



**South African Nursing Council**

*Regulating nursing, advocating for the public*

# ANNUAL **REPORT** 2023-2024

**80** *Years*  
OF SELF-REGULATION  
1944 - 2024

# SANC's

## General Information

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**South African Nursing Council**  
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# Table of Contents

## PART A: GENERAL INFORMATION

1. Message by the Chairperson of Council .....	6 - 7
2. Message by the Registrar and Chief Executive Officer.....	8 - 9
3. Report of the Chief Financial Officer .....	10 - 13
4. South African Nursing Council Councillors' Statement of Responsibility .....	14

## PART B: STRATEGIC OVERVIEW ..... 15

1. Vision, Mission, Mandate and Values .....	16
2. Legislative Mandates .....	17
3. Organizational Structure (Filled and Vacant Positions) .....	18
4. Key policy developments and legislative changes .....	19

## PART C: ORGANISATIONAL PERFORMANCE ..... 20

1. SANC Strategic Focus Areas: 2018/19 – 2023/24 FY2. ....	21
2. Overview of SANC performance 2023/2024 FY .....	22 - 36
3. Core Operations .....	37 - 51
4. Legal and Regulatory Affairs .....	52 - 54
5. Internal Audit and Risk Management .....	55 - 58
6. Corporate Services .....	59 - 71

## PART D: CORPORATE GOVERNANCE ..... 72

1. The SANC Council .....	73 - 97
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## PART E: FINANCIAL INFORMATION ..... 98

1. South African Nursing Council Councillors' Report .....	101 - 102
2. South African Nursing Council Audit and Risk Committee Report .....	103 - 105
3. Independent Auditor's Report .....	106 - 108
4. Approved Financial Statements .....	109 - 112
5. Accounting Policies .....	113 - 116
6. Notes to the Annual Financial Statements .....	117 - 137
7. Detailed Income Statement .....	138 - 139

## List of Abbreviations/Acronyms

AFS	Annual Financial Statement
APC	Annual Practicing Certificate
APP	Annual Performance Plan
ARC	Audit and Risk Committee
ATR	Annual Training Report
BCM	Business Continuity Management
BEC	Bid Evaluation Committee
CCMA	Commission for Conciliation, Mediation and Arbitration
CHE	Council on Higher Education
CoT	City of Tshwane
COLA	Cost of Living Adjustment
CPD	Continuing Professional Development
DMSA	Data Management and Statistical Analysis
EE	Employment Equity
ERM	Enterprise Risk Management
ERP	Enterprise Resource Planning
EVP	Employee Value Proposition
FY	Financial Year
HEQSF	Higher Education Qualifications Sub-Framework
HRIS	Human Resources Information Systems
HRRC	Human Resources and Remuneration Committee
IC	Impairment Committee
ICT	Information Communication Technology
IMS	Integrated Management System
MMS	Membership Management System

M&S	Medical & Surgical
MOA	Memorandum of Agreement
NDoH	National Department of Health
NDP	National Development Plan
NEA	Nursing Excellence Awards
NEI's	Nursing Education Institutions
NFP	Not for Profit
PABX	Private Automatic Branch Exchange
PCC	Professional Conduct Committee
PEE	Professional Entrance Examination
PERSAL	Personal And Salary System
PIC	Preliminary Investigating Committee
PMDS	Performance Management Development System
PMO	Project Management Office
QA	Quality Assurance
RMP	Records Management Plan
SADC	Southern African Development Community
SAQA	South African Qualifications Authority
SCM	Supply Chain Management
SMT	Senior Management Team
SP	Strategic Plan
UAT	User Acceptance Testing
WSP	Workplace Skills Plan



**South African Nursing Council**  
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## Part A

# GENERAL INFORMATION





## Message by the Chairperson

*Dr Matlou Molepo*

The year 2024 marks the 30<sup>th</sup> anniversary of South Africa's democratic dispensation. It also marks 80 years of existence of the South African Nursing Council since 1944. It is imperative to therefore reflect on the fundamental principles that underpin our democracy.

South Africa's commitment to constitutional supremacy has been influential in advancing a democratic society, one that is founded on social justice, human dignity, and equality. The South African Nursing Council as a statutory body operating under the Nursing Act, 2005 (Act No. 33 of 2005) plays an essential role in upholding the principles of the Constitution of the Republic of South Africa, 1996 and ensuring that constitutional democracy thrives. Section 27 of the Constitution provides that everyone has the right to have access to health care services, including reproductive health care services, and no one may be refused emergency medical treatment.

The SANC has an unwavering commitment to set and maintain standards of nursing education and practice and for advocating on behalf of the public in matters concerning nursing in the Republic of South Africa. For the past five years the SANC has carried the vision of ensuring excellence in professionalism and advocacy for the health care users, and the mission has been to serve and protect health care users by regulating nursing and midwifery professions.

The 2023/2024 Financial Year (FY) marks the end of the implementation of the five-year SANC Strategic Plan that was developed by the 16<sup>th</sup> Council in 2018. The FY under review was also characterized by endings as well as new beginnings - the end of term of the 16<sup>th</sup> Council (2018/19 – 2023/24) on the 22<sup>nd</sup> of August 2023, and the beginning of term of the 17<sup>th</sup> Council on the 23<sup>rd</sup> of August 2023.

### 16<sup>th</sup> Council's Five-Year Strategy

The 2023/24 FY saw the culmination of the 16<sup>th</sup> Council's five-year strategy with the following Strategic Focus Areas (SFA):

- SFA 1- **Repositioning and reengineering the organisation;**
- SFA 2- **Regulating the nursing profession; and**
- SFA 3- **Providing expert guidance on nursing related issues.**

The 16<sup>th</sup> Council achieved remarkable progress from where it started in 2018 to where it ended in 2023 and will always be known as the Council that achieved the majority of its objectives of its five-year Strategic Plan within the almost two years of the COVID-19 pandemic. Despite this life-changing event, the SANC 16<sup>th</sup> Council excelled in its performance and left the SANC with a firm foundation for the 17<sup>th</sup> Council to build on.

The following milestones were achieved amongst many during the 2023/2024 FY:

#### SFA 1 - Repositioning and reengineering the organisation

- A well-researched Strategic Plan that reaffirms the redefined vision, mission and values for the period 2024/2025 to 2028/2029 was developed by the 17<sup>th</sup> Council and the SANC Senior Management Team. The Annual Performance Plan for the 2024/2025 FY was also developed. The two strategic planning documents were developed taking into account the policy reforms which have over the years been indicative of a systemic shift towards planning and managing performance to achieve results.
- The SANC continued to foster regional collaborations through the *South African Development Community (SADC) Nursing and Midwifery Regulators Forum* which was convened successfully with the last meeting of the 2023/2024 FY held on the 20<sup>th</sup> of February 2024.
- Through sound internal controls, the SANC obtained an unqualified audit opinion with Independent Auditors expressing the opinion of fair presentation of financial statements in all material respects for the past four financial years.
- The image of the nursing profession was promoted through several initiatives during the five-year strategy including the launch of the *#bethatnurse-campaign*, the introduction of "Nursing as a career"-video and pamphlets.
- In honour of nurses who lost their lives during the COVID-19 pandemic, a Wall of Remembrance was constructed on the SANC premises and was unveiled by the then Deputy Minister of Health, Dr S Dhlomo.

## SFA 2 - Regulating the nursing profession

The Nursing Act, 2005 (Act No. 33 of 2005) prescribes the core mandate of the SANC as regulating the nursing profession by establishing and maintaining nursing education and training as well as practice standards and also advocating on behalf of the public on nursing related matters.

During the 2023/2024 financial year, the SANC ardently ensured the execution of functions towards the achievement of its core mandate and continued with enthusiasm to regulate the nursing profession:

- Central to the SANC's core mission is regulating nursing education and training. The SANC continued to implement and monitor the approved education and training standards through conducting quality control inspections during the period under review.
- Section 51 of the Nursing Act, 2005 (Act No. 33 of 2005) mandates the Impairment Committee (IC) to conduct inquiries into alleged unfitness to practice. In advocating for the public and ensuring the wellness of the nurse practitioners, the SANC ensured that nurse practitioners with physical or mental health challenges or any other condition which affirms them as impaired, were assisted and rehabilitated.
- In order to **promote evidence-based decision-making and interventions**, a Research Committee was established, and research priorities identified and shared with stakeholders.

## SFA 3 - Providing expert guidance on nursing related issues

- The SANC maintained its commitment of providing expert guidance and keeping best relations with the National Department of Health through active engagement with the Department of Health on nursing-related matters during the year under review. The reports on nursing-related matters submitted to the Minister of Health are assumed to act as a decision-making tool that can assist the Minister in making decisions based on facts and evidence.

## Other Initiatives

- In an effort to promote servant leadership, the SANC Servant Leadership research project was interpreted by *Data Management and Statistical Analysis (DMSA)* as contracted by the SANC in May – June 2023. A report with recommendations for Councillors, staff and nurse practitioners was provided and presented during the 2023/2024 FY. The SANC endeavours to develop the Servant Leadership Model and implementation plan and have the plan ultimately disseminated to key stakeholders.
- The Nursing Indaba that was held during the fiscal year under review was undeniably a very notable event that potentially had a lasting impact on nursing professionals. Meaningful connections and engagements took place as well as insightful and valuable information communicated with regards to the nursing profession, nursing practice and education and training matters.
- In enhancing nurses' motivation, the annual Nursing Excellence Awards were also hosted successfully for the first time during the Nursing Indaba with the belief and the anticipation that the initiative boosted nurses' morale

and loyalty. Nurses were recognised on the following six categories: Cecilia Makiwane Award-Nursing Practice Award, Student Community Development Award, Henrietta Stockdale Award, Lifetime Achievement Extra-Ordinary Service Award and SANC Chairperson's Award.

## Ensuring effective governance

On 23 August 2023 the Minister of Health appointed the 17th Council of the SANC. Following the appointment by the Minister, the 17<sup>th</sup> Council attended a corporate governance workshop to familiarise Council members with principles and concepts underpinning corporate governance and the role of board members in providing strategic leadership. Building on the foundation laid by the 16<sup>th</sup> Council, the 17<sup>th</sup> Council developed and finalised its five-year strategic plan (2024/2025-2028/2029) and the Annual Performance Plan for the 2024/2025 fiscal year. As the SANC move forward, informed by the SANC mandate and strategic focus, the **impact statement** of the SANC for the upcoming financial year (2024/2025) is:

***A sustainable nursing profession that cares, protects, advocates, and promotes the dignity of health care users.***

In the 2023/2024 financial year, the SANC excelled in supporting self-assessment for Council members and Committees. The Council not only met but also exceeded the planned annual target of 90% for the implementation of the Council performance improvement plan.

The South African Nursing Council (SANC) embraced an enterprise-wide approach to risk management, effectively integrating risk and opportunity management into all aspects of the planning and decision-making processes. Throughout the year, the Council conducted strategic, operational, and project risk assessments to identify and analyse risks that could impact the achievement of the Council's strategic objectives.

We remain forever indebted to our stakeholders whose invaluable input towards the regulation of nursing never waivers, and whose constructive input assists us in keeping our strategy and vision on track.

I am honoured to have been re-appointed as Chairperson of the 17<sup>th</sup> Council. I thank the 16<sup>th</sup> Council as well as the 17<sup>th</sup> Council for their engagement, guidance, leadership, commitment and passion in taking the SANC into the future.

On behalf of the Council, I would like to thank our talented Management teams and staff under the leadership of the Registrar and CEO, Prof N.G. Mtshali for their commitment, zeal and passion.

We end this year on a high note with much gratitude.



**DR MC MOLEPO**  
**SANC CHAIRPERSON**



## Message by the Registrar and Chief Executive Officer

*Prof: N.G Mtshali*

The South African Nursing Council (SANC) will be celebrating 80 years of existence as a statutory professional body on 8 November 2024. In 1944, the nursing profession in South Africa was the first in the world to obtain self-regulation and be granted autonomy in terms of the Nursing Act, 1944 (Act No. 45 of 1944). The existence of the SANC as a statutory body is therefore mandated by the Nursing Act, 1944 through an Act of Parliament. The annual report is produced in compliance with the statutory obligation of the Council to submit an annual report to the Minister of Health regarding the performance of the SANC in the year under review. It is an honour to present the 2023/24 SANC annual report, which highlights significant milestones in achieving the SANC's mandate and strategic objectives.

During the 2023/2024 fiscal year, the SANC made significant strides in fulfilling its primary mandate of regulating the nursing profession. This was accomplished by establishing and upholding rigorous standards for nursing education, training, and practice. Additionally, the SANC maintained its dedication to serving as a strong advocate for the public in matters concerning nursing.

Within the framework of the five-year Strategic Plan spanning from 2018/19 FY to 2023/24 FY, the South African Nursing Council (SANC) had adopted a "goals and strategic objectives"-approach to ensure ongoing organisational continuity. Noteworthy milestones have been attained during this reviewed period. It is my distinct pleasure to present a summary of the key accomplishments for the 2023/2024 financial year:

### Regulating Nursing Education and Training

As South Africa celebrates 30 years of democratic government this year, the nursing profession has achieved substantial progress in transforming the nursing education and training system. This includes shifting from a fragmented nursing education system, operating outside the higher education platform, to a unified system integrated into higher education. In 2019, the Minister of Health signed the first National Policy of Nursing Education and Training, providing a framework for the unified nursing education system. In the year under review, the SANC had a total of 119 accredited Nursing Education

Institutions (NEIs) under this unified system. All these NEIs offer higher education programs accredited by the Council on Higher Education and the South African Nursing Council. Graduates from these programs receive qualifications that allow them to register as nurses in categories specified in the Nursing Act of 2005.

The SANC remains dedicated to advancing the objectives outlined in the National Development Plan, with a specific emphasis on education, healthcare, and skills development. During the year under review, the SANC recorded a total of 5,214 undergraduate student registrations, indicating a 128% increase from the 2,288 students registered in the 2022/23 financial year. Furthermore, there was a notable rise in the registration of postgraduate diploma students, escalating from 357 students in 2022/23 to 671 students in 2023/24, reflecting an 87% increase.

During this reviewed period a combined total of 8,251 nurses completed their undergraduate programme, and 1,210 specialist nurses were duly registered as per the Nursing Act, following the successful conclusion of their education and training. Presently, the nurse register encompasses 271,047 nurses. With the National Health Insurance (NHI) in effect, provincial and national nursing training agendas must prioritize programmes that align with the requisite skill set for NHI implementation.

The nurses who graduated from the new undergraduate programs were required to undergo professional entrance examinations to ensure their readiness for practice. The initial cohort from the Diploma in General Nursing (R.171) and Bachelor of Nursing (R. 174) programs, as well as the Higher Certificate in Nursing (R174) group that began sitting for these exams in 2021, took the Professional Entrance Examination in May 2023. Since the introduction of these exams, pass rates ranged from 75% to 99% across all cohorts. In the 2023/2024 FY, the Council reviewed the initial implementation of the Professional Entrance Examinations, considered input from stakeholders, and decided to suspend the examinations to allow for a comprehensive review, improvement, and streamlining of the process.

During the reporting period, the Council prioritized the

accreditation of postgraduate diploma programs to improve the training of specialised nurses in the country. A total of 19 postgraduate Nursing Diploma programs were accredited successfully, including the landmark accreditation of the first-ever postgraduate diploma program in Infection Prevention and Control. This accreditation holds significant importance as nurses play a critical role in infection prevention and control within healthcare facilities, a fact underscored by the challenges posed by the COVID-19 pandemic. To contribute to addressing the shortage of Specialist nurses and Specialist midwives, the Council granted permission to NEIs to have a mid-year intake to specialist programmes on the condition that their postgraduate diploma programs have obtained accreditation from the SANC and the Council on Higher Education (CHE).

One other notable achievement during this reporting period was the signing of the Memorandum of Agreement (MOA) between the CHE and the SANC. The MOA establishes a framework for cooperation and collaboration in pursuing the respective mandates related to qualifications, quality assurance, and promotion in higher education. This emphasizes the SANC's dedication to the future of nursing education and training.

### Regulating the Nursing Practice

The protection of the public remains the Council's top priority. Under this mandate, the SANC conducted monitoring of Nursing Practice Standards at 24 health establishments to ensure the acceptability and effectiveness of the standards. The SANC used approved standards and inspection tools to assess and enforce compliance in health establishments, aiming to improve the quality of nursing care provided. The health establishments inspected include public and private hospitals, Community Health Centers, Primary Health Care clinics, and an old age home.

### Provide an effective and efficient Financial Management System.

From the 2020/2021 financial year to the 2022/2023 financial year, the independent auditors' report on the audit of the financial statements unequivocally affirmed that the SANC financial statements fairly represent the financial position of the SANC, its financial performance, and cash flows in accordance with International Financial Reporting Standards and the requirements of the Nursing Act, 2005 (Act No. 33 of 2005).

### Service delivery improvement.

During the period under review, the enhancement of service delivery remained a key focus for the SANC. The implementation of the SANC Service Standards Charter during the 2023/2024 FY was in alignment with the objectives outlined in the previous Annual Report. The SANC continued with the implementation of the Change Management Plan under the slogan *#buildingabetterSANC*. To further support this initiative, the Change Management Programme, SANC Values Campaign, and Marketing Campaign were all launched during the 2023/2024 FY.

As part of digitising the SANC systems, several online interventions were introduced contributing to more effective service delivery: A new Private Automatic Branch Exchange (PABX) system, Queueing and Rating system for walk-in clients, LiveChat through the SANC website to mention a few.

### Collaboration with partners and stakeholders

The South African Nursing Council (SANC) values the importance of maintaining open communication with stakeholders. Throughout the fiscal year, the SANC continued to collaborate with local and international partners to build trust and facilitate the exchange of ideas. The successful organisation of the Nursing Indaba and the SANC Nursing Excellence Awards marked a significant step in improving engagement with our stakeholders. The SANC Nursing Excellence Awards aim to annually recognise outstanding service by nurses in good standing with the SA Nursing Council and by Nursing Education Institutions within their respective fields.

The SANC Registrar Roadshows occurred from 12 to 15 March 2024, towards the end of the 2023/2024 financial year. These roadshows were conducted at Rob Ferreira Hospital in Mpumalanga Province and in Klerksdorp, Northwest Province. The primary objective of the roadshows is to directly communicate key SANC activities, including the Council's five-year Strategic Plan, and to address significant issues concerning nursing education, training, and practice. Additionally, the roadshows aim to enhance brand awareness and recognition, have one-on-one engagement with key stakeholders, and ultimately to provide limited-service delivery options directly to the nurses.

### Acknowledgements

I would like to extend my sincere appreciation to the Chairperson of the Council, Council members, management, staff, and all parties involved in ensuring the success of the SANC over the years, including the year under review. The SANC Management and staff are looking forward to working with the Council to operationalise and implement the evidence-based, meticulously prepared strategic planning documents produced by the 17th Council. I also want to express deep appreciation for the dedication of the nurses who, in the face of daily challenges, consistently fulfil their nursing duties with unwavering diligence.



**PROF: NG MTSHALI**  
**REGISTRAR AND CHIEF EXECUTIVE OFFICER (CEO)**





## Report of the Chief Financial Officer

*Chief Financial Officer - Mr Tumelo Mokoena CA (SA)*

### 3.1 OVERVIEW

The South African Nursing Council (SANC) is a body responsible for setting, maintaining and regulating standards of nursing education and practice in the Republic of South Africa. The Council is funded mainly through revenue generated from the rendering of various services to the nurse practitioners as well as the Nursing Education Institutions (NEIs). This is complemented by the sale of distinguishing devices to the nurse practitioners as well as through investment income that is generated from investing excess cash with the major South African banks. The Council executed its role to manage its finances effectively and efficiently and managed to report a net surplus of R60.4 million (2023: R59.5 million) during the year. This increase in net surplus for the period is equivalent to 1.5% year on year.

### 3.2 REVENUE

Total revenue earned amounted to R162.9 million (2023: R165.0 million), this represents a decrease of 1.3% year-on-year. The annual fees from nurse practitioners of R132.8 million (2023: R126.5 million) remain the core funding source for the Council. During the year under review, annual fees amounted to 81.5% (2023: 76.6%) of the total revenue generated by the Council. The restoration fees decreased to R10.2 million (2023: R10.4 million) and this represents a decrease of 1.9% over the two comparative periods. The decrease in restoration fees can be attributed to the implementation of the PERSAL deductions which had the effect of bulk payments being received directly from public health establishments and major private health providers, as opposed to receiving payments from the individual nurse practitioners. This change of the payment method allows the employers to identify nurse practitioners whose affairs are not in order with the Council and the employers are able to implement the necessary corrective action as the nurse practitioners are not allowed to practise the profession if their affairs are not in order with the Council. Furthermore, the direct payments by these employer groups also minimise the risk of late payments. It is illegal in South Africa for any nurse practitioner to practise the nursing profession if the nurse practitioners are not registered with the Council.

Registration and verification fees increased to R7.4 million (2023: R5.4 million) and R3.3 million (2023: R2.3 million)

respectively. The increase was mainly attributable to the increase in number of students who are registering for the new qualification programmes as well as the increase in the number of verifications that were performed during the year under review. Examination fees decreased to R1.1 million (2023: R1.8 million), this represents a significant decrease of 38.9% year-on-year, and this is mainly due to the drastic decline in the number students who are writing the legacy qualification programmes due to the phasing out of the legacy qualifications. In addition, there is a decline in number of foreign candidates writing the entrance examinations. Accreditation fees decreased to R2.3 million (2023: R3.2 million) during the year under review due to less accreditation visits conducted as responsible resources were assigned to clear the backlog of Post Graduate Diploma curriculum evaluations submitted by Nursing Education Institutions.

The Nursing Education Institution Annual Fee increased to R1.8 million (2023: R1.7 million) during the year under review and this is due to positive response by Nursing Education Institutions, complying to the regulation. This fee is payable by all the Nursing Education Institutions which intend to remain accredited with the Council. The Council recognised an amount of R0.8 million (2023: 9.8 million) for Other Income – Unidentified Deposits. This amount relates to the amounts that remain unclaimed over a period of three years. These amounts arise from the inadequately referenced deposits into the accounts of the Council. The Council in collaboration with major banks put measures in place to reduce the number of unidentified deposits.

Revenue from the sale of distinguishing devices showed a decrease to R3.1 million (2023: R3.7 million) due to low supplies of epaulettes from the contracted service provider. The service provider was working on improving the functionality of the epaulettes.

The Council will continue to put measures in place to improve revenue generation, revenue mix and the ultimate collection of Council revenue. It is worth noting that the phasing out of the legacy qualifications and the PERSAL deductions and direct deposits by the big Nursing Education Institutions will have an impact on the key revenue streams of the Council going forward.

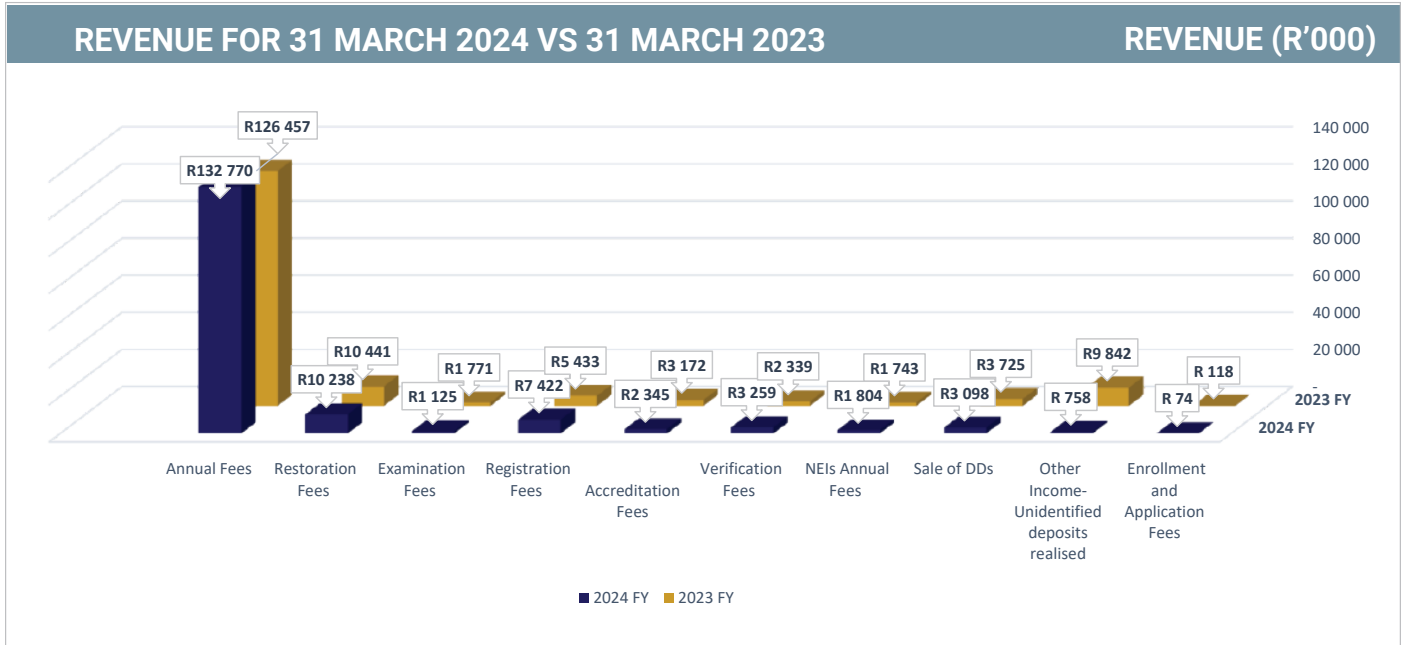


Figure 1: Revenue

### 3.3 ANNUAL FEES

The annual fee payment period opens on the 1st of July of each year, and it runs until the 31st of December each year. The nurse practitioners have an option to pay the annual fees directly through a bank account deposit or to pay at the Council premises. The Council prefers the direct bank account deposits; however, some nurse practitioners still prefer making payments at the Council premises. The main reasons behind not making direct deposits are the fear of non-delivery of Annual Practising Certificates as they would have to be delivered through the South African Post Office if the direct bank deposit payment option is used. The fear stems from challenges with the South African Post Office deliveries. Furthermore, there is also a fear of removal from the nurse register if they make a direct bank deposit and the payment reaches the Council after the cut-off date.

There are major challenges with the annual practising certificates which are sent through the South African Post Office, but this is exacerbated by the incorrect and outdated nurse practitioners' information in the nurse register. This results in Council receiving a large number of annual practising certificates which are returned undelivered. To address the issue of undelivered APC's the SANC introduced courier services, started to actively create awareness and conscientising the profession about regular updating of contact details and utilising the SANC e-Register.

The chart below depicts the number of APC's processed from April to March of each comparative year.

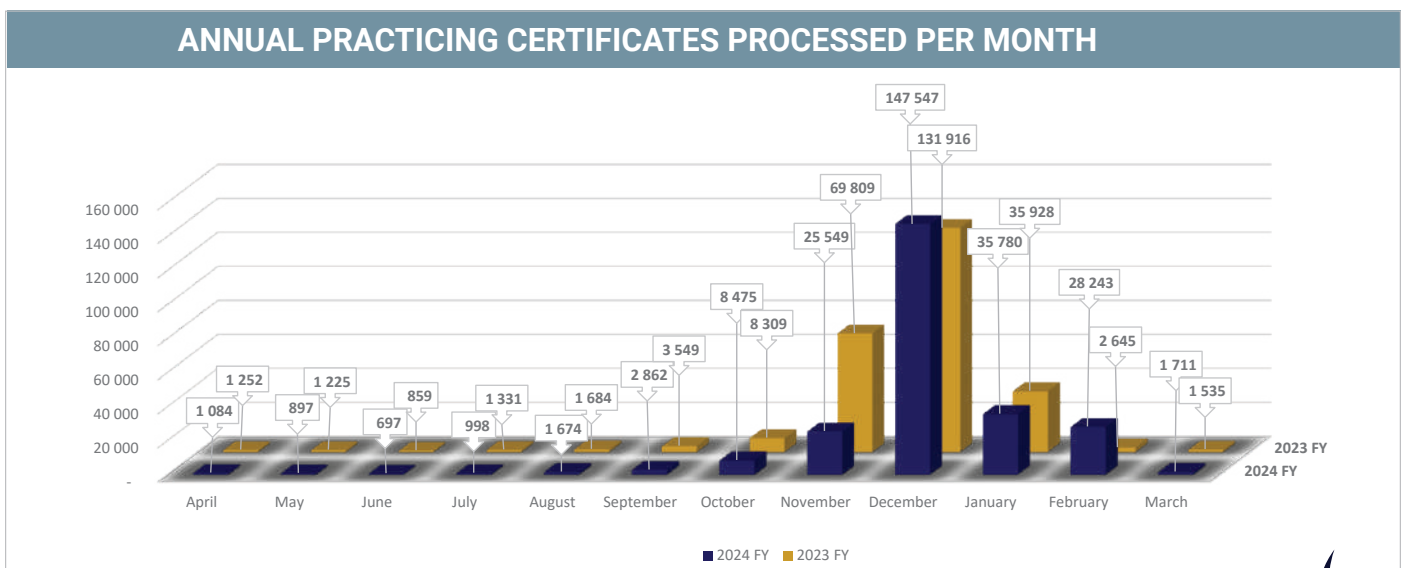


Figure 2: Annual Practising Certificates processed per month

Nurse practitioners traditionally settle annual fees towards the end of the year and the PERSAL deductions are also effected by the employers on behalf of the nurse practitioners towards the end of the year. The peak periods are in the months of November through to December. The peaks in the months of January and February are uncommon, these were caused mainly by the late submission of the supporting documents by the departments which had effected the PERSAL deductions on behalf of the nurse practitioners.

A total of 256 296 (2023: 256 706) APC's were processed in the 2024 financial year. The direct deposit payment method is still the most preferred method of payment. This payment method is utilised by all the departments that deduct annual fees through PERSAL, private organisations as well as individual nurse practitioners. The use of the direct deposit payment method for APCs processed increased to 227 028 (89%) (2023: 226 086) (88%) whilst the counter payments decreased to 29 268 (11%) (2023: 30 620) (12%). The decrease in over-the-counter payments is a good sign that the nurse practitioners are starting to embrace the direct deposit payment method, which is a payment method that the Council prefers.

The table below summarises the methods of payments used by the nurse practitioners during 2024 and 2023 financial years.

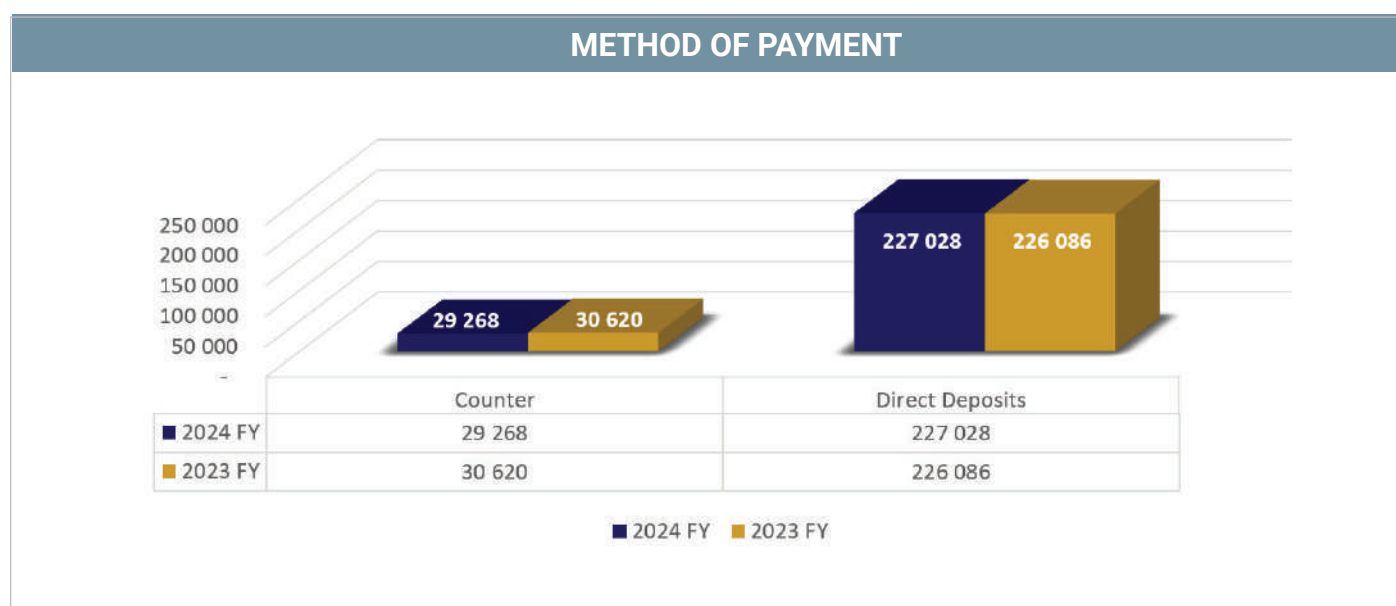


Figure 3: Method of payment

### 3.4 EXPENDITURE

Expenditure increased by 12.8% year-on-year, and this can be attributed mainly to the filling of the vacant positions within the Council, increases in computer licence fees, water and electricity costs, legal expenses, records improvement project, consulting fees and computer services costs. The employee costs remain the highest cost element within the South African Nursing Council, and this is in line with the activities of the Council. There are still several vacant positions that are expected to be filled during the 2024/25 financial year and the Council has put measures in place to ensure that all critical vacancies are filled urgently.

### 3.5 INVESTMENT INCOME

The finance income increased to R66.4 million (2023: R44.6 million) representing 48.9% increase in 2024 because of a prevailing high interest rate environment. The prime lending rate was 11.75% (31 March 2024) compared to 11.25% (31 March 2023). The Council is considering optimal investment strategies in order to grow investments.

### 3.6 OTHER INCOME

Other income increased to R1.4 million (2023: R1.3 million) which represents an increase of 7.7% over the two comparative periods. This increase is mainly due to increase in donor fund income and admission of guilty fine recognised during the period under review. There are on-going discussions regarding the Council's donor funding. Other income also includes admission of guilt fines, refunds for administration fees and impairment loss reversal, amongst others.

### 3.7 WORKING CAPITAL

The Council managed to maintain a healthy cash balance and was able to settle its liabilities as they fall due, and the Council has put measures in place to ensure that valid invoices are settled within 30 days in line with the provisions of the Nursing Act, 2005. The cash and cash equivalent balances increased by R67.3 million during the year under review and this is mainly due to increased interest income earned by the Council as well as lower spending amongst some operating expenditure and capital expenditure items.

### 3.8 CAPITAL INVESTMENTS

The South African Nursing Council invested in new laptops and office furniture to the value of R4.3 million. Furthermore, commitments to the amount of R60.8 million (R46.8 million) have been contracted with service providers. These are committed towards strategic ICT projects, distinguishing devices, capital expenditure and operational expenditure, amongst others.

### 3.9 SUPPLY CHAIN MANAGEMENT

#### 3.9.1 OPERATIONAL CHALLENGES AFFECTING THE SUPPLY CHAIN MANAGEMENT PROCESSES

The Council still operates on manual systems, and this created inefficiencies which resulted in some bids awarded after 120 days. The Council appointed a service provider during the year under review to automate supply chain management processes which will improve quality and efficiency. The service provider will develop and implement the automation during the 2024/25 financial year.





