2017 and 1 February 2017 respectively.

Liquidity ratio increased from 0.99 in the prior year to 1.22 at 31 December 2016.

### Comprehensive income

Council is a not for profit organisation with the funding for its operations drawn mainly from membership fees such as annual fees, registration fees and restoration fees. Other sources of income are sponsorships/donations for specific one-off projects, for instance the funding of the national pharmacy conference.

During the year under review, income grew by 21.43% of which part of the growth amounting to 9.09% was attributable to the 2<sup>nd</sup> National Pharmacy Conference. The pharmacy conference is organised on a break-even basis whereby income is to equal expenditure. Any surplus arising from the conference goes to defray future conference expenses. There was no surplus from the conference held during the year.

Total comprehensive income increased from R3.15 million in the prior year to R7.53 million during the year under review. The growth is attributable to a rise in investment income and annual inflationary increases in fees.

### Budgetary control

Council's budget is guided by the five-year strategic plan. The budget for the year under review was approved at the 14/15 October 2015 Council meeting. Budget performance reports were presented to management, the Executive Committee, the Audit Committee and Council. At various council committee meetings respective budget performance reports formed part of the agenda.

### Supply chain management

Council has adopted a proactive stance towards black economic empowerment. The procurement policies of Council are in support of government policy for the general good in addressing past imbalances. The list of prospective suppliers was updated. The adjudicating committee and tender committee presided on purchases above the value of R40 000 and R400 000 respectively.

### Risk management

In line with Council's policy on risk management, risks were managed through the systematic analysis of actual and potential risks and the development and implementation of measures to counter those risks. The aim is to support decision making and thereby increasing the likelihood of achieving objectives. The Audit Committee assisted Council in carrying out its risk governance responsibilities.

An updated risk register was maintained during the year. Identified risks are not an indication of what management is doing wrong, rather they indicate the things that could go wrong which would have an impact on the achievement of objectives. The following were the top risks and control improvements to mitigate the risks:

- (a) Non-compliance with education and other related legislation:
  - submit learner achievement data for pharmacist's assistants to the South African Qualifications Authority (SAQA)
  - application for Assessment Quality Partner with QCTO
  - draft memorandum of understanding (MoU) with CHE
  - follow up on application to register as a professional body with SAQA.
- (b) Litigation as a result of setting and enforcing professional standards:
  - improve record keeping throughout the process of standard setting and version control

- record the international benchmarking process
  - develop and implement the filing index for the organisation
  - implement Conduct of Meetings Policy.
- (c) Non-compliance with set turnaround times in processing customer requests/ applications:
- review turnaround times on applications
  - investigate areas where there are bottlenecks in the system and manage them
  - review and revise the dashboard process
  - standing meetings with heads of pharmaceutical services in both public and private sectors
  - standing meetings with heads of departments and MECs in the provinces to address constraints
  - review and automate remaining people/ organisation registration processes
  - implement internal audit service delivery recommendations.
- (d) Inadequate business continuity planning:
- review five-year strategic plan
  - finalise development of business continuity plan.
- (e) Inadequate/insufficient building infrastructure (office and parking space):
- finalise purchase of new office premises/plot
  - building improvements to accommodate conference facilities.

## Internal audit

During the year under review, the internal audit function was outsourced to an independent audit firm, KwinanaEquifin Advisory Services (Pty) Ltd (KwinanaEquifin). KwinanaEquifin attended all Audit Committee meetings to report on the adequacy of internal controls implemented by management.

A risk-based internal audit plan for three years ending 31 December 2018 was approved. Internal controls were considered adequate, with minor improvements recommended in some areas. Below is the list of audits performed:

- (a) Follow-up audits:
- Legal Services and Professional Conduct
  - Pharmacy Practice
  - Pharmacy Education
  - Continuing Professional Development, Pre-registration and Registration
  - Information Technology

- Infrastructure and facilities
- Marketing and communication.

(b) New audits:

- Human resources management
- Governance and compliance
- Financial management
- Service delivery.

