

SANC Stakeholder Engagement eForum - 6 April 2022

The SANC hosted another successful virtual Stakeholder eForum on **Wednesday, 6 April 2022**, with 108 attendees present.

The following issues were discussed:

- **Briefing and update on Personal and Salary System (PERSAL) and Annual Practising Certificate (APC) implementation challenges**
- **Update on Provider Affairs matters:**
 - Accreditation certificates
 - Accredited Institutions
 - Articulation from legacy to Higher Education Qualifications Sub-Framework (HEQSF) aligned nursing qualifications
 - Education and training of Nurse Specialists
 - Nursing Education Institution (NEI) annual fee
 - Establishment of the Monitoring & Evaluation unit
- **Update on Learner Affairs matters:**
 - Professional entrance examination
 - Licensure examination
- **Update on Professional Practice matters:**
 - Update on Continuing Professional Development (CPD)
 - Development of Nursing Practice Standards by the SANC
 - Establishment of Inspectorate Section
- **Advocacy by Nurses**
- **SANC Fraud Management**
- **The new Marketing campaign for 2022: Service Delivery**
- **Update on the SANC's COVID-19 Wall of Remembrance**
- **eTransformation update.**



The Powerpoint slide presentations linked to the above items are available on the SANC website at: <https://www.sanc.co.za/stakeholder-forum/>

The SANC values and appreciates the input received from delegates and look forward to more of these engagement opportunities.



First SADC Nursing and Midwifery Regulators' Forum inaugurated-29 March 2022

Introduction

The South African Nursing Council (SANC) was the host country of a one-day inaugural virtual meeting of the Southern African Development Community (SADC) **Nursing and Midwifery Regulators' Forum** on 29 March 2022. Initiated, coordinated and hosted by the SANC, the Forum was the culmination of efforts of the Council, to bring together all Nursing and Midwifery Regulators in the SADC region to exchange and share their experiences and best practices on all aspects of Nursing and Midwifery. It was also meant to provide a premier platform to present and discuss the most recent innovations, trends, and concerns as well as practical challenges encountered, and solutions adopted in the field of governance, Nursing and Midwifery.

Attendance

The Forum was attended by 45 participants which included Council members; Executive Management (e.g. Registrars and CEOs); Senior Management and officials from the following Nursing and Midwifery Regulators:

- Nursing and Midwifery Council of Botswana;
- Democratic Republic of Congo (DRC) Nursing Council;
- Eswatini Nursing Council;
- Nursing and Midwifery Council of Malawi;
- Nursing Council of Mauritius;
- Nursing Council of Namibia;
- South African Nursing Council;
- Nursing Council of Zambia; and
- Nursing Council of Zimbabwe.

The Inaugural Meeting

The Forum meeting was divided into three sessions structured to foster discussion between participants and included the following topics:

First session

The first session, chaired by the Vice-Chairperson of the SANC, Dr Sibusiso Zuma, started with an inaugural opening and welcoming address by the Chairperson of the SANC Council, Dr Moshibudi Molepo. In her opening remarks, Dr Molepo pointed out that the purpose of the meeting was to share best practices in relation to governance, professional Nursing education and practice. She urged members of the Forum to consider and adopt the draft Interim Protocol prepared by the SANC.

The address of the Chairperson was followed by an abridged Regulators' profile of the Regulators' Council from South Africa; Eswatini; Botswana; Malawi, and Zambia.

Second session

The second session, chaired by Dr Zuma, started with the presentation of the draft SADC Nursing and Midwifery Regulators' Interim Protocol by Ms Sizo Mchunu, SANC Registrar and CEO. The Forum meeting resolved to adopt the draft Interim Protocol subject to certain proposed amendments provided by members.

Issues on adoption of the protocol included but were not limited to:

- Forum name: SADC Nursing and Midwifery Regulators' Forum;
- The Forum would be comprised of Nursing and Midwifery Regulators who are signatories to the protocol;
- The SANC, deputised by Nursing and Midwifery Council of Malawi, would assume the Chairpersonship of the Forum for a period of 2 years as the Forum was in its 'building phase';
- The frequency of the Forum meetings would be on 6-month intervals (3 virtual meetings and 1 physical meeting);
- Regulators' Councils (namely, signatories to the protocol) would have one voting right per country on any matter;
- Registrars or their designate and Chairpersons or their designate and relevant Council/Board members or relevant Executive and Senior Managers would attend the meetings as participants. The Forum agreed that the Registrars of the Regulators would be signatories to the protocol (unless the Chairperson is given authority, or the relevant person is designated where the country has an umbrella Council).