**South African Nursing Council**  
Regulating nursing, advocating for the public

## South African Nursing Council

### *Councillors' Statement of Responsibility*

The Council is responsible for the preparation and fair presentation of the annual financial statements comprising of the statement of financial position as at 31 March 2024, the statement of comprehensive income, the statement of changes in equity, and statement of cash flows for the year ended, the notes to the financial statements which include a summary of significant accounting policies and other explanatory notes, and the report of the SANC Council in accordance with the International Financial Reporting Standards.

All information and amounts disclosed throughout the annual financial statements are consistent with the annual financial statements as audited by the external auditors.

The Council is responsible for establishing and implementing a system of internal control designed to provide reasonable assurance as to the integrity and reliability of the financial statements that are free from material misstatement, whether due to fraud or error and from maintaining adequate accounting records and an effective system of risk management as well as the preparation of supplementary schedules included in these financial statements.

The external auditors are engaged to express an independent opinion on the Annual Financial Statements. The external auditors' report is presented on pages 106 to 108. The annual financial statements set out on pages 98 to 139, which have been prepared on the going concern basis, were approved by the Council on 29 July 2024.

In our opinion, the Annual Report fairly reflects the organisational performance information, operations, corporate governance, and financial affairs of the SANC for the financial year ended 31 March 2024.

**Dr MC Molepo (Chairperson)**

**Prof DR Phetlhu (Vice-Chairperson)**





## Part B

# STRATEGIC OVERVIEW



SANC Vision, Mission, Mandate and Values



**VISION**

Leadership in regulating nursing and advocating for the public.



**MISSION**

To protect health care users by regulating and advancing the nursing profession in South Africa.

SANC VALUES

<p><b>CARING</b></p> <p>Aligned to the caring ethos that underpins the nursing profession, we strive to demonstrate care through the nature and quality of interactions with internal and external stakeholders.</p>	<p><b>PROFESSIONALISM</b></p> <p>We commit to the development of self and others to foster professionalism in advancing the nursing profession.</p>	<p><b>EXCELLENCE</b></p> <p>We promote a culture of continuous improvement in our quest to become a leader in the regulation of the nursing profession.</p>
<p><b>ADVOCACY</b></p> <p>The protection of health care users is central in the rollout of all SANC initiatives.</p>	<p><b>COLLABORATION</b></p> <p>We demonstrate effective teamwork and proactive collaboration to ensure an integrated approach to service delivery.</p>	<p><b>ACCOUNTABILITY</b></p> <p>We accept responsibility for our actions, decisions, and deliver on our promises.</p>

SANC MANDATE

To regulate the Nursing and Midwifery professions by establishing and maintaining nursing education and training as well as practice standards, while advocating for the interests of the public.

## 2. LEGISLATIVE MANDATES

The South African Nursing Council (SANC) is an autonomous, financially independent, statutory professional body, initially established by the Nursing Act, 1944 (Act No. 45 of 1944), and currently operating under the Nursing Act, 2005 (Act No. 33 of 2005). Operations at the SANC are governed by various legislative frameworks, including but not limited to the following:

<b>Constitutional Mandate</b>	<p>The Constitution of the Republic of South Africa, 1996 (the Constitution), specifically:</p> <ul style="list-style-type: none"> <li>• Schedule 4 of the Constitution reflects health services as a concurrent national and provincial legislative competence.</li> <li>• Section 9 of the Constitution states that everyone has the right to equality, including access to health care services.</li> <li>• Section 24 of the Constitution stipulates that: "all South Africans have a right to an environment that is not harmful to their health or well-being, and to have the environment protected for the benefit of present and future generations."</li> <li>• Section 27 of the Constitution states that everyone has the right to have access to health care, food, water, and social security, and that no-one may be refused emergency medical treatment.</li> <li>• Section 28 of the Constitution provides that every child has the right to "basic nutrition, shelter, basic health care services, and social services."</li> <li>• Section 29 of the Constitution provides that everyone has the right to establish an independent educational institution that does not discriminate, is registered with the State, and maintains standards comparable to public educational institutions.</li> </ul>
<b>National Health Act, 2003 (Act No. 61 of 2003)</b>	Provides for, amongst others, the establishment of the Forum for Statutory Health Professional Councils, which must, among others, protect the interests of the public and health care users, as well as ensure consistency in the actions and decisions of the statutory health professional councils.
<b>National Health Amendment Act, 2013 (Act No. 12 of 2013)</b>	The act provides for the establishment of the Office of Health Standards Compliance, which, among others, liaises and establishes cooperative relationships with regulatory authorities, such as the SANC, to ensure harmonisation of standards.
<b>Nursing Act, 2005 (Act No. 33 of 2005)</b>	Provides for the continued existence of the SANC and the regulation of the nursing profession by establishing and maintaining the standards of nursing education, training, and practice.
<b>National Health Insurance Bill</b>	<ul style="list-style-type: none"> <li>• The objective of the National Health Insurance Bill is to provide universal access to quality health care for all South Africans, as enshrined in the Constitution.</li> <li>• In order to achieve Universal Health Coverage, there is a need to address structural inefficiencies within the health system; ensure accountability for the quality of the health services rendered; and ultimately to improve health outcomes particularly focusing on the poor, vulnerable, and disadvantaged groups. The National Health Insurance policy objective is to ensure that everyone has access to appropriate, efficient, affordable, and quality health services.</li> </ul>
<b>National Qualifications Framework Act, 2008 (Act No. 67 of 2008)</b>	<ul style="list-style-type: none"> <li>• Provides for the establishment of the South African Qualifications Authority (SAQA). The SANC has been accredited by SAQA as a Professional Body – the current accreditation is until 29 March 2026 (SAQA 061/21).</li> </ul>

## SANC ORGANISATIONAL STRUCTURE

### KEY:

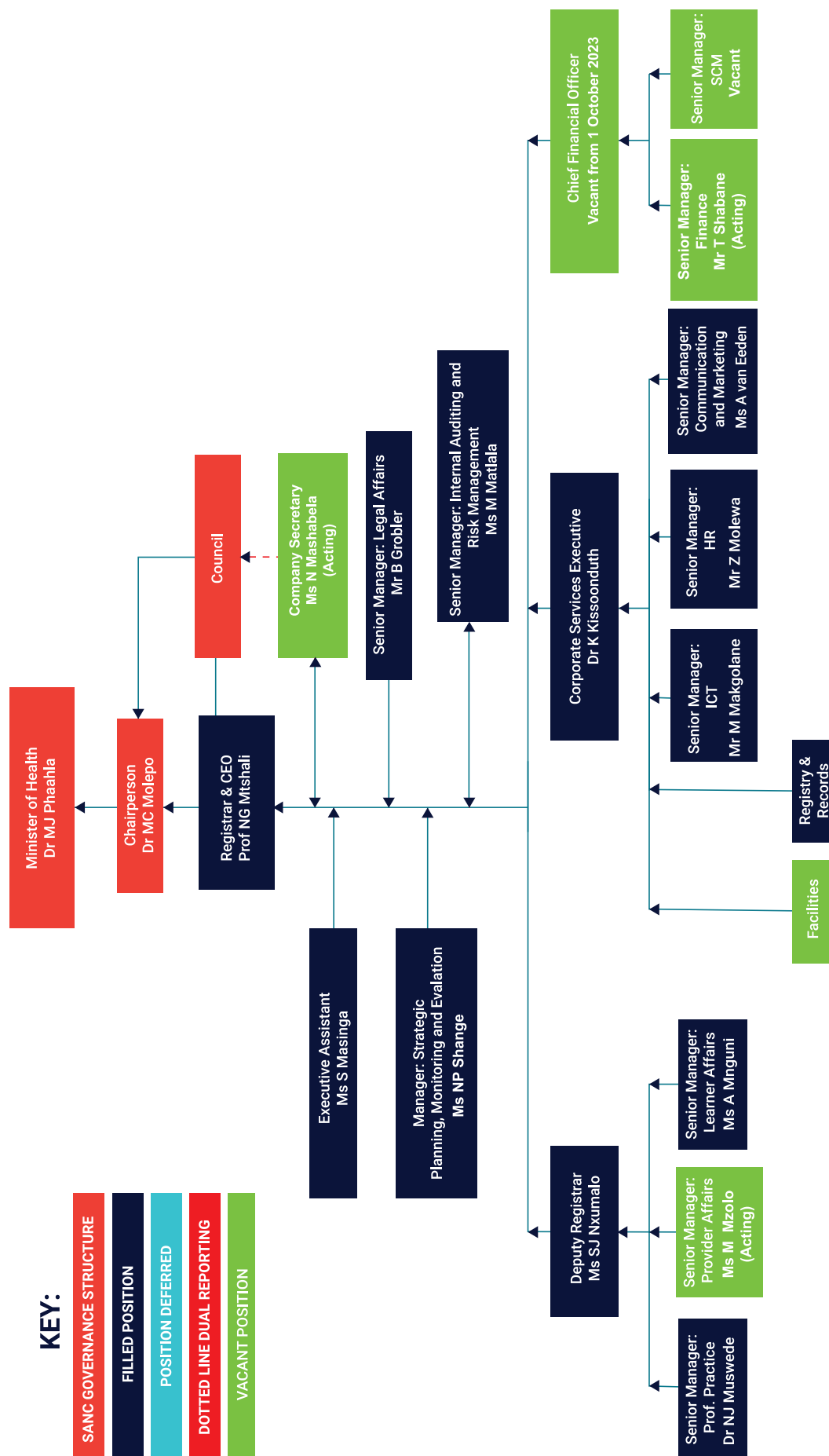


Figure 4: Macrostructure approved by Council - reflecting filled and vacant positions

#### 4. KEY POLICY DEVELOPMENTS AND LEGISLATIVE CHANGES

Key policy developments and legislative changes with implications on the SANC's mandate and operations include the following:

##### NATIONAL LEGISLATIVE CHANGES

###### Employment Equity Amendment Act, 2022 (Act No. 4 of 2022)

- The Employment Equity Amendment Act, 2022 (Act No. 4 of 2022), which introduces significant amendments to the Employment Equity Act, 1998 (Act No. 55 of 1998) was signed into law by the South African President in April 2023. According to the Department of Employment and Labour the amendment aims to promote transformation and empower the Minister of Employment and Labour (Minister) to identify national economic sectors for purposes of the administration of the Employment Equity Act. This is to be done through the setting of numerical targets for each of the identified sectors.
- Companies conducting business with Government and its institutions will require a compliance certificate in relation with provisions of the Act. The attraction and retention of talented employees remains a priority for supporting the SANC mandate. This requires the organisation to monitor legislative developments with a view to develop and review relevant human resource policies and employment equity imperatives in compliance with new legislation and regulations.

##### INTERNAL LEGISLATIVE CHANGES

The SANC, mandated by the Nursing Act, 2005 (Act No. 33 of 2005) is responsible for either publishing Regulations or for consultation with the Minister of Health responsible for publication of Regulations. The SANC engaged with the National Department of Health (NDoH) regarding regulations as follows:

###### Regulations relating to conditions under which a registered person may practice as a private practitioner.

- Regulations were published by the National Department of Health (NDoH) for public comment with a closing date of 30 September 2023.
- The SANC attended to the public comments on the regulations received from the NDoH.

###### Section 57 Regulations regarding an appeal against decision of the South African Nursing Council

- Regulations were sent on 23 October 2023 to the NDoH for public comments.

###### Regulations relating to the Institution and Conduct of inquiries into alleged unprofessional conduct of persons registered in terms of the Nursing Act, 2005 (Act No. 33 of 2005)

- Regulations were sent on 23 October 2023 to the NDoH for public comments.

###### Regulations regarding distinguishing devices for all nurses and midwives

- These Regulations were approved by the Council in January 2024 and sent to the NDoH for publication.

###### Nursing Act, 2005 (Act No. 33 of 2005)

- The project on the review of the Nursing Act, 2005 (Act No. 33 of 2005) in consultation with the NDoH is ongoing.

###### Regulations relating to conducting of inquiries into alleged unfitness to practice due to disability or impairment of persons registered in terms of the Nursing Act, 2005

- The regulations were submitted to the NDoH, but had to be reviewed and amended in 2023 due to time lapse.
- A review and amendment process is underway before submission to the SANC's Laws, Practice and Standards Committee.





## Part C

# ORGANISATIONAL PERFORMANCE



## 1. SANC STRATEGIC FOCUS AREAS: 2018 – 2023

### SFA 1 - REPOSITIONING AND RE-ENGINEERING THE ORGANISATION

#### Strategic Objectives (SOs)

To arrive at overall repositioning and reengineering of the SANC, the following strategic objectives were adopted:

- SO1 - Ensure effective governance
- SO2 - Position the SANC to become an employer of choice
- SO3 – Strengthen and sustain financial position
- SO4 - Enhance Information and Communication Technology Management solutions (ICT/IMS)
- SO5 - Enable effective knowledge management solutions
- SO6 - Improve service delivery

### SFA 2 - REGULATING THE NURSING PROFESSION

#### Strategic Objectives (SOs)

To enhance this strategic focus area during the years 2018 - 2023, the following objectives were adopted:

- SO7 - Regulating Nursing education and training
- SO8 - Regulate Nursing Practice
- SO9 - Promote Nursing Research

### SFA 3 - PROVIDING EXPERT GUIDANCE ON NURSING RELATED MATTERS

#### Strategic Objectives (SOs)

To enhance this strategic focus area in the next five years, the following objectives were adopted:

- SO10 - Promote servant leadership
- SO11 - Initiate, influence and facilitate the development of Nursing related legislative framework
- SO12 - Promote collaborations with other Nursing regulators
- SO13 - Advise and consult with the Minister of Health on Nursing related matters
- SO14 - Promote the image of the Nursing profession within the context of being a regulator

## 2. OVERVIEW OF SANC PERFORMANCE 2023/2024 FY

### INTRODUCTION

The 2023/2024 FY is the fifth and final year of the implementation of the SANC five-year strategy 2018/2019-2023/2024 FY's. During the 2023/2024 FY the SANC was directed by the SANC Annual Performance Plan which was aligned to the Strategic Focus Areas, strategic objectives and initiatives outlined in the SANC five-year Strategic Plan 2018/2019 to 2023/2024 FY's.

### PERFORMANCE REPORTING

The SANC utilised the following standards, approved by the Council, to assess the extent of the achievement against the set targets:

*Table 1: Standards used to assess the annual performance reports: 2023/24 FY.*

a)	Achieved Targets	Green	Performance target achieved
b)	Partially achieved	Amber	Performance target partially achieved
c)	Not achieved	Red	Performance target not achieved

### OVERALL ORGANISATIONAL PERFORMANCE: 2023/2024 FY

#### SANC annual performance for the APP 2023/2024 FY

The SANC has been committed to the effective and efficient execution of the five-year strategy.

The organisation scored 67% on its annual performance targets in the financial year under review as in Table 2 below:

*Table 2: Annual APP Performance 2023/2024 FY*

Planned Targets	Achieved Targets	Partially achieved	Not achieved	Deferred
42	28	12	2	0
100%	67%	28%	5%	0

### PERFORMANCE INFORMATION BY PROGRAMME (2023/2024 FY QUARTERLY REFLECTION)

The quarterly achievements against planned quarterly and annual targets in the APP are reported and presented to Council to afford Council an opportunity to engage and advise on the progress against planned targets.

The tables below present the number of planned targets per quarter of the 2023/2024 FY, the number of targets achieved, partially achieved, and not achieved as well as percentages relating to the achieved, partially achieved and not achieved quarterly targets.

PROGRAMMES			
PROGRAMME 1: GOVERNANCE DIVISION		PROGRAMME 3: FINANCE DIVISION	
PROGRAMME 2: PROFESSIONAL AFFAIRS DIVISION		PROGRAMME 4: CORPORATE SERVICES DIVISION	

Table 3: Quarter 1 and 2 Performance Information APP 2023/2024 FY

2023/2024 FY QUARTERLY ACHIEVEMENT														
		QUARTER 1							QUARTER 2					
Programmes		Achieved		Partially Achieved		Not Achieved			Achieved		Partially Achieved		Not Achieved	
	# of Indicators	#	%	#	%	#	%	# of Indicators	#	%	#	%	#	%
Programme 1	12	8	67%	2	17%	2	17%	12	4	33%	3	25%	5	42%
Programme 2	9	6	67%	1	11%	2	22%	9	6	67%	0	0%	3	33%
Programme 3	3	3	100%	0	0%	0	0%	3	3	100%	0	0%	0	0%
Programme 4	11	6	55%	3	27%	2	18%	10	4	40%	3	30%	3	30%
Totals	35	23	66%	6	17%	6	17%	34	17	50%	6	18%	11	32%

Table 4: Quarter 3 and 4 Performance Information 2023/2024 FY

2023/2024 FY QUARTERLY ACHIEVEMENT														
		QUARTER 3							QUARTER 4					
Programmes		Achieved		Partially Achieved		Not Achieved			Achieved		Partially Achieved		Not Achieved	
	# of Indicators	#	%	#	%	#	%	# of Indicators	#	%	#	%	#	%
Programme 1	16	12	75%	4	25%	0	0%	0%	5	45%	3	27%	3	27%
Programme 2	9	7	78%	1	11%	1	11%	11%	6	67%	3	33%	0	0%
Programme 3	2	2	100%	0	0%	0	0%	0%	1	50%	0	0%	1	50%
Programme 4	10	5	50%	3	30%	2	20%	20%	5	50%	3	30%	2	20%
Totals	37	26	70%	8	22%	3	8%	8%	17	53%	9	28%	6	19%

The table below presents the comparison between the overall SANC performance for 2022/2023 and 2023/2024 financial years.

Table 5: Comparison of overall SANC Performance for 2022/2023 FY and 2023/2024 financial years.

ANNUAL PERFORMANCE ACHIEVEMENT 2022/2023 FY					ANNUAL PERFORMANCE ACHIEVEMENT 2023/2024 FY				
Programmes	# of Indicators	Achieved	Partially Achieved	Not Achieved	Programmes	# of Indicators	Achieved	Partially Achieved	Not Achieved
Programme	14		4	1	Programme	19	15	4	0
(1)			29%	7%	(1)		79%	21%	0%
Programme	5	9	1	0	Programme	9	6	3	0
(2)		64%	20%	0%	(2)		67%	33%	0%
Programme	4	4	0	1	Programme	3	2	0	1
(3)		80%	0%	25%	(3)		67%	0%	33%
Programme	18	3	1	5	Programme	11	5	5	1
(4)		75%	6%	27%	(4)		45%	45%	9%
Totals	41	12	6	7	Totals	42	28	12	2
		67%	15%	17%			67%	28%	5%

Table 6: Overall Performance per Programme 2023/2024 FY

PROGRAMMES	Achieved Targets	Achieved Targets	Partially achieved	Not achieved
PROGRAMME 1: GOVERNANCE DIVISION	19	15	4	0
	100%	79%	21%	0%
PROGRAMME 2: PROFESSIONAL AFFAIRS DIVISION	9	6	3	0
	100%	67%	33%	0%
PROGRAMME 3: FINANCE DIVISION	3	2	0	1
	100%	67%	0%	33%
PROGRAMME 4: CORPORATE SERVICES DIVISION	11	5	5	1
	100%	45%	45%	9%
TOTAL	42	28	12	2
	100%	67%	28%	5%



**SANC PROGRAMME PERFORMANCE INFORMATION FOR THE 2023/2024 FY****PROGRAMME 1: GOVERNANCE**

**Purpose:** Provide strategic leadership, management, and support services to the SANC.

**Description of sub-programmes**

The programme consists of four sub-programmes which are aligned with the budget programme structure of the SANC.

The sub-programmes are:

- Leadership Management Department (including Strategic Planning, Monitoring and Evaluation section)
- Secretariat Department
- Internal Audit and Risk Management Department
- Legal Affairs Department.

Strategic Focus Area 1	Repositioning and re-engineering the organisation
Strategic Objectives	<ul style="list-style-type: none"> <li>• Ensure effective governance.</li> <li>• Promote collaborations with other Nursing regulators.</li> <li>• Advise and report to the Minister of Health on matters regarding the Nursing profession.</li> </ul>

In line with Section 4(p)(i) of the Nursing Act, 2005 (Act No. 33 of 2005) stipulating that the newly appointed Council must submit to the Minister a five-year Strategic Plan within six months of Council coming into office which includes details as to how the Council plans to achieve its objectives under the Act. The 17<sup>th</sup> Council developed the SANC five-year Strategic Plan for the period 2024/2025 to 2028/2029 in collaboration with the SANC Management. The Strategic Plan was approved by Council on the 5<sup>th</sup> of December 2023. The SANC Annual Performance Plan 2024/2025 FY was also developed and approved by Council on the 5<sup>th</sup> of December 2023.

The approved SANC budget for the 2024/2025 financial year was submitted to the Director-General: Health within 30 days of approval by the Council. To add on the achievements for the period under review, the draft Service Delivery and Budget Implementation Plan (SDBIP)/SANC Annual Operational Plan for the 2024/2025 FY was developed and submitted to the Chairperson of Council. The SDBIP serves as a management tool that facilitate the co-ordination of the SANC's resources (i.e. human, financial and physical) in order to ensure that outcomes and outputs as outlined in the Strategic Plan (SP) and Annual Performance Plan (APP) are achieved.

The SANC continued to advise and liaise with the Minister of Health on Nursing related matters during the period under review. Two reports in that regard were submitted as planned. The SANC also made tireless efforts to convene the SADC Nursing and Midwifery Regulators forum with the last meeting successfully held on the 20<sup>th</sup> of February 2024. The Servant Leadership Model was developed and approved by the 17<sup>th</sup> Council as planned in the 2024/2025 FY.

As part of stakeholder engagement the Nursing Indaba was convened successfully in May 2023 where valuable and profound information on Nursing profession, nursing practice and education and training matters were shared. The event was welcomed and appreciated by the nurse practitioners.

By the end of the financial year under review, 100% of planned organisational policies as per the policy register were reviewed. To internalise the principle that sound corporate governance is a prerequisite in promoting accountability the Secretariat Department managed to achieve 87.5% compliance with category one of compliance universe and implemented 92% of Council performance improvement plan against a target of 90%.

Strides were made to complete 100% of the Internal Audit Projects in the approved plan, however 94% (15 of 16) was achieved. The partial achievement was attributed to one audit project (revenue and income) that was not completed timeously due to high employee turnover at the co-source partner. The completion of the outstanding audit project was predicted for completion by the first quarter of the following financial year.

PROGRAMME 1: GOVERNANCE						
Sub-Programme 1.1 Leadership Management Department						
Strategic Focus Area: Repositioning and re-engineering the organisation						
Strategic Objectives	Performance Indicator	Actual Performance 2022/2023 FY	Planned Annual Target 2023/2024 FY	Actual Achievement 2023/2024 FY	Deviation from planned Target to Actual Achievement 2023/2024 FY	Reasons for Deviations
Ensure effective governance.	Strategic Plan 2024/2025 – 2028/2029 approved by Council	New Indicator	Strategic Plan 2024/2025 – 2028/2029 approved by Council	Strategic Plan 2024/2025 – 2028/2029 approved by Council	None	N/A
	Annual Performance Plan 2024/2025 approved by Council	SANC 2023/24 APP approved by Council	Annual Performance Plan 2024/2025 approved by Council	Annual Performance Plan 2024/2025 approved by Council	None	N/A
	Approved SANC Budget 2024/2025 submitted to the Director-General: Health	New Indicator	Approved SANC Budget 2024/2025 submitted to the Director-General: Health	Approved SANC Budget 2024/2025 submitted to the Director-General: Health	None	N/A
	Percentage of Draft Performance Agreements for Executive and Senior Managers submitted to the Chairperson of Council within 14 days of approval of the budget	New Indicator	100%	100%	None	N/A
	Number of Service Delivery and Budget Implementation Plan submitted to the Chairperson of Council	New Indicator	1		None	N/A
Advise and Report to the Minister of Health on Nursing related matters	Number of reports on nursing related matters submitted to the Minister of Health	2	2		None	N/A

PROGRAMME 1: GOVERNANCE						
Sub-Programme 1.1 Leadership Management Department						
Strategic Focus Area: Repositioning and re-engineering the organisation						
Strategic Objectives	Performance Indicator	Actual Performance 2022/2023 FY	Planned Annual Target 2023/2024 FY	Actual Achievement 2023/2024 FY	Deviation from planned Target to Actual Achievement 2023/2024 FY	Reasons for Deviations
Ensure effective governance	Percentage of planned quarterly performance targets achieved	68%	100%	67%	33%	Underperformance of Programmes/ Divisions contribute to the overall performance of the organisation.
	Percentage of planned organisational policies reviewed	New	100%	144%	44%	Four additional policies were reviewed as the apparent necessity was identified.
	Percentage of compliance with the National Department of Health Compliance Dashboard	New indicator	100%	100%	None	N/A
Promote servant leadership.	Servant Leadership Model Developed	New indicator	Servant Leadership Model Developed	Servant Leadership Model was developed	None	N/A
Promote collaborations with other nursing regulators	Number of SADC Nursing and Midwifery Regulators Forum	New indicator	2	2	None	N/A
	Number of Nursing Indaba's convened	New indicator	1	1	None	N/A
	Number of reports on collaborations with relevant local critical partners and stakeholders	4	2	2	None	N/A
	Number of reports on collaborations with international partners and stakeholders	New indicator	2	2	None	N/A

PROGRAMME 1: GOVERNANCE						
Sub-Programme 1.2 Leadership Management Department						
Strategic Focus Area: Repositioning and re-engineering the organisation						
Strategic Objectives	Performance Indicator	Actual Performance 2022/2023 FY	Planned Annual Target 2023/2024 FY	Actual Achievement 2023/2024 FY	Deviation from planned Target to Actual Achievement 2023/2024 FY	Reasons for Deviations
Ensure effective governance.	Percentage of Compliance with category one of compliance universe	New indicator	100%	88%	12%	The SANC's Employment Equity Plan in compliance with the Employment Equity Act was still in progress at the end of the financial year.
	Percentage of Council Performance Improvement Plan implemented	New indicator	90%	92%	2%	N/A
Sub-Pro Sub-Programme 1.3 Internal Audit and Risk Management Department						
Ensure effective governance	Percentage of Internal Audit Projects in the approved plan completed	New indicator	100%	94%	6%	One audit project was not completed timeously due to high employee turnover at the co-source partner
	Number of strategic Risk Reports submitted to ARC	New indicator	4	4	0	N/A
Sub-Programme 1.4 Legal Affairs Department						
Regulate Nursing Practice	Percentage of unprofessional conduct cases from Professional Investigating Committee (PIC) investigated	New indicator	90%	67%	33%	Capacity constraints in the office that investigates unprofessional conduct cases.

## PROGRAMME 2: PROFESSIONAL AFFAIRS DIVISION

**Purpose:** Regulate nursing education and training;  
Regulate nursing practice; and  
Promote nursing research.

### Description of sub-programmes

The programme consists of two sub-programmes which are aligned with the budget programme structure of the SANC. The sub-programmes are:

- Provider Affairs Department; and
- Professional Practice Department.

Strategic Focus Area 1	Regulating the nursing profession
Strategic Objectives	Regulate nursing education and training Regulate nursing Practice Promote nursing Research

During the financial year under review the Provider Affairs Department ensured the implementation and monitoring of the approved Nursing education and training standards by conducting quality control inspections in line with the pre-approved plan. Furthermore, audit visits were conducted at Nursing Education Institutions (NEIs) in line with the audit plan.

In pursuance of the strategic objective of regulating the nursing education and training, the SANC's Provider Affairs Department ensured that 100% of complete applications received from NEIs were accredited within a 12-month period. In the same scope 100% of complete nursing programmes were accredited within a 12-month period.

Learner Affairs registered 60% of complete nurse applications received within 90 days. The underachievement was due to the unplanned sudden increase in the number of nurse applications following the unplanned abeyance of the Professional Entrance Examination (PEE). This required the re-configuration of the I-Series system to be able to capture applications of nurses who did not sit for the PEE.

In line with the mandate of SANC of regulating the nursing profession, the Professional Practice Department monitored 24 health establishments on Nursing Practice Standards during the 2023/2024 FY. Even though the target was to investigate 90% of alleged unprofessional conduct cases and 90% of complaints relating to unfitness to practice, the Department achieved 100% on both planned annual targets. Furthermore, the Continuing Professional Development (CPD) programme piloting was conducted as planned in four provinces (Free State, Northwest, Limpopo and Northern Cape) for the financial year under review.



PROGRAMME 2: PROFESSIONAL AFFAIRS DIVISION						
Sub-Programme 2.1 Provider Affairs Department						
Strategic Focus Area: Regulating the Nursing Profession						
Strategic Objectives	Performance Indicator	Actual Performance 2022/2023 FY	Planned Annual Target 2023/2024 FY	Actual Achievement 2023/2024 FY	Deviation from planned Target to Actual Achievement 2023/2024 FY	Reasons for Deviations
Regulate nursing education and training.	Percentage of quality control inspections conducted in line with approved plan	New indicator	100%	17%	83%	The deployment of staff responsible for conducting quality inspections to Accreditation Section to increase capacity and speed up the accreditation of Post Graduate Diplomas (PGDs).
	Percentage of Nursing Education Institutions (NEIs) audit visits conducted in line with the audit plan	New indicator	100%	17%	83%	The deployment of staff responsible for NEI audit visits to Accreditation section to increase capacity and speed up the accreditation of PGDs.  N/A
	Percentage of complete applications received from Nursing Education Institutions (NEIs) accredited within a 12-month period	New indicator	100%	100%	None	N/A
	Percentage of complete nursing programmes accredited within a 12-month period	New indicator	100%	100%	None	

Sub-Programme 2.2 Learner Affairs Department						
Strategic Objectives	Performance Indicator	Actual Performance 2022/2023 FY	Planned Annual Target 2023/2024 FY	Actual Achievement 2023/2024 FY	Deviation from planned Target to Actual Achievement 2023/2024 FY	Reasons for Deviations
Regulate nursing education and training	Percentage of complete nurse applications registered within 90 days	New indicator	90%	60%	30%	Increase in the number of nurse applications following the abrupt abeyance of the PEE, and time lost while waiting for the re-configuration of the I-Series system to be able to capture applications of nurses who did not sit for PEE.
Sub-Programme 2.3 Professional Practice Department						
Regulate Nursing Practice	Number of health establishments monitored on Nursing Practice Standards	New indicator	24	24	None	
	Percentage of cases of alleged unprofessional conduct investigated	New indicator	90%	100%	10%	The Section managed to investigate all the unprofessional conduct cases received.
	Percentage of complaints, relating to unfitness to practice investigated	New indicator	90%	100%	10%	The Section managing to investigate all the complaints relating to unfitness to practice.
	Number of CPD programmes conducted	New indicator	4	4	None	N/A



**PROGRAMME 3: FINANCE DIVISION**

**Purpose:** Manage and facilitate the provision of financial accounting services.

<b>Strategic Focus Area 1</b>	<b>Repositioning and re-engineering the organisation</b>
<b>Strategic Objectives</b>	Strengthen and sustain financial position

Responding to the strategic objective of strengthening and sustaining the financial position, the Finance Department planned to develop and implement a revenue generation strategy with the aim of increasing the SANC revenue. The Finance Department worked diligently to ensure that by the end of the fiscal year the Revenue Pricing Model and Pricing Strategy was approved by Council as planned. The Revenue Pricing Model and Pricing Strategy was not approved by Council due to the dispute between the SANC and service provider that led to the delay in finalising the Revenue Pricing Model and Strategy for submission to Council for approval.

In order to provide an effective and efficient financial management system the SANC planned to maintain a minimum ratio of 3:1. The ratio as at the end of the financial year under review was 13:1. The overachievement of 10 times in excess in this respect was due to the increased cash reserves which made the Council to be highly liquid. Furthermore, the SANC achieved an unqualified audit opinion with no material findings for the 2022/2023 FY.

<b>PROGRAMME 3: FINANCE DIVISION</b>						
<b>Strategic Focus Area: Repositioning and re-engineering the organisation</b>						
<b>Strategic Objectives</b>	<b>Performance Indicator</b>	<b>Actual Performance 2022/2023 FY</b>	<b>Planned Annual Target 2023/2024 FY</b>	<b>Actual Achievement 2023/2024 FY</b>	<b>Deviation from planned Target to Actual Achievement 2023/2024 FY</b>	<b>Reasons for Deviations</b>
Strengthen and sustain financial position	Revenue Pricing Model and Pricing Strategy approved by Council	New indicator	Revenue Pricing Model and Pricing Strategy approved by Council	Revenue Pricing Model and Pricing Strategy was not approved by Council	Revenue Pricing Model and Pricing Strategy was not approved by Council	The dispute between the SANC and Service provider led to the delay in finalising the Revenue Pricing Model and Strategy for submission to Council for approval.
	Minimum current ratio of 3:1 maintained	New indicator	Minimum current ratio of 3:1 maintained	The ratio as at 31 March was 13:1	10 times in excess	Increased cash reserves made the Council to be highly liquid.
	Unqualified audit opinion with no material audit findings achieved.	New indicator	Unqualified audit opinion with no material audit findings achieved	Unqualified audit opinion with no material audit findings achieved	None	N/A

## PROGRAMME 4: CORPORATE SERVICES DIVISION

**Purpose:** Oversee all human resources related matters, provide information communication technology business enablement, oversee internal and external communication and marketing, guide and coordinate records management and services; manage and facilitate the provision of facilities services.

### Description of sub-programmes

The programme consists of three sub-programmes and two sections which are aligned with the budget programme structure of the SANC. The sub-programmes and sections are:

- Human Resources Department
- Information and Communication Technology Department
- Communication and Marketing Department
- Registry and Records Section
- Facilities Section.

Strategic Focus Area 1	Repositioning and re-engineering the organisation
<b>Strategic Objectives</b>	<ul style="list-style-type: none"> <li>• Position the SANC to become the employer of choice</li> <li>• Enhance Information and Communication Technology management solutions (ICT/IMS)</li> <li>• Enable effective knowledge management solutions</li> <li>• Improved service delivery</li> <li>• Promote the image of the SANC and of the nursing profession within the context of being a regulator</li> </ul>

For the period under review, to implement a fit-for-purpose organisational structure, the Human Resources Department planned to fill 90% of funded vacant posts. The actual achievement on the annual planned target of filling 90% of funded vacancies was 65% (22 of 34). The partial achievement was largely attributed to some of the hard to fill positions which were advertised several times with no success, headhunting process not yielding the desired results, re-prioritisation of some of the vacant and funded positions in line with the changing business processes at the SANC, and capacity constraints.

The Information and Communication Technology Department functioned towards achieving exceptional results in enhancing information management systems and processes. The Department planned to implement 100% of the SAGE ERP Finance Module by the end of the 2023/2024 FY. Three milestones out of 5 were achieved, two milestones could not be achieved due to the unresponsive market leading to the delays in the appointment of the service provider which affected some of the planned milestones of the SAGE ERP Finance Module deliverables.

The following milestones in the Finance Sage ERP deliverables were completed:

- Fixed Asset Blueprint module;
- User Acceptance Testing (UAT) for fixed assets completed and signed off;
- Migration of fixed asset module from Quality Assurance (QA) environment to live/production environment.

The ICT Department planned to achieve 100% compliance with deliverables in the Membership Management System (MMS) however, there was no achievement due to the unresponsive market leading to the delay in the appointment of the service provider in the 2023/2024 FY which then affected the rest of the MMS project deliverables.