## Report of the Audit Committee

We are pleased to present our report for the financial year ended 31 December 2016.

### Purpose of the annual report

This annual report captures in summary form the activities of the Audit Committee (the Committee) for the financial year 2016, accounting how the Committee has performed, met its terms of reference and key priorities. The terms of reference were reviewed and revised, a process that is performed annually.

### Audit Committee members and attendance

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

During 2016, the Committee held three meetings. Attendance was satisfactory and all meetings were quorate. The Committee updated Council on its performance after each meeting. The names of the members and attendance at meetings are recorded in Table 44.

Name of member	Number of meetings attended during 2016
Advocate MJ Ralefatane (Chairperson)	3
Mr Panajiotaki George Kyriacos	2
Mr Johannes Stephanus du Toit	3
Ms Anna Mirriam Mmanoko Badimo	2
Ms Shaila Hari	3

Table 44: Audit Committee meetings 2016

### Audit 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 unit. The Committee ensures there are

effective internal audit arrangements in place, reviews the work and findings of internal and external audits, maintains oversight on counter fraud arrangements (including the establishment of whistleblowing systems) and reviews Council's corporate governance and risk management measures.

The Audit Committee reports it has complied with its responsibility arising from the International Financial Reporting Standards appropriate to Council. The Audit Committee also reports that it has delivered on the key responsibilities as set out in the terms of reference. Compliance with a number of the key responsibilities is evidenced by the following actions:

- Regular review and monitoring of corporate risk register, with appropriate attention 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.
- Review of legal and ethical compliance including the processes for raising concerns (whistleblowing).
- 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 KwinanaEquifin Advisory Services (Pty) Limited, with Rakoma & Associates Chartered Accountants Inc. (Rakoma) serving as the external auditors.

The internal auditors attended every Committee meeting 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 2016 annual financial statements from the external auditors record no material non-compliance with prescribed policies and procedures. The unqualified/clean audit achieved for the year is evidence of the efficiency and effectiveness of internal controls.

#### Evaluation of financial statements

The Committee has:

- reviewed and discussed with Rakoma and the accounting authority the audited annual financial statements
- reviewed Rakoma's management letter and management responses
- 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 in the near 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 Rakoma's conclusions on the annual financial statements, and is of the opinion that the audited financial statements be accepted and read together with the report from Rakoma.

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



Advocate MJ Ralefatane

Chairperson of the Audit Committee

SOUTH AFRICAN PHARMACY COUNCIL  
FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2016



**South African  
Pharmacy Council**

These financial statements were prepared by: Voster Himbotwe

General Manager: Finance

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

Issued 10 May 2017

General Information	
Country of incorporation and domicile	South Africa
Nature of business and principal activities	Pharmacy industry regulator
Registered office	591 Belvedere Street Arcadia Pretoria 0083
Business address	591 Belvedere Street Arcadia Pretoria 0083
Postal address	Private Bag X40040 Arcadia Pretoria 0007
Bankers	Standard Bank of South Africa Investec Bank Limited
Auditor	Rakoma and Associates Incorporated Chartered Accountants (S.A.) Registered Auditor
Level of assurance	These financial statements have been audited in compliance with the applicable requirements of the Pharmacy Act 53 of 1974.
Preparer	The financial statements were internally compiled by: Voster Himbotwe General Manager: Finance



### Councillors' Responsibilities and Approval

The Registrar shall keep true and accurate records of all income and expenditure as required by the Pharmacy Act 53 of 1974 and is responsible for the content and integrity of the financial statements and related financial information included in this report.

It is the councillors' responsibility to ensure that the financial statements fairly present the state of affairs of the Council as at the end of the financial year and the results of its operations and cash flows for the period then ended, in conformity with the International Financial Reporting Standards (IFRS) for Small and Medium-sized Entities (SMEs). The external auditors are engaged to express an independent opinion on the financial statements.