The adoption of the draft Interim Protocol was followed by an item on adoption of corporate identity for the Forum wherein the SANC presented 5 proposals (logos) in this respect. The Forum noted that SANC would, once corporate identity is adopted, create logos, electronic letterhead,

presentation templates and an email signature related to the adopted corporate identity. The Forum afforded members an opportunity to review the proposals and submit their inputs within a period of 1 month on their preferred logo.

Third session

The third session, chaired by the President of the Nursing Council of Namibia, Ms Fransina Tjituka, focused on items dealing with "setting a Regional Agenda – Broad Strokes" and "summary of day's events". On the first issue, it was agreed that the signatories to the protocol would collectively develop a Regional Agenda for the Forum and the items would be discussed at the first ordinary meeting of the Forum.

The SANC Registrar and CEO, Ms Mchunu presented the following summary of the day's events:

- Agreement on the purpose for the establishment of the Nursing and Midwifery Regulators' Forum;
- Approval of the draft Interim Protocol subject to the proposed amendments;
- Presentations on best practices by Regulators (abridged Regulators' Profile) be submitted to the Secretariat of the Forum for circulation to other members;
- Members to submit inputs on the proposed corporate identity for the Forum so that all inputs could be consolidated with a view to finalise the document;
- SANC to assist with development/creation of logos, electronic letterhead, presentation template and email signature once the proposed corporate identity is adopted;
- Members to develop a Regional Agenda for the Forum in consultation with their respective constituencies; and submit broad strokes to the Secretariat;
- The report of the meeting to be shared with other SADC Nursing and Midwifery Regulator's Councils that did not attend the inaugural meeting;
- Contact details of the SADC Nursing and Midwifery Regulator's Councils to be shared among the members; and
- The next meeting of the Forum to take place in September 2022.

Closure

The one-day inaugural virtual meeting ended with the delivery of a vote of thanks by Dr Molepo. She thanked all members of the Nursing and Midwifery Regulators' Forum present for their invaluable inputs made at the meeting and their sacrifice to attend the meeting. She expressed hope that all members of the Forum would be able to attend the next meeting scheduled for September 2022.

Impairment Committee Findings – Poor Management of Scheduled Substances/Medicines in Health Establishments

Below is the circular that was issued on 25 March 2022 for the attention of all stakeholders:



CIRCULAR 4/2022

To: National Department of Health
Provincial Departments of Health
Private Health Care Providers
All stakeholders

SUBJECT: IMPAIRMENT COMMITTEE FINDINGS: POOR MANAGEMENT OF SCHEDULED SUBSTANCES/
MEDICINES IN HEALTH ESTABLISHMENTS

1. PURPOSE

- 1.1 Share the findings/trends of the Impairment Committee (IC) regarding mismanagement of scheduled substances/medicines with the National Department of Health, Provincial Departments of Health, Private Health Care Providers and other relevant stakeholders.
- 1.2 To remind Registered Nurses and/or Midwives of their role in managing scheduled substances/medicines in health establishments in line with relevant policies and protocols.

2. BACKGROUND

- 2.1 The IC is one of the standing committees established by the South African Nursing Council (SANC) in terms of section 51 of the Nursing Act, 2005 (Act No.33 of 2005). The Committee is appointed to manage practitioners who are registered in terms of section 31 (1) of the Act, who are deemed unfit to practice nursing due to disability or impairment. Most of the cases received by IC relate to abuse of scheduled substances/medicines. In dealing with these cases, the Committee has noted with concern the deteriorating vigilance in the management of scheduled substances/medicines in healthcare establishments, both public and private, which leads to abuse of these substances/medicines by Health Care Professionals.
- 2.2 On analysis of the reported cases, the IC established that practitioners had access to these substances/ medicines in any of the following ways:
 - When Registered Nurses and/or Midwives issue and administer prescribed scheduled substances/ medicines alone.
 - Scheduled substances/ medicines cupboard keys not kept in line with applicable policies.
 - Scheduled substances/ medicines not co-checked during hand over and in every shift change, leaving discrepancies to go unnoticed.
 - Counting and recording of the quantities of scheduled substances/ medicines administered not done in line with applicable institutional policies or common best practices