Determined to enhance secured SANC information assets, the ICT Department planned to improve the SANC domain and data security. That was displayed by the achievement of 100% of targets on the cyber security remediation plan deliverables implemented as planned for the financial year under review.

Working towards the promotion of the image of the SANC and of the nursing profession, the Communication and Marketing Department planned to implement a nursing excellence recognition programme. The Department initially planned to host the

annual Nursing Excellence Awards (NEA) during the 2022/2023 FY however, the awards could not be hosted due to COVID-19 restrictions. In that regard, the target was deferred to the financial year under review with the purpose to host the awards as part of the 2023/2024 FY Nursing Indaba.

The Communication and Marketing Department reinforced the awareness of the SANC values amongst the SANC personnel by way of an organisational values drive. Furthermore, the Department planned to improve service delivery at the SANC through the implementation of a Change Management Plan. Lastly, the Department planned to promote the SANC service delivery initiatives through the implementation of the Communication and Marketing Plan. All the annual targets planned by the Communication and Marketing Department were achieved as follows:

- The Annual Nursing Excellence Awards (NEA) were hosted in May 2023;
- 100% of SANC values were implemented in line with the approved plan;
- 100% of the Change Management Plan: Service Delivery was implemented; and
- 100% of the Communication and Marketing Campaign Plan on planned service delivery initiatives were implemented.

PROGRAMME 4: CORPORATE SERVICES DIVISION						
Sub-Programme 4.1 Human Resources Department						
Strategic Objectives	Performance Indicator	Actual Performance 2022/2023 FY	Planned Annual Target 2023/2024 FY	Actual Achievement 2023/2024 FY	Deviation from planned Target to Actual Achievement 2023/2024 FY	Reasons for Deviations
Ensure effective governance	Percentage of funded vacancies filled	New indicator	90%	65%	25%	Some of the hard to fill positions were advertised several times with no success, headhunting process not yielding the desired results, re-prioritisation of some of the positions in line with the changing business processes at the SANC, and capacity constraints.
Position SANC to become the employer of choice	Percentage of deliverables in each phase of the Project Implementation Plan achieved	New indicator	100%	75%	25%	The deliverables that were linked to the approval of the Organisational structure by Council. The structure had to be reviewed in line with the changing business processes at the SANC before approval by Council.

### Sub-Programme 4.2 Information and Communication Department

Strategic Objectives	Performance Indicator	Actual Performance 2022/2023 FY	Planned Annual Target 2023/2024 FY	Actual Achievement 2023/2024 FY	Deviation from planned Target to Actual Achievement 2023/2024 FY	Reasons for Deviations
Enhance Information and Communication Technology Management solutions (ICT/IMS)	Percentage of planned SAGE ERP Finance Module deliverables implemented	New indicator	90%	65%	25%	The unresponsive market led to the delay in the appointment of the service provider and affected the implementation of some of the planned milestones of the SAGE ERP Finance Module deliverables.
	Percentage of Membership Management	New indicator	100%	75%	25%	The unresponsive market led to the delay in the appointment of the service provider in the 2023/2024 FY which affected the rest of the MMS project deliverables.
	System (MMS) Project target deliverables implemented Cyber security remediation plan deliverables implemented	New indicator				N/A

## Sub-Programme 4.3 Communication and Marketing Department

Strategic Objectives	Performance Indicator	Actual Performance 2022/2023 FY	Planned Annual Target 2023/2024 FY	Actual Achievement 2023/2024 FY	Deviation from planned Target to Actual Achievement 2023/2024 FY	Reasons for Deviations
Promote the image of the SANC and of the nursing profession within the context of being a regulator	Annual Nursing Excellence Awards hosted	New indicator	Annual Nursing Excellence Awards hosted	Annual Nursing Excellence Awards hosted	None	N/A
	Percentage of SANC Values implemented in line with the approved plan	New indicator	100%	100%	None	N/A
	Percentage of Change Management Plan: Service Delivery implemented	New indicator	100%	100%	None	N/A
	Percentage of Communication and Marketing Campaign Plan implemented	New indicator	100%	100%	None	N/A
Section: Registry and Records						
Enable effective knowledge management solutions	Percentage of quarterly deliverables of the Records Management Plan achieved (RMP) achieved	New indicator	100%	29%	61%	The digitalization of the records process took longer period than anticipated which had a ripple effect on other deliverables.
Section: Facilities						
Improved service delivery	Percentage of quarterly deliverables in the Facilities Management Plan achieved	New indicator	100%	85%	15%	Qualifying bidders were not available which impacted processing of matters through SCM.

## DEFERRED TARGETS

There were no deferred targets.



## Core Operations: Professional Affairs Division

*Ms Suyekiye J Nxumalo - Deputy Registrar*

### 3.1 PROFESSIONAL AFFAIRS DIVISION OVERVIEW

The Professional Affairs Division is responsible for the core business of the South African Nursing Council, that of regulating nursing education and practice. The Department derives its mandate from the Nursing Act, 2005 (Act No. 33 of 2005).

It is comprised of three Departments namely:

- Provider Affairs Department with two sections (Accreditation, and Monitoring and Evaluation);
- Learner Affairs Department with two sections (Assessment and Nurse Registrations); and
- Professional Practice Department with four sections (Practice and Conduct, Inspectorate, Continuing Professional Development (CPD) and Impairment).

The Professional Affairs Department supports the following Council Committees:

- Education Committee;
- Laws, Practice and Standards Committee and its Subcommittee on Continuing Professional Development Committee;
- Impairment Committee; and
- Preliminary Investigating Committee.

The key achievements of the Division are as follows:

- Accreditation of nursing programmes is a continuous process submitted by the Nursing Education Institutions (NEIs) for both undergraduate and postgraduate Diploma programmes to address and ensure that the country produce nurses to meet the national need of the country.
- Information sharing with the profession on nursing practice and education and training matters during the Nursing Indaba held by the SANC in May 2023.
- Examinations for Legacy qualifications ended in November 2023. Professional Entrance Examination leading to registration in the categories "Auxiliary Nurse/General Nurse/Professional Nurse and Midwife/Nurse Specialist or Midwife Specialist" was conducted by the SANC as per schedule.
- The nursing practice standards continued to be piloted in the financial year 2023/2024, the findings were analysed and some incorporated into the standards and approved by the Council to be gazetted for public comments.
- CPD was piloted in all provinces and the next phase is the phased-in implementation approach.
- Inspections and investigations were conducted in health establishments and NEIs.
- Enquiries were held for nurses who are alleged to be unfit to render nursing care with reasonable skill and safety.
- Statutory registrations were done in line with the Nursing Act, 2005 (Act No. 33 of 2005).
- Regulations regarding distinguishing devices for all nurses and midwives were published for comments by the National Department of Health, the comments were processed and approved by Council and awaiting promulgation by the Minister of Health.

### 3.2. PROVIDER AFFAIRS DEPARTMENT

The Provider Affairs Department is mandated in terms of Section 4(1) and (2)(f) and (g) of the Nursing Act, 2005 (Act No. 33 of 2005) to execute its responsibilities. The Department is responsible for:

- accreditation of NEIs, nursing programmes;
- approval of clinical facilities; and
- monitoring and evaluation of accredited NEIs to ensure that they comply with accreditation criteria, standards and requirements.

In compliance with the Nursing Act, 2005 (Act No, 33 of 2005), the Provider Affairs Department performed as follows in the 2023/24 financial year:

### ACCREDITED NURSING EDUCATION INSTITUTIONS

In 2023/24 FY the SANC accredited 119 NEIs to offer new nursing programmes.

*Table 7: Number of accredited NEIs in 2023/24 FY*

ACCREDITED NURSING EDUCATION INSTITUTIONS	TOTAL ACCREDITED
Private NEIs	35
Public NEIs	65
Universities	19
<b>TOTAL</b>	<b>119</b>

### ACCREDITED NURSING EDUCATION PROGRAMMES

In 2023/24 FY the SANC accredited six undergraduate programmes namely, Higher Certificate in Nursing, Diploma in Nursing, Advanced Diploma in Midwifery and Bachelor of Nursing programmes.

*Table 8: Accredited undergraduate programmes in 2023/24 FY*

ACCREDITED PROGRAMMES	NUMBER OF ACCREDITED PROGRAMMES
Higher certificate in Nursing	01
Diploma in Nursing	01
Advanced Diploma in Midwifery	03
Bachelor of Nursing	01
<b>TOTAL</b>	<b>06</b>

### ACCREDITED POSTGRADUATE DIPLOMA PROGRAMMES

In 2023/24 financial year the Council prioritized the accreditation of postgraduate diploma programmes to upscale the production of specialist nurses in the country. The SANC accredited 19 postgraduate Nursing Diploma programmes. See Table 3 depicting the total number of accredited programmes per area of specialisation.



Table 9: Accredited postgraduate nursing diploma programmes in 2023/24 FY

POSTGRADUATE NURSING DIPLOMAS	TOTAL ACCREDITED
Postgraduate Diploma in Adult Critical Care Nursing R	02
Postgraduate Diploma in Perioperative Nursing R. 635	01
Postgraduate Diploma in Mental health Nursing R. 635	01
Postgraduate Diploma in Midwifery R. 635	02
Postgraduate Diploma in Emergency Nursing R. 635	01
Postgraduate Diploma in Nephrology Nursing R. 635	01
Postgraduate Diploma in Orthopaedic Nursing R. 635	01
Postgraduate Diploma in Occupational Health Nursing R. 635	01
Postgraduate Diploma in Primary Care Nursing R. 635	04
Postgraduate Diploma in Ophthalmic Nursing R. 635	03
Postgraduate Diploma in Infection Prevention and Control Nursing R. 635	01
Postgraduate Diploma in Nursing Education R. 635	01
<b>Total</b>	<b>19</b>

#### APPROVED CLINICAL FACILITIES FOR WORK-INTEGRATED LEARNING IN THE 2023/24 FY

In 2023/24 FY the SANC approved 221 clinical facilities. The clinical facilities are spread across all nine provinces and are for the placement of both undergraduate and postgraduate diploma students. Clinical facilities included public and private health establishments including community-based clinical settings and emergency response services.

Table 10: Number of approved clinical facilities by type in 2023/24

TYPE OF CLINICAL FACILITY	APPROVED NUMBERS
Public Hospitals	67
Private Hospitals	23
Community Health Centres	40
Public Clinics	68
Old Age Homes/Frail Care	08
Industry Clinics	04
Private Clinics	06
Emergency Medical Response Services	05
<b>Total</b>	<b>221</b>

## CONDUCTED AUDIT VISITS AND QUALITY CONTROL INSPECTIONS

In 2023/24 FY the SANC conducted audit visits at three NEIs and three clinical facilities. Quality control inspections were conducted at one NEI and nine clinical facilities.

Table 11: Number of conducted audit visits and quality control inspections in 2023/24 FY

NUMBER OF NURSING EDUCATION INSTITUTIONS		NUMBER OF CLINICAL FACILITIES
<b>AUDIT VISITS:</b>		
03		16
<b>QUALITY CONTROL INSPECTIONS:</b>		
01		09
<b>INSPECTIONS IN LOCO:</b>		
02		00
<b>Total</b>	<b>06</b>	<b>25</b>

### 3.3. LEARNER AFFAIRS DEPARTMENT

The Learner Affairs Department is responsible for all statutory registrations and management of examinations conducted by the SANC. It specifically supports the Education Committee of the Council in terms of the Nursing Act, 2005 (Act No. 33 of 2005), to:

- Register learner nurses and/or learner midwives.
- Register nurses on completion of training.
- Conduct examinations and grant certificates in respect of such examinations.
- Process applications for registrations of internationally qualified nurses and midwives and issue limited registrations.
- Issue replacement certificates.
- Register Community Service Practitioners.

In compliance with the Nursing Act, 2005 (Act No. 33 of 2005), the Learner Affairs Department performed as follows in the 2023/24 financial year:

#### REGISTERED STUDENTS AS LEARNERS AND ON COMPLETION OF TRAINING

In terms of the Nursing Act, 2005 (Act No. 33 of 2005), the SANC must register from commencement of education and training until completion, including additional qualifications. The SANC also provides statistics of students who register and pass/fail the examinations.

A total of 5 214 students were registered in the year under review with 5 084 under the Higher Education Qualifications Sub-Framework (HEQSF)-compliant undergraduate programmes and 130 from the legacy undergraduate programmes. About 671 students were registered in specialist programme of which 625 were registered for the HEQSF compliant postgraduate Nursing Diplomas and 46 under legacy qualifications. The learners from legacy programmes were those that were not affected by the pronouncement by the Minister of Higher Education and Training in 2019.

Table 12: Registered students as learners in 2023

PROGRAMME	TOTAL LEARNER NURSE REGISTERED
<b>UNDERGRADUATE HEQSF COMPLIANT NURSING PROGRAMMES</b>	
Higher Certificate in Nursing	996
Diploma in Nursing	2 705
Bachelor of Nursing	1 314
Advanced Diploma in Midwifery	69
<b>Sub-total</b>	<b>5 084</b>
<b>UNDEGRADUATE LEGACY PROGRAMMES</b>	
Four-year Diploma/Degree program	36
Bridging course for Enrolled Nurses leading to registration as a General Nurse/Psychiatric Nurse	94
<b>Sub-total</b>	<b>130</b>
<b>Total</b>	<b>5 214</b>
<b>POSTGRADUATE NURSING DIPLOMA PROGRAMMES</b>	
Health Services Management	179
Mental Health Nursing	21
Primary Care Nursing	154
Midwifery	74
Nursing Education	78
Perioperative Nursing	13
Adult Critical care - Nursing	26
Occupational Health Nursing	60
Emergency Nursing	20
<b>Sub-total</b>	<b>625</b>
<b>POST-BASIC LEGACY PROGRAMMES</b>	
Course in Clinical Nursing Science leading to registration of an additional qualification	1
Diploma in Child Nursing	2
Diploma in Advanced Midwifery	5
Diploma in Occupational Health Nursing	8
Diploma in Nursing Administration	29
Diploma in medical and Surgical Nursing Science: General Nursing	1
<b>Subtotal</b>	<b>46</b>
<b>TOTAL</b>	<b>671</b>
<b>GRAND TOTAL</b>	<b>5 885</b>

**NURSE REGISTERED ON COMPLETION OF BASIC QUALIFICATIONS IN 2023**

No person may practise as a nurse practitioner unless he or she is registered to practise in at least one of the prescribed categories in the Nursing Act, 2005 (Act No. 33 of 2005). In the year 2023, the SANC registered a total number of 7 691 nurses on completion of basic legacy qualifications. A total of 764 were registered on completion of the new qualifications.

*Table 13: Nurses registered on completion of basic qualifications in 2023*

BASIC QUALIFICATIONS	TOTAL
<b>LEGACY QUALIFICATIONS</b>	
Nursing Auxiliary	34
Enrolled Nurses	112
General Nurses	638
Nurse (General, Psychiatric and Community and Midwife) [BN Degree and 4-year Diploma]	3 430
Midwife	23
Psychiatric Nurse	1
Community Service Practitioner	2 907
<b>Total</b>	<b>7 145</b>
<b>HEQSF-COMPLIANT NURSING QUALIFICATIONS</b>	
Auxiliary Nurse	449
General	592
Community Service Practitioners	37
Professional Nurse and Midwife	28
<b>Total</b>	<b>1 106</b>
<b>GRAND TOTAL</b>	<b>8 251</b>

**NURSE REGISTERED ON COMPLETION OF ADDITIONAL QUALIFICATIONS IN 2023**

According to Section 34(1) of the Nursing Act, 2005 (Act No. 33 of 2005) the Council must register the additional qualification of a person who is registered in terms of Section 31 of the Act. The SANC registered a total number of 1 210 specialist nurses on completion of training. Of these specialist nurses 1 086 were registered on additional legacy qualifications. A total of 124 specialist nurses were registered on completion of the HEQSF-compliant qualifications.

Table 14: Nurse registered on completion of Additional Qualifications/Postgraduate Diplomas in 2023

ADDITIONAL QUALIFICATIONS		POSTGRADUATE QUALIFICATIONS	
LEGACY QUALIFICATIONS	TOTAL	HEQSF-COMPLIANT NURSING QUALIFICATIONS	TOTAL
<b>CLINICAL SPECIALISATIONS</b>			
Clinical Nursing Science, Health Assessment, Treatment and Care	43	Primary Care Nursing	25
Post-Basic Occupational Health Nursing	108	Occupational Health Nursing	15
Post-Basic Psychiatric Nursing- Child Psychiatric Nursing	2	Mental Health Nursing	17
Post-basic Child Nursing Science	18		
Community Health Nursing	35		
		Midwifery	13
<b>Medical and Surgical Nursing Science:</b>			
• Operating Theatre Nursing	13	Perioperative Nursing	11
• Critical Care Nursing-General	31		
• Critical Care Nursing - Trauma	4		
• Critical Care Nursing - Nephrology	1		
• Emergency Nursing	1		
• Nephrology Nursing	1		
• Oncological Nursing	6		
• Trauma and Emergency	2		
• Trauma Nursing	1		
<b>NON-CLINICAL SPECIALISATIONS</b>			
Nursing Administration	431	Health Service Management	28
Nursing Education	389	Nursing Education	15
<b>Total</b>	<b>1 086</b>		<b>124</b>
<b>GRAND TOTAL</b>		<b>1 210</b>	

## SANC EXAMINATIONS

In line with the provisions of the Nursing Act, 2005 (Act No. 33 of 2005), the SANC conducted national examinations for the legacy qualifications as per the SANC approved schedules. Examinations conducted included national examinations and Professional Entrance Examination for the HEQSF-compliant qualifications. The table on page 44 provides the schedule of examinations that were conducted by Council in 2023.

Table 15: SANC examination schedule for the calendar year 2023

PROGRAMME	DATE	PAPER
<b>LEGACY QUALIFICATION EXAMINATION</b>		
Bridging course - Final Year	08 May	Paper 1
	10 May	Paper 2
	06 Nov	Paper 1
	08 Nov	Paper 2
<b>PROFESSIONAL ENTRANCE EXAMINATION</b>		
Registration as an Auxiliary Nurse (including admission examination for foreign nurses)	10 May	
	08 Nov	
Registration as a General Nurse (including admission examination for foreign nurses)	12 May	
	10 Nov	
Registration as a Professional Nurse and Midwife	08 May	Paper 1
	10 May	Paper 2
	06 Nov	Paper 1
	08 Nov	Paper 2

## PERFORMANCE IN THE SANC EXAMINATIONS

The performance in the SANC examinations across the board ranged from 59% to 93% pass rate with foreign applicants performing poorly when compared to other groupings.

Table 16: Examination statistics for the calendar year 2023

TYPE OF EXAMINATION	TOTAL CANDIDATES	PASSED		FAILED	
		NUMBER	%	NUMBER	%
LEGACY EXAMINATIONS					
• Bridging course - Final Year	514	414	81%	100	19%
PROFESSIONAL ENTRANCE EXAMINATIONS FOR NEW QUALIFICATIONS					
• Auxiliary Nurse	488	452	93%	36	7%
• General Nurse	514	400	78%	114	22%
• Professional Nurse and Midwife	51	38	75%	13	25%
• Foreign Applicants (General Nurse)	51	30	59%	21	41%

## ASSESSORS AND MODERATOR REGISTRATIONS

In line with the Nursing Act, 2005 (Act No. 33 of 2005) a total of 220 Assessors and 216 Moderators were registered in the calendar year 2023.

Table 17: Assessors and Moderators registered in the calendar year 2023

Assessors	220
Moderators	216
<b>Total</b>	<b>436</b>

**REPLACEMENT CERTIFICATES ISSUED DURING JANUARY-DECEMBER 2023**

A total of 651 replacement certificates were issued during the calendar year 2023. Table 18 below provides a breakdown per qualification/category:

*Table 18: Replacement certificates issued per qualification/category in the calendar year 2023*

REPLACEMENT CERTIFICATES PER QUALIFICATION CATEGORY	TOTAL CANDIDATES
Nurse (General, Psychiatric and Community) and Midwife	176
General Nurse and Midwife	5
General Nurse	120
Psychiatric Nurse	7
Midwife	35
Enrolled Nurse	67
Nursing Auxiliary	91
<b>CLINICAL SPECIALISATION (LEGACY)</b>	
Intensive Care Nursing	3
Orthopaedic Nursing Science	1
Community Nursing Science	6
Clinical Nursing Science Health Assessment, Treatment and Care	29
Post-Basic Child Nursing Science	1
Post-Basic Midwifery and Neonatal Nursing Science	13
Post-Basic Occupational Health Nursing Science	4
Post-Basic Psychiatric Nursing Science	3
Post-Basic Community Nursing Science-Occupational Health	2
<b>Medical &amp; Surgical</b>	
• Operating Theatre Nursing	6
• Orthopaedic Nursing	3
• Ophthalmological Nursing	2
• Oncological Nursing	2
• Critical Care Nursing-General	7
• Trauma and Emergency	3
• Emergency Nursing	2
• Neonatal Nursing	1
Assessor	1
Moderator	2
<b>NON-CLINICAL</b>	
Nursing Education	22
Nursing Administration	37
<b>Total</b>	<b>651</b>



## VERIFICATION AND TRANSCRIPT STATISTICS ISSUED IN THE 2023 CALENDAR YEAR

In the 2023 calendar year, the SANC received a total number of 1 656 requests for verifications and transcripts.

Table 19 depicts the nurses who requested verifications of qualifications and/or transcripts of training to be sent mostly to the United States of America (651), United Kingdom (319), Australia (224) and agencies (308) with different countries.

*Table 19: Verification and Transcript Statistics issued in the 2023 calendar year*

Country	Jan	Feb	Marc	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
Agencies	9	12	21	6	69	14	22	40	15	20	34	46	308
Australia	5	26	5	2	33	8	30	38	18	21	15	23	224
Cayman Island	0	0	2	4	2	2	2	3	1	2	2	2	22
Ireland	1	8	1	3	4	3	3	2	6	1	2	4	38
Namibia	0	0	0	1	0	1	0	0	0	0	0	2	4
New Zealand	0	1	0	0	2	1	0	2	2	1	1	2	12
Swaziland	0	0	0	1	0	0	0	1	0	1	1	0	4
Tanzania	0	0	0	0	0	0	0	0	0	0	1	0	1
UAE	0	2	3	5	10	4	4	5	3	10	4	10	60
UK	10	43	20	30	42	23	45	25	18	32	20	11	319
USA	24	68	48	40	84	50	43	82	40	73	58	41	651
Zimbabwe	0	4	2	0	2	1	0	0	0	1	2	1	13
<b>MONTH TOTALS</b>	<b>49</b>	<b>164</b>	<b>102</b>	<b>92</b>	<b>248</b>	<b>107</b>	<b>149</b>	<b>198</b>	<b>103</b>	<b>162</b>	<b>140</b>	<b>142</b>	<b>1 656</b>

Note: The above figures indicate the number of persons who have requested that verifications of qualifications and/or transcripts of training be sent to the countries indicated only, and NOTHING ELSE

- *It is specifically stated that nurses are not required to notify the Council if they do leave the country.*
- *The fact that a nurse has requested a verification be sent does not necessarily mean that she/he has taken up the offer of a position in another country.*

### 3.4. PROFESSIONAL PRACTICE DEPARTMENT

The Professional Practice Department of the SANC handles all professional/nursing practice matters of practitioners who are registered in terms of Section 31(1) of the Nursing Act, 2005 (Act No. 33 of 2005). It is responsible for maintaining standards and conduct of nurses, investigation of alleged unprofessional conduct by nurses, determination of conditions relating to Continuing Professional Development (CPD) and holding enquiries for nurses who are alleged to be incapacitated.

The Department executes its mandate through its four sections namely: Inspectorate, Impairment, Preliminary Investigations and CPD.

The Department supports three Committees and one sub-Committee of Council, i.e.:

- Laws, Practice and Standards Committee, and its sub-committee; the CPD sub-Committee;
- Impairment Committee (IC); and
- Preliminary Investigating Committee (PIC).

## CONDUCTING INSPECTIONS AND INVESTIGATIONS OF HEALTH ESTABLISHMENTS

In terms of Section 4(1)(d) of the Nursing Act, 2005 (Act No. 33 of 2005), the SANC is mandated to conduct inspections and investigations of health establishments to ensure compliance with the Act as well as with rules and standards determined by the Council in terms of this Act.

During the year under review, the Department continued to pilot the Nursing Practice Standards for the remaining four provinces. The purpose of the pilot study was to test the applicability of standards and measures developed across all nursing service delivery platforms, as well as administrative internal processes developed. Inspection reports were compiled and sent to all health establishments in line with the policy and procedures. Quality improvement plans are at varying stages of being received by the SANC office. There was general acceptance and appreciation of the standards by the health services and the profession. Lessons learnt from the pilot informed the revision and finalisation of the Nursing Practice Standards, and inspection tools were approved by the Council in January and April 2024 respectively. The approved standards and inspection tools will be used to assess and enforce compliance in health establishments to improve quality of the nursing care provided.

### HEALTH ESTABLISHMENTS INSPECTED IN 2023/24 FY

Table 20: Health Establishments inspected in 2023/24 FY.

HEALTH ESTABLISHMENTS TYPE	NUMBER
Public Hospitals	07
Private Hospitals	03
Community Health Centres	03
Primary Health Care Clinics	10
Old Age Home	01
<b>Total</b>	<b>24</b>

### MANAGING UNPROFESSIONAL CONDUCT - PRELIMINARY INVESTIGATIONS

The Preliminary Investigating Committee (PIC) is responsible for handling cases of alleged unprofessional conduct in terms of the Nursing Act, 2005 (Act No. 33 of 2005). Cases of unprofessional conduct are received from the media, members of the public, and managers in both private and public healthcare establishments. Only cases relating to nurses whose names are in the SANC nurse register are investigated. Table 21 to Table 28 reflect a statistical summary of cases that were received and processed by the SANC during the year under review.

Table 21: Number of cases received for alleged unprofessional conduct by nurses in 2023/24 FY

FYR 2023-24	Q1	Q2	Q3	Q4	TOTAL
Complaints attended to	5	21	11	19	56
Outside jurisdiction	3	14	10	16	43
<b>TOTAL</b>	<b>8</b>	<b>35</b>	<b>21</b>	<b>35</b>	<b>99</b>

Table 22: Cases in progress (cumulative)

CUMULATIVE CASES	Q1	Q2	Q3	Q4	TOTAL
2020	1	1	0	0	2
2021	4	0	0	0	4
2022	6	4	2	1	13
2023	5	22	25	19	71
2024	0	0	0	18	18
<b>TOTAL</b>	<b>16</b>	<b>27</b>	<b>27</b>	<b>38</b>	<b>108</b>

Table 23: Number of nurses referred to the Professional Conduct Committee

	EDUCATION AND TRAINING	REGISTERED NURSE (4 YEAR DIPLOMA/DEGREE)	REGISTERED NURSE (2 YEAR BRIDGING)	MIDWIVES	ENROLLED NURSES	ENROLLED AUXILLIARY NURSES	TOTAL
Q1	0	3	2	18	2	1	26
Q2	10	0	0	0	0	0	10
Q3	0	3	6	16	2	8	35
Q4	0	26	7	5	9	15	62
<b>TOTAL</b>	<b>10</b>	<b>32</b>	<b>15</b>	<b>39</b>	<b>13</b>	<b>24</b>	<b>133</b>

Table 24: Committee decisions of cases referred to the Preliminary Investigating Committee

	Q1	Q2	Q3	Q4	TOTAL
Number of cases	3	0	0	5	8
Caution	0	0	1	1	2
Professional Conduct Committee (PCC)	9	0	13	10	32
Refer to legal for SAPS	1	0	0	0	1
Fine	0	10	1	1	12
In abeyance/deferred/ flagged	0	0	1	2	3
<b>TOTAL</b>	<b>13</b>	<b>10</b>	<b>16</b>	<b>19</b>	<b>58</b>

Table 25: Persons who reported cases of alleged unprofessional conduct by nurses

CASES REPORTED BY	Q1	Q2	Q3	Q4	TOTAL
Members of the public	11	0	10	15	36
Nursing Manager	1	0	3	3	7
Internal referral ED/IC	0	10	1	1	12
Media	1	0	2	0	3
<b>TOTAL</b>	<b>13</b>	<b>10</b>	<b>16</b>	<b>19</b>	<b>58</b>

Table 26: Place of incidence of the alleged unprofessional conduct

REPORTED FROM	Q1	Q2	Q3	Q4	TOTAL
Private healthcare establishment	8	0	4	6	18
Public healthcare establishment	5	0	11	12	28
Impairment Committee (IC)	0	10	1	1	12
<b>TOTAL</b>	<b>13</b>	<b>10</b>	<b>16</b>	<b>19</b>	<b>58</b>

Table 27: Nature of allegations of unprofessional conduct by nurses reported to SANC

TYPE OF ALLEGATIONS OF PRESENTED CASES	TOTAL
Mismanagement /negligence of a pregnant woman or in labour	14
Failure to seek medical assistance	2
Baby: Poor nursing care	2
Poor pain management	1
Poor nursing care	11
Theft /fraud	4
Patient assault	3
Medication error	5
Hospital sustained injuries	3
Education: Contravention of Section 32 of the Act	10
Acting beyond the Scope of Practice	3
<b>TOTAL</b>	<b>58</b>

Table 28: Reported cases of unprofessional conduct of nurses per province

PROVINCE	TOTAL
Gauteng	20
KwaZulu-Natal	11
North West	6
Eastern Cape	6
Western Cape	4
Northern Cape	0
Limpopo	1
Mpumalanga	6
Free State	4
<b>TOTAL</b>	<b>58</b>

## MANAGING UNFITNESS TO PRACTICE - IMPAIRMENT

The inquiries into alleged unfitness to practice are conducted by the Impairment Committee, as mandated by Section 51 of the Nursing Act, 2005 (Act No. 33 of 2005). Employers, colleagues, and the public report cases of unfitness to practice to the Council. While the SANC's primary mandate is the protection of the public, the SANC also ensures the wellness of incapacitated nurse practitioners as a result of physical or mental health challenges or any other such condition which renders them incapable of practising nursing with reasonable skill and safety. Through the Impairment Committee the nurse practitioners are assisted and rehabilitated.

In terms of managing unfitness to practice the following was achieved:

*Table 29: Received cases of allegations of unfitness to practice by nurses*

CASES	Q1	Q2	Q3	Q4	TOTAL
Cases in progress	6	6	11	9	32
New cases	0	0	0	0	0
Limitation to practice	0	0	0	0	0
Administrative removals	19	19	19	21	78
Student	0	0	0	0	0
Restored	4	1	1	0	6
Discharged/closed	0	0	0	1	1
Inquiries	0	0	0	0	0
Referred to PIC	0	0	0	0	0
<b>TOTALS</b>	<b>29</b>	<b>26</b>	<b>31</b>	<b>31</b>	<b>117</b>

*Table 30: Categories of nurses who are under impairment review*

CATEGORY	GENDER	Q1	Q2	Q3	Q4
Registered Nurse	F	20	20	8	10
	M	5	5	1	1
Enrolled Nurse	F	3	3	2	1
	M	1	1	1	0
Enrolled Nursing Auxiliary/Learner	F	0	0	0	0
	M	0	0	0	0
<b>TOTAL</b>		<b>29</b>	<b>29</b>	<b>12</b>	<b>12</b>

Table 31: Removals due to non-compliance of impaired nurses

CATEGORY	GENDER	Q1	Q2	Q3	Q4
Registered Nurse	F	12	12	11	12
	M	4	4	5	5
Enrolled Nurse	F	2	2	2	3
	M	1	1	2	1
Enrolled Nursing Auxiliary	F	0	0	0	0
	M	0	0	0	0
<b>TOTAL</b>		<b>19</b>	<b>19</b>	<b>20</b>	<b>21</b>

Table 32: Cases of impaired nurses per category, gender and province

CATEGORY	GENDER	GP	KZN	NW	WC	LP	TOTAL
Registered Nurse	F	3	3	0	3	1	10
	M	0	0	1	0	0	1
Enrolled Nurse	F	1	0	0	0	0	1
	M	0	0	0	0	0	0
<b>TOTAL</b>		<b>4</b>	<b>3</b>	<b>1</b>	<b>3</b>	<b>1</b>	<b>12</b>

Table 33: Administrative removals per province due to non-compliance

CATEGORY	GENDER	GP	KZN	WC	TOTAL
Registered Nurse	F	4	2	6	12
	M	2	1	2	5
Enrolled Nurse	F	1	1	0	2
	M	1	1	0	2
<b>TOTAL</b>		<b>8</b>	<b>5</b>	<b>8</b>	<b>21</b>



## Legal and Regulatory Affairs

The core functions of the Legal Affairs Department are to:

- Provide corporate legal support services to the SANC;
- Institute and defend all litigation matters on behalf of and against the SANC;
- Assist with the drafting of all relevant legislation;
- Conduct inspections and investigations of accredited and illegal Nursing Education Institutions;
- Conduct any other inspection or investigation ordered by the Registrar and CEO;
- Lead the prosecution in an inquiry into any complaint of unprofessional conduct or misconduct against any practitioner in terms of the Nursing Act, 2005 (Act No. 33 of 2005);
- Render legal support to all standing or working Committees of the Council or the Administration;
- Facilitate all appeals in terms of Section 15(4) of the Nursing Act, 2005 (Act No. 33 of 2005); and
- Attend to all appeals in terms of Section 57 of the Nursing Act, 2005 (Act No. 33 of 2005).

The Legal Affairs Department of the South African Nursing Council supports Professional Conduct Committee, Ad hoc Disciplinary Appeals Committee in terms of Section 15(4) of the Nursing Act, and Appeal Committee in terms of Section 57 of the Nursing Act. The Professional Conduct hearings do form a large part of the Legal Affairs Department's work.

In adhering to its function in terms of the Nursing Act, 2005 (Act No. 33 of 2005), the Legal Affairs Department rendered services to the following Committees of Council:

### 4.1. PROFESSIONAL CONDUCT COMMITTEE (PCC)

The function of the Professional Conduct Committee is to conduct inquiries or formal hearings into any complaint or allegation of unprofessional conduct or misconduct, referred to it by the Preliminary Investigation Committee in terms of Section 46 of the Nursing Act, 2005 (Act No. 33 of 2005). The committee will then make a finding and decide on an appropriate sanction based on the evidence before the Committee in terms of Section 47(1) of the Act.

During the period under review, the Committee had three sittings:

The first sitting was in Gauteng province. This was a Special PCC, where the SANC had four cases: one was finalised and three were withdrawn.

The second was in KZN province, with 14 cases: six were finalised, two were withdrawn, two were administratively removed from the SANC nurse register, and four were postponed.

The third sitting was in Gauteng province, where the SANC had twelve cases: five cases were finalised, three were withdrawn, two were administratively removed from the SANC nurse register and two were postponed.