The financial statements are prepared in accordance with the IFRS for SMEs and are based upon appropriate accounting policies consistently applied and supported by reasonable and prudent judgements and estimates.

The councillors acknowledge that they are ultimately responsible for the system of internal financial control established by the Council and place considerable importance on maintaining a strong control environment.

To enable the councillors to meet these responsibilities, the councillors set standards 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 Council and all employees are required to maintain the highest ethical standards in ensuring the Council's business is conducted in a manner that in all reasonable circumstances is above reproach.

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

The councillors are of the opinion, based on the information and explanations given by management that the system of internal control provides reasonable assurance that the financial records may be relied on for the preparation of the financial statements.

However, any system of internal financial control can provide only reasonable, and not absolute, assurance against material misstatement or loss.

The councillors have reviewed the Council's cash flow forecast for the year to 31 December 2017 and, in the light of this review and the current financial position, they are satisfied that the Council has or has access to adequate resources to continue in operational existence for the foreseeable future.

The external auditors are responsible for independently auditing and reporting on the Council's financial statements. The financial statements have been examined by the Council's external auditor whose report is presented on page 46.

The financial statements set out on pages 47 to 64, which have been prepared on the going concern basis, were approved by the councillors on 10 May 2017 and were signed on its behalf by:



Prof M Chetty (President)



Ms. NP Thipa (Treasurer)



Mr. TA Masango (Registrar)

## REPORT OF THE INDEPENDENT AUDITOR

To the councillors of the South African Pharmacy Council

We have audited the accompanying financial statements of the South African Pharmacy Council which comprise the statement of financial position as at 31 December 2016, statement of comprehensive income, statement of changes in equity and the statement of cash flows, and a summary of significant accounting policies and other explanatory notes as set out on pages 49 to 62.

### Councillors' responsibility for the Financial Statements

The councillors are responsible for the preparation and fair presentation of these financial statements in accordance with the IFRS for SMEs and in the manner required by the Pharmacy Act 53 of 1974. This responsibility includes: designing, implementing and maintaining internal controls relevant for the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies, and making accounting estimates that are reasonable in the circumstances.

### Auditors' responsibility

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

An audit involves performing procedures to obtain audit evidence about the amounts and disclosure in financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatements of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal controls relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control.

An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

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

### Opinion

In our opinion, the financial statements fairly present, in all material respects, the financial position of the South

African Pharmacy Council as at 31 December 2016 and of its financial performance and cash flows for the year ended in accordance with the IFRS for SMEs and in the manner required by the Pharmacy Act 53 of 1974.

### Emphasis of matter

As disclosed in note 21 of the financial statements there were material prior period adjustments that were processed to recognise revenue from annual and registration fees in the correct accounting periods. Our opinion is not modified in respect of this matter.

### Additional matters

We draw your attention to the matters below. Our opinion is not modified in respect of these matters.

### Other report required by the Companies Act

As part of our audit of the financial statements for the year ended 31 December 2016, we have read the Councillors' Report for the purpose of identifying whether there are material inconsistencies between this report and the audited financial statements. The Councillors' Report is the responsibility of the councillors. Based on reading this report, we have not identified material inconsistencies between the report and the audited financial statements. We have not audited the report and, accordingly, do not express an opinion on it.

### Unaudited supplementary information

The supplementary information set out on pages 63 to 64 does not form part of the financial statements and is presented as additional information. We have not audited this information and, accordingly, we do not express an opinion thereon.

*Rakoma & Associates Inc.*

Rakoma & Associates Incorporated  
Registered Auditors

Per: Collins Malunga

Chartered Accountant (SA)

Registered Auditor

Director

10 May 2017

Fourways



## Councillors' Report

The council members have pleasure in submitting their report on the financial statements of the South African Pharmacy Council for the year ended 31 December 2016.