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Chairperson: Dr M Molepo, Vice Chairperson: Dr S Zuma, Registrar & CEO: Ms S Mchunu

IMPAIRMENT COMMITTEE FINDINGS: POOR MANAGEMENT OF SCHEDULED SUBSTANCES/MEDICINES IN HEALTH ESTABLISHMENTS

- Prolonged use of prescribed scheduled substances/ medicines, which leads to dependency. For example, Registered Nurses and/or Midwives who were involved in car accidents or have had major operations which lead to addiction and abuse.

3. TELL-TALE SIGNS OF NURSE PRACTITIONERS WHO MAY BE ABUSING SCHEDULED SUBSTANCES/ MEDICINES

The following are some of the warning signs that the nurse may be using or addicted to scheduled Substances or medicines:

- 3.1 Scheduled substances/ medicines to be discarded kept in a syringe for no apparent reason;
- 3.2 Registered Nurse and/or Midwife frequently borrowing scheduled substances/ medicines from other wards or visiting the wards/ healthcare establishments at awkward times;
- 3.3 Registered Nurse and/or Midwife requesting colleagues to countersign in the register for scheduled substances/ medicines which they did not witness being dispensed;
- 3.4 Inaccurate recording and questionable entries;
- 3.5 Erasing or 'overwriting' of drug book entries, instead of following standard operating procedures;
- 3.6 Registered Nurse and/or Midwife often volunteering to administer scheduled medications; and
- 3.7 Registered Nurse and/or Midwife frequently offering to count scheduled substances/ medicines, to make sure the count is correct.

4. ROLE OF PRACTITIONERS IN MANAGEMENT OF SCHEDULED SUBSTANCES/ MEDICATIONS

- 4.1 It remains the obligation of the Registered Nurse and/or Midwife to ensure that all scheduled substances/medicines are ordered, controlled, administered and disposed of in terms of the given protocols, policies and procedures of the institution.
- 4.2 Registered Nurses and/or Midwives must ensure that Enrolled Nurses/Nursing Auxiliaries ARE NOT allowed to keep the keys to the controlled medicines and substance cupboard and to check and administer scheduled medicines alone.
- 4.3 Scheduled medicines must be prescribed by a doctor except in emergency situations as per institutional protocol.
- 4.4 Registered Nurses and/or Midwives are personally liable for all unprofessional conduct while performing their duties.
- 4.5 The person in charge of the ward or nursing unit will remain accountable for all nursing care provided.

5. ROLE OF NURSE MANAGERS IN MANAGEMENT OF SCHEDULED SUBSTANCES/ MEDICATIONS

- 5.1 Nurse Managers must develop and implement policies and procedures with regards to the ordering, safe keeping and administration of scheduled substances/ medicines.
- 5.2 There should be strict monitoring of compliance to policies and procedures to assist Nurse Managers to prevent possible addiction and/or abuse.
- 5.3 Nurse Managers must report incidences of alleged addiction or abuse to the SANC, so that the alleged practitioner is managed under the Impairment Programme, failure of which, the Nurse Manager will be charged for unprofessional conduct.

SANC Circular 4 of 2022 Cont.

IMPAIRMENT COMMITTEE FINDINGS: POOR MANAGEMENT OF SCHEDULED SUBSTANCES/MEDICINES IN HEALTH ESTABLISHMENTS


6. The contents of this circular must be brought to the attention of all practitioners and all managers in all health establishments.
7. For further information in respect of this circular, kindly contact Dr NJ Muswede, Senior Manager: Professional Practice at jmuswede@sanc.co.za or Tel: 012 420 1008.



MS SA MCHUNU
REGISTRAR AND CEO
SOUTH AFRICAN NURSING COUNCIL

DATE 25/03/2022

- END -



PEOPLE ONLY SEE whats
on the surface, they do
not see the **SACRIFICES**
YOU HAD TO MAKE

WE SALUTE those who
sacrificed their lives to
save the **LIVES OF**
THEIR PATIENTS

SANC Marketing Campaign for 2022/23:

SERVICE DELIVERY

The SANC Council has included effective service delivery as one of its strategic objectives in its 2018-2023 Strategic Plan.