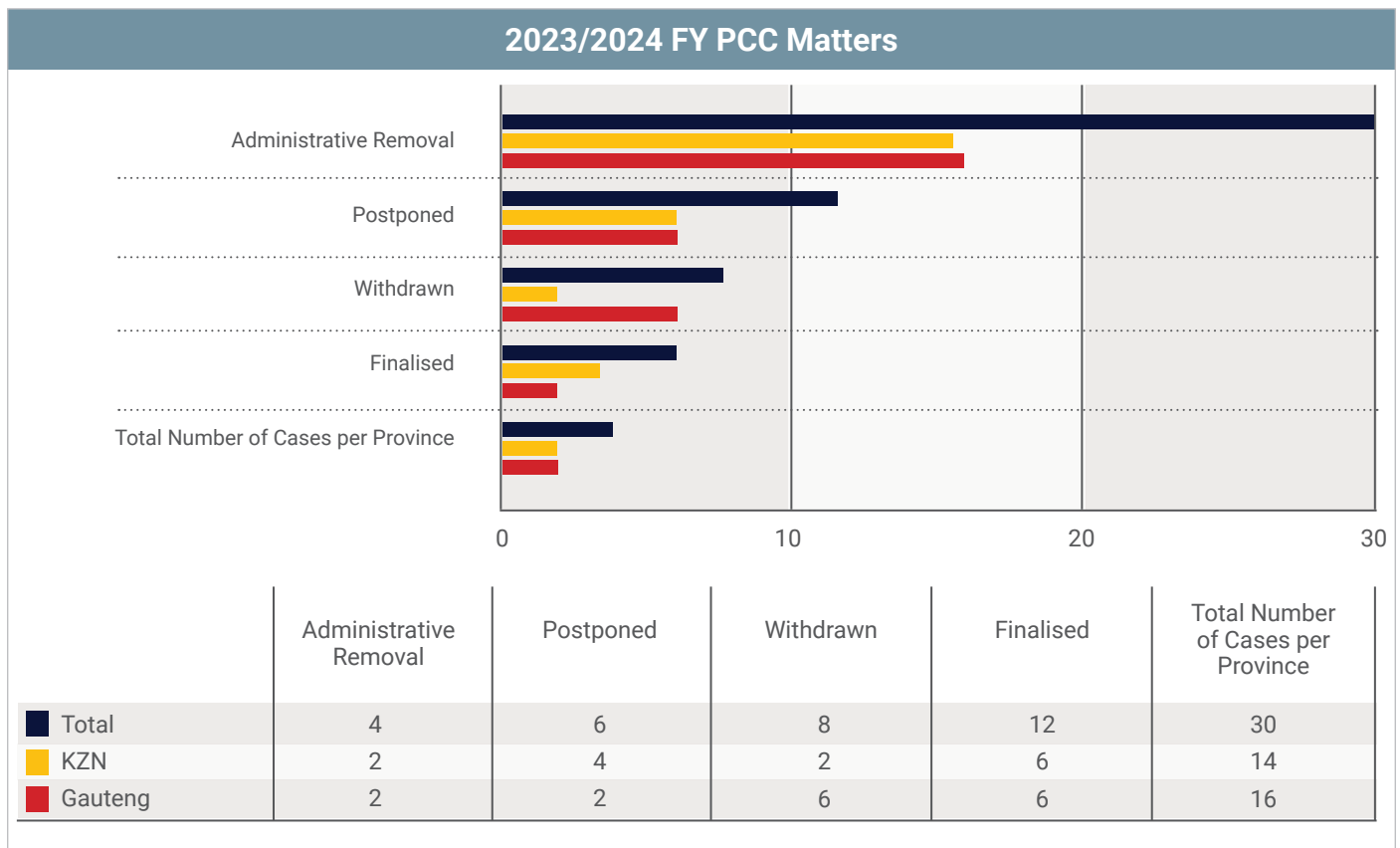


Figure 4: 2023/2024 FY PCC Matters

## 4.2. APPEAL COMMITTEE

### 4.2.1. Appeal in terms of Section 15 (4) Appeal of the Nursing Act, 2005 (Act No. 33 of 2005)

The SANC had received four appeals in terms of section 15 (4) of the Nursing Act, 2005 (Act No. 33 of 2005) against the decision of the Professional Conduct Committee. Many of these appeals were heard and finalised, some sanctions were appealed, and the cases transferred to appeal in terms of Section 57 of the Nursing Act, 2005 (Act No. 33 of 2005). In Eastern Cape the SANC had two cases, and two cases in KwaZulu-Natal.

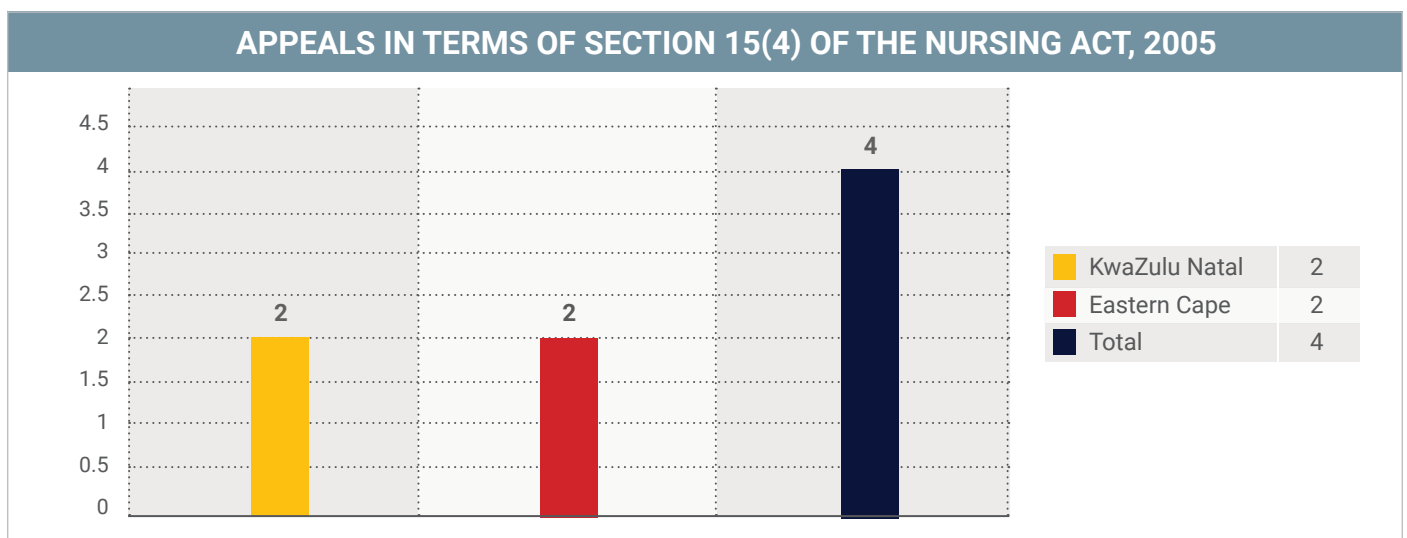


Figure 5: Appeals per province

4.2.2. Appeal in terms of Section 57 of the Nursing Act, 2005 (Act No. 33 of 2005)

For the period 2023-2024, the South African Nursing Council had received 15 appeals in terms of Section 57 of the Nursing Act, 2005 (Act No. 33 of 2005) which were appeals to the Appeals Committee, appointment by the Minister of Health in terms of Section 57 of the Nursing Act, 2005 (Act No. 33 of 2005).

There were seven Professional Conduct cases in which sanctions were overturned by the Council of the SANC. All of these cases were placed under appeal in terms of Section 57 of the Nursing Act, 2005 (Act No 33 of 2005). Defendants and their representatives were notified about the Council's decision. The Minister of Health appointed a new Appeals Committee in terms of Section 57 of the Nursing Act, 2005 (Act No. 33 of 2005).

The Legal Affairs Department was dealing with additional matters under Section 57 of the Nursing Act, 2005 (Act No. 33 of 2005), that were attended to as follows: five cases were finalised, three postponed, and seven cases were awaiting a hearing date.

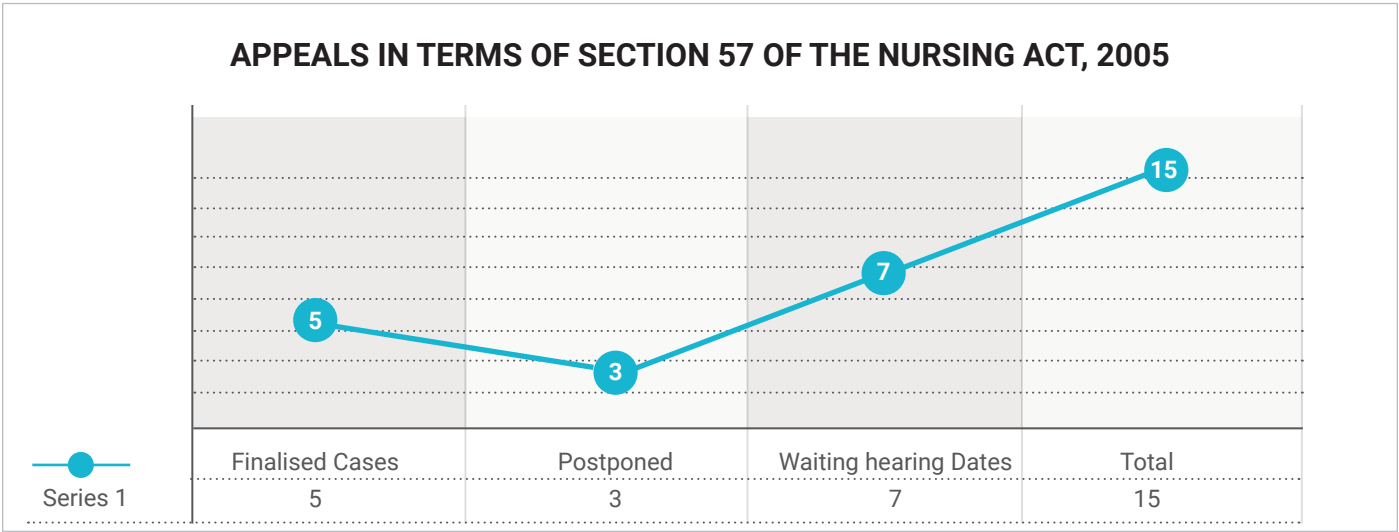


Figure 6: Status of appeals

4.3. LITIGATION MATTERS

During the period under review the SANC attended to various legal matters, most of which were successfully defended by the SANC. These ranged from urgent applications to various other forms of applications, mainly Nursing Education Institutions and bodies representing same brought against the SANC. Very few matters were brought against the SANC by individuals and usually if an individual is the applicant, they are represented by either a trade union or other form of organisation.



## Internal Audit and Risk Management

### 5.1. OVERVIEW

Included in the SANC Council's five-year strategic plan 2018/19-2023/24 FY is the Strategic Objective: Effective Governance, which bears reference to the Internal Audit and Risk Management Department's operations for the 2023/24 financial year.

The Internal Audit activity is responsible for providing independent, objective assurance and consulting services designed to add value and improve the SANC's operations. It assists the SANC to accomplish its objectives by bringing a systematic, disciplined approach to evaluating and improving the effectiveness of risk management, control and governance processes. The Internal Audit activity reports administratively to the Registrar and CEO and functionally to the Audit and Risk Committee (ARC).

The Risk Management unit is responsible for rendering risk management support to the SANC to ensure that key risks are identified, assessed and mitigated. It is further responsible for the coordination of combined assurance, Business Continuity Management (BCM) and fraud management strategies within the SANC.

### 5.2. INTERNAL AUDIT

The purpose, authority and responsibilities of the Internal Audit are defined in the Internal Audit Charter as approved by the Audit and Risk Committee. The scope of work of Internal Audit is to evaluate and report on the adequacy and effectiveness of the SANC's risk management, control and governance processes as designed, and represented by management to ensure that:

- Risks are appropriately identified and managed;
- Significant financial, managerial and operating information is accurate, reliable and timely;
- Employees' actions are in compliance with the policies, standards, procedures, instructions, code of ethics and applicable laws, regulations and contractual obligations;
- Resources are acquired economically, used efficiently, and adequately protected;
- Objectives are achieved;
- Quality and continuous improvement are fostered in the SANC's control process; and
- Significant legislative or regulatory issues impacting the SANC are recognised and addressed appropriately.

#### The Internal Audit Department

Developed a risk-based Internal Audit Strategic Plan and Annual Plan which was approved by the ARC. The internal audit scope of work comprised of the following audit projects:

- Annual Financial Statements,
- Quarterly Organisational Performance Information,
- Compliance,
- Payroll,
- Recruitment and Terminations,
- Leave Management,
- I-Series General and Applications Controls,
- Registrations,
- Revenue, Income and Receivables

Conducted quarterly follow-up audits on the implementation of action plans by Management to address findings highlighted in the internal and external audit reports.

Presented internal audit reports to Management, which included recommendations to strengthen and improve internal controls. Reported progress on the execution of the approved internal audit annual plan and implementation of action plans by Management to the Audit and Risk Committees on a quarterly basis.

### 5.3. RISK MANAGEMENT

The SANC has adopted an enterprise-wide approach to its management of risk. The Risk Management Policy is aligned to the requirements of the King Report on Corporate Governance for South Africa (King IV) and the ISO 31000:2018 Risk Management Standards. The Policy provides the risk management methodology which directs how risk is identified, evaluated, managed, monitored and reported across the organisation. The SANC ensures continuous improvement to risk governance processes by reviewing the Enterprise Risk Management to respond to changes in the internal and external environment and ascertain the effective management of risk.

Strategic, operational and project risk assessments were conducted on a regular basis to identify and analyse risks that impact on the overall achievement of the Council's strategic objectives. Risk response strategies were developed and monitored to ensure that key risks are mitigated within acceptable levels and reported to the Audit and Risk Committee on a quarterly basis. Emerging risks were regularly identified, monitored and reported through the appropriate channels.

The SANC developed a Combined Assurance Framework in line with King IV report and adopted an assurance model which promotes collaboration between management, internal and external assurance providers. The Combined Assurance Model aims to:

- Provide an integrated approach to adequately manage organisational risks,
- Optimise assurance coverage by coordinating the efforts of management, internal and external assurance providers,
- Deliver systematic assessment of key risks associated with strategic objectives and the responses thereto,
- Support the ARC in assessing the effectiveness of internal financial control, and
- Provide a context of the impact of inadequate and ineffective control, on the overall control environment.

The SANC established a Combined Assurance Forum for the implementation of the Combined Assurance Plan during the 2023/24 financial year and reported progress on the implementation of the plan to the ARC.

The Council approved the Business Continuity Management (BCM) Policy and Plan for implementation during the 2023/24 financial year. The BCM Policy provides a framework for building organisational resilience with the capability for an effective response to any future conditions or risks that may threaten to disrupt operations. The BCM Policy aims to:

- Identify urgent mission critical activities across the SANC,
- Establish defined structure to plan for and respond to incidents or disasters,
- Ensure ongoing BCM arrangements that are subject to regular reviews, audits and exercises, and
- Protect and preserve the reputation and financial sustainability of the SANC.

The SANC established a Business Continuity Management Forum for the implementation of the BCM Plan during 2023/24 financial year and reported progress on the implementation of the plan to the ARC.

### 5.4. FRAUD MANAGEMENT

The SANC has a zero-tolerance approach to fraud and corruption. The Council approved a Fraud Management Framework and Fraud Management Policy and Procedure which encompass controls aimed at the prevention, detection and response to fraud and corruption incidents. The focus is on creating employee and stakeholder fraud and ethics awareness to ensure that all stakeholders are cognisant of the impact of fraud and corruption and the processes to follow to report such occurrences.

The SANC's Whistle Blowing Hotline, **0800 20 12 16 (2023/24 FY)**, is in place for reporting suspected fraudulent or unethical behaviour through an outsourced toll-free hotline managed by an independent service provider. The Hotline is promoted as one of the SANC's initiatives of encouraging the reporting of any form of fraudulent and/or corrupt activity. All the fraud cases received through the fraud hotline and other reporting channels are investigated and reported quarterly to the ARC and to the Council.

**Table 34: Cases reported through the Fraud Hotline during the 2023/24 Financial Year were as follows:**

CUMULATIVE CASES	Awaiting additional Information	Under Investigation	Resolved	Closed*	TOTAL
Fraud	2	6	1	5	14
Unprofessional Conduct	0	1	0	4	5
Service Complaints	0	1	1	3	5
<b>TOTAL</b>	<b>2</b>	<b>8</b>	<b>2</b>	<b>12</b>	<b>24</b>

*\*Cases whereby whistle-blowers were reluctant to provide sufficient information for investigation, or which do not fall within the mandate of the SANC.*

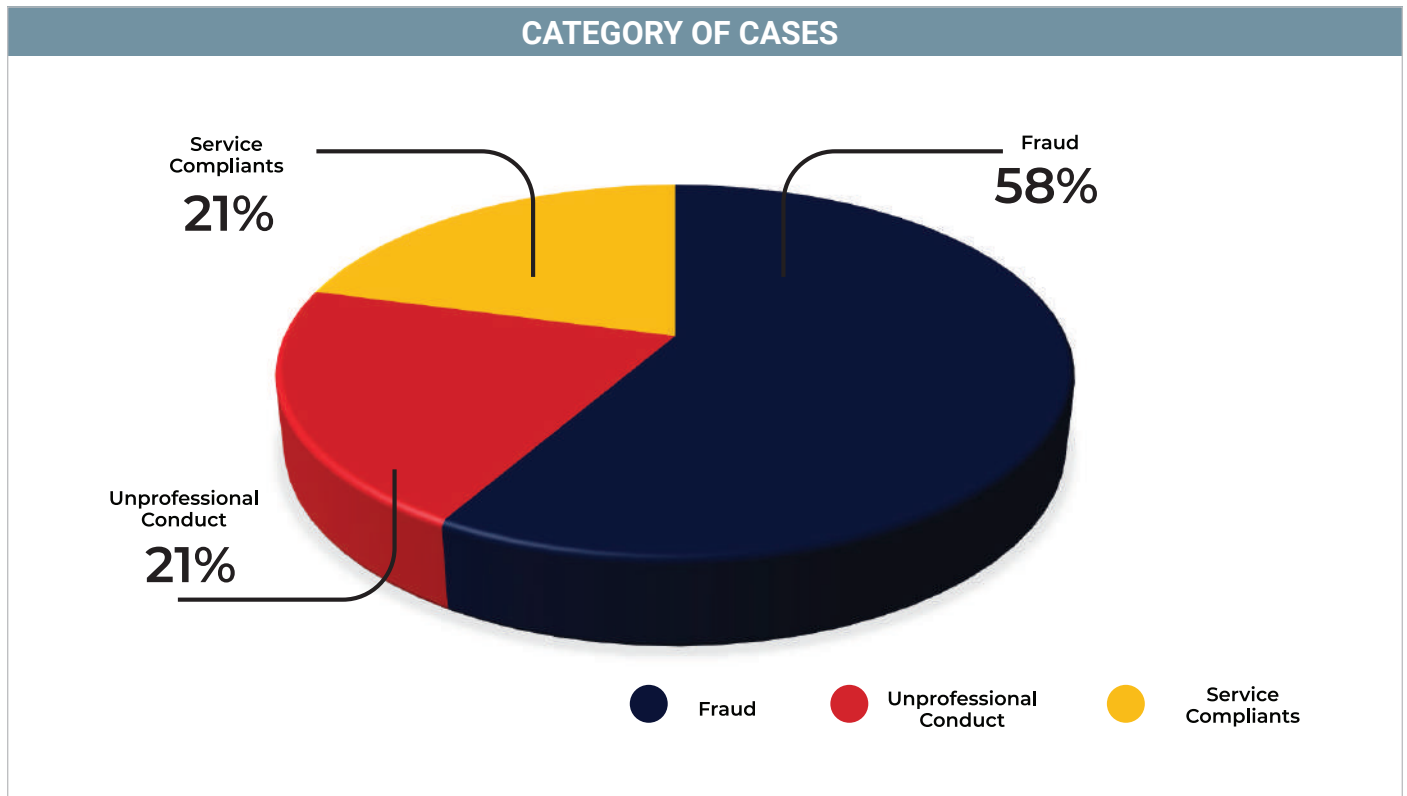


Figure 7: Category of cases

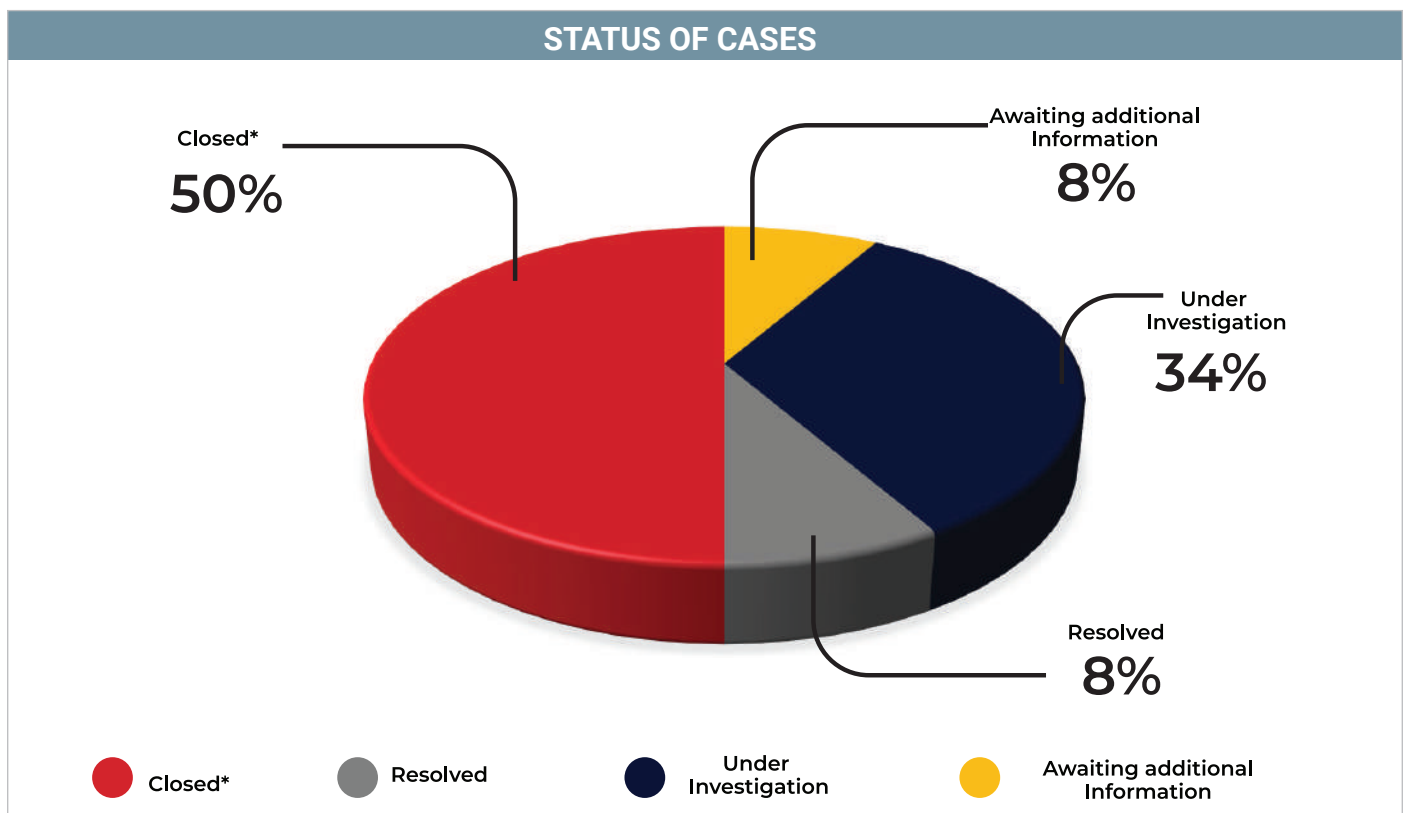


Figure 8: Status of cases

\*Cases whereby whistle-blowers were reluctant to provide sufficient information for investigation, or which do not fall within the mandate of the SANC.

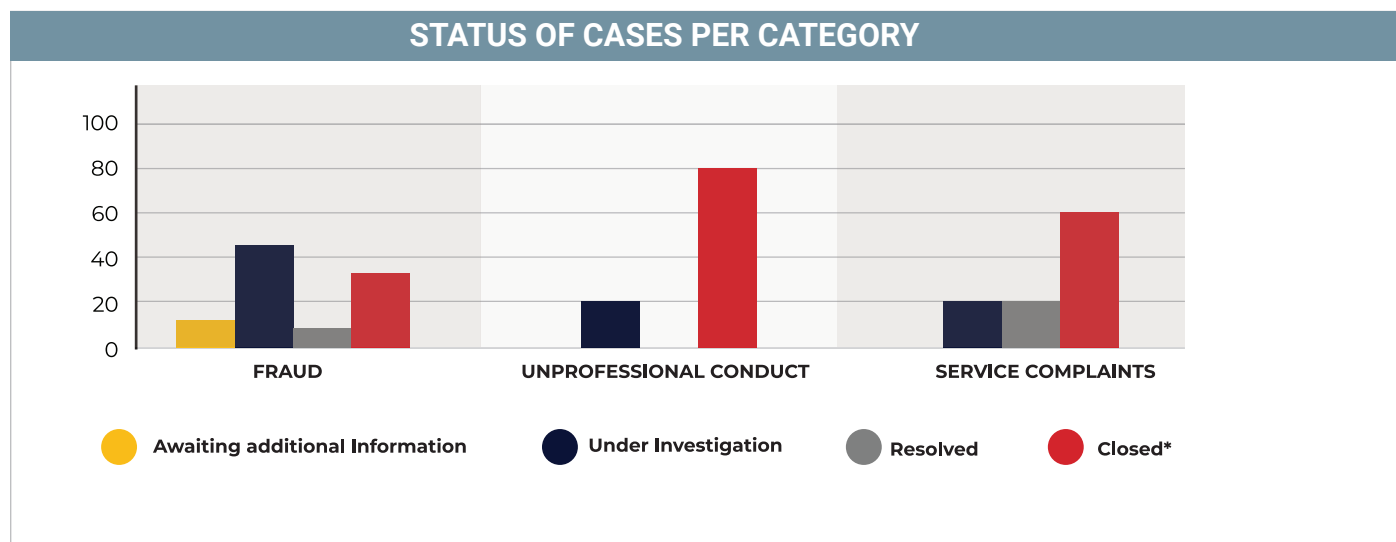


Figure 9: Status of cases per category

\*Cases whereby whistle-blowers were reluctant to provide sufficient information for investigation, or which do not fall within the mandate of the SANC.





## CORPORATE SERVICES

*Dr Krishnee Kissoonduth –  
Corporate Services Executive*

The 2023/2024 financial year presented the Corporate Services Division with opportunities for the team to, amongst other matters, close long outstanding audit-related matters, consider new technology in response to manual interventions in the SANC and strengthen the governance framework of the Division.

The Corporate Services Division highlights the following notable achievements:

- The implementation of the Human Resources (HR) Strategy made great strides towards proper direction for all the key areas of HR, including recruitment, performance management and development, workplace skills plan, employee health and wellness etc. Operational efficiency and performance was enhanced through the recruitment of the right people in the right positions.
- Significant progress was made in preparations for the introduction of the Sage Enterprise Resource Planning (ERP) system during the 2023/2024 FY. The advanced Sage 300 ERP system (Payroll, SCM, HR and Assets Modules) which will replace the outdated Employee Self-Service (ESS) legacy system and end the technical challenges that have been experienced around effective leave management in the SANC, will go live in the 2024/2025 FY.
- As at the end of the financial year under review, the SANC had progressed towards full implementation of the Performance Management Development System (PMDS) Policy. This will support the implementation of the SANC Strategic Plan and contribute towards the retention of talented and high performing employees.
- Through Supply Chain Management the SANC embarked on a process to appoint a new service provider for the Membership Management System (MMS).
- The Project Management Office (PMO) under the ICT Department effectively managed 13 projects with interdependencies, in the interest of a more effective and efficient SANC. Of crucial importance is the Digitisation Project which involve the scanning of SANC records to enable easy access and reference.
- The Executive Committee (EXCO) of Council approved the consolidation of two adjacent SANC properties on the 29th of February 2024. The work by the Town Planner to consolidate the two stands is in progress and it is expected to be concluded early in the 2024/2025 FY. This will be followed by the erection of SANC carports.

## 6.1. HUMAN RESOURCES

### OVERVIEW

The Human Resources function in the SANC is aligned to the Strategic Plan 2018/19-2023/24:

Strategic Objective 1 - Ensure Effective governance; and

Strategic Objective 2 - Position the SANC to become an employer of choice.

### CRITICAL MILESTONES

The Human Resources Department continued to implement the HR Strategy for 2023/2024 FY and provided progress reports on all items on the HR Strategy to the Human Resources and Remuneration Committee (HRRC) and Council.



## LEADERSHIP STABILITY

All SANC Executive positions were filled at the beginning of the 2023/2024 FY. However, in the midst of 2023/2024, two members of the Senior Management Team (the Chief Financial Officer and the Company Secretary) resigned. Recruitment for the two Senior Management Team (SMT) personnel is at an advanced stage with the vacant positions expected to be filled in the first quarter of the 2024/2025 FY. The personnel cost per salary band and programme is provided in the tables below:

*Table 35: Personnel cost per salary band*

LEVEL	PERSONAL EXPENDITURE (R'000)	% OF PERSONNEL EXPENDITURE TO TOTAL PERSONNEL COST (R'000)	NO. OF EMPLOYEES	AVERAGE PERSONNEL COST PER EMPLOYEE (R'000)
Unskilled	665	1%	3	222
Semi-Skilled	49 117	44%	116	423
Junior Management	20 618	18%	36	573
Middle Management	22 346	20%	24	931
Senior Management	11 069	10%	8	1 384
Executive Management	7 665	7%	4	1 916

*Table 36: Personnel cost by Programme/activity/objective*

PROGRAMME/ACTIVITY/OBJECTIVE	TOTAL EXPENDITURE FOR THE ENTITY (R'000)	PERSONNEL EXPENDITURE (R'000)	PERSONNEL EXPENDITURE AS A % OF TOTAL EXPENDITURE (R'000)	NO. OF EMPLOYEES	AVERAGE PERSONNEL COST PER EMPLOYEE (R'000)
Administration	167 681	71 642	42.7%	118	607.14
Learner Affairs	167 681	18 671	11.1%	36	518.63
Professional Practice	167 681	11 599	6.9%	18	644.41
Provider Affairs	167 681	9 568	5.7%	19	503.56

## CONDITIONS OF SERVICE AND EMPLOYEE CODE OF CONDUCT AND ETHICS

The SANC is committed to creating and maintaining an ethical workplace culture through the implementation of policies and practices. Towards this end, policy-related workshops assisted the SANC employees to comply with the Conditions of Services and Employee Code of Conduct and Ethics to promote an ethical culture in the SANC.



## EMPLOYEE HEALTH AND WELLNESS

The SANC recognises that a healthy workforce brings about a more productive workforce with less absenteeism, fewer accidents, lower health care demands, and greater overall savings by reducing the incidence of disease and disability. The SANC continued to implement the reviewed Employee Health and Wellness Policy, through *Lyra Southern Africa Pty Ltd*, (previously named: ICAS Employee and Organisation Enhancement Services Southern Africa Pty Ltd).

The HR Department facilitated the following events:

- A 'Heart Healthy Valentine's Day', hosted at the SANC on 14 February 2024
- Organisational Wellness Day, hosted at the SANC on 15 February 2024:  
Employees participated in a 3km fun-walk around Arcadia, Aerobics and Yoga classes.

## LEARNING AND DEVELOPMENT

### Implementation of the Bursary Policy

In the 2023/24 Financial year, the SANC successfully implemented the SANC Internal Bursary program. Thirteen internal staff bursaries were awarded and implemented. Additionally, eight employee recipients of bursaries in the 2022/23 financial year had commenced with service in terms of their respective bursary service obligations period in line with the SANC Internal Bursary Policy. Five employees were awarded a once-off payment in line with the SANC bursary policy on receipt of a degree or national diploma or postgraduate diploma from an accredited Higher Education Institution.

## AFFILIATION TO PROFESSIONAL BODIES

The SANC continued with the implementation of Professional Membership Affiliation for all Staff members, including members of the Senior Management and Executives. As a result, the SANC reaped the benefits of implementing professional membership affiliations which have contributed to organisational success by fostering knowledge sharing, professional development, credibility, and networking opportunities for SANC Staff with colleagues across all sectors.

## IMPLEMENTATION OF THE SANC GRADUATE INTERNSHIP POLICY

The SANC successfully implemented the Graduate Internship Policy during the 2023/24 financial year. This policy serves as a cornerstone of the SANC's efforts to bridge the gap between education and employment, providing valuable opportunities for recent graduates to gain practical experience and enhance their employability.

As the first phase of implementation, the SANC successfully advertised and appointed two Interns within the Information and Communication Technology Department. It is anticipated that in the new financial year, the programme will be rolled out on a larger scale to other Divisions within the SANC.

## REMUNERATION AND Payscale DESIGN

With the support of the service provider, the SANC engaged on the Remuneration and Pay-scale Design Project. The key deliverables of the project included the development/review of job profiles, job grading, remuneration benchmarking, pay scale design, and the review of applicable organisational Policies and Procedures.

## EMPLOYEE VALUE PROPOSITION (EVP)

The Council approved a Total Rewards Policy which articulates the principles of the SANC's Employee Value Proposition. This model involves five deliberate components **viz. (1) compensation (remuneration), (2) well-being, (3) benefits, (4) development and (5) recognition**, that operate in an interdependent manner in the workplace and contribute towards the attraction and retention of talented employees. The Total Rewards Policy of the SANC reflects the commitment to attract and retain highly skilled, high-performing employees who enable the organisation's performance and achievement of the vision, mission, and values of the organisation.

## HR GOVERNANCE MATTERS

### WORKPLACE SKILLS PLAN (WSP) AND ANNUAL TRAINING REPORT (ATR)

In the 2023/24 financial year, the SANC submitted WSP and ATR reports to the relevant SETA for job-specific training that was undertaken.

Table 37: Training costs

PROGRAMME/ ACTIVITY/ OBJECTIVE	PERSONNEL EXPENDITURE (R'000)	TRAINING EXPENDITURE (R'000)	TRAINING EXPENDITURE EXP. AS A % OF PERSONNEL COST (R'000)	NO. OF EMPLOYEES	AVERAGE TRAINING COST PER EMPLOYEE (R'000)
All staff	111 480	294	0.3%	38	8

A skills audit will be conducted once the Remuneration Strategy and Payscale Design Project has been approved by Council.

The Employment Equity Report was submitted by the 15th of January 2024 to the Department of Employment and Labour in line with the Employment Equity Act. The SANC could not comply fully with the Employment Equity Act due to the Employment Equity Plan not being in place. The development of the Employment Equity Plan will be prioritised in 2024/2025 for submission to the Department of Employment and Labour.

HR policies were developed/reviewed in line with the HR Policy Register in accordance with the Policy on Policies to ensure alignment with legislation, best practices and to close possible audit gaps.

## EMPLOYEE RELATIONS MANAGEMENT

### COLLECTIVE BARGAINING

The SANC maintained labour peace and good employer/employee relations while consulting on matters of mutual interest. The SANC successfully concluded and signed the 2023/2024 FY Cost of Living Adjustment (COLA) agreement with the labour unions through the Bargaining Forum and implemented the signed Collective Agreement on 08 November 2023 with effect from 1 April 2023. The COLA is implemented from 1st April until 31st of March of the year. The Consultative Forum was established in line with Section 84 of the Labour Relations Act, 1995 (Act No. 66. of 1995) for consultation purposes between the Labour Union and the employee on policies, procedures, the introduction of technology, restructuring and transformation, education and training, job grading, as well as the Performance Management and Development System.

### GRIEVANCES

Seven grievances were received during the 2023/2024 FY. These grievances ranged from matters pertaining to unpaid additional work performed, bursary provisions and minimum requirements for an advertised post (promotion).