### 1. Nature of business

The South African Pharmacy Council is a nonprofit making statutory body governed by the Pharmacy Act 53 of 1974. The objectives of the Council (as contained in the Act) may be summarised as follows:

- to assist in the promotion of the health of the population of the Republic;
- to advise the minister, or any other person, on any matters relating to pharmacy;
- to promote the provision of pharmaceutical care;
- to uphold and safeguard the rights of the general public to universally acceptable standards of pharmacy practice; and

- to establish, develop, maintain and control universally acceptable standards relating to pharmaceutical education and training, registration, practice and professional conduct.

There have been no material changes to the nature of the Council's business from the prior year.

### 2. Review of financial results and activities

The financial statements have been prepared in accordance with the IFRS for SMEs and the requirements of the Pharmacy Act 53 of 1974. The accounting policies have been applied consistently compared to the prior year.

### 3. Councillors

The councillors in office at the date of this report are as follows:

Councillors	Office	Designation	Nationality
Prof Manoranjenni Chetty	President	Non-executive	South African
Mr Douglas James Heaslet Defty	Vice President	Non-executive	South African
Ms Nocawe Portia Thipa	Treasurer	Non-executive	South African
Mr Gavin Stewart Steel	Representative from NDoH	Non-executive	South African
Prof Roderick Bryan Walker	Education Committee Chairperson	Non-executive	South African
Mr Vusi Cornelias Dlamini	Health Committee Chairperson	Non-executive	South African
Mr Tshuba Solomon Rasekele	CPI Chairperson	Non-executive	South African
Mr Rajatheran Moodley	CII Chairperson	Non-executive	South African
Ms Jacqueline Ann Maimin	Practice Committee Chairperson	Non-executive	South African
Dr Panjasaram Naidoo	CPD Committee Chairperson	Non-executive	South African
Mr Ayanda Soka		Non-executive	South African
Mr Gaoboibe Jonas Kgasane		Non-executive	South African
Mr Charles John Cawood		Non-executive	South African
Mr Panajiotaki George Kyriacos		Non-executive	South African
Ms Letty Mahlangu		Non-executive	South African
Mr Johannes Albertus Raats		Non-executive	South African
Mr Hezron Tshepo Mphaka		Non-executive	South African
Ms Helen Catherine Hayes		Non-executive	South African
Mr Mathys Jacobus Snyman		Non-executive	South African
Mr Johannes Stephanus du Toit		Non-executive	South African
Prof Shirley-Anne Boschmans		Non-executive	South African
Ms Rachel Verity Wigglesworth		Non-executive	South African
Ms Claudette Norina Jasson		Non-executive	South African
Adv Nazreen Shaik-Peremanov		Non-executive	South African
Ms Josephine Herbert		Non-executive	South African



## Statement of Financial Position as at 31 December 2016

	Note(s)	2016	Restated 2015
<b>Assets</b>			
<b>Non-current Assets</b>			
Property, plant and equipment	2	10 392 725	12 065 592
Intangible assets	3	101 638	620 923
		<b>10 494 363</b>	<b>12 686 515</b>
<b>Current Assets</b>			
Trade and other receivables	4	14 481 216	12 784 226
Cash and cash equivalents	5	38 176 849	29 417 205
		<b>52 658 066</b>	<b>42 201 431</b>
<b>Total Assets</b>		<b>63 152 429</b>	<b>54 887 946</b>
<b>Equity and Liabilities</b>			
<b>Equity</b>			
Retained income		19 820 434	12 289 768
<b>Liabilities</b>			
<b>Non-current Liabilities</b>			
Finance lease liabilities	6	10 996	-
<b>Current Liabilities</b>			
Trade and other payables	8	41 486 088	39 820 897
Finance lease liabilities	6	20 934	54 528
Provisions	7	1 813 976	2 722 753
		<b>43 320 998</b>	<b>42 598 178</b>
<b>Total Liabilities</b>		<b>43 331 995</b>	<b>42 598 178</b>
<b>Total Equity and Liabilities</b>		<b>63 152 429</b>	<b>54 887 946</b>