With the introduction of new service delivery channels such as LiveChat, Facebook, service-oriented emails and the business portal on the website, the SANC is experiencing a definitive shift in the service and communication channels that its clients use. There is a general perception amongst the SANC's clients on Facebook that the service delivery has improved, though there is still room for improvement.

With several service improvement interventions in process, it is now important to alert the SANC's clients about these improvements to service delivery as it has a direct impact on the image of the SANC and the perception of its brand.

Campaign strategy

The campaign will focus on the SANC employees (internal) as well as stakeholders (external). The SANC employees are the primary stakeholders responsible for service delivery and will thus be targeted first.

The Communication and Marketing Strategy for SANC Service Delivery will create awareness, educate, remind and in the case of SANC employees, reward the desired behaviour.

Key objectives of the Campaign

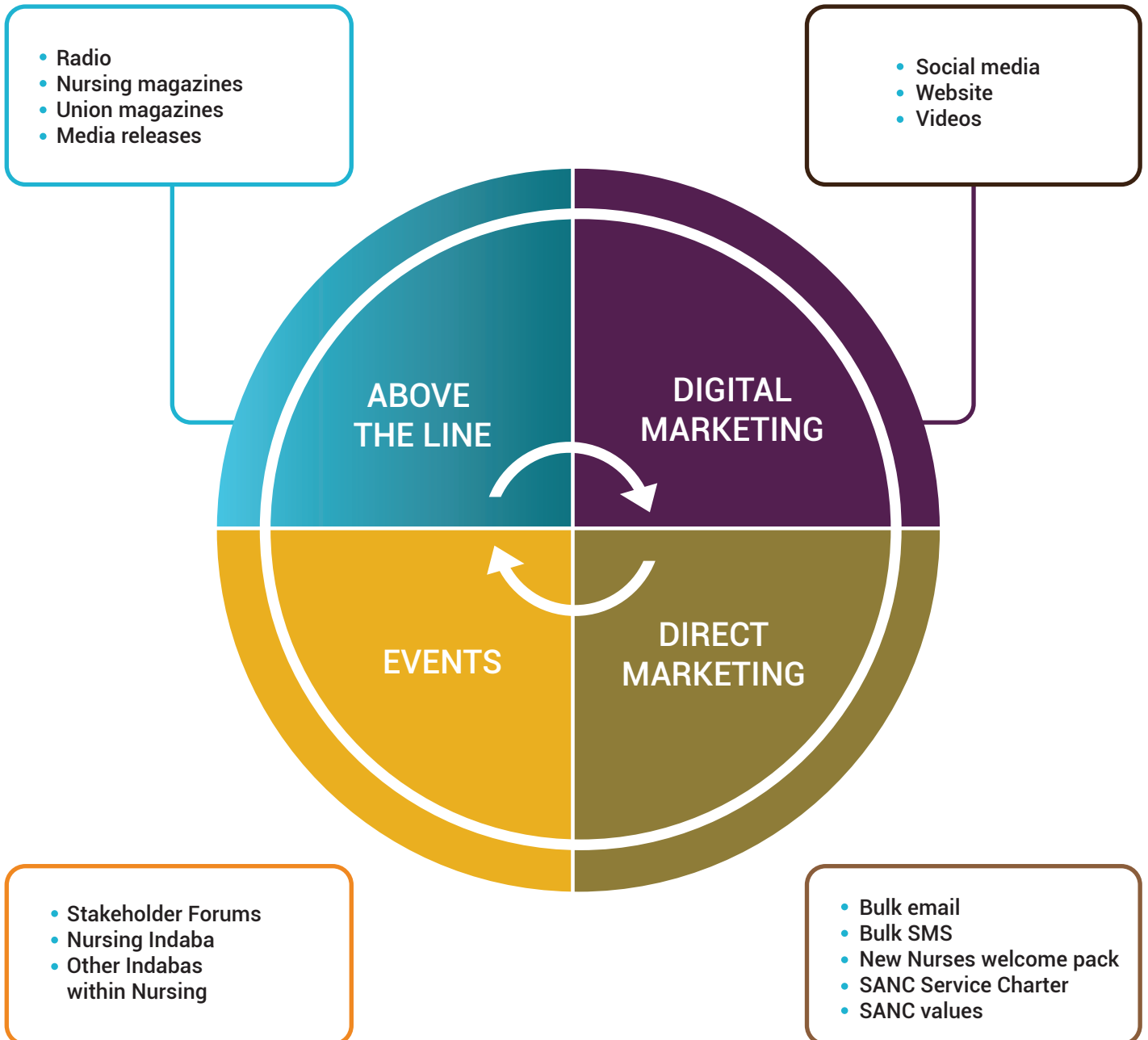
- To target the SANC employees first by way of a change management plan and training to ensure buy-in and compliance;
- To support the SANC brand and strengthen brand loyalty through the marketing of the SANC's effective service delivery; and
- To link the marketing campaign to the SANC Values: **ACPRIQ - Advocacy, Caring, Professionalism, Relevance, Innovation and Quality.**