Table 38: Grievances received in 2023/2024

LEVELS	NUMBER OF GRIEVANCES	NATURE OF GRIEVANCE
Unskilled	0	N/A
Semi-Skilled	2	Unfair Labour Practice - Benefits
Junior Management	1	Unfair Labour Practice - Benefits
Middle Management	3	Unfair Labour Practice - Promotion Unfair Labour Practice – Benefits
Senior Management	1	Unfair Labour Practice - Benefits
Executive Management	0	N/A
<b>TOTAL</b>	<b>7</b>	

## MISCONDUCT

Misconduct cases that were managed during the year under review to a point of resolution or that are still pending are related to allegations of examination fraud, financial fraud, contravention of the conditions of service, disregarding safety rules and/or regulations, abuse of sick leave, unauthorised leave, threatening behaviour, habitual late-coming, dereliction of duties, insubordination, gross negligence and failure to carry out lawful orders or routine instructions, as well as dishonesty and/or intentional misrepresentation.

The nature of disputes at the CCMA ranged from matters relating to unfair labour practice, (e.g. benefits in terms of Acting and Additional Responsibility allowance, financial reward for additional qualification obtained, non-renewal of the fixed term contract, constructive dismissal and promotion). The applicable employees referred the matter to the Labour Court for review of the CCMA outcome. Management has systematically responded to matters at the CCMA to a point of finalization within the timeframes stipulated by the CCMA. Where applicable, settlements have been implemented timeously by the SANC.

## OTHER HUMAN RESOURCES MATTERS

### TALENT MANAGEMENT

The attraction and retention of talented employees to support the mandate of the SANC remains a priority through the implementation of relevant policies and employment equity imperatives.

*Table 39: Employment equity statistics per employee grouping*

LEVELS	African Male	Coloured Male	Indian Male	White Male	African Female	Colored Female	Indian Female	White Female
Unskilled	8	0	0	0	1	0	0	0
Semi-Skilled	18	0	0	0	42	0	0	1
Junior Management	9	0	0	0	25	0	0	1
Middle Management	15	0	0	1	31	2	0	0
Senior Management	2	0	0	1	3	0	0	1
Executive Management	0	0	0	0	2	0	1	0

*Table 40: Employment changes*

LEVELS	01 April 2023	Appointments	Terminations	31 March 2024
Unskilled	7	3	1	9
Semi-Skilled	72	3	10	65
Junior Management	32	7	4	35
Middle Management	44	14	9	49
Senior Management	8	0	1	7
Executive Management	4	0	1	3

## ORGANISATIONAL DEVELOPMENT

### PERFORMANCE MANAGEMENT AND DEVELOPMENT SYSTEM (PMDS)

The implementation of the PMDS is at an early stage of maturation in the SANC in support of a high performing organisation. Regular workshops on the PMDS Policy and dedicated support to line managers and employees have supported the progress that has been made to finalise biannual reviews and signed Performance Agreements. Quarterly progress reports on the implementation of the PMDS Policy are submitted to the Senior Management Team, HRRC and Council. The SANC has made appreciable progress in 2023/2024 FY towards preparation for the moderation process and based upon approval by the relevant authority, to implement reward-based monetary incentives.

### HUMAN RESOURCES INFORMATION SYSTEMS (HRIS) AND PERSONNEL RECORDS

The Sage ERP 300 People project is at the implementation stage, and the following business processes have been mapped:

- As-Is HR Business Processes Mapped
- As-Is Payroll/Leave Business Processes Mapped, and
- As-Is Payroll/ESS People Blueprint has been completed.

### HR RISK AND AUDIT MANAGEMENT

Significant progress has been made towards closing all HR audit findings around Occupational Health and Safety, Employment Equity, personnel records, leave management, the implementation of the PMDS Policy and non-compliance to HR Policies. This has been achieved through the development of new and the review of existing policies, the down-management of audit findings, the appointment of a service provider to develop the Employment Equity Plan, the auditable governance of leave, and the appointment of a service provider to implement the Enterprise Resource Planning (ERP).

## 6.2. INFORMATION AND COMMUNICATION TECHNOLOGY (ICT)

### OVERVIEW

The Information and Communication Technology (ICT) Department comprises of three Sections namely: ICT Operations, Business Applications, and Project Management Office (PMO). The Department is mandated to automate and optimise the SANC business processes in a secured ICT environment. To achieve that, the Department has one **Strategic Objective S04: Enhance Information and Communication Technology Management (ICT/IMS)** which is broken down into three strategic interventions, namely:

- Enhance Information Management systems, processes, and people;
- Enhance secured SANC information assets; and
- Provide an enabling and empowering ICT environment.

The ICT strategic goals are to improve service delivery to the SANC stakeholders and increase value of ICT for business. As part of the ICT Department's Strategy, the aim is to automate the SANC business processes and the adoption of value-add solutions that will improve the image of the Council, service delivery, data integrity, and operational effectiveness and also to play a part in environmental sustainability.

The eBusiness Transformation Projects aim to increase efficiency and contribute towards Green ICT. The implementation status of the two above-mentioned strategic goals is provided in **Figure 8: eBusiness Transformation Programme**.

Two ICT strategic goals are depicted in the table below:

Table 41: ICT Strategic Goals

ICT Strategic Goals
<b>Goal 1: Improve Service Delivery to the SANC Stakeholders by:</b> <ul style="list-style-type: none"> <li>Moving towards a service design approach focused on the SANC stakeholders.</li> <li>Increasing breadth, reliability and security of digital options while creating operational linkage to the SANC channel service environment.</li> <li>Providing real-time processing of transactions, including transaction history.</li> <li>Building new systems with a customer experience focus to ensure we can meet the stakeholders' service expectations, regardless of service channel or point in the process.</li> </ul>
<b>Goal 2: Increase Value of ICT for Business by:</b> <ul style="list-style-type: none"> <li>Increasing user (e.g. SANC stakeholders and employees) satisfaction with IT reliability, security, privacy, training, and responsiveness</li> <li>Reducing manual remediation of transactions</li> <li>Enabling faster, more accurate and better documented services</li> <li>Improving data reliability and consistency.</li> </ul>

One of the aims of the ICT Department's Strategy, is to automate the SANC business processes and the adoption of value-add solutions that will improve the image of the Council, service delivery, data integrity, and operational effectiveness and to play a part in environmental sustainability.

The eBusiness Transformation Projects aim to increase efficiency and contribute towards a sustainable environment promoted through the campaign Go-Green. The implementation status of the two above-mentioned strategic goals is provided in Figure 10: eBusiness Transformation Programme.

### ICT BUSINESS PROCESS IMPROVEMENT

The Project Management Office continues to carry out its mandate of enhancing and digitising SANC business processes. This involves automating critical processes and integrating value-added solutions aimed at bolstering the Council's image, improving service delivery, ensuring data integrity, and enhancing operational effectiveness. Below is a helicopter-view status of the ICT projects:

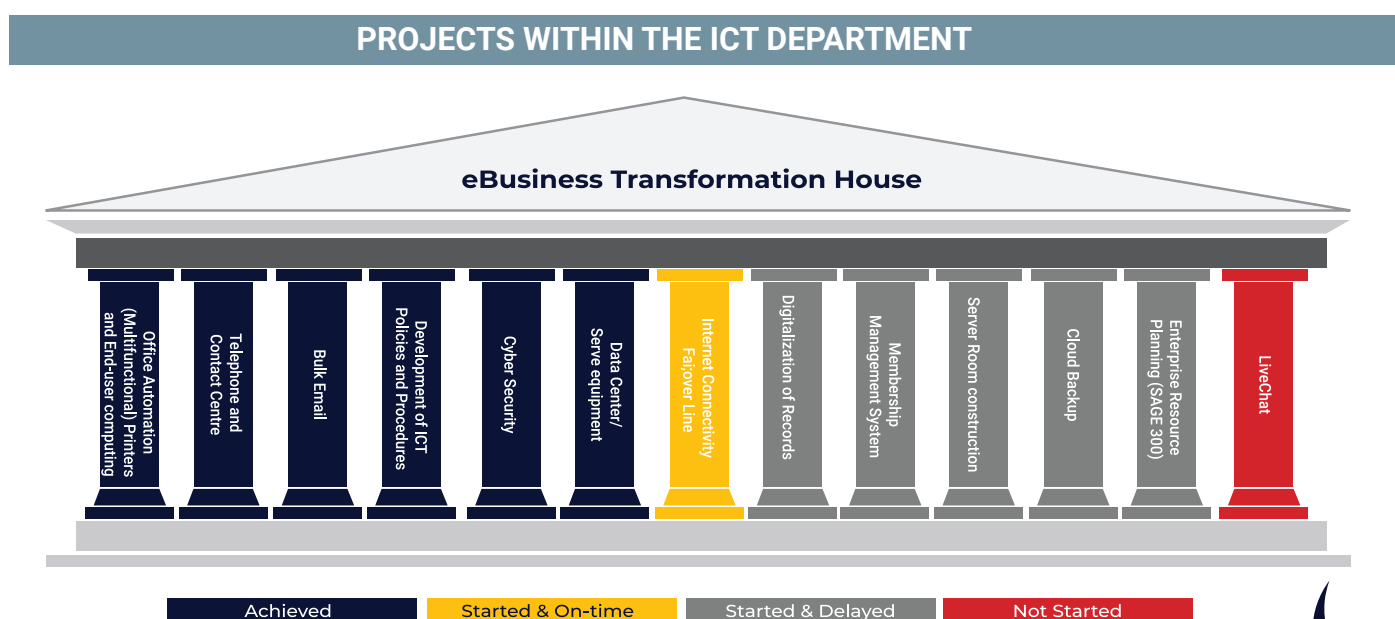


Figure 10: eBusiness Transformation Programme.

The overall annual performance of the ICT Department in percentage (%) is stipulated below:

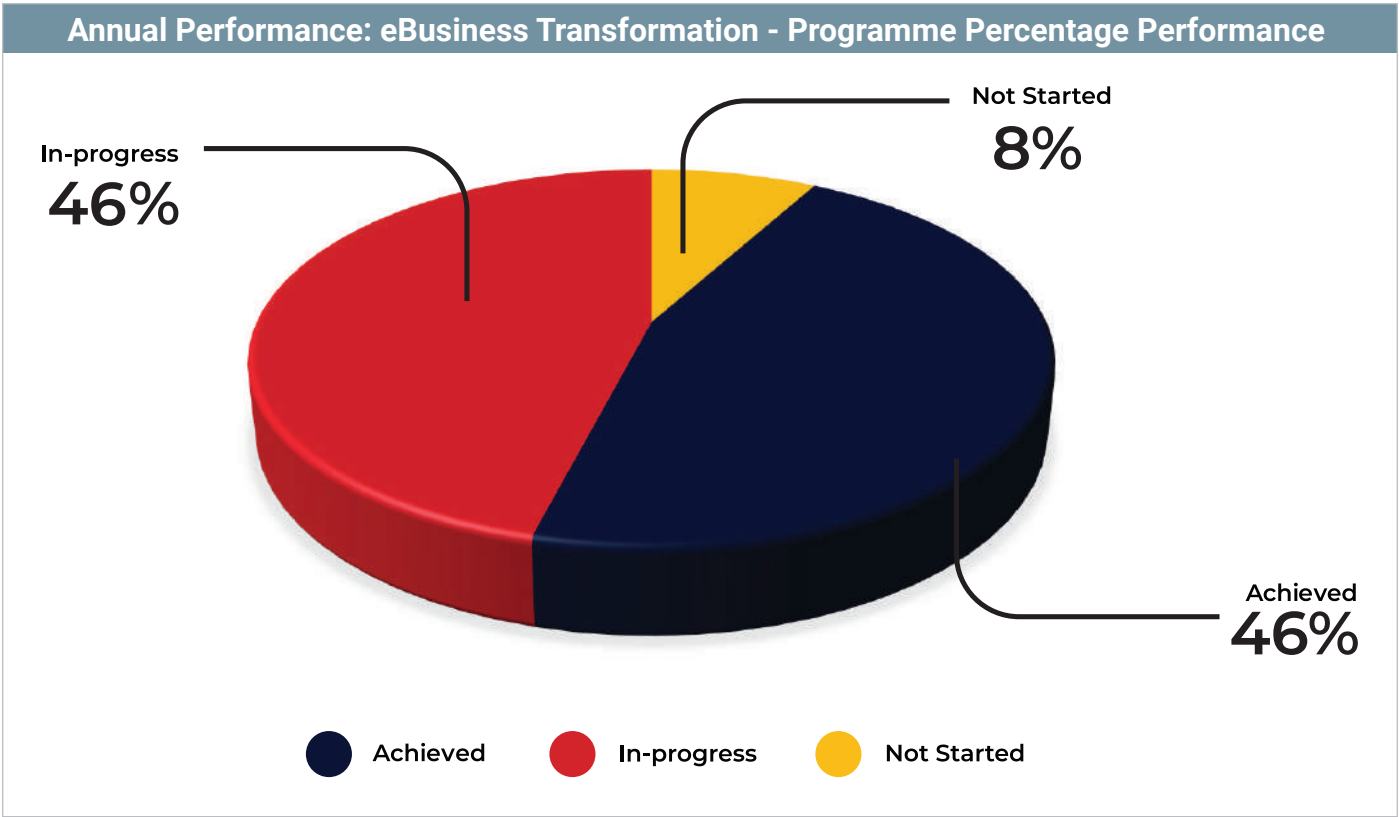


Figure 11: eBusiness Transformation Programme Annual Performance in Percentage (%).

6.3. REGISTRY AND RECORDS SECTION

The Project Management Office (PMO) embarked on a records digitalisation project with *Metrofile (Pty) Ltd* from April 2023 with the following objectives:

- To achieve ICT strategic objectives of contributing to environmental sustainability;
- To prepare for the Membership Management System (MMS);
- To enable easy access of Nursing records; and
- To address audit findings.

Document scanning services was procured through *Metrofile (Pty) Ltd* to scan an initial six million SANC records.

Table 42: Overview Status of Records Digitisation Project.

Total Records to be Scanned	Records Scanned	Outstanding Records to be Scanned
6 000 000	4 200 000	1 800 000

The SANC has an additional 12 million records that are stored in the SANC and at *Metrofile (Pty) Ltd* . These records will be digitized to create a uniform system so that all nurses’ files or records are available on the Therefore Records Management System. This measure will be cost-effective as there won’t be delivery charges to be paid by the SANC to *Metrofile (Pty) Ltd* as all records will be digitized.

## 6.4. COMMUNICATION AND MARKETING

### OVERVIEW

The Communication and Marketing Department focused on the following operational targets during the past Financial Year, as included in the SANC Council's five-year strategy:

SO2 - Position the SANC to become an employer of choice:

- a) Ensure Organisational Values Drive; and
- b) Engage employees.

SO6 - Improve Service Delivery; and

SO14 - Promote the image of the Nursing profession within the context of being a Regulator.

### POSITION THE SANC TO BECOME AN EMPLOYER OF CHOICE - ENSURE ORGANISATIONAL VALUES DRIVE

#### ORGANISATIONAL VALUES DRIVE

The SANC Organisational Values Campaign for employees continued during 2023/24 under the acronym, **ACPRIQ**:

- Advocacy
- Caring
- Professionalism
- Relevance
- Innovation, and
- Quality.

#### ENGAGE EMPLOYEES

##### Internal communication

The Department implemented an internal Employee Communication Strategy with communications sent ranging from Take Note emails, to Circulars, media scanning reports, Values campaign, Change Management campaign, Marketing campaign, HR matters, etc. During the financial year, a total of 316 internal communications were sent to staff.

##### SANC Intranet: **SANCPulse**

The Internal Communication Strategy extended to the SANC Intranet called **SANCPulse**, with consistent links and competitions that drove employees to the Intranet. The SANC approved Policies also reside on the **SANCPulse**, for easy access by all employees.

The following information was published on the **SANCPulse** during the past Financial Year:

- SANC policies published: 26
- **#buildingabetterSANC**-campaign: 21

The **SANCPulse** consists of 67 site pages and contains more than 4 000 uploaded photos and site assets. It is utilised as the main driver for internal surveys, with the following internal surveys completed in the past Financial Year:

- Change Management Survey.
- HR Employee and Team Values Awards Nominations.
- Evaluation of Staff perception regarding change management plan implementation.
- Internal Marketing Campaign: Service Delivery.

The **SANCPulse** has a permanent **Staff Suggestion Box** providing staff with the opportunity to provide their input about the organisation and employee matters.

## IMPROVE SERVICE DELIVERY

### NEW PABX

As part of its ongoing Change Management for Service Delivery campaign, #buildingabetterSANC, the Council continued to introduce more service delivery tools as part of its commitment towards improved service delivery. One of these service delivery tools that have been introduced is a new PABX (Call Centre) system offering self-service options, amongst other key features.

### SERVICE STANDARDS CHARTER

The Council launched its Service Standards Charter and revisited the service standards as encapsulated in the Charter with its employees, ensuring that employees had another round of sensitization regarding the required standards.

Stakeholders and the public can access the Service Standards Charter on the SANC website: <https://www.sanc.co.za/sscharter/>

### COURIERS FOR ANNUAL PRACTICING CERTIFICATES (APCs) AND DISTINGUISHING DEVICES

The Council introduced the option of courier services for delivery of distinguishing devices and APCs, to assist clients with speedy delivery of these items.

### CLIENT SERVICE AND ENGAGEMENT STATISTICS

The statistics for client services and engagement during the year under review is reflected below in Figure 12.

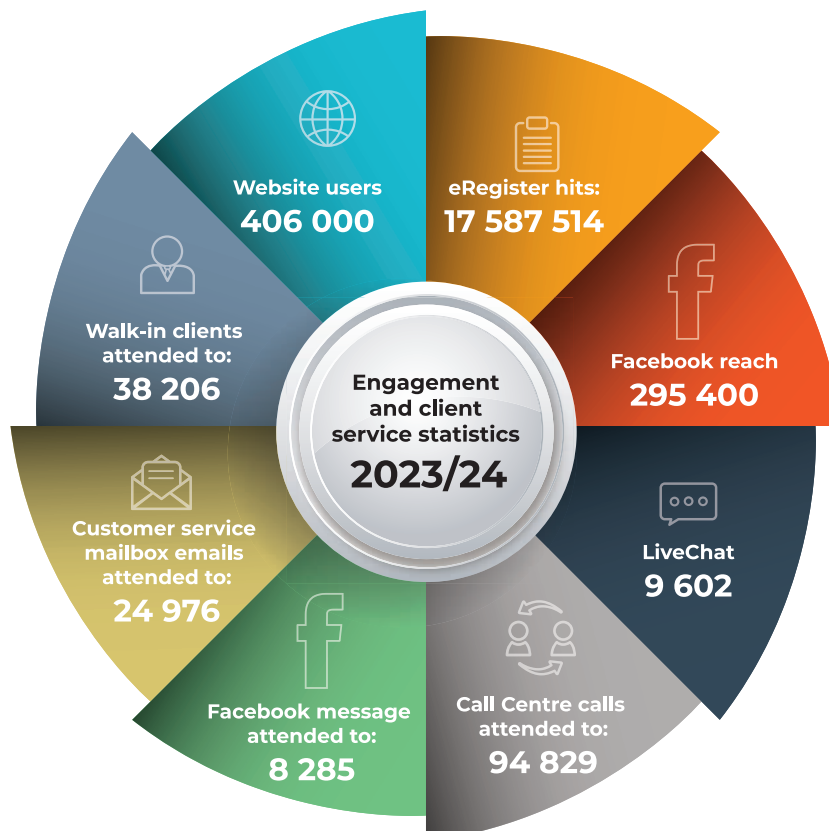


Figure 12: Client Services and Engagement Statistics 2023/24 FY



## PROMOTING THE IMAGE OF THE NURSING PROFESSION WITHIN THE CONTEXT OF BEING A REGULATOR: STAKEHOLDER ENGAGEMENT

The following activities were executed in support of stakeholder engagement and to promote the image of both the SANC as well as the nursing profession:

### EXTERNAL COMMUNICATION TO STAKEHOLDERS - STATISTICS

The Department developed and executed an External Communication Strategy that focused on consistent communication with stakeholders via Facebook, emails, the SANC website, Circulars, YouTube, videos, etc.

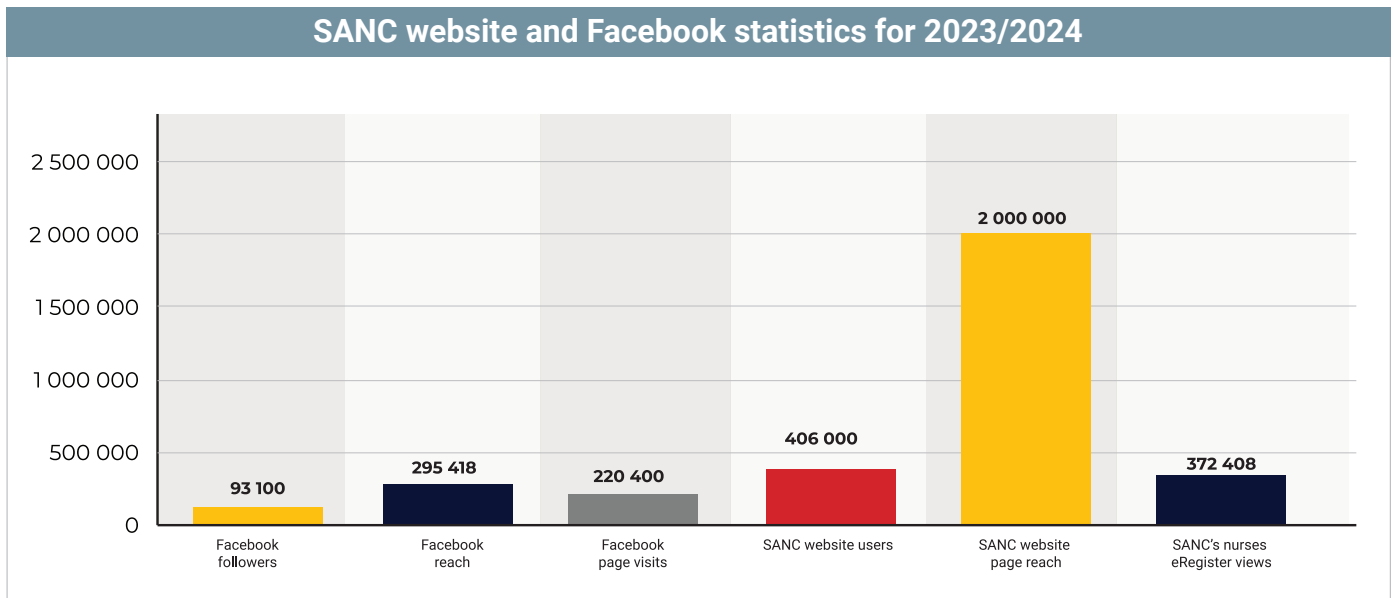


Figure 13: Statistics regarding engagement with stakeholders using social media platforms

**Facebook:** The SANC Facebook page, [www.facebook.com/sancorg](https://www.facebook.com/sancorg) has 93 100 followers since the start of the page in 2020. For the 2023/24 Financial Year, the Facebook Reach was 295 418 and 220 400 Facebook page visits were recorded.

**SANC website:** The SANC website, [www.sanc.co.za](https://www.sanc.co.za) had 406 000 users and 2 000 000 page views, with the average engagement time of 1 minute 07 seconds per session.

The SANC's **nurse e-Register** attracted the most views of all page views: 372 408. The website is updated consistently and communication to stakeholders is shared on the website. Monthly analytical reports are distributed to management to monitor usage patterns and track the efficiency of the website.

**YouTube:** The SANC has its own YouTube channel, called **SANCTV**, [www.youtube.com/@sanc-tv](https://www.youtube.com/@sanc-tv).

**Newsletter:** The SANC issued six editions of its electronic newsletter, the **#SANCnews** which is distributed to stakeholders via email, the SANC website and Facebook.



Figure 14: The #SANCnews

## Media Engagement

The SANC daily tracks and monitors news coverage about the SANC and nursing, and reports media coverage to members of Council and Management. The SANC also responds to media enquiries. The SANC received 13 Media Enquiries from 01 April 2023 to 31 March 2024 from various media houses - see Figure 15. Media enquiries were received from the Cape Argus, Health for Mzansi, Cape Times, Health-e News, DFA News, Freelance Health Journalist, Maroela Media, Daily Sun Newspaper, Newsroom Afrika, Carte Blanche, The Beeld Newspaper and Daily News.

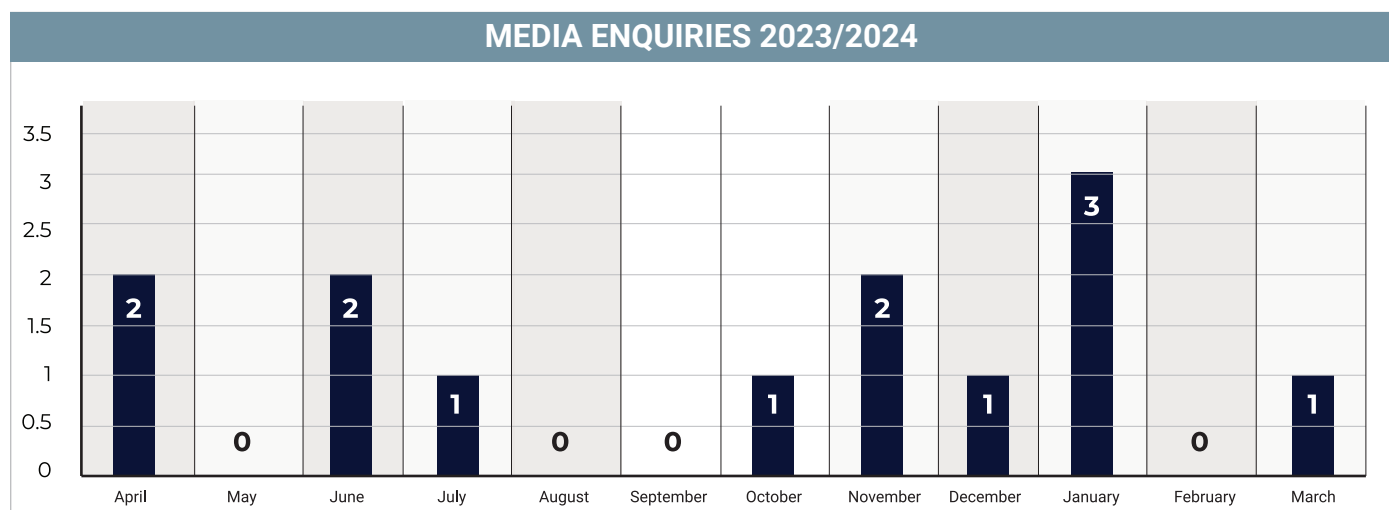


Figure 15: 2023/2024 Media enquiries statistics

## Media Releases in 2023/24 FY

The SANC issued four media releases on nursing-related matters during the financial year under discussion. Media releases issued included:

- Training of nurses by Private Nursing Education Institutions
- The SANC mandate
- SANC welcomes new Council
- SANC reiterates its warning against so-call bogus nursing schools.

## SANC Circulars

The SANC issued 17 Circulars to stakeholders during the past Financial Year:

Table 43: SANC Circulars issued.

SUBJECT	DATE ISSUED
Circular 3/2023 Mid-year intake of students for the Postgraduate Diploma Programmes	12/05/2023
Circular 4/2023 Annual Fees for 2024	01/06/2023
Circular 5/2023 Student Ratios for Education and Training of nurses	15/06/2023
Circular 6/2023 Directive on the management of a vaginal birth after previous caesarean section	05/07/2023
Circular 7/2023 Non-adherence to the Scope of Practice by nurse practitioners	07/07/2023
Circular 8/2023 Introduction of courier services for delivery of Annual Practising Certificates	22/08/2023
Circular 9/2023 Introduction of courier services for delivery of Distinguishing Device	22/08/2023
Circular 10/2023 Additional Third Examination Month for Professional Entrance Examination	24/08/2023
Circular 11/2023 Intake of students by NEIs from one programme to another, prior to writing the Professional Entrance Examination	15/11/2023

Table 43: SANC Circulars issued cont.

SUBJECT	DATE ISSUED
Circular 12/2023 SANC Examination Schedule – 2024	21/12/2023
Circular 13/2023 Update on Professional Entrance Examination to be conducted in 2024	22/11/2023
Circular 14/2023 Closure of SANC offices	23/11/2023
Circular 1/2024 Issuance of Duplicate/Replacement Registration Certificates	04/01/2024
Circular 2/2024 Placing the Professional Entrance Examination in abeyance	12/02/2024
Circular 3/2024 Performance of Medical Male Circumcision by nurses	14/02/2024
Circular 4/2024 Offering of a programme in Bachelor of Health Sciences in the field of Nursing Systems Science	04/03/2024
Circular 5/2024 SANC Easter Holidays Closure	13/03/2024

### External Surveys

The following external surveys were done via the SANC website, with survey links first sent to stakeholders via email, and further awareness created via social media:

- SANC Servant Leadership Survey executed by Data Management and Statistical Analysis (DMSA) in May 2023
- Nursing Indaba Survey May 2023
- SANC New Service Tools March 2024.

### EVENT MANAGEMENT

The following key events were organised, managed and hosted by the Council in the year under review:

- 16th Council Farewell Dinner
- 17th Council Induction Workshop and welcoming dinner
- SANC Nursing Indaba:

The SANC Nursing Indaba was hosted on 18 and 19 May 2023 with the theme: *The Future of Nursing*. The Nursing Indaba was attended physically by 497 delegates and 1 000 virtual delegates. In addition, 1242 delegates followed the live broadcast on the SANC's YouTube channel, **SANCTV**.

### Hosting of the Nursing Excellence Awards:

The NEA nominations closed on 27 March 2023, with 88 nominations for the six award categories:

- Cecilia Makiwane Award - Nursing Practice : 34
- SANC Chairperson's Award : Discretionary.
- Student Community Development Award : 7
- Henrietta Stockdale Award : 23
- Nurse Researcher Award; and : 2
- Lifetime Achievement Extra-Ordinary Service Award : 22.

A Council-appointed NEA Committee adjudicated the awards, and award recipients were informed and invited to the Nursing Excellence Awards dinner on 18 May 2023. The dinner was hosted at the SANC Nursing Indaba 2023.

### SANC Registrar's Roadshows March 2024

The SANC hosted the Registrar's Roadshows in Mpumalanga and North-West in compliance with the Nursing Act, 2005 (Act, No.33 of 2005) to promote and maintain engagement with all stakeholders regarding nursing standards, and in particular standards of nursing education and training and professional conduct and practice.

The roadshows were attended by approximately 250 attendees per province. The format of the roadshows was presentations followed by questions and answers sessions, with service desks in the foyer area allowing nurses to pay restoration fees, buy distinguishing devices, etc.

### Corporate Social Responsibility

The SANC celebrated the 2023 Nelson Mandela International Day on Tuesday, 18 July 2023 by donating six boxes of double-knit wool, to Knit-A-Square South Africa, a Section 21 registered Not For Profit (NFP) company who are distributing blankets, beanies, handwarmer sets and soft toys to pre-school children in creches and day-Care Centres. Most of their squares are sewn into blankets by grandmothers' groups in the informal settlements and Knit-A-Square South Africa pay a small reward to them for each blanket returned that is suitable for distribution.



## Part D

# CORPORATE GOVERNANCE



## 1. CORPORATE GOVERNANCE – THE SANC COUNCIL

### 1.1 Governance Framework

The SANC adheres to a governance framework as informed by, but not limited to the Nursing Act, 2005 (Act No. 33 of 2005), and has adopted the King IV Report on Corporate Governance, 2016 as a guideline in matters concerning governance within the SANC.

### 1.2 Executive Authority

The Council is accountable to the Minister of Health as its Executive Authority who, in turn, accounts to Parliament and the Parliamentary Portfolio Committee on Health.

Section 4(1)(p) of the Nursing Act, 2005 (Act No. 33 of 2005) stipulates that the Council submits to the Minister the following:

- i. A five-year Strategic Plan within six months of the Council coming into office which includes details as to how the Council plans to achieve its objectives under this Act;
- ii. A report every six months on the status of Nursing and on matters of public importance compiled by the Council in the course of the performance of its functions under this Act; and
- iii. An Annual Report within six months of the end of the financial year.

### 1.3 Company Secretary

The Company Secretary is a central source of information and advice on matters of good governance to the Council and the SANC. The Company Secretary is accountable to the Council, and:

- Provides Council with guidance as to their duties, responsibilities and powers in compliance with applicable laws and regulations;
- Has a duty to make Council aware of any laws relevant to or affecting the Council;
- Keeping the Council abreast of new applicable legislation and governance prescripts; and
- Is responsible for corporate governance issues, setting annual plans for the Council and related Committees.

### 1.4 Council Composition

The Council consists of 25 members, of whom 14 must be registered in terms of Section 31(1)(a) and (b) of the Nursing Act, 2005 (Act No. 33 of 2005), appointed by the Minister of Health taking into account their expertise in nursing education, nursing, community health, primary health care, occupational health and mental health.

Following from a process of nomination by fellow practitioners, qualifying members are appointed by the Minister of Health in terms of Section 5 of the Nursing Act, 2005 (Act No. 33 of 2005) as follows:

- **Section 5(1)(a)** - Fourteen members who are registered in terms of Section 31(1)(a) and (b).
- **Section 5(1)(b)**
  - i. One person must be an officer of the National Department of Health;
  - ii. One person must have special knowledge of the law;
  - iii. One person must have special knowledge of financial matters;
  - iv. One person must have special knowledge of pharmacy;
  - v. One person must have special knowledge of education;
  - vi. One person must have knowledge of consumer affairs;
  - vii. Three persons must represent communities; and
  - viii. One person must be registered in terms of Section 31(1)(c) and 31(1)(d).

The Chairperson of the Council is appointed by the Minister of Health after consultation with the Council. At the first meeting of the Council the members must elect a Vice-Chairperson from the categories mentioned in Section 31(1)(a) and (b). The term of office for the Council is five years.

### 2023/2024 FY Council Members

The 2023/2024 financial year was overseen by the 16th Council whose term ended on 22 August 2023. Thereafter the Minister of Health appointed the 17th Council, whose term of office commenced on 23 August 2023 and will end on 22 August 2028.

**Members of the 16th and 17th Council during this year under review**

Table 44: 16th and 17th Council Members

<b>16th Council Members 23 August 2018 – 22 August 2023</b>		<b>17th Council Members 23 August 2023- 22 August 2028</b>
<b>No</b>	<b><i>Council members appointed in terms of Section 5 (1) (a) of the Act</i></b>	
1.	Dr MC Molepo: Chairperson	Dr MC Molepo: Chairperson
2.	Dr SM Zuma: Vice-Chairperson	Prof. DR Phetlhu: Vice-Chairperson
3.	Dr H Ally	Prof. PJ Jordan
4.	Prof A Makhene	Prof. SM Zuma
5.	Dr SZ Mthembu	Dr SZ Mthembu
6.	Dr HC de Swardt	Dr E Kaye-Petersen
7.	Dr L Nkonzo-Mtembu	Ms LCBN Lioma
8.	Mr JT Ntshabele	Mr SV Mkhathswa
9.	Ms TM Magoro	Ms MM Mutepe
10.	Dr NM Geyer	Ms PZ Khumalo-Ntamane
11.	Dr PM Orton	Mr TR Moeketsi
12.	Prof SE Duma	Ms MC Ramokotjo
13.	Dr E Kaye-Petersen	Ms ER Malatji
14.	Ms S Molokoane-Machike	Ms MM Makgotlho
<b><i>Council member appointed in terms of Section 5(1)(b)(i) of the Act</i></b>		
15.	<sup>1</sup> Ms C Mbuyane	Dr M Matandela
16.	Ms TA Kaseke	Ms TA Kaseke
17.	<sup>2</sup> Mr R Tshimomola	Mr S Shandu
18.	Mr MS Choma	Ms JA Maimin
19.	Prof DI Gihwala	Ms NG Zulu-Siwela
20.	Mr L Rabotapi	Mr L Rabotapi
21.	Mr MJ Matsomela	Ms ST Mthembu
22.	Ms SF Molokoane-Machika	Mr M Tshofela
23.	Ms DQ Ngidi	Mr R Rensburg
24.	Ms ZM Ramaila	Ms FL Kgatla
25.	Ms F Newton	Mr B Mgwenya

<sup>1</sup>. Ms. Mbuyane was appointed to replace Ms. V Taschl who served as an interim replacement for Ms N Gumede's who passed away in 2020.<sup>2</sup>. Mr. Tshimomola replaced Mr. W Manthe who resigned.