## Statement of Changes in Equity

	Retained income	Total equity
<b>Restated balance at 01 January 2015</b>	<b>9 138 310</b>	<b>9 138 310</b>
Profit for the year	3 151 460	3 151 460
Other comprehensive income	-	-
<b>Total comprehensive income for the year</b>	<b>3 151 460</b>	<b>3 151 460</b>
<b>Restated balance at 01 January 2016</b>	<b>12 289 770</b>	<b>12 289 770</b>
Profit for the year	7 530 664	7 530 664
Other comprehensive income	-	-
<b>Total comprehensive income for the year</b>	<b>7 530 664</b>	<b>3 151 460</b>
<b>Balance at 31 December 2016</b>	<b>19 820 434</b>	<b>19 820 434</b>



## Accounting Policies

### 1. Presentation of financial statements

The financial statements have been prepared in accordance with the IFRS for SMEs 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 company 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 determines 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.

#### Provisions

Provisions are inherently based on assumptions and estimates using the best information available. Additional disclosure of these estimates of provisions are included in note 7 - Provisions.

#### 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.

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 as follows:

Item	Depreciation method	Average useful life
Land	Straight line	Indefinite
Buildings	Straight line	20 years
Furniture and fixtures	Straight line	10 years
Motor vehicles	Straight line	4 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 Intangible assets

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

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

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

Item	Useful life
Computer software	2 years
Register (included in computer software)	5 years

### 1.4 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.

#### 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.

### 1.5 Leases

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

#### Finance leases - lessee

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

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

#### Operating leases – lessee

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

### 1.6 Impairment of assets

The Council assesses at each reporting date whether there is any indication that an asset may be impaired.

If there is any indication that an asset may be impaired, the recoverable amount is estimated for the individual asset. If it is not possible to estimate the recoverable amount of the individual asset, the recoverable amount

of the cash-generating unit to which the asset belongs is determined.

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

### 1.7 Employee benefits

Council operates a defined contribution plan, the assets of which are held in a separate trustee-administered 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.

### 1.8 Provisions and contingencies

Provisions are recognised when:

- the company has an obligation at the reporting date as a 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.

Provisions are disclosed in note 7.

### 1.9 Revenue

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

### Interest

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

**Notes to the Financial Statements**

	2016			2015		
<b>2. Property, plant and equipment</b>						
	2016			2015		
	Cost	Accumulated Depreciation	Carrying Value	Cost	Accumulated Depreciation	Carrying Value
Land	600 000	-	600 000	600 000	-	600 000
Buildings	12 864 306	(6 283 917)	6 580 389	12 815 513	(5 728 851)	7 086 662
Furniture and fixtures	2 370 247	(1 417 994)	952 254	2 383 472	(1 211 016)	1 172 456
Motor vehicles	752 893	(340 221)	412 672	752 893	(151 998)	600 895
Office equipment	1 770 366	(1 211 556)	558 810	1 860 875	(1 239 213)	621 662
IT equipment	4 430 530	(3 141 929)	1 288 601	4 308 329	(2 324 412)	1 983 917
<b>Total</b>	<b>22 788 342</b>	<b>(12 395 617)</b>	<b>10 392 725</b>	<b>22 721 082</b>	<b>(10 655 490)</b>	<b>12 065 592</b>

**Reconciliation of property, plant and equipment – 2016**

	Opening Balance	Additions	Disposals	Depreciation	Total
Land	600 000	-	-	-	600 000
Buildings	7 086 662	49 792	-	(555 066)	6 580 389
Furniture and fixtures	1 172 456	-	(4 233)	(215 970)	952 254
Motor vehicles	600 895	-	-	(188 223)	412 672
Office equipment	621 662	187 861	(2 168)	(248 546)	558 810
IT equipment	1 983 917	318 192	(18 227)	(995 282)	1 288 601
<b>Total</b>	<b>12 065 592</b>	<b>554 846</b>	<b>(24 627)</b>	<b>(2 203 087)</b>	<b>10 392 725</b>