The SANC's Customer Service Vision



Channels

The following channels will be used to achieve the campaign objectives:



Service Standards Charter

As part of the Council's strategic plan, the SANC is in the process of developing a Service Standards Charter, applicable to the entire organization. The SANC Service Standards Charter will stipulate the Council's service standards, contact details as well as mechanisms of redress within the service areas.

THE SANC VALUES ACPRIQ



South African Nursing Council
Regulating nursing, advocating for the public



Advocacy

promoting the SANC, its brand and services to all stakeholders,



Caring

about each other, clients and the organisation's purpose.



Professionalism

maintain a high level of professionalism in all areas of our day-to-day work.

Relevance

commit to being an integral part of the organisation and its future.



Innovation

consistently and intentionally introduce new ideas, products, processes and procedures to ensure the organisation meets the needs of our clients.



Quality

ensure high value in all deliverables and service delivery.



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Change Management Programme – Service Delivery

The SANC most vital asset is its clients. Client service is an integral part of each position at the SANC, not an extension of it. Change management is the process of helping employees and/or other stakeholders understand and adopt an organizational change. It is important to provide reasons for the change and ensure adequate resources are in place to effect the change. As mentioned under "Service Standards Charter" on page 8 of this newsletter, the SANC is in the process of developing a Service Standards Charter, applicable to the entire organisation.

Consequently, the SANC is embarking on a change management programme to improve its service delivery across all platforms within the organisation and in support of the requirements of the SANC Service Standards Charter.

Timeline

The Values Campaign, Change Management Programme and Marketing Campaign will run concurrently and be launched as of April 2022.

PILOT INSPECTIONS VISITS

In January 2022, the SANC Council approved the Nursing Practice Standards and the pilot roll out implementation plan. A purposive sampling approach was adopted in determining the health establishments to be inspected. The purpose of the pilot inspection visits is to test the developed tools and determine their applicability in practice, in line with the approved policy and Standard Operating Procedures (SOPs). The standards were developed by a diverse Technical Working Group (TWG), to ensure an inclusive process in standards development.



Some of the TWG members who participated in the Development of Nursing Practice Standards with the Inspection Team

The pilot inspections are already underway, conducted by the Inspectorate Section, a newly established section within the Professional Practice Department. Lessons learnt from the pilot will inform the review and finalisation of the Nursing Practice Standards, that will be used to inspect all health establishments to improve the quality of the nursing care provision.

The Inspectorate team has inspected the following health establishments to date:

✓ **Gauteng province**

- Chris Hani Baragwanath Academic Hospital on the 16 – 18 February 2022
- Mediclinic Medforum Private Hospital on the 15 – 17 March 2022

✓ **Limpopo province**

- Rethabile Health Community Centre on the 9 March 2022.



The Inspection Team and Nursing Management Team at Chris Hani Baragwanath Academic Hospital



The inspection team and nursing management team at Medforum Private Hospital



There is general acceptance of the Nursing Practice Standards by the profession in health establishments inspected so far and valuable comments are being provided. The engagements have been fruitful for the Nurses in health establishments and the Inspectors. The Council appreciates the continued cooperation provided by Executives, Nurse Leaders and practitioners in health establishments.