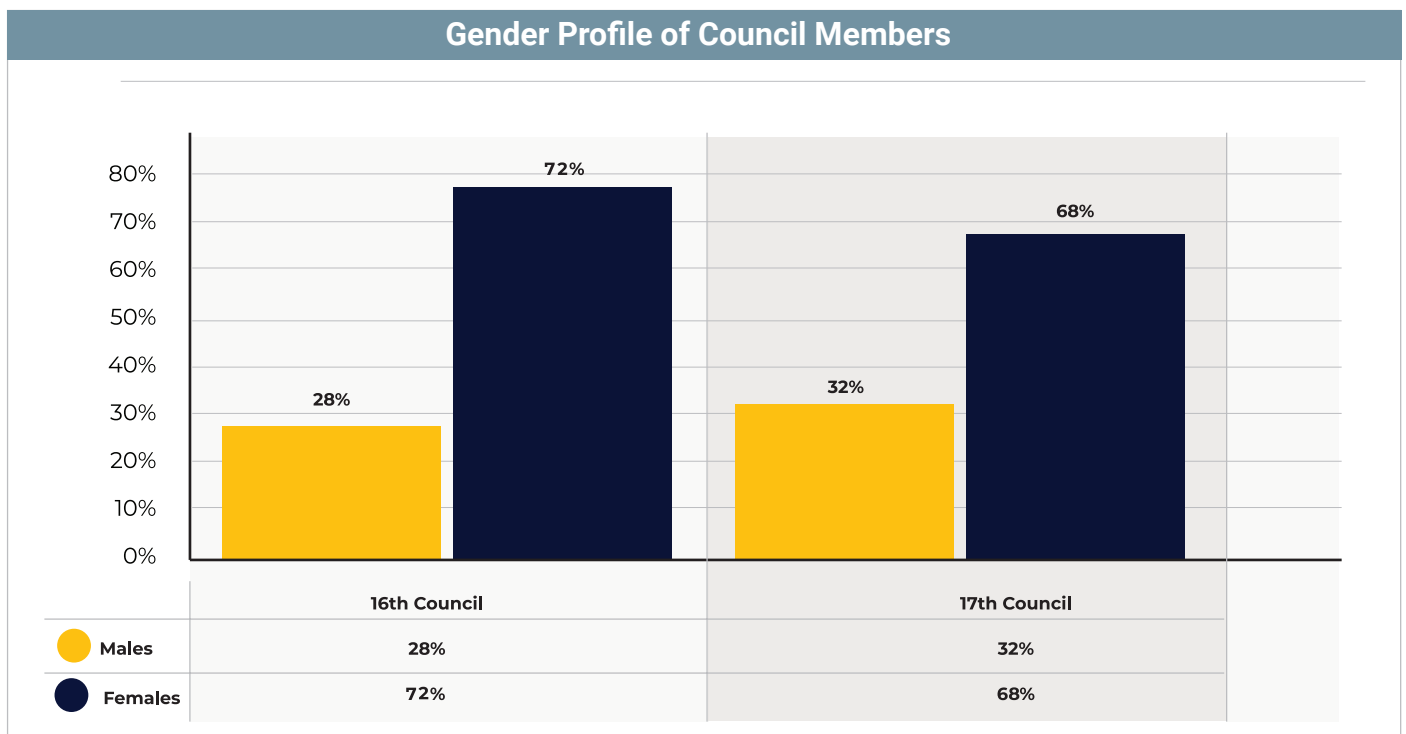


Figure 16: Gender Profile of Council members

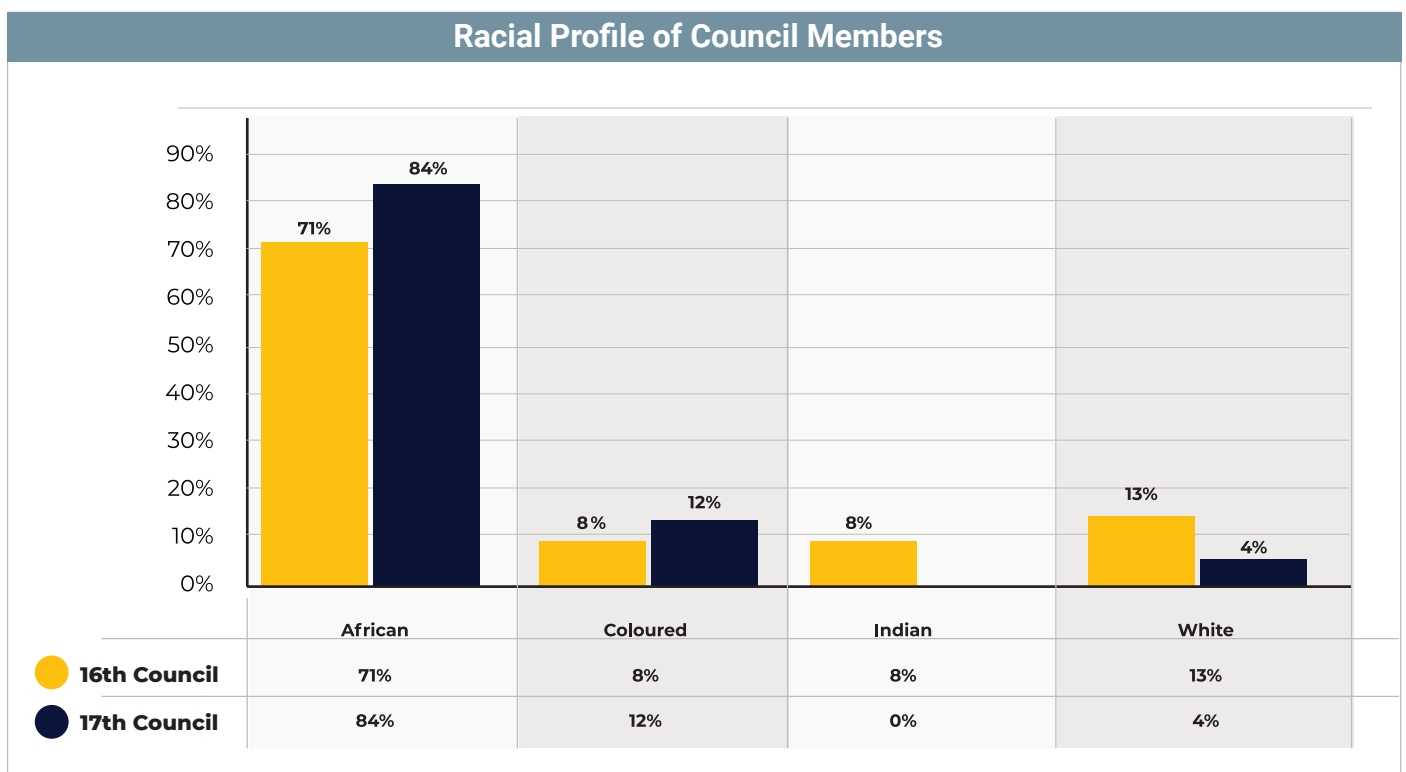


Figure 17: Racial profile of Council Members



# 16<sup>th</sup> Council: 2018-2023



**Dr Matlou Molepo**  
Chairperson



**Dr Sibusiso Zuma**  
Vice-Chairperson;  
Chairperson of Preliminary  
Investigating Committee



**Dr Hafisa Ally**



**Mr Simon Choma**



**Prof Sinegugu Duma**  
Chairperson of Education  
Committee



**Prof Dherendra Gihwala**



**Ms Trudy Kaseke**  
Chairperson of Laws,  
Practice and  
Standards Committee



**Dr Nelouise Geyer**



**Dr Penelope Orton**  
Chairperson of Research  
Committee



**Mr Lehlohonolo Rabotapi**  
Chairperson of Audit and  
Risk Committee



**Ms Thukane Magoro**  
Chairperson of Human  
Resources and Remuneration  
Committee; Chairperson of  
COVID-19 Command Committee



**Dr Elizabeth  
Kaye-Petersen**



**Prof Agnes Makhene**  
Chairperson of Professional  
Conduct Committee;  
Chairperson of Nursing Excellence  
Awards (NEA) ad hoc Committee



**Mr Molefe Matsomela**  
Chairperson of Information and  
Communication Technology  
Governance Committee



**Ms Ziphora Ramaila**



**Dr Hester De Swardt**  
Chairperson of Communication  
and Marketing Committee



**Ms Sophy Molokoane-  
Machika**



**Dr Sindisiwe Mthembu**



**Ms Florrie Newton**



**Ms Duduzile Ngidi**



**Dr Lulama Nkonzo-Mtembu**



**Mr Tshidiso Ntshabele**  
Chairperson of Impairment  
Committee



**Mr Rabelani Tshimomola**  
Chairperson of  
Finance Committee



**Ms Catherine Mbuyane**



# 17<sup>th</sup> Council: 2023-2028



**Dr Matlou Molepo**  
Chairperson of the Council



**Prof Deliwe Phetlhu**  
Vice-Chairperson  
of the Council



**Prof Portia Jordan**  
Education Committee  
Chairperson



**Ms Trudy Kaseke**  
Laws, Practice and  
Standards Committee  
Chairperson



**Ms Patience Khumalo**  
Professional Conduct  
Committee Chairperson  
NEA Chairperson



**Ms Lillian Lioma**  
Communication and  
Marketing Committee  
Chairperson



**Mr Bhekithemba Mgwenya**  
Human Resources and  
Remuneration Committee  
Chairperson



**Ms Mavis Mutepe**  
Impairment Committee  
Chairperson



**Mr Lehlohonolo Rabotapi**  
ICT Governance Committee  
Chairperson



**Mr Russell Rensburg**  
Audit And Risk Committee  
Chairperson



**Mr Sifiso Shandu**  
Finance Committee  
Chairperson



**Dr Sibusiso Zuma**  
Preliminary Investigation  
Committee Chairperson



**Dr Elizabeth  
Kaye-Petersen**



**Ms Lerato Kgatla**



**Ms Jacqueline Maimin**



**Ms Mmadiepetsane  
Makgotlho**



**Ms Refilwe Malatji**



**Dr Mirriam Matandela**



**Mr Sifiso Mkhathswa**



**Mr Tebogo Moeketsi**



**Dr Sindisiwe Mthembu**



**Ms Sinenhlanhla Mthembu**



**Ms Masebina Ramokotjo**



**Mr Mbulelo Tshofela**



**Ms Nontuthezelo  
Zulu-Siwela**

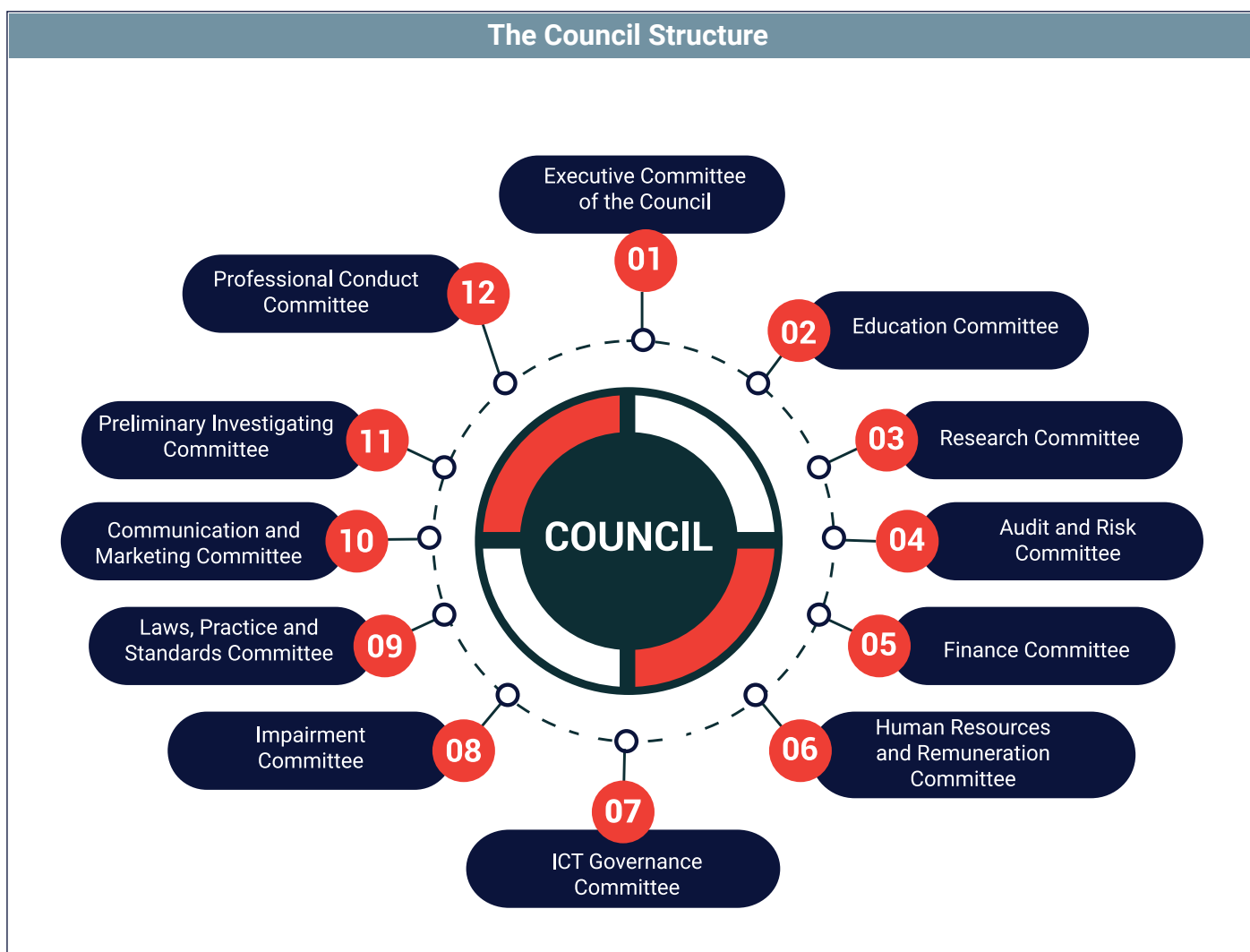


Figure 18: The Council Structure

### The Council Charter

The Council has approved the Council Charter which regulates how the Council and individual members discharge their responsibilities according to the principles of good governance.

The Charter aims to ensure that all the Council Members understand their duties and responsibilities, as well as the laws, regulations and best practices governing their conduct. It also details the division of responsibilities at the Council level and between the Council and Management.

### The Charter of Good Conduct for Councillors

The members of the Council sign a Charter of Good Conduct for Councillors, binding them to fulfil their fiduciary responsibility to act only in the interest of the Council. To ensure decorum, members of Council also have to adhere to the approved Rules of Conduct of Business during the course of running Council meetings.

## Council meeting attendance

### Council year-to-date attendance schedule for the period 1 April 2023 to 31 March 2024

The Nursing Act, 2005 (Act No. 33 of 2005) stipulates that meetings of the Council must be held at least four times a year at such times and places as the Council may determine. Meetings of the Council and its Committees are scheduled annually in advance. The Council is also permitted, in terms of the Nursing Act, 2005 (Act No. 33 of 2005) to hold special meetings as specific circumstances dictate.

The 16<sup>th</sup> Council held one Ordinary meeting in July 2023 and five special meetings in April 2023, July 2023 and August 2023.

The 17<sup>th</sup> Council held four Ordinary meetings in September 2023, November 2023 and January 2024. One (special meeting was held in December 2023.

Table 45: Council meetings held in 2023/24 FY

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
11	5 (6 days)	6	13

Table 46: Council membership attendance

Total number of Council members	25
Required attendance of quorum	13
Average number of attendees per meeting per day	
16th Council	21
17th Council	24
Council's overall attendance percentage	
16th Council	84
17th Council	94

## ATTENDANCE OF COUNCIL MEETINGS FROM 1 APRIL 2023 TO 31 MARCH 2024

Table 47: Attendance of Council Meetings by dates from 1 April 2023 to 31 March 2024

Meeting Dates	*13/04/2023	*28/04/2023	13/07/2023	14/07/2023	*19/07/2023	28/07/2023	22/08/2023	21/09/2023	28/09/2023	*30/11/2023	*05/12/2023	25/01/2024	26/01/2024	*06/03/2024
Meeting Type	Special	Special	Ordinary	Ordinary	Special	Special	Special	Special	Special	Special	Special	Ordinary	Ordinary	Special
Total No. in Attendance	22	21	22	22	18	20	21	25	24	25	21	23	23	22

\*Continuation of Ordinary/planned Special Council meetings

Table 48: Council meetings held in 2023/24 FY

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
9	2 (4 days)	10	14

Table 49: Council membership attendance

Total number of Council members	25
Required attendance of quorum	13
Average number of attendees per meeting per day	22
Council's overall attendance percentage	88%

### Council Committees, their role and mandate

Section 15 of the Nursing Act, 2005 (Act No. 33 of 2005) stipulates that the Council may from time to time establish such Committees as it may think necessary to investigate and report to the Council on any matter falling within the scope of its functions. The Chairperson and Vice-Chairperson of the Council serve as *ex officio* members of the Committees of the Council.

Each Committee of the Council is constituted with formal Terms of Reference or a Charter which will determine, amongst other things, the membership, purpose, powers and authority of the Committee, the scope of its mandate and its relationship to the Council. The Council has established the following Council Committees:

#### Statutory Committees:

- Executive Committee of the Council;
- Professional Conduct Committee;
- Impairment Committee;
- Laws, Practice and Standards Committee;
- Education Committee;
- Information and Communication Technology Governance Committee;
- Human Resources and Remuneration Committee;
- Audit and Risk Committee;
- Finance Committee;
- Communication and Marketing Committee;
- Preliminary Investigating Committee;
- Research Committee;
- Continuing Professional Development (Sub-Committee); and
- Nursing Excellence Awards Committee (NEA).

### 1.5 Executive Committee of the Council (EXCO)

#### Mandate of the Committee

The Committee may perform all the functions of the Council between Council meetings except for rescinding or amending decisions of Council. This implies that it may determine and execute policy subject to subsequent ratification by the Council.

## Membership

The membership of the Committee during the year under review consisted of:

*Table 50: Executive Committee of the Council membership*

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Dr MC Molepo: Chairperson	Dr MC Molepo: Chairperson
Dr SM Zuma: Vice-Chairperson	Prof DR Phetlhu: Vice-Chairperson
Ms C Mbuyane	Prof PJ Jordan
Dr E Kaye-Petersen	Dr M Matandela
Mr JT Ntshabele	Ms MC Ramokotjo
Dr PM Orton	Mr S Shandu
Mr R Tshimomola.	Mr M Tshofela
Mr MJ Matsomela	Prof SM Zuma

*Table 51: Executive Committee meetings*

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
3	3	0	3

*Table 52: Executive Committee membership attendance*

Total number of Council members	8
Required attendance of quorum	5
Average number of attendees per meeting per day	7.6
Committee overall attendance percentage	95%

The EXCO of the 16th Council had two meetings on 14 and 21 June 2023 and EXCO of the 17th Council had one meeting on 29 January 2024.

*Table 53: Attendance of Executive Committee Meetings in the 2023/24 FY*

Executive Committee Meeting Dates			
Meeting type	Ordinary	Ordinary	Ordinary
Meeting dates	14/06/2023	21/06/2023	29/02/2014
Total No in attendance	8	7	8

## 1.6 Professional Conduct Committee

### Mandate of the Committee

The Committee is responsible for:

- Holding inquiries in terms of the Nursing Act, 2005 (Act No. 33 of 2005);
- Considering all matters in the best interest of the public and the profession;
- Establishing a legislative framework for professional conduct;
- Ensuring compliance with the legislative framework;
- Reporting and referring any non-compliance or any other matter to the relevant bodies;
- Ensuring that findings of the Professional Conduct Committee are published in a Government Gazette; and
- Appointing experts or Assessors in terms of Section 47(11) of the Act.

### Membership

The membership of the Committee during the year under review consisted of:

Table 54: PCC membership

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Prof A Makhene: Chairperson	Ms PZ Khumalo-Ntamane: Chairperson
Dr H Ally: Vice-Chairperson	Ms MM Makgotlho: Vice-Chairperson
Mr MS Choma	Ms JA Maimin
Dr LL Nkonzo-Mtembu	Mr SV Mkhathshwa
Ms P Mapotse	Ms MM Mutepe
Dr N Geyer.	Ms MC Ramokotjo

Table 55: Professional Conduct Committee meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
5	4	1	16

Table 56: Professional Conduct Committee membership attendance

Total number of Council members	6
Required attendance of quorum	4
Average number of attendees per meeting per day	5
Committee overall attendance percentage	83%

The Professional Conduct Committee of the 17th Council convened two meetings. The first meeting was convened over a two-day period and was attended by six committee members out of eight on the first day and on the third day, it was attended by five members. The second meeting was convened over a four-day period, the first day was attended by six members, the second day by seven members, and the third and fourth day by six members.

Table 57: Attendance of Professional Conduct Committee meetings in the 2023/24 FY

Professional Conduct Committee Meeting Dates																	
Meeting Type	Ordinary		Ordinary				Ordinary				Spec ial	Ordinary		Ordinary			
Meeting Dates	03/04/2023	04/04/2023	17/04/2023	18/04/2023	19/04/2023	20/04/2023	12/06/2023	13/06/2023	14/06/2023	15/06/2023	12/07/2023	*07/11/2023	*08/11/2023	11/03/2024	*12/03/2024	*13/03/2024	*14/03/2024
Total No. in Attendance	4	4	5	5	5	5	6	6	6	6	6	6	5	7	7	6	6

\*Dr E Kaye-Peterson joined PCC on 07-08/11/2024.

## 1.7 Impairment Committee (IC)

### Mandate of the Committee

The Committee is mandated in terms of Section 51 of the Nursing Act, 2005 (Act No. 33 of 2005) to conduct inquiries into alleged impairment or unfitness to practice for persons registered in terms of the Act.

### Membership

The membership of the Committee during the year under review consisted of:

Table 58: Impairment Committee membership

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Mr JT Ntshabele: Chairperson	Ms MM Mutepe: Chairperson
Prof SE Duma	Mr TR Moeketsi: Vice-Chairperson
Dr PM Orton	Mr. B Mgwenya
Ms F Newton.	Dr SZ Mthembu

Table 59: Impairment Committee meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
3	3	0	3



Table 60: Impairment Committee membership attendance

Total number of Council members	4
Required attendance of quorum	3
Average number of attendees per meeting per day	4
Committee overall attendance percentage	100%

The Impairment Committee of the 16<sup>th</sup> Council convened one meeting of 3 May 2023 and all members were in attendance. The Impairment Committee convened two meetings and all committee members were in attendance.

Table 61: Attendance of Impairment Committee meetings in the 2023/24 FY

Impairment Committee Meetings			
Meeting Type	Ordinary	Ordinary	Ordinary
Meeting Dates	03/05/2023	23/10/2023	12/02/2024
Total No. in Attendance	4	4	4

## 1.8 Laws, Practice and Standards Committee

### Mandate of the Committee

The Committee is established in terms of Section 15 of the Nursing Act, 2005 (Act No. 33 of 2005) to deal with all matters of professional/ Nursing practice for the Council, including but not limited to the following:

- Developing a regulatory framework for Nursing practice;
- Reviewing all draft regulations developed by other functional areas of the Council;
- Determining, reviewing, and developing the scope of practice for all categories of nurse practitioners;
- Developing standards, rules and ethical codes for Nursing practice;
- Providing comments on draft legislation that has an impact on the Nursing Profession;
- Phased-in establishment of the Inspectorate Section of the SANC;
- Establishing a mechanism for implementing the transition of practitioners from current to new categories of nurses in terms of the Nursing Act, 2005 (Act No. 33 of 2005) and relevant regulatory frameworks; and
- Developing and implementing Continuing Professional Development (CPD) system for Nurses and Midwives.

### Membership

The membership of the Committee during the year under review consisted of:

Table 62: Laws, Practice and standards Committee membership

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Ms TA Kaseke: Chairperson	Ms TA Kaseke: Chairperson
Dr E Kaye-Petersen: Vice-Chairperson	Dr M Matandela: Vice-Chairperson
Dr SM Zuma	Dr E Kaye-Petersen
Dr N Geyer	Ms MM Makgotlho
Dr PM Orton	Ms RE Malatji
Ms C Mbuyane.	Ms MC Ramokotjo



Table 63: Laws, Practice and Standards Committee meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
3	3	0	6

Table 64: Laws, Practice and Standards Committee membership attendance

Total number of Council members	6
Required attendance of quorum	4
Average number of attendees per meeting per day	5.5
Committee overall attendance percentage	94%

The Laws, Practice and Standards Committee of the 16th Council convened two meetings and both meetings were attended by five committee members out of six. The Laws, Practice and Standards Committee convened a total number of two meetings over a period of two days for each meeting. Both meetings had full attendance by committee members.

Table 65: Attendance of Laws, Practice and Standards Committee meetings in the 2023/24 FY

Laws, Practice and Standards Committee Meetings Dates						
Meeting Type	Ordinary		Ordinary		Ordinary	
Meeting Dates	04/05/2023	05/05/2023	22/11/2023	23/11/2023	22/02/2024	23/02/2024
Total No. in Attendance	5	5	6	6	6	6

## 1.9 Education Committee

### Mandate of the Education Committee

The Committee is responsible for:

- Developing and reviewing regulations and policies for Nursing Education and Training;
- Determining, developing and reviewing standards, for Nursing Education and Training;
- Developing and reviewing the assessment and moderation system for Nursing Education and Training;
- Developing and reviewing qualification frameworks for Nursing Programmes;
- Investigating and managing complaints and non-compliances in respect of Nursing Education Institutions;
- Monitoring and evaluating the implementation of regulations and policies in Nursing Education;
- Communicating to Nursing Education Institutions and relevant stakeholders with regards to information pertaining to Nursing education and training;
- Providing support to Nursing Education Institutions to facilitate delivery of quality Nursing Education; and
- Identify research priorities and needs and collaborate with relevant stakeholders.

## Membership

The membership of the Committee during the year under review consisted of:

*Table 66: Education Committee membership*

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Prof SE Duma: Chairperson	Prof PJ Jordan: Chairperson
Prof A Makhene: Vice-Chairperson	Dr SZ Mthembu: Vice-Chairperson
Prof DI Gihwala	Ms NG Zulu-Siwela
Dr E Kaye-Petersen	Dr E Kaye-Petersen
Dr SZ Mthembu	Dr M Matandela
Ms C Mbuyane.	Prof SM Zuma

The Education Committee of the 16th Council convened four meetings, two meetings had full attendance, the meeting that was convened on the 18 April 2023 was attended by four committee members out of six and the meeting that was convened on 27 June 2023 was attended by five committee members. The Education Committee of the 17th Council convened a total number of six meetings, four meetings were attended by four out of six committee members and two meetings were attended by five committee members.

*Table 67: Education Committee meetings*

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
6	3	3	10

*Table 68: Education Committee membership attendance*

Total number of Council members	6
Required attendance of quorum	4
Average number of attendees per meeting per day	5
Committee overall attendance percentage	83%

*Table 69: Attendance of Education Committee membership in the 2023/24 FY*

Education Committee Meetings Membership Attendance										
Meeting Type	Special	Ordinary		Special	Ordinary			Special	Ordinary	
Meeting Dates	18/04/2023	10/05/2023	11/05/2023	27/06/2023	15/11/2023	16/11/2023	17/11/2023	17/01/2024	26/02/2024	27/02/2024
Total No. in Attendance	4	6	6	5	4	4	4	4	5	5

## 1.10 Information and Communication Technology (ICT) Governance Committee

### mandate of the Committee

The Committee advises the Council and Management on all matters relating to the ICT and is responsible for:

- The investigating, considering and steering of high level/impact ICT projects;
- The prioritising of proposed high-level projects;
- The constant reviewing of approved projects;
- Facilitating the achievement of optimal ICT management;
- Enhancing the understanding and satisfaction with the value of ICT investments; and
- Fusing the ICT and business strategies, goals, and resources, and achieving competitive advantage through ICT.

### Membership

The membership of the Committee during the year under review consisted of:

Table 70: ICT Governance Committee membership

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Mr MJ Matsomela: Chairperson	Mr LL Rabotapi: Chairperson
Ms TM Magoro: Vice-Chairperson	Mr S Shandu: Vice-Chairperson
Prof DI Gihwala	Prof DR Phetlhu
Ms M Ramaila	Mr SV Mkhathshwa
Dr C Motau: External Independent member	Dr C Motau: External Independent member
Mr L Ndaba: External Independent member	Mr L Ndaba: External Independent member

Table 71: ICT Governance Committee meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
3	3	0	3

Table 72: ICT Governance Committee membership attendance

Total number of Council members	6
Required attendance of quorum	4
Average number of attendees per meeting per day	5
Committee overall attendance percentage	83%

The ICT Governance Committee of the 16th Council convened only one meeting, on 7 June 2023 and was attended by all members. The ICT Governance Committee of the 17th Council convened two meetings and both meetings were attended by five members out of six.

**Table 73: Attendance of ICT Governance Committee in the 2023/24 FY**

ICT Governance Committee Meetings			
Meeting Type	Ordinary	Ordinary	Ordinary
Meeting Dates	07/06/2023	13/11/2023	21/02/2024
Total No. in Attendance	6	5	5

### 1.11 Human Resources and Remuneration Committee

#### Mandate of the Committee

The Human Resources and Remuneration Committee is responsible for:

- Reviewing and making recommendations to the Council regarding the SANC's Human Resources Strategy, in respect to the alignment of that Strategy to:
  - (i) the SANC's strategic and operational plans; and
  - (ii) the SANC's organisational structure;
- Reviewing and making recommendations to the Council regarding the SANC's Human Resources Policies and practices, including in respect of the effectiveness of policies and practices to support the Human Resources Strategy;
- Reviewing and making recommendations to the Council regarding the SANC's Remuneration Policies and practices; and
- Developing a Performance Management and Development System (PMDS) for the SANC.

#### Membership

The membership of the Committee during the year under review consisted of:

**Table 74: Human Resources and Remuneration Committee membership**

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Ms TM Magoro: Chairperson	Mr B Mgwenya: Chairperson
Mr MJ Matsomela: Vice-Chairperson	Ms ST Mthembu: Vice-Chairperson
Ms SF Molokoane-Machika	Mr LL Rabotapi
Dr SZ Mthembu	Ms LCBN Lioma
Mr C Marais: Remuneration Specialist	Mr R Rensburg
Prof S Singh: External Independent member	Mr C Marais: Remuneration Specialist
	Prof S Singh: External Independent member

Table 75: HRRC Committee meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
4	4	0	4

Table 76: HRRC membership attendance

	16 <sup>th</sup> Council	17 <sup>th</sup> Council
Total number of Council members	6	7
Required attendance of quorum	4	5
Average number of attendees per meeting per day	6	7
Committee overall attendance percentage	83%	95%

**NB:** Overall Committee attendance is 89% for 16th and 17th Council for the financial year.

The Human Resources and Remuneration Committee 16<sup>th</sup> Council only had one meeting, on 08 June 2023 and it was attended by five committee members out of six. The Human Resources and Remuneration Committee of the 17th Council convened three meetings during the under review. A total number of two meeting had full attendance and one meeting was attended by six members out of seven.

Table 77: HRRC meetings in the 2023/24 FY

HRRC MEETINGS				
Meeting Type	Ordinary	Ordinary	Ordinary	Ordinary
Meeting Dates	08/06/2023	14/11/2023	18/01/2024	18/03/2024
Total No. in Attendance	5	5	7	7

## 1.12 Audit and Risk Committee

### Mandate of the Committee

The Committee provides an independent oversight of:

- The effectiveness of the SANC's assurance functions and services, with particular focus on combined assurance arrangements, including internal audit services and external audit assurance service provider;
- The integrity of the annual financial statements and, to the extent delegated by the Council, other external reports issued by the SANC;
- Compliance with legislative requirements;
- The effectiveness of risk management and ethics; and
- The Council has delegated full responsibility for risk monitoring and oversight to the Audit and Risk Committee until a separate Risk Committee (established by Council on 31 March 2021) is fully functional.

## Membership

The membership of the Committee during the year under review consisted of:

Table 78: Audit and Risk Committee membership

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Ms LL Rabotapi: Chairperson	Mr R Rensburg: Chairperson
Mr K Sello: Vice-Chairperson /External independent member	Ms N Ngema: Vice-Chairperson/ External Independent
Dr SM Zuma	Mr M Tshofela
Ms TA Kaseke	Ms TA Kaseke
Ms ZL Ngwepe: External independent member	Ms ZL Ngwepe
	Mr KJ Sello

Table 79: Audit and Risk Committee meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Joint ARC and FINCO	Total number of meeting days
7	3	2	2	7

Table 80: Audit and Risk Committee membership attendance

	16 <sup>th</sup> Council	17 <sup>th</sup> Council
Total number of Council members	5	6
Required attendance of quorum	3	4
Average number of attendees per meeting per day	4	6
Committee overall attendance percentage	80%	92%

NB: Overall Committee attendance is 86% for 16th and 17th Council for the financial year.

Table 81: Attendance of Audit and Risk Committee meetings in the 2023/24 FY

Audit And Risk Committee Meetings							
Meeting Type	Ordinary	Joint ARC & FINCO	Joint ARC & FINCO	Special	Ordinary	Ordinary	Special
Meeting Dates	22/05/2023	30/05/2023	21/07 2023	24/11/2023	28/11/2023	08/03/2024	12/03/2024
Total No. in Attendance	4	7	9	5	5	6	6

### 1.13 Finance Committee

#### Mandate of the Committee

The Finance Committee is a Committee of Council that is responsible for the oversight over the Finance functions of the Council. The Committee is currently made up of four Council members and one external independent member. There is currently a vacancy for one external member. The Committee meets at least once per quarter, and it submits a report to the Council on its activities for the quarter. The Finance Committee operates in terms of the written Charter which is approved by Council. In terms of the Finance Committee Charter, the Finance Committee is responsible for the following:

- The Committee should monitor and review the overall financial strategy and ensure that it is aligned with the SANC's strategy and business requirements;
- The Committee should ensure ongoing effectiveness and efficiency in management of the organisation financial resources;
- The Committee should ensure that the SANC remains sustainable through development of appropriate budgets that are approved by the Council;
- The Committee should ensure accuracy and efficiency of financial management in line with best practice; and
- The Committee should ensure that financial risks are identified, properly assessed and adequately managed in order to reduce the SANC's exposure thereto, to an acceptable level.