**Reconciliation of property, plant and equipment – 2015**

	Opening Balance	Additions	Disposals	Depreciation	Total
Land	600 000	-	-	-	600 000
Buildings	7 501 322	206 734	-	(621 394)	7 086 662
Furniture and fixtures	1 030 120	369 766	(26 444)	(200 986)	1 172 456
Motor vehicles	161 513	550 657	(1)	(111 274)	600 895
Office equipment	923 420	134 630	(15 609)	(420 779)	621 662
IT equipment	1 597 180	1 304 516	(43 604)	(874 175)	1 983 917
<b>Total</b>	<b>11 813 555</b>	<b>2 566 303</b>	<b>(85 658)</b>	<b>(2 222 608)</b>	<b>12 065 592</b>

**Net carrying amounts of leased assets**

Office equipment	36 803	30 464
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**Details of properties**

Land and buildings are situated at 591 Belvedere Street, Arcadia, Pretoria. The title deed number to the property is Erf 1470, Arcadia, Pretoria in the extent of 1708 (one thousand seven hundred and eight) square meters.

## Notes to the Financial Statements

	2016	2015
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**3. Intangible assets**

	2016			2015		
	Cost	Accumulated Depreciation	Carrying Value	Cost	Accumulated Depreciation	Carrying Value
Computer software	4 679 134	(4 577 496)	101 638	4 679 134	(4 058 211)	620 923

**Reconciliation of intangible assets – 2016**

	Opening Balance	Additions	Depreciation	Total
Computer software	620 923	-	(519 285)	101 638

**Reconciliation of intangible assets – 2015**

Computer software	1 147 178	289 978	(816 233)	620 923
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**4. Trade and other receivables**

Trade receivables	14 354 158	11 335 810
Deposits	11 822	11 822
VAT	63 157	232 365
Other receivables	52 079	1 204 229
	<b>14 481 216</b>	<b>12 784 226</b>

Included in the trade receivables amount is a provision for doubtful debts amounting to R 10 390 524 (2015: R 10 466 641).

**5. Cash and cash equivalents**

Cash and cash equivalents consist of:

Cash on hand	6 787	1 074
Bank balances	25 258 620	25 155 703
Short-term deposits	12 911 443	4 260 428
	<b>38 176 849</b>	<b>29 417 205</b>

Details of facilities held by the Council are as follows:

- Overdraft amounting to R1 500 000 of which the expiry date is 24/09/2017 for unforeseen emergencies. The facility had not been used at reporting date.
- Guarantees by the bank amounting to R50 000 of which the expiry date is 24/09/2017.
- Card facility by the bank amounting to R350 000 of which the expiry date is 24/09/2017.

**Notes to the Financial Statements**

	2016	2015
<b>6. Finance lease liabilities</b>		
<b>Minimum lease payments which fall due</b>		
Within one year	23 293	65 049
In second to fifth year inclusive	11 325	-
	34 617	65 049
Less: future finance charges	(2 687)	(10 521)
<b>Present value of minimum lease payments</b>	<b>31 930</b>	<b>54 528</b>
Non-current liabilities	10 996	-
Current liabilities	20 934	54 528
	<b>31 930</b>	<b>54 528</b>

**7. Provisions**
**Reconciliation of provisions – 2016**

	Opening Balance	Utilised during the year	Adjustments during the year	Total
Legal proceedings	1 158 537	(719 097)	(439 440)	-
Provisions for leave pay	1 564 216	(96 394)	346 154	1 813 976
	<b>2 722 753</b>	<b>(815 490)</b>	<b>(93 286)</b>	<b>1 813 976</b>

**Reconciliation of provisions – 2015**

	Opening Balance	Utilised during the year	Adjustments during the year	Total
Legal proceedings	1 245 625	-	(87 088)	1 158 537
Provisions for leave pay	1 426 576	(56 208)	193 848	1 564 216
	<b>2 672 201</b>	<b>(56 208)</b>	<b>106 760</b>	<b>2 722 753</b>