#### Membership

The membership of the Committee during the year under review consisted of:

Table 82: Finance Committee membership

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Mr R Tshimomola: Chairperson	Mr S Shandu: Chairperson
Dr H Ally	Ms JA Maimin: Vice-Chairperson
Mr MS Choma	Prof PJ Jordan
Ms SF Molokoane-Machika	Mr TR Moeketsi
Mr S Maharaj: External Independent Member.	Mr S Maharaj: External Independent Member.

Table 83: Finance Committee meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
3	3	0	3

Table 84: Finance Committee membership attendance

Total number of Committee members	5
Required attendance of quorum	3
Average number of attendees per meeting	4
Committee overall attendance percentage	80%

Table 85: Attendance of Finance Committee meetings in the 2023/24 FY

FINANCE COMMITTEE MEETINGS			
Meeting Type	Ordinary	Ordinary	Ordinary
Meeting Dates	09/06/2023	20/11/2023	16/02/2024
Total No. in Attendance	4	3	5

### 1.14 Communication and Marketing Committee

#### Mandate of the Committee

The purpose of the Committee is to:

- Ensure effective and auditable governance of marketing and communication matters at the SANC in line with relevant provisions of the Act;
- Ensure effective, accurate and timeous communication with all the relevant SANC stakeholders; and
- Promote a positive image of the SANC.

#### Membership

The membership of the Committee during the year under review consisted of:

Table 86: Communication and Marketing Committee membership

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Dr HC de Swardt: Chairperson	Ms LCBN Lioma: Chairperson
Mr JT Ntshabele: Vice-Chairperson	Mr TR Moeketsi: Vice-Chairperson
Prof DI Gihwala	Ms NG Zulu-Siwela
Ms F Newton	Ms. FL Kgatla
Ms DQ Ngidi	Mr B Mgwenya
Ms ZM Ramaila	

Table 83: Finance Committee meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
3	3	0	3

Table 88: Communication and Marketing Committee membership attendance

	16 <sup>th</sup> Council	17 <sup>th</sup> Council
Total number of Committee members	6	5
Required attendance of quorum	4	4
Average number of attendees per meeting	6	5
Committee overall attendance percentage	100%	100%

NB: Overall Committee attendance is 100% for 16th and 17th Council for the financial year.



Table 89: Attendance of Communication and Marketing Committee meetings

Communication and Marketing Committee Meeting			
Meeting Type	Ordinary	Ordinary	Ordinary
Meeting Dates	29/06/2023	03/11/2023	28/02/2024
Total No. in Attendance	6	5	5

### 1.15 Preliminary Investigating Committee (PIC)

#### Mandate of the Committee

The Committee is mandated in terms of Sections 46, 47, 50 and 52 of the Nursing Act, 2005 (Act No. 33 of 2005) to investigate all reported cases of alleged unprofessional conduct against nurse practitioners who are registered in terms of the Act.

#### Membership

The membership of the Committee during the year under review consisted of:

Table 90: Preliminary Investigating Committee membership

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Dr SM Zuma: Chairperson	Prof SM Zuma: Chairperson
Mr LL Rabotapi	Ms RE Malatji: Vice-Chairperson
Ms ZM Ramaila	Prof DR Phetlhu
Dr HC de Swardt	Ms ST Mthembu
Ms TA Kaseke.	Ms FL Kgatla

Table 91: Preliminary Investigating Committee meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
3	3	0	3

Table 92: Preliminary Investigating Committee membership attendance

Total number of Committee members	5
Required attendance of quorum	3
Average number of attendees per meeting day	4.5
Committee overall attendance percentage	95%

Table 93: Attendance of Preliminary Investigating Committee meetings in the 2023/24 FY

Preliminary Investigating Committee Meetings						
Meeting Type	Ordinary	Ordinary	Ordinary	Ordinary	Ordinary	Ordinary
Meeting Dates	05/06/2023	06/06/2023	01/11/2023	02/11/2023	04/03/2024	05/03/2024
Total No. in Attendance	5	5	4	5	5	5

### 1.16 Nursing Excellence Awards ad hoc Committee

#### Mandate of the Committee

The Council took a resolution, at its ordinary meeting held on 30 June 2022, to establish the Nursing Excellence Awards Committee to assist the Council in exercising its functions in relation to the awarding of the annual Nursing Excellence Awards by:

- Developing an annual schedule of awards and making a recommendation to the Council;
- Assisting the Council in finalising the award categories, description of categories, award guidelines, and method of adjudication on nominations received;
- Evaluating; considering and making recommendations to Council with respect to the award criteria for each award;
- Evaluating applicants and nominees based on the Council approved criteria;
- Selecting a preferred nominee based on the award criteria and the documentation provided in the nomination guidelines; and
- Providing confidential written recommendations to the Council, outlining the Committee's preferred recipients and rationale for recommendations against the approved guidelines.

#### Membership

The membership of the Committee during the year under review consisted of:

Table 94: Nursing Excellence Awards ad hoc Committee membership

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Prof A Makhene: Chairperson	Ms PZ Ntamané-Khumalo: Chairperson
Dr E Kaye-Petersen	Mr LL Rabotapi: Vice-Chairperson
Mr TJ Ntshabele	Mr Mkhathshwa
Mr LL Rabotapi	Prof SM Zuma
Dr SM Zuma.	Ms MM Mutepe

Table 95: Nursing Excellence Awards ad hoc Committee meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
1	0	1	1

Table 96: Nursing Excellence Awards Ad Hoc Committee membership attendance

Total number of Committee members	5
Required attendance of quorum	3
Average number of attendees per meeting day	5
Committee overall attendance percentage	100%

Table 97: Nursing Excellence Awards ad hoc Committee meetings in the 2023/24 FY

Nursing Excellence Awards Ad Hoc Committee Meetings	
Meeting Type	Ordinary
Meeting Dates	24/04/2024
Total No. in Attendance	5

### 1.17 Research Committee

#### Mandate of the Committee

The Committee is responsible for the SANC's research priorities and the development and support of the research initiatives from stakeholders. This includes:

- Support the Council in line with Section 41 of the Nursing Act, 2005 (Act No. 33 of 2005) in ensuring that the prescribed ethical conduct pertaining to research related to the practice of Nursing is adhered to;
- Oversee the scientific review of research proposals in order to ensure that only well-designed and scientifically sound research is submitted and approved;
- Guide the development of the SANC's strategic research priorities and objectives and monitor research performance within the framework of the SANC's Strategic Planning process;
- Consider and make recommendations on matters of policy relating to research, including matters referred to it by the Council;
- Review and oversee the implementation on the SANC's Policy on Research Ethics;
- Advise the Council on research and research training matters as they arise;
- Enable effective management of research and research requests at SANC; and
- Identify research priorities and needs and collaborate with relevant stakeholders.

#### Membership

The membership of the Committee during the year under review consisted of:

Table 98: Research Committee membership

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Dr PM Orton: Chairperson	Prof DR Phetlhu: Chairperson
Prof A Makhene	Prof PJ Jordan: Vice-Chairperson
Dr SZ Mthembu.	Dr SZ Mthembu
	Ms NG Zulu-Siwela

Table 99: Research Committee meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
2	0	2	2

Table 100: Research Committee membership attendance

	16 <sup>th</sup> Council	17 <sup>th</sup> Council
Total number of Committee members	3	4
Required attendance of quorum	2	3
Average number of attendees per meeting	2	3
Committee overall attendance percentage	67%	75%

NB: Overall Committee attendance is 71% for 16th and 17th Council for the financial year.

Table 101: Research Committee meetings in the 2023/24 FY

Nursing Excellence Awards Ad Hoc Committee Meetings		
Meeting Type	Ordinary	Ordinary
Meeting Dates	24/04/2024	01/03/2024
Total No. in Attendance	2	3

### 1.19. CONTINUING PROFESSIONAL DEVELOPMENT COMMITTEE

This is a sub-committee of Laws, Practice and Standards Committee. The committee had three members, and three meetings. The meetings were held on 21/04/2023, 25/07/2023, and 01/02/2024.

#### Membership

The membership of the Committee during the year under review consisted of:

Table 102: Continuing Professional Development Committee membership

16 <sup>th</sup> Council	17 <sup>th</sup> Council
Dr PM Orton	Dr E Kaye-Petersen
Dr N Geyer	Ms MM Makgotlho
Dr E Kaye-Petersen	Ms MC Ramokotjo

Table 103: CPD Committee meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
3	3	0	3

Table 104: CPD membership attendance

Total number of Committee members	3
Required attendance of quorum	3
Average number of attendees per meeting day	2.6
Committee overall attendance percentage	86%

Table 105: CPD Committee meetings in the 2023/24 FY

CPD Committee Meetings			
Meeting Type	Ordinary	Ordinary	Ordinary
Meeting Dates	21/04/2023	25/07/2023	01/02/2024
Total No. in Attendance	2	3	3





## Part E

# FINANCIAL INFORMATION

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## South African Nursing Council General Information

Annual Financial Statements for the year ended 31 March 2024

<b>Country of incorporation and domicile</b>	South Africa
<b>Nature of business and principal activities</b>	Regulation body that sets, maintains and regulates standards of nursing education and nursing practice in the Republic of South Africa.
<b>Registered office</b>	602 Pretorius Street Arcadia Pretoria 0083
<b>Postal address</b>	Private Bag X 132 Pretoria 0001
<b>Auditors</b>	Nexia SAB&T Incorporated Registered Auditors
<b>Company Secretary</b>	Ms Nolene Mashabela (Acting)
<b>Level of assurance</b>	These annual financial statements have been audited in compliance with the applicable requirements of the Nursing Act, 2005 (Act No. 33 of 2005).
<b>Preparer/Compiler</b>	The annual financial statements were internally compiled by the Acting Senior Manager Finance, Mr Thulani Shabane.

# Table of Contents

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

	Pages
Councillors' Report .....	101-102
Audit and Risk Committee Report .....	103-105
Independent Auditor's Report .....	106-108
Statement of Financial Position .....	109
Statement of Profit or Loss and Other Comprehensive Income .....	110
Statement of Changes in Equity .....	111
Statement of Cash Flows .....	112
Accounting Policies .....	113-116
Notes to the Annual Financial Statements .....	117-137
<b>The following supplementary information does not form part of the annual financial statements and is unaudited:</b>	
Detailed Income Statement .....	138-139



The Councillors have pleasure in submitting their report on the annual financial statements of the South African Nursing Council for the year ended 31 March 2024.

### 1. Nature of business

The South African Nursing Council (Council) is engaged in setting, maintaining and regulating standards of Nursing education and Nursing practice in the Republic of South Africa. The Council was established by Section 2 of the Nursing Act, 1978 (Act No. 50 of 1978) and continues to exist as a juristic person, notwithstanding the repeal of that Act by the current Nursing Act (Act No. 33 of 2005).

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 annual financial statements have been prepared in accordance with International Financial Reporting Standards and the requirements of the Nursing Act (Act No.33 of 2005). The accounting policies have been applied consistently compared to the prior year.

Full details of the financial position, results of operations and cash flows of the Council are set out in these annual financial statements.

### 3. Councillors

#### 17th Council Members appointed on 23 August 2023 for a five year term

1. Dr MC Molepo (Chairperson)
2. Prof DR Phetlhu (Vice-Chairperson)
3. Prof PJ Jordan
4. Ms TA Kaseke
5. Dr E Kaye-Petersen
6. Ms FL Kgatla
7. Ms PZ Khumalo-Ntamane
8. Ms LCBN Lioma
9. Ms JA Maimin
10. Ms MM Makgotlho
11. Ms RE Malatji
12. Dr M Matandela
13. Mr B Mgwenya
14. Mr SV Mkhathshwa
15. Mr TR Moeketsi
16. Dr SZ Mthembu
17. Ms ST Mthembu
18. Ms MM Mutepe
19. Mr LL Rabotapi
20. Ms MC Ramokotjo
21. Mr R Rensburg
22. Mr S Shandu
23. Mr M Tshofela
24. Ms NG Zulu-Siwela
25. Prof SM Zuma

#### 16th Council Members term ended on 22 August 2023

1. Dr MC Molepo (Chairperson)
2. Dr SM Zuma (Vice-Chairperson)
3. Prof A Makhene
4. Ms TA Kaseke
5. Dr E Kaye-Petersen
6. Dr HC De Swardt
7. Dr LL Nkonzo-Mtembu
8. Prof DI Gihwala
9. Mr JT Ntshabele
10. Ms TM Magoro
11. Dr Nelouise-Marie Geyer
12. Dr PM Orton
13. Prof SE Duma
14. Mr MS Choma
15. Ms DQ Ngidi
16. Dr SZ Mthembu
17. Mr MJ Matsomela
18. Ms SF Molokoane-Machika
19. Mr LL Rabotapi
20. Ms ZM Ramaila
21. Ms F Newton
22. Dr E Kaye-Petersen
23. Dr H Ally
24. Mr R Tshimomola
25. Ms C Mbuyane

#### 4. Going concern

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

The Councillors believe that the council has adequate financial resources to continue in operation for the foreseeable future and accordingly the annual financial statements have been prepared on a going concern basis. The councillors have satisfied themselves that the council is in a sound financial position to meet its foreseeable cash requirements. The councillors are not aware of any new material changes that may adversely impact the council. The councillors are also not aware of any material non-compliance with statutory or regulatory requirements or of any pending changes to legislation which may affect the Council.

#### 5. External auditors

Nexia SAB&T are the appointed auditors for a five year term that began on 2019 financial year, the contract has been extended for the 6<sup>th</sup> year to audit the current financial year.



We are pleased to present our report for the financial year ended 31 March 2024.

The Audit and Risk Committee is an independent committee appointed by Council. The committee operates in terms of an approved Charter to discharge its delegated duties.

### COMPOSITION AND ATTENDANCE OF COMMITTEE MEETINGS

The Audit and Risk Committee comprised of three independent non-Council members and three Council members appointed in terms of the Nursing Act, 2005 (Act No.33 of 2005).

The Audit and Risk Committee meetings are attended by the Registrar and Chief Executive Officer, the Chief Financial Officer, Senior Manager Internal Audit and Risk Management, the Manager Risk and management representatives of the various departments of the SANC. The external auditors attend the Audit and Risk Committee meetings by invitation and may independently meet with the Audit and Risk Committee as and when required.

The Audit and Risk Committee Charter provides for the Committee to meet at least four times per annum. The Committee held three (3) ordinary meetings, two (2) special meetings and two (2) joint meetings of the Audit and Risk and Finance Committee (ARC and FINCO) during the financial year.

The table below outlines the Audit and Risk Committee members and the number of meetings attended by each member during the financial year:

NAME OF MEMBER	MEMBERSHIP	NUMBER OF MEETINGS ATTENDED	TERM OF OFFICE EXPIRY
Mr R Rensburg	Council member (Chairperson)	4	22 August 2028
Mr LL Rabotapi	Council member (Former Chairperson)	3	22 August 2023
Dr SM Zuma	Council member	2	22 August 2023
Ms TA Kaseke	Council member	6	22 August 2028
Mr N Tshofela	Council member	4	22 August 2028
Ms Z Ngwepe	Independent external member	5	09 December 2026
Mr KJ Sello	Independent external member	7	17 March 2025
Ms N Ngema	Independent external member	4	09 November 2026

### RESPONSIBILITIES OF THE AUDIT AND RISK COMMITTEE

The Audit and Risk Committee's Charter outlines the following governance responsibilities of the committee.

:

- Council-wide risk management governance.
- Efficacy of the internal audit function.
- External audit governance responsibilities.
- Efficacy of the financial management and financial reporting systems, particularly relating to internal and/or external audit responsibilities.
- Oversight over the efficacy of the ethics and compliance management of the organisation.
- Oversight over the application and effectiveness of combined assurance model.

### EXTERNAL AUDIT

Nexia SAB&T is the external audit firm responsible for performing the external regulatory audit function for the 2023/24 financial year. The Audit and Risk Committee has satisfied itself that the audit firm and the designated auditor are in good standing with the Independent Regulatory Board for Auditors.

The Audit and Risk Committee is satisfied with the independence and objectivity of the external auditors, including the consideration of the auditor's previous appointments, the extent of other work undertaken, and compliance with criteria relating to independence or conflict of interest as prescribed by the Independent Regulatory Board for Auditors. The external auditors did not undertake any other work except external audit work during the financial year.

The Audit and Risk Committee liaised with the external auditors during the year and has reviewed the implementation plan to address the external audit findings raised in previous years. As a result, the Audit and Risk Committee is satisfied that the matters previously raised by the external auditors are being addressed by management.

### INTERNAL AUDIT

The Audit and Risk Committee is responsible for ensuring that the Internal Audit function is independent and has the necessary resources, standing and authority within the organisation to enable it to fulfil its duties. The internal audit activities have been co-sourced to Pholela Business Advisory and managed by the Senior Manager Internal Auditing and Risk Management.

The Internal Audit Unit operated in terms of the approved Internal audit charter, developed a risk-based internal audit plan, and reported quarterly to the Audit and Risk Committee. The Internal Audit Unit has reviewed the system of internal control, performance information and risk management during the financial year. The internal audit activity operated efficiently and addressed some pertinent risk areas in its audits.

The Committee is satisfied that the Internal Audit function was independent and objective and has discharged its functions and responsibilities, in terms of prevailing internal audit standards, the Internal Audit Charter and the Internal Audit Plan.

### ENTERPRISE-WIDE RISK MANAGEMENT

The Audit and Risk Committee supports the Council with its governance responsibility for the effective implementation of risk management within the organisation. Management is accountable to the Audit and Risk Committee for designing, implementing and monitoring the Council-wide risk management process and for integrating it into the day-to-day activities of the SANC.

The SANC has adopted an enterprise-wide approach to manage risk, which is defined in its Enterprise Risk Management Framework (ERM). The framework provides a consistent approach to which risks are identified, evaluated, managed and reported in the organisation.

Management has committed to continuous improvement of the organisation's risk maturity through the implementation of various strategies to manage the risk exposure of the SANC. The effectiveness of such strategies are monitored and reported on in the quarterly risk and combined assurance reports to the Audit and Risk Committee.

## THE EFFECTIVENESS OF INTERNAL CONTROLS

The Audit and Risk Committee has reviewed the external auditors' reports on the audited annual financial statements and the internal auditor's reports on the adequacy and effectiveness of internal controls. The Committee noted the control deficiencies arising from both the internal and external audit reports and has considered the appropriateness of management's responses.

An assessment of internal and external audit findings indicates that while controls are in place some weaknesses were identified in other areas of the business and the control environment requires improvement. Management has committed to taking the necessary measures to address the control weaknesses identified by internal and external auditors. The implementation of the management action plans is monitored on a quarterly basis and reported as such to the Council.

## EVALUATION OF AUDITED ANNUAL FINANCIAL STATEMENTS

The Audit and Risk Committee has:

- Reviewed and discussed the audited annual financial statements to be included in the annual report, with the external auditors and the Registrar and CEO;
- Reviewed the external auditor's management letter and management's response thereto; and
- Reviewed adjustments resulting from the audit after the 2023/24 audit was finalised.

The Audit and Risk Committee accepts the external auditor's conclusions on the annual financial statements as well as the audit opinion and the audited annual financial statements be read together with the report of the external auditors.

Special appreciation also goes to the internal audit team and external auditors for their support and professionalism in the performance of their mandate.

*Russell Rensburg*

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Mr R Rensburg  
Chairperson of the Audit and Risk Committee



## INDEPENDENT AUDITOR'S REPORT

To the Councillors of South African Nursing Council

### Opinion

We have audited the financial statements of South African Nursing Council (SANC) set out on pages 98 to 139, which comprise the statement of financial position as at 31 March 2024, and the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including material accounting policy information.

In our opinion, the financial statements present fairly, in all material respects, the financial position of South African Nursing Council as at 31 March 2024, and its financial performance and cash flows for the year then ended in accordance with the IFRS Accounting Standards as issued by the International Accounting Standards Board and the requirements of the Nursing Act of South Africa (Act No. 33 of 2005).

### Basis for Opinion

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

### Other Information

The council members are responsible for the other information. The other information comprises the information included in the document titled "South African Nursing Council's Annual Report -2023-2024", which includes the Councillors' Report and the Audit and Risk Committee Report, which we obtained prior to the date of this report. The other information does not include the financial statements and our auditor's report thereon.

## Audit. Tax. Advisory.

Chairperson: Mrs A Ramasike  
Chief Executive Officer: Mr MF Sulaman  
SAB&T Chartered Accountants Incorporated t/a Nexia SAB&T  
Company Registration Number: 1997/018869/21 | IRBA Registration Number: 921297  
Offices in: Bloemfontein, Cape Town, Centurion, Durban, Johannesburg, Kimberley, Nelspruit, Polokwane, Port Elizabeth, Rustenburg  
B-BBEE rating: Level 1 Contributor in terms of Generic Scorecard - B-BBEE Codes of Good Practice  
SAB&T Chartered Accountants Incorporated is a member of Nexia, a leading, global network of independent accounting and consulting firms.  
SAB&T Chartered Accountants Incorporated is an authorised financial services provider.  
\* A full list of directors is available for inspection at the company's registered office or on request.

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

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

### **Responsibilities of the Council Members for the Financial Statements**

The council member are responsible for the preparation and fair presentation of the financial statements in accordance with the IFRS Accounting Standards as issued by the International Accounting Standards Board and the requirements of the Nursing Act of South Africa, and for such internal control as the council members determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

### **Auditor's Responsibilities for the Audit of the Financial Statements**

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

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

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

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

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

#### **Report on Other Legal and Regulatory Requirements**

In terms of the IRBA Rule published in Government Gazette Number 39475 dated 4 December 2015, we report that Nexia SAB&T has been the auditor of SANC for 6 years.

*Nexia SAB&T*

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#### **Nexia SAB&T**

Ayisha Ramasike  
Director  
Registered Auditor  
31 July 2024



		<b>2024</b>	<b>2023</b>
	<b>Note(s)</b>	<b>R</b>	<b>R</b>
<b>ASSETS</b>			
<b>Non-Current Assets</b>			
Property, plant and equipment	2	57 044 413	56 882 292
Right-of-use assets	26	514 694	784 249
Intangible assets	3	1 129 716	1 117 647
Other financial assets	4	1 103 806	930 382
		<b>59 792 629</b>	<b>59 714 570</b>
<b>Current Assets</b>			
Inventories	5	1 618 140	505 374
Trade and other receivables	6	14 800 698	13 462 869
Cash and cash equivalents	7	816 408 421	749 070 581
		<b>832 827 259</b>	<b>763 038 824</b>
<b>Total Assets</b>		<b>892 619 888</b>	<b>822 753 394</b>
<b>EQUITY AND LIABILITIES</b>			
<b>EQUITY</b>			
Reserves	9	77 454 961	74 253 300
Retained income		731 120 108	668 201 640
		<b>808 575 069</b>	<b>742 454 940</b>
<b>LIABILITIES</b>			
<b>Non-Current Liabilities</b>			
Lease liabilities	27	621 166	830 361
Retirement benefit obligation	10	19 691 000	22 542 000
		<b>20 312 166</b>	<b>23 372 361</b>
<b>Current Liabilities</b>			
Trade and other payables	11	12 756 305	11 518 122
Deferred income	12	50 052 824	44 565 945
Employee benefit obligation	13	923 524	842 026
		<b>63 732 653</b>	<b>56 926 093</b>
<b>Total Liabilities</b>		<b>84 044 819</b>	<b>80 298 454</b>
<b>Total Equity and Liabilities</b>		<b>892 619 888</b>	<b>822 753 394</b>

	Note(s)	2024 R	2023 R
Revenue	14	162 893 783	165 040 633
Other operating income	15	1 370 648	1 348 643
Operating expenses		(167 681 381)	(149 052 495)
<b>Net (deficit) surplus from operations</b>	16	<b>(3 416 950)</b>	<b>17 336 781</b>
Investment income	17	66 360 728	44 649 597
Interest expense	18	(2 142 516)	(2 535 695)
<b>Net Surplus for the year</b>		<b>60 801 262</b>	<b>59 450 683</b>
<b>Other comprehensive income:</b>			
<b>Items that will not be reclassified to profit or loss:</b>			
Remeasurements on net defined benefit liability	10	2 117 206	2 247 339
Revaluation surplus	9	3 028 236	-
Fair Value Through Other Comprehensive Income		173 425	(231 520)
<b>Total items that will not be reclassified to profit or loss</b>		<b>5 318 867</b>	<b>2 015 819</b>
<b>Total comprehensive income for the year</b>		<b>66 120 129</b>	<b>61 466 502</b>

	Revaluation reserve	Reserve for valuation of investments	Total reserves	Retained income	Total equity
	R	R	R	R	R
Opening balance as previously reported	73 633 749	851 071	74 484 820	606 511 396	680 996 216
<b>Balance at 01 April 2022 as restated</b>	<b>73 633 749</b>	<b>851 071</b>	<b>74 484 820</b>	<b>606 511 396</b>	<b>680 996 216</b>
Surplus for the year	-	-	-	59 450 683	59 450 683
Other comprehensive income	-	(231 520)	(231 520)	2 247 339	2 015 819
<b>Total comprehensive income for the year</b>	<b>-</b>	<b>(231 520)</b>	<b>(231 520)</b>	<b>61 698 022</b>	<b>61 466 502</b>
Transfer between reserves	-	-	-	(7 778)	(7 778)
<b>Balance at 01 April 2023</b>	<b>73 633 749</b>	<b>619 551</b>	<b>74 253 300</b>	<b>668 201 640</b>	<b>742 454 940</b>
Surplus for the year	-	-	-	60 801 262	60 801 262
Other comprehensive income	3 028 236	173 425	3 201 661	2 117 206	5 318 867
<b>Total comprehensive income for the year</b>	<b>3 028 236</b>	<b>173 425</b>	<b>3 201 661</b>	<b>62 918 468</b>	<b>66 120 129</b>
<b>Balance at 31 March 2024</b>	<b>76 661 985</b>	<b>792 976</b>	<b>77 454 961</b>	<b>731 120 108</b>	<b>808 575 069</b>

Note(s)

9



	Note(s)	2024 R	2023 R
<b>Cash flows from operating activities</b>			
Cash receipts from customers		161 555 954	161 922 768
Cash paid to suppliers and employees		(152 675 438)	(140 269 622)
Cash generated from operations	19	8 880 516	21 653 146
Interest income	17	65 938 681	44 353 490
Dividends received	17	54 271	62 682
Interest paid	18	(1 185)	-
<b>Net cash from operating activities</b>		<b>74 872 283</b>	<b>66 069 318</b>
<b>Cash flows from investing activities</b>			
Purchase of property, plant and equipment	2	(4 280 023)	(4 005 391)
Proceeds from disposal of property, plant and equipment		37 346	17 633
Acquisition of intangible assets		(207 448)	-
<b>Net cash utilised by investing activities</b>		<b>(4 450 125)</b>	<b>(3 987 758)</b>
<b>Cash flows from financing activities</b>			
Cash repayments on lease liabilities	26	(292 524)	-
Net payments on defined benefit obligations	10	(2 791 794)	(3 003 662)
<b>Net cash from financing activities</b>		<b>(3 084 318)</b>	<b>(3 003 662)</b>
<b>Total cash movement for the year</b>		<b>67 337 840</b>	<b>59 077 898</b>
Cash and cash equivalent at the beginning of the year		749 070 581	689 992 683
<b>Cash and cash equivalents at the end of the year</b>	7	<b>816 408 421</b>	<b>749 070 581</b>

## Material accounting policy information

### 1. Basis of preparation

The annual financial statements have been prepared on the going concern basis in accordance with, and in compliance with, International Financial Reporting Standards ("IFRS") and International Financial Reporting Standards Interpretations Committee ("IFRS IC") interpretations issued and effective at the time of preparing these annual financial statements and the Nursing Act (Act No.33 of 2005) as amended.

The annual financial statements have been prepared on the historic cost convention, unless otherwise stated in the accounting policies which follow and incorporate the principal accounting policies set out below. They are presented in Rands, which is the Council's functional currency

#### 1.1 Material judgements and key sources of estimation uncertainty

In preparing the annual financial statements in accordance with IFRS, management is required to make judgements, estimates and assumptions that affect the application of policies and the reported amounts represented in the annual financial statements and related disclosures. Use of available information and the application of judgement is inherent in the formation of estimates. The estimates and associated assumptions are based on historical experience and various other factors that are believed to be reasonable under the circumstances, the results of which form the basis of making the judgements about carrying values of assets and liabilities that are not readily apparent from other sources. Actual results may differ from these estimates which could be material to the annual financial statements.

The estimates and underlying assumptions are reviewed on an on-going basis and where applicable, adjustments are recognised in the period in which the estimate is revised if the revision affects only that period or in the period of the revision and further periods if the revision affects both current and future periods. Material judgements and assumptions include:

#### Prior year comparatives

When there is an amendment to the classification and presentation of items in the annual financial statements, prior year comparatives are also reclassified and restated in line with the amendment. The nature and reason for reclassification and amendment are also disclosed.

Where there has been a change in accounting policy in the current year, a retrospective adjustment is made as far as practicable and the prior year comparatives are restated accordingly. Similarly, when accounting errors have been identified in the current year which relate to the prior year, the correction is made retrospectively as far as practicable and the prior year comparatives are restated accordingly.

#### Calculation of expected credit loss (ECL)

When measuring expected credit loss (ECL), the Council uses reasonable and supportable forward-looking information, which is based on assumptions for the future movement of different economic drivers and how these drivers will affect each other.

Loss given default is an estimate of the loss arising on default. It is based on the difference between the contractual cash flows due and those that the lender would expect to receive, taking into account cash flows from collateral and integral credit enhancements.

Probability of default constitutes a key input in measuring ECL. Probability of default is an estimate of the likelihood of default over a given time horizons, the calculation of which includes historical data, assumptions and expectations of future conditions.

#### Defined benefit obligations

Estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimates are revised and in any future periods affected. Information about significant areas of estimation uncertainty and critical judgements in applying accounting policies that have the most significant effect on the amounts recognised in the Financial Statements is included in note 10.

## 1.2 Financial instruments

Financial instruments held by the Council are classified in accordance with the provisions of IFRS 9 Financial Instruments.

A financial instrument is any contract that gives rise to a financial asset of one entity, and a financial liability or equity instrument of another entity.

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

Broadly, the classification possibilities, which are adopted by the Council, as applicable, are as follows:

### **Financial assets which are equity instruments:**

- Designated as at fair value through other comprehensive income.

### **Financial assets which are debt instruments:**

- Amortised cost.

Financial assets are derecognised when the contractual rights to the cash flows from the financial asset expire or when it is transferred, and the transfer qualifies for derecognition.

### **Financial liabilities:**

- Amortised cost

Financial instruments and risk management presents the financial instruments held by the Council based on their specific classifications refer note to 8 for details.

All regular way purchases or sales of financial assets are recognised and derecognised on a trade date basis. Regular way purchases or sales are purchases or sales of financial assets that require delivery of assets within the time frame established by regulation or convention in the marketplace.

The specific accounting policies for the classification, recognition and measurement of each type of financial instrument held by the Council are presented below:

All assets and liabilities for which fair value is measured or disclosed in the financial statements are categorised within the fair value hierarchy. This is described, as follows, based on the lowest level input that is significant to the fair value measurement as a whole:

- Level 1-quoted (unadjusted) market prices in active markets for identical assets or liabilities.
- Level 2-valuation techniques for which the lowest level input that is material to the fair value measurement is directly or indirectly observable.
- Level 3-valuation techniques for which the lowest level input that is material to the fair value measurement is unobservable.

## **Trade and other receivables**

### **Classification**

Trade and other receivables, excluding, when applicable, VAT and prepayments, are classified as financial assets subsequently measured at amortised cost (note 6).

They have been classified in this manner because their contractual terms give rise, on specified dates to cash flows that are solely payments of principal and interest on the principal outstanding, and the Council's business model is to collect the contractual cash flows on trade and other receivables.

### **Recognition and measurement**

Trade and other receivables are recognised when the Council becomes a party to the contractual provisions of the receivables. They are measured, at initial recognition, at fair value plus transaction costs, if any.

They are subsequently measured at amortised cost.

The amortised cost is the amount recognised on the receivable initially, minus principal repayments, plus cumulative amortisation (interest) using the effective interest method of any difference between the initial amount and the maturity amount, adjusted for any loss allowance.

### **Impairment**

The Council recognises a loss allowance for expected credit losses on trade and other receivables, excluding VAT and prepayments. The amount of expected credit losses is updated at each reporting date.

The Council measures the loss allowance for trade and other receivables at an amount equal to lifetime expected credit losses (lifetime ECL), which represents the expected credit losses that will result from all possible default events over the expected life of the receivable.

### **Measurement and recognition of expected credit losses**

The Council makes use of a provision matrix as a practical expedient to the determination of expected credit losses on trade and other receivables. The provision matrix is based on historic credit loss experience, adjusted for factors that are specific to the debtors, general economic conditions and an assessment of both the current and forecast direction of conditions at the reporting date, including the time value of money, where appropriate.

### **Write off policy**

The Council writes off a receivable when there is information indicating that the counterparty is in severe financial difficulty and there is no realistic prospect of recovery, e.g. when the counterparty has been placed under liquidation or has entered into bankruptcy proceedings. Receivables written off may still be subject to enforcement activities under the Council recovery procedures, taking into account legal advice where appropriate. Any recoveries made are recognised in surplus or deficit.

### **Credit risk**

Details of credit risk are included in the trade and other receivables note (note 6) and the financial instruments and risk management note (note 8).

### **Investments in equity instruments**

#### **Classification**

Investments in equity instruments are presented in note 4. They are classified as mandatorily at fair value through other comprehensive income.

The designation as at fair value through other comprehensive income is never made on investments which are either held for trading or contingent consideration in a business combination.

#### **Recognition and measurement**

Investments in equity instruments are recognised when the Council becomes a party to the contractual provisions of the instrument. The investments are measured, at initial recognition, at fair value. Transaction costs are added to the initial carrying amount for those investments which have been designated as at fair value through other comprehensive income. All other transaction costs are recognised in surplus or deficit.

Investments in equity instruments are subsequently measured at fair value with changes in fair value recognised in other comprehensive income (and accumulated in equity in the reserve for valuation of investments) Details of the valuation policies and processes are presented in note

Dividends received on equity investments are recognised in surplus or deficit when the Council's right to received the dividends is established, unless the dividends clearly represent a recovery of part of the cost of the investment. Dividends are included in investment income (note 17).

### **Impairment**

Investments in equity instruments are not subject to impairment provisions.

### **Trade and other payables**

#### **Classification**

Trade and other payables (note 11), excluding VAT and amounts received in advance, are classified as financial liabilities subsequently measured at amortised cost.

#### **Recognition and measurement**

They are recognised when the Council becomes a party to the contractual provisions, and are measured, at initial recognition, at fair value plus transaction costs, if any.

They are subsequently measured at amortised cost using the effective interest method.

The effective interest method is a method of calculating the amortised cost of a financial liability and of allocating interest expense over the relevant period. The effective interest rate is the rate that exactly discounts estimated future cash payments (including all fees and points paid or received that form an integral part of the effective interest rate, transaction costs and other premiums or discounts) through the expected life of the financial liability, or (where appropriate) a shorter period, to the amortised cost of a financial liability.

If trade and other payables contain a significant financing component, and the effective interest method results in the recognition of interest expense, then it is included in surplus or deficit in interest paid (note 18).

Trade and other payables expose the Council to liquidity risk and possibly to interest rate risk. Refer to note 8 for details of risk exposure and management thereof.

### **Offsetting**

Financial assets and financial liabilities are not offset unless the Council has a legally enforceable right to offset the amounts recognised and intends either to settle on a net basis, or to realise the asset and settle the liability simultaneously.

### **Cash and cash equivalents**

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

Cash and cash equivalents comprise of cash held at the bank. The carrying amount of these assets approximates their fair value.

## **1.3. New Standards and Interpretations**

### **1.3.1 Standards and interpretations effective and adopted in the current year**

In the current year, the Council has adopted the following standards and interpretations that are effective for the current financial year and that are relevant to its operations:

<b>Standard/ Interpretation:</b>	<b>Effective date: Years beginning on or after</b>	<b>Expected impact:</b>
Classification of Liabilities as Current or Non-Current - Amendment to IAS 1	01 January 2024	No material impact



## **Classification of Liabilities as Current or Non-Current - Amendment to IAS 1**

The amendments aim to promote consistency in applying the requirements by helping companies determine whether, in the statement of financial position, debt and other liabilities with an uncertain settlement date should be classified as current (due or potentially due to be settled within one year) or non-current.

The effective date is for years beginning on or after 01 January 2024.

The Council expects to adopt the amendment for the first time in the 2024 annual financial statements.

### **1.4 Revenue**

Revenue comprises the consideration received or receivable on contracts entered into with customers in the ordinary course of the Council's activities. Revenue is shown net of taxes and discounts. Revenue is recognised at the amount of the transaction price that is allocated to each performance obligation and this is determined at an amount that depicts the consideration to which the Council expects to be entitled in exchange for transferring the good and services promised to the customer. The transaction prices recognised by the Council are published in the Government Gazette in terms of the Nursing Act (Act No. 33 of 2005).

Revenue is recognised when control is transferred to the customer. The appropriate time when control is transferred has been determined as follows:

Verification fees, Confirmation fees, Enrollment and application fees	When verification letter is issued, confirmation letter is issued, learner certificate is issued and on receipt of application
Annual fees	When the Annual Practising Certificate (APC) is issued.
Restoration fees	When the relevant nurse practitioner has been reinstated into the register of nurses
Registration fees	When registration has been confirmed to the nurse practitioner
Examination fees	When the results of the examination have been released
Distinguishing devices	When the devices are dispatched / collected by the nurse practitioner
Application fees for accreditation	Acknowledgement of receipt of application documents
Other fees (Annual fees-Nursing Education Institutions, other income unidentified deposits realised and other income)	Point-in-time

### **1.5 Property, plant and equipment**

The cost of an item of property, plant and equipment is recognised as an asset when:

- it is probable that future economic benefits associated with the item will flow to the Council; and
- the cost of the item can be measured reliably.

Property, plant and equipment is initially measured at cost. Costs 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.

Property, plant and equipment is carried at cost less accumulated depreciation and any impairment losses except for land and buildings which are carried at revalued amounts.

Property, plant and equipment are depreciated on the straight line basis over their expected useful lives to their estimated residual value. The residual value, useful life and depreciation method of each asset are reviewed at the end of each reporting period. If the expectations differ from previous estimates, the change is accounted for as a change in accounting estimate.

**1.5 Property, plant and equipment (continued)**

Land and buildings are carried at revalued amount, being the fair value at the date of revaluation less any subsequent accumulated depreciation and subsequent accumulated impairment losses. Revaluations are made with sufficient regularity such that the carrying amount does not differ materially from that which would be determined using fair value at the end of the reporting period.

Any increase in the carrying amount of land and buildings, as a result of a revaluation, is recognised in other comprehensive income and accumulated in the revaluation surplus in equity. The increase is recognised in profit to the extent that it reverses a revaluation decrease of the same asset previously recognised in losses.

Any decrease in the carrying amount of land and buildings, as a result of a revaluation, is recognised in losses in the current period. The decrease is debited in other comprehensive income to the extent of any credit balance existing in the revaluation surplus in respect of that asset.

The revaluation surplus in equity related to a specific item of land and buildings is transferred directly to retained earnings when the asset is derecognised.

The useful lives of items of property, plant and equipment have been assessed as follows:

Item	Average useful life
Land	Indefinite
Motor vehicles	5 years
Office equipment	5-6 years
IT equipment	3 years
Building	50 years

The residual value, useful life and depreciation method of each asset are reviewed at the end of each reporting year. If the expectations differ from previous estimates, the change is accounted for prospectively as a change in accounting estimate.

Each part of an item of property, plant and equipment with a cost that is significant in relation to the total cost of the item is depreciated separately.

The depreciation charge for each year is recognised in surplus or deficit unless it is included in the carrying amount of another asset.

Impairment tests are performed on property, plant and equipment when there is an indicator that they may be impaired. When the carrying amount of an item of property, plant and equipment is assessed to be higher than the estimated recoverable amount, an impairment loss is recognised immediately in surplus or deficit to bring the carrying amount in line with the recoverable amount.

An item of property, plant and equipment is derecognised upon disposal or when no future economic benefits are expected from its continued use or disposal. Any gain or loss arising from the derecognition of an item of property, plant and equipment, determined as the difference between the net disposal proceeds, if any, and the carrying amount of the item, is included in surplus or deficit when the item is derecognised.

The gain or loss arising from derecognition of an item of property, plant and equipment is included in profit or loss when the item is derecognised. The gain or loss arising from derecognition of an item of property, plant and equipment is determined as the difference between the net disposal proceeds, if any, and the carrying amount of the item.

**1.6 Intangible assets**

An intangible asset is recognised when:

- it is probable that the expected future economic benefits that are attributable to the asset will flow to the Council; and
- the cost of the asset can be measured reliably.

Intangible assets are initially recognised at cost.

Expenditure on research (or on the research phase of an internal project) is recognised as an expense when it is incurred.

An intangible asset arising from development (or from the development phase of an internal project) is recognised when:

- it is technically feasible to complete the asset so that it will be available for use or sale.
- there is an intention to complete and use or sell it.
- there is an ability to use or sell it.
- it will generate probable future economic benefits.
- there are available technical, financial and other resources to complete the development and to use or sell the asset.
- the expenditure attributable to the asset during its development can be measured reliably.

Intangible assets are carried at cost less any accumulated amortisation and any impairment losses.

Intangible assets comprise of computer software and are initially recognised at cost. Intangible assets are subsequently carried at cost less any accumulated amortisation and any impairment losses.

Reassessing the useful life of an intangible asset with a finite useful life after it was classified as indefinite is an indicator that the asset may be impaired. As a result the asset is tested for impairment and the remaining carrying amount is amortised over its useful life.

Internally generated brands, mastheads, publishing titles, customer lists and items similar in substance are not recognised as intangible assets.

Amortisation is provided to write down the intangible assets, on a straight line basis, to their residual values as follows:

Item	Useful life
Computer software	10 years

### 1.7 Inventories

Inventories comprise distinguishing devices and are valued at the lower of cost and net realisable value. Cost is determined using the first-in-first out basis. Net realisable value is the estimated selling price in the ordinary course of business less the estimated costs of completion and selling expenses.

The cost of inventories comprises of all costs of purchase, and other costs incurred in bringing the inventories to their present location and condition.

When inventories are sold, the carrying amount of those inventories are recognised as an expense in the period in which the related revenue is recognised.

### 1.8 Impairment of non-financial assets

The Council assesses at each end of the reporting period whether there is any indication that an asset may be impaired. If any such indication exists, the Council estimates the recoverable amount of the asset.

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.

The recoverable amount of an asset or a cash-generating unit is the higher of its fair value less costs to sell and its value in use.

If the recoverable amount of an asset is less than its carrying amount, the carrying amount of the asset is reduced to its recoverable amount. That reduction is an impairment loss.

The Council assesses at each reporting date whether there is any indication that an impairment loss recognised in prior periods for assets may no longer exist or may have decreased. If any such indication exists, the recoverable amounts of those assets are estimated.

The increased carrying amount of an asset other than attributable to a reversal of an impairment loss does not exceed the carrying amount that would have been determined had no impairment loss been recognised for the asset in prior periods.

An impairment loss of an asset or reversal of an impairment loss of an asset is recognised immediately in profit or loss except in a case of revalued assets where any reversal of an impairment loss of a revalued asset is treated as a revaluation increase.

## **1.9 Employee benefits**

### **Short-term employee benefits**

The cost of short-term employee benefits, (those payable within 12 months after the service is rendered, such as paid vacation leave, bonuses, and non-monetary benefits such as medical care), is recognised in the period in which the service is rendered and are not discounted.

The cost of employee entitlements to salaries, annual leave, etc., which the Council has a present obligation to pay as a result of employees' services provided to the reporting date is recognised as a liability.

### **Defined contribution plans**

Payments to the defined contribution plans are recognised as an expense when employees have rendered the service entitling them to the contributions.

### **Defined benefit plans**

The Council provides post-employment medical aid benefits to some of their retirees. The total value of the contractual liability is recognised at year-end.

For defined benefit plans the cost of providing the benefits is determined using the projected unit credit method. Actuarial valuations are conducted on an annual basis by independent actuaries separately for each plan. Consideration is given to any event that could impact the funds up to the end of the reporting period where the interim valuation is performed at an earlier date.

Actuarial gains and losses are recognised in the year in which they arise, in other comprehensive income. Gains or losses on the curtailment or settlement of a defined benefit plan is recognised when the Council is demonstrably committed to curtailment or settlement.

The amount recognised in the Statement of Financial Position represents the present value of defined benefit obligation as adjusted for unrecognised actuarial gains and losses and unrecognised past service costs, and reduces the fair value of plan assets.

Any asset is limited to unrecognised actuarial losses and past service costs, plus the present value of available refunds and reduction in future contributions to the plan.

The Council recognises all actuarial gains and losses arising from the defined medical aid benefit plan in other comprehensive income.

## **1.10 Leases**

The Council assesses whether a contract is, or contains a lease, at the inception of the contract.

A contract is, or contains a lease if the contract conveys the right to control the use of an identified asset for a period of time in exchange for consideration.

In order to assess whether a contract is, or contains a lease, management determine whether the asset under consideration is "identified", which means that the asset is either explicitly or implicitly specified in the contract and that the supplier does not have a substantial right of substitution throughout the period of use. Once management has concluded that the contract deals with an identified asset, the right to control the use thereof is considered. To this end, control over the use of an identified asset only exists when the Council has the right to substantially all of the economic benefits from the use of the asset as well as the right to direct the use of the asset.

In circumstances where the determination of whether the contract is or contains a lease requires material judgement, the relevant disclosures are provided in the material judgments and sources of estimation uncertainty section of these accounting policies.

### **1.11 Provisions and contingencies**

Provisions are recognised when:

- the Council has a present obligation as a result of a past event;
- it is probable that an outflow of resources embodying economic benefits will be required to settle the obligation; and
- a reliable estimate can be made of the obligation.

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

Where some or all of the expenditure required to settle a provision is expected to be reimbursed by another party, the reimbursement shall be recognised when, and only when, it is virtually certain that reimbursement will be received if the entity settles the obligation. The reimbursement shall be treated as a separate asset. The amount recognised for the reimbursement shall not exceed the amount of the provision.

Provisions are not recognised for future operating losses.

Contingent liabilities are not recognised. Contingencies are disclosed in note 20.



	2024 R	2023 R
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## 2. Property, plant and equipment

	2024			2023		
	Cost or revaluation	Accumulated depreciation	Carrying value	Cost or revaluation	Accumulated depreciation	Carrying value
Land	15 710 000	-	15 710 000	15 710 000	-	15 710 000
Buildings	33 190 000	-	33 190 000	36 625 000	(4 308 823)	32 316 177
Office equipment and furniture	21 741 801	(19 116 407)	2 625 394	20 840 315	(15 839 092)	5 001 223
Motor vehicles	973 594	(767 439)	206 155	973 594	(592 862)	380 732
Computer equipment	13 814 595	(8 501 731)	5 312 864	10 543 236	(7 069 076)	3 474 160
<b>Total</b>	<b>85 429 990</b>	<b>(28 385 577)</b>	<b>57 044 413</b>	<b>84 692 145</b>	<b>(27 809 853)</b>	<b>56 882 292</b>

### Reconciliation of property, plant and equipment - 2024

	Opening balance	Additions	Disposals	Revaluations	Depreciation	Total
Land	15 710 000	-	-	-	-	15 710 000
Buildings	32 316 177	-	-	3 028 235	(2 154 412)	33 190 000
Office equipment and furniture	5 001 223	901 486	-	-	(3 277 315)	2 625 394
Motor vehicles	380 732	-	-	-	(174 577)	206 155
IT equipment	3 474 160	3 378 537	(36 304)	-	(1 503 529)	5 312 864
	<b>56 882 292</b>	<b>4 280 023</b>	<b>(36 304)</b>	<b>3 028 235</b>	<b>(7 109 833)</b>	<b>57 044 413</b>

### Reconciliation of property, plant and equipment - 2023

	Opening balance	Additions	Change in useful life	Depreciation	Total
Land	15 710 000	-	-	-	15 710 000
Buildings	34 470 588	-	-	(2 154 411)	32 316 177
Office equipment and furniture	4 789 233	3 365 620	(130 884)	(3 022 746)	5 001 223
Motor vehicles	575 451	-	-	(194 719)	380 732
IT equipment	3 496 512	639 771	421 246	(1 083 369)	3 474 160
	<b>59 041 784</b>	<b>4 005 391</b>	<b>290 362</b>	<b>(6 455 245)</b>	<b>56 882 292</b>

Land and buildings are carried at revalued amounts (adjustments made using net replacement / elimination method) while all the other assets are carried at cost.

Land and buildings are revalued every three years and the last revaluation was done on 31 March 2024 based on valuation performed by Mr D.R. Riley, an independent valuator from Property Partnership CC using the Income Capitalisation Method of valuation for land and building and comparable sales method of valuation for vacant land and the last valuation did not result in material change in the value of the asset.

During the current financial year, the Council disposed furniture with a carrying amount of R nil for R36 304 to employees of the Council.

Figures in Rand						2024	2023	2023
3. Intangible assets								
	Cost / Valuation	Accumulated amortisation and impairment	Carrying value	Cost / Valuation	Accumulated amortisation and impairment	Carrying value		
Asset under construction	4 199 716	(3 992 268)	207 448	3 992 268	(3 992 268)	-		
Application Systems	2 421 369	(1 499 101)	922 268	2 421 369	(1 303 722)	1 117 647		
<b>Total</b>	<b>6 621 085</b>	<b>(5 491 369)</b>	<b>1 129 716</b>	<b>6 413 637</b>	<b>(5 295 990)</b>	<b>1 117 647</b>		
<b>Reconciliation of intangible assets - 2024</b>								
	Opening balance	Additions	Amortisation	Total				
Asset under construction	-	207 448	-	207 448				
Application Systems	1 117 647	-	(195 379)	922 268				
	<b>1 117 647</b>	<b>207 448</b>	<b>(195 379)</b>	<b>1 129 716</b>				
<b>Reconciliation of intangible assets - 2023</b>								
	Opening balance	Amortisation	Impairment loss	Total				
Asset under construction	3 992 268	-	(3 992 268)	-				
Application Systems	1 313 026	(195 379)	-	1 117 647				
	<b>5 305 294</b>	<b>(195 379)</b>	<b>(3 992 268)</b>	<b>1 117 647</b>				

	2024 R	2023 R
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### 3. Intangible assets (continued)

#### Note on intangible assets

Intangible assets relate to purchased applications software such as Canon Document Management System, Sage 300 ERP, Modern Asset Cloud and Caseware amongst others.

Membership Management System (MMS)

The Council received a cancellation letter during January 2023 dated 28 December 2022 from the Attorneys of the service provider that was assisting the Council with the development of the Membership Management System. The Membership Management System has since then been fully impaired as it is highly unlikely that the project will be completed and asset cannot be used in its current form.

### 4. Other financial assets

#### Designated at fair value through Other Comprehensive Income

<b>Sanlam Limited</b>	777 584	631 682
Level 1 listed on the Johannesburg Stock Exchange-11 206 shares in Sanlam Limited trading at R69.39.		
<b>Old Mutual PLC</b>	131 566	131 122
Level 1 listed on the Johannesburg Stock Exchange-11 112 shares in Old Mutual PLC trading at R11.84.		
<b>Old Mutual bonus shares Quilter</b>	80 270	58 719
Level 1 Listed on the Johannesburg Stock Exchange-3 174 ordinary Quilter PLC shares trading at R25.29		
<b>Nedbank bonus shares</b>	114 386	108 859
Level 1 listed on the Johannesburg Stock Exchange-502 shares in Nedbank trading at R227.86		
	<b>1 103 806</b>	<b>930 382</b>

#### © Listed shares traded on a stock exchange

Financial assets at fair value through OCI consist of listed shares and are recognised at fair value, which is the quoted market value of the shares on the JSE and is equal to the carrying amount.

#### Reconciliation of fair value adjustment-other financial assets

Sanlam Limited	145 902	(177 391)
Old Mutual PLC	444	(24 668)
Nedbank bonus shares	21 552	(9 548)
Quilter B Shares before consolidation	-	(11 186)
Cumulative losses of Quilter B Shares reclassified to retained earnings	-	7 778
Quilter shares	5 527	(16 505)
	<b>173 425</b>	<b>(231 520)</b>

### 5. Inventories

Distinguishing devices	1 666 439	553 673
	1 666 439	553 673
Provision for slow moving inventory	(48 299)	(48 299)
	<b>1 618 140</b>	<b>505 374</b>

Inventories are valued at the lower of cost, on a first-in-first-out basis, and net realisable value.

Inventory comprises of badges, brooches ,bars and epaulettes for practitioners.

During the current financial year, R2 384 907 (2023: R2 532 242 ) was incurred as an expense relating to the procurement of inventory items.

Inventories were tested for impairment for possible write down to their net realisable value. During the current financial year, Rnil of inventory was written down to its recoverable amount.



	2024 R	2023 R
<b>6. Trade and other receivables</b>		
Trade receivables	471 155	285 896
Other receivables	942 196	856 055
Impairment loss-PAYE asset	(428 991)	-
Prepayments	5 761 904	4 923 682
Deposits	7 924	7 924
VAT asset	2 679 000	2 390 873
Advances on credit cards	515 581	374 501
Escrow Payment*	4 909 834	4 909 834
Less expected credit loss allowance	(57 905)	(285 896)
Trade receivables at amortised cost	14 800 698	13 462 869
<b>Total trade and other receivables</b>	<b>14 800 698</b>	<b>13 462 869</b>

The lifetime expected loss provision for trade receivables is as follows:

31 March 2024	Current	30 days past due	60 days past due	+90 days past due	Total
Expected loss rate	0 %	0 %	0 %	100 %	-
Gross carrying amount	-	-	410 280	57 905	468 185
Loss provision	-	-	-	(57 905)	(57 905)
<b>31 March 2023</b>	<b>Current</b>	<b>30 days past due</b>	<b>60 days past due</b>	<b>+90 days past due</b>	<b>Total</b>
Expected loss rate	0 %	0 %	0 %	100 %	-
Gross carrying amount	-	-	-	424 676	424 676
Loss provision	-	-	-	(424 676)	(424 676)

\*

An amount of R4 909 834 is disclosed as a prepayment in the current financial year and was for the development of the Membership Management System (MMS) by SpesNet Pty Ltd. During 2022/2023 financial year that contract was cancelled and therefore the Council no longer expects to receive the service for which the prepayment had been made. Due to the change in nature of the transaction, the Council is expecting to receive the payment made back from the Attorneys which held this amount in an Escrow account as per the contract terms with SpesNet (Pty) Ltd.

The SANC raises lifetime expected credit losses for all trade receivables. No trade and other receivables were pledged as security for liabilities.

#### Trade receivables impaired

As of 31 March 2024, trade and receivables of R57 905 (2023: R85 437) were impaired.

#### Reconciliation of provision for impairment of trade and other receivables

	2024 R	2023 R
Expected credit loss allowance at beginning of the year	285 896	478 693
Impairment loss reversed	(227 991)	(393 256)
Impairment loss	-	339 239
<b>Expected credit loss allowance at end of the year</b>	<b>57 905</b>	<b>424 676</b>

#### Exposure to credit risk

Trade receivables inherently expose the Council to credit risk, being the risk that the Council will incur financial loss if customers fail to make payments as they fall due.

	2024 R	2023 R
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## 6. Trade and other receivables (continued)

There have been no significant changes in the credit risk management policies and processes since the prior reporting period.

A loss allowance is recognised for all trade receivables, in accordance with IFRS 9 Financial Instruments, and is monitored at the end of each reporting period. In addition to the loss allowance, trade receivables are written off when there is no reasonable expectation of recovery, for example, when a debtor has been placed under liquidation. Trade receivables which have been written off are subject to enforcement activities.

The Council's historical credit loss experience does not show significantly different loss patterns for different customer segments. The provision for credit losses is therefore based on past due status without disaggregating into further risk profiles. The loss allowance provision is determined as follows:

	2024	2024	2023	2023
	Estimated gross carrying amount at default	Loss allowance (Lifetime expected credit loss)	Estimated gross carrying amount at default	Loss allowance (Lifetime expected credit loss)
Expected credit loss rate:				
More than 120 days past due:(2024 100%) (2023 100%)	57 905	57 905	424 676	(424 676)

## 7. Cash and cash equivalents

Cash and cash equivalents consist of:

Cash on hand	6 982	15 064
Bank balances	3 230 709	1 091 356
Short-term deposits	813 170 730	747 964 161
	<b>816 408 421</b>	<b>749 070 581</b>

## 8. Financial instruments and risk management

### Categories of financial instruments

#### Categories of financial assets-at amortised cost

#### 2024

	Note(s)	Fair value through other comprehensive income - equity instruments	Amortised cost	Total	Fair value
Listed investment -at fair value through other comprehensive income (FVTOCI)	4	1 103 806	-	1 103 806	1 103 806
Trade and other receivables	6	-	468 185	468 185	-
Cash and cash equivalents	7	-	816 408 421	816 408 421	816 408 421
		<b>1 103 806</b>	<b>816 876 606</b>	<b>817 980 412</b>	<b>817 512 227</b>

			2024 R	2023 R
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8. Financial instruments and risk management (continued)

2023

	Note(s)	Fair value through other comprehensive income - equity instruments	Amortised cost	Total	Fair value
Listed investment-at fair value through other comprehensive income (FVTOCI)	4	930 382	-	930 382	930 382
Trade and other receivables	6	-	424 676	424 676	424 676
Cash and cash equivalents	7	-	749 070 581	749 070 581	749 070 581
		<b>930 382</b>	<b>749 495 257</b>	<b>750 425 639</b>	<b>750 425 639</b>

Categories of financial liabilities-at amortised cost

2024

	Note(s)	Amortised cost	Total	Fair value
Trade and other payables	11	3 148 691	3 148 691	-

2023

	Note(s)	Amortised cost	Total	Fair value
Trade and other payables	11	3 341 029	3 341 029	-

	2024 R	2023 R
<b>8. Financial instruments and risk management (continued)</b>		
<b>Financial risk management</b>		
<b>Overview</b>		
The Council is exposed to the following risks from its use of financial instruments:		
<ul style="list-style-type: none"> <li>• Credit risk;</li> <li>• Liquidity risk; and</li> <li>• Market risk (currency risk, interest rate risk and price risk).</li> </ul>		
<b>Credit risk</b>		
Credit risk is the risk of financial loss to the Council if a customer or counterparty to a financial instrument fails to meet its contractual obligations.		
<b>Liquidity risk</b>		
The Council is exposed to liquidity risk, which is the risk that the Council will encounter difficulties in meeting its obligations as they become due.		
The Council manages its liquidity risk by effectively managing its working capital, capital expenditure and cash flows. The financing requirements are met through cash generated from operations.		
There have been no significant changes in the liquidity risk management policies and processes since the prior reporting period.		
<b>Interest rate risk</b>		
Fluctuations in interest rates impact on the value of investments and financing activities, giving rise to interest rate risk.		
The Council policy with regards to financial assets, is to invest cash at floating rates of interest and to maintain cash reserves in short-term investments in order to maintain liquidity, while also achieving a satisfactory return for the Council.		
There have been no significant changes in the interest rate risk management policies and processes since the prior reporting period.		
<b>9. Reserves</b>		
<b>Revaluation reserve</b>		
<ul style="list-style-type: none"> <li>• Opening balance</li> <li>• Revaluation surplus</li> </ul>	73 633 749 3 028 236	73 633 749 -
	<b>76 661 985</b>	<b>73 633 749</b>
<b>Fair value adjustment</b>		
<ul style="list-style-type: none"> <li>• Opening balance</li> <li>• Fair value adjustment through OCI</li> </ul>	619 551 173 425	851 071 (231 520)
	<b>792 976</b>	<b>619 551</b>
<b>Total Reserves</b>	<b>77 454 961</b>	<b>74 253 300</b>

	2024 R	2023 R
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## 10. Retirement benefits

### Defined benefit plan

The Council provides post-retirement medical aid benefits to former employees and widow(er) members who participated in the Bestmed, Bonitas and Medshield Schemes.

The actuarial valuation of the post-employment medical aid liability performed as at 31 March 2024 reported a contractual liability amounting to R19 691 000 (2023:R22 542 000).

Present value of the defined benefit obligation-wholly unfunded	19 691 000	22 542 000
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### Changes in the present value of the defined benefit obligation are as follows:

Present value of the defined benefit obligation-wholly unfunded	22 542 000	25 279 000
Expected benefit payments	(2 973 000)	(3 043 000)
Interest cost	2 058 000	2 514 000
Actuarial (gain)/Loss	(1 936 000)	(2 208 000)
	<b>19 691 000</b>	<b>22 542 000</b>

Actual payments made on retirement benefits amount to R2 791 794 and not R2 973 000 and as such remeasurements on net defined benefit liability was readjusted by R181 206 to R2 117 206

### Amount recognised in profit or loss

Current service cost	2 058 000	2 514 000
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### Amount recognised in other comprehensive income

Actuarial (gain)	(1 936 000)	(2 208 000)
	<b>122 000</b>	<b>306 000</b>

### Key assumptions used

Assumptions used on last valuation date, 31 March 2024 were as follows:

Health care cost inflation rate	6,95 %	6,37 %
Discount rates used	10,88 %	9,76 %

### Sensitivity analysis

The sensitivity analyses indicated in the below table have been determined based on the exposure to medical aid inflation rate for defined benefit obligation at the statement of financial position date. The analysis is prepared assuming the amount of liability outstanding at the statement of financial position date was outstanding for the whole period under review. A 1% increase or decrease is used, since this represents the normal change, if any, per interest rate review period by the Reserve Bank of South Africa. There were no changes in the methods and assumptions used during the period under review. A positive number below indicates an increase in profit. For a 1% increase there would be an equal and opposite impact on the profit or loss.

### Sensitivity Analysis on Interest Cost for the year ending 31 March 2024

Assumption	Change	Total	% Change
Central assumptions		2 058 000	
	1 %	2 187 000	6 %
Health care inflation	(1)%	1 941 000	(6)%
	1 %	2 139 000	4 %
Discount rate	(1)%	1 965 000	(5)%
Post-retirement mortality	1yr	1 953 000	(5)%
Post-retirement mortality	(1yr)	2 166 000	5 %

	2024 R	2023 R
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# 10. Retirement benefits (continued)

## Sensitivity Analysis on Interest Cost for the year ending 31 March 2025

Assumption	Change	Interest Cost (R)	% Change
Central assumptions		1 997 000	
	1 %	2 115 000	6 %
Health care inflation	(1)%	1 889 000	(5)%
	1 %	2 062 000	3 %
Discount rate	(1)%	1 923 000	(4)%
	1yr	1 894 000	(5)%
Post-retirement mortality	(1yr)	2 103 000	5 %

## Valuation

The effective date of the valuation was 31 March 2024. The valuation was performed by Chanan Weiss from ARCH Actuarial Consulting, he is a member of the Actuarial Society of South Africa with more than 20 years of experience. ARCH Actuarial Consulting is not connected to the Council.

# 11. Trade and other payables

Trade payables	3 148 691	3 341 029
PAYE Control account	1 509 942	64 579
Account receivable in credit	2 970	-
Leave accrual	3 961 626	5 008 636
Accruals	3 682 709	2 833 993
Sundry payables	450 367	269 885
<b>Total trade and other payables</b>	<b>12 756 305</b>	<b>11 518 122</b>

## Note

## Exposure to liquidity risk

Refer to note 8, Financial Instruments and Financial Risk Management, for details of liquidity risk exposure and management.

# 12. Deferred income

Income received in advance	22 901 880	23 062 589
Examination fees and accreditation fees	997 462	1 067 114
Restoration fees	654 514	603 997
Registration fees	14 531 816	8 311 808
Annual practising certificate	8 612 059	6 727 662
Other deferred income	1 255 920	2 805 911
Donor funds	1 099 173	1 986 864
	<b>50 052 824</b>	<b>44 565 945</b>

# 13. Employee benefit obligations

13th cheque payable to employees	923 524	842 026
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	2024 R	2023 R
<b>14. Revenue</b>		
<b>Revenue</b>		
Annual fees	132 769 638	126 457 367
Restoration fees	10 237 626	10 441 303
Examination fees	1 125 167	1 770 537
Registration fees	7 422 074	5 432 502
Accreditation fees	2 345 264	3 172 329
Verification fees	3 259 290	2 338 707
Annual fees-Nursing Education Institution	1 803 827	1 743 218
Sale of distinguishable devices	3 098 293	3 724 906
Other income-unidentified deposits realised	758 467	9 841 559
Enrollment and Application fees	74 137	118 205
	<b>162 893 783</b>	<b>165 040 633</b>
<b>15. Other income</b>		
Admission of guilt fee	23 840	5 000
Refunds admin fees	20 017	18 331
Sale of waste paper	1 269	3 116
Parking fees	20 140	19 870
Various sundry income	189 700	67 314
Donor fund income	887 692	841 739
Impairment loss reversal	227 990	393 273
	<b>1 370 648</b>	<b>1 348 643</b>
<b>16. Net surplus from operations</b>		
Net (deficit) surplus from operations is stated after accounting for the following:		
<b>Auditor's remuneration - external</b>		
Audit fees	370 948	340 258
<b>Auditor's remuneration - internal</b>	<b>850 920</b>	<b>361 216</b>
<b>Employee costs</b>		
Salaries, wages, bonuses and other benefits	104 309 774	94 892 962
Provident costs- contribution plans	6 521 901	6 132 951
<b>Total employee costs</b>	<b>110 831 675</b>	<b>101 025 913</b>
<b>Depreciation and amortisation</b>		
Depreciation of property, plant and equipment	7 109 832	6 164 883
Depreciation of right-of-use assets	269 555	24 417
Amortisation of intangible assets	195 379	195 379
Impairment loss on intangible assets	-	3 992 268
<b>Total depreciation and amortisation</b>	<b>7 574 766</b>	<b>10 376 947</b>
<b>Other</b>		
Transport and freight	1 113 734	934 931
Legal fees	3 107 870	2 095 072
Utilities	4 101 389	3 634 733
Software expenses	5 007 314	2 603 186
Consulting fees	3 946 861	1 087 381
Records Improvement project	2 777 928	-

	2024 R	2023 R
<b>17. Investment income</b>		
<b>Dividend income</b>		
<b>Equity instruments at fair value through other comprehensive income:</b>		
Listed investments - Local	54 271	62 682
<b>Total dividend income</b>	<b>54 271</b>	<b>62 682</b>
<b>Interest income</b>		
<b>Investments in financial assets:</b>		
Bank and other cash	65 938 681	44 353 490
Interest income on Escrow Agreement	367 776	233 425
<b>Total interest income</b>	<b>66 306 457</b>	<b>44 586 915</b>
<b>Total investment income</b>	<b>66 360 728</b>	<b>44 649 597</b>
<b>18. Interest paid</b>		
Other	1 185	-
Retirement benefits	2 058 000	2 514 000
Lease liabilities	83 331	21 695
<b>Total finance costs</b>	<b>2 142 516</b>	<b>2 535 695</b>
<b>19. Cash generated from operations</b>		
Net surplus for the period	60 801 262	59 450 683
<b>Adjustments for non-cash items:</b>		
Depreciation, amortisation and impairments	7 574 767	10 376 947
Loss allowances recovered	(227 990)	(393 273)
Expected credit loss allowance	-	200 459
Interest income on Escrow Agreement	(367 776)	(233 465)
Loss on share consolidations	-	12 561
Impairment loss-PAYE asset	428 990	-
(Profit) /Loss disposal of property,plant and equipment	(1 042)	(17 633)
Interest on lease liability	83 331	21 695
Interest-other	1 185	-
<b>Adjust for items which are presented separately:</b>		
Interest income	(65 938 681)	(44 353 490)
Dividends received	(54 271)	(62 682)
Interest accrued on retirement benefit	2 058 000	2 514 000
<b>Changes in working capital:</b>		
(Increase) in inventories	(1 112 766)	(8 971)
Decrease / (Increase) in trade and other receivables	(1 171 053)	(2 691 586)
Increase trade and other payables and employee benefit obligation	1 319 681	3 869 263
Increase / (decrease) in deferred income	5 486 879	(7 031 362)
	<b>8 880 516</b>	<b>21 653 146</b>



	2024 R	2023 R
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## 20. Contingent liabilities

### MATTER 1

SpesNet (Pty) Ltd in a letter dated 28 December 2022 cancelled the contract with the South African Nursing Council for the development of a Membership Management System, after cancellation discussions took place between the parties to find an amicable way to end the relationship but common ground could not be found. At this stage either party may attempt to sue the other for damages suffered but no party has taken action. Furthermore, SpesNet has issued a letter notifying the Council of its intention to sue for remaining contract cost of R30 163 097.

### MATTER 2

Seven employees who were dismissed in January and May 2013 respectively after completion of internal disciplinary hearings being conducted because of improper conduct during a protected strike during November 2011. The CCMA dismissed their application. The employees took the matter on review to the Labour Court, and the matter was referred back to the CCMA and the following ruling was given, four employees dismissed fairly and three to be re-employed. The outcome, possible depending on whether settlement is reached on payment rather than reinstatement due to breach of trust relationship between employees and employer. Legal costs could amount to R250 000.

### MATTER 3

The former employee of the SANC referred a matter to the CCMA after his contract ended and claimed that he had a reasonable expectation to be permanently employed. He lost the case at the CCMA and referred the matter to the Labour Court claiming that he was permanently employed. If he is successful he may be awarded retrostective reinstatement and this could be in excess of R3 000 000.

## 21. Commitments

### Authorised expenditure

#### Already contracted for but not provided for

• Intangible asset (SAGE 300)	6 881 320	-
• Operating services	29 951 869	22 759 784
• Open purchase orders	2 145 354	900 143
• Property, plant and equipment	4 562 050	2 018 303
• Inventory	17 241 340	21 080 823
<b>Total</b>	<b>60 781 933</b>	<b>46 759 053</b>

Contracted expenditure relates to contracts entered into with service providers for a period ranging from 3 to 5 years to provide goods and services which include maintenance and support contracts for equipment, internal audit services amongst others.

#### Expenditure not yet contracted for but approved for future expenditure:

Property, plant and Equipment	8 136 500	21 159 286
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Expenditure not yet contracted relates to capital expenditure approved by Council

## 22. Current tax

The Council is exempt