	2016	Restated 2015
<b>8. Trade and other payables</b>		
Trade payables	338 846	1 378 924
Income received in advance	39 668 550	38 335 933
Other payables	1 478 692	106 039
	<b>41 486 088</b>	<b>39 820 897</b>

## Notes to the Financial Statements

	2016	Restated 2015
<b>9. Revenue</b>		
Annual and registration fees	60 764 033	55 046 325
Rendering of services	273 688	146 147
Other revenue	8 667 686	7 992 391
	<b>69 705 376</b>	<b>63 184 863</b>
<b>10. Other income</b>		
Profit and loss on sale of assets and liabilities	30 270	19 383
Sponsorship	5 899 898	171 147
Other income	647 429	27 951
Insurance claim received	61 157	17 533
	<b>6 638 755</b>	<b>236 014</b>
<b>11. Operating profit</b>		
Operating profit for the year is stated after accounting for the following:		
Profit/(loss) on disposal of assets	30 270	19 383
Amortisation of intangible assets	519 285	816 233
Depreciation on property, plant and equipment	2 203 087	2 228 608
Employee costs	37 787 180	34 539 763
Research and development costs	406 360	49 286
<b>12. Investment revenue</b>		
<b>Interest revenue</b>		
Bank	2 463 804	1 478 542
<b>13. Finance costs</b>		
Finance leases	2 479	226 679
Bank	3 532	5 562
	<b>6 011</b>	<b>232 241</b>
<b>14. Auditor's remuneration</b>		
Fees	172 831	161 898

Notes to the Financial Statements

	2016	2015
<b>15. Cash generated from operations</b>		
Profit before taxation	7 530 664	3 151 460
<b>Adjustments for:</b>		
Depreciation and amortisation	2 722 370	3 044 842
(Profit) loss on sale of assets	(30 270)	(19 383)
Interest received	(2 463 804)	(1 478 542)
Finance costs	6 011	232 241
Movements in provisions	(908 777)	50 552
<b>Changes in working capital:</b>		
Trade and other receivables	(1 696 991)	(2 292 789)
Trade and other payables	1 665 191	11 396 806
	<b>6 824 395</b>	<b>14 085 187</b>

**16. Commitments**

**Authorised capital expenditure**

**Committed but not contracted**

Property, plant and equipment	3 550 054	4 660 000
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This committed expenditure relates to plant and equipment and will be financed by funds internally generated.

**Operating leases - as lessee (expense)**

**Minimum lease payments due**

- within one year	23 293	65 049
- in second to fifth year inclusive	11 325	-
	<b>34 617</b>	<b>65 049</b>

**17. 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 the Registrar.

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

## Notes to the Financial Statements

	2016	Restated 2015
<b>Related party transactions</b>		
Allowances	652 360	694 215
Committee meeting expenses	316 963	274 039
Council and sub-committee member fees	379 338	362 342
Locum fees	143 474	133 406
Preparation fees	89 150	86 288
Transport	830 290	841 792

**18. 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.

**19. Events after the reporting period**

There were no adjusting events after the reporting period.

In February 2017 Council signed a contract to purchase properties Erf 30 and Portion 1 of Erf 35 in Hatfield, Pretoria for future development at R15 million to address problems of office space and parking for staff, public and pharmacy professionals. The purchase was financed from savings that had been made over prior periods.

**20. Financial risk management**

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

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

**Liquidity risk**

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

**Interest rate risk**

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

**Credit risk**

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

As at 31 December 2016, the carrying values of trade payables, cash and accrued expenses are assumed to approximate their fair values due to the short-term maturities of these financial statements.



## Detailed Income Statement

	Note(s)	2016	2015
<b>Revenue</b>			
Annual and registration fees		60 764 003	55 046 325
Examination fees		273 688	146 147
Other revenue		8 667 686	7 992 391
	9	69 705 376	63 184 863
<b>Other income</b>			
Profit and loss on sale of assets		30 270	19 383
Sponsorship		5 899 898	171 147
Other income		647 429	27 951
Insurance claim received		61 157	17 533
	10	6 638 755	236 014
<b>Investment income</b>			
Interest received		2 463 804	1 478 542
	12	2 463 804	1 478 542
<b>Expenses (refer to page 64)</b>		<b>(71 271 259)</b>	<b>(61 515 718)</b>
<b>Operating profit</b>	11	<b>7 536 676</b>	<b>3 383 702</b>
Finance costs	13	(6 011)	(232 241)
<b>Profit for the year</b>		<b>7 530 664</b>	<b>3 151 460</b>

The supplementary information presented does not form part of the financial statements

## Detailed Income Statement

	Note(s)	2016	2015
<b>Operating expenses</b>			
Advertising and promotions		(157 405)	(146 673)
Allowances		(652 360)	(694 215)
Auditors remuneration	14	(172 831)	(161 898)
Bad debts and provision for doubtful debts		(1 878 138)	(5 536 202)
Bank charges		(591 327)	(639 503)
Cleaning		(27 366)	(28 330)
Computer expenses		(3 510 665)	(2 155 509)
Committee meeting expenses		(316 963)	(274 039)
Conferences		(7 327 530)	(210 098)
Consumables		(111 464)	(136 024)
Council and sub-committee member fees		(379 338)	(362 342)
Curriculum development		(2 162 135)	(1 440 282)
Depreciation, amortisation and impairments		(2 722 370)	(3 044 842)
Disciplinary fees		(55 467)	(48 765)
Employee costs		(37 732 696)	(34 539 763)
Inspection fees		(3 381 540)	(1 946 645)
Insurance		(222 768)	(278 604)
Tax adjustments/ re-assessments - SARS		(445 901)	(157 639)
Lease rentals on operating lease		(421 077)	(552 497)
Legal expenses		(31 000)	(412 315)
Locum fees		(143 474)	(133 406)
Office expenses		(1 206 675)	(1 290 449)
Postage		(677 111)	(862 660)
Preparation fees		(89 150)	(86 288)
Printing and stationery		(1 096 697)	(960 003)
Repairs and maintenance		(954 667)	(1 225 810)
Research and development costs		(406 360)	(49 286)
Security		(334 461)	(358 714)
Telephone and fax		(1 933 159)	(1 879 995)
Training		(605 434)	(451 263)
Transport expenses		(830 290)	(841 792)
Utilities		(693 439)	(609 869)
		(71 271 259)	(61 515 718)

The supplementary information presented does not form part of the financial statements

## GLOSSARY OF TERMINOLOGY

AQP	Assessment quality partner
BCP	Business continuity plan
BHF	Board of Healthcare Funders
CEO	Chief Executive Officer
CHE	Council on Higher Education
CII	Committee of Informal Inquiry
CFI	Committee of Formal Inquiries
CFO	Chief Financial Officer
COO	Chief Operating Officer
CPD	Continuing professional development
CPI	Committee of Preliminary Inquiry
CSR	Communication and Stakeholder Relations
DB	Defined benefit
DC	Defined contribution
DoH	Department of Health
EAP	Employee assistance programme
ETD	Education, training and development
EXCO	Executive Committee
FET	Further education and training
FIP	International Pharmaceutical Federation
FSB	Financial Services Board
GPE	Good pharmacy education
GPP	Good pharmacy practice
HEQSF	Higher Education Qualifications Sub-Framework
HET	Higher education and training
HWSETA	Health and Welfare Sector Education Training Authority
IFRS	International Financial Reporting Standards
IT	Information technology
LS&PC	Legal Services and Professional Conduct
MCC	Medicines Control Council
MEC	Minister of the Executive Council
MoU	Memorandum of understanding
NDoH	National Department of Health
PALPB	Pharmacist's assistant learner post-basic
PCDT	Primary care drug therapy
PT	Pharmacy technician
PTA	Pharmacy technical assistant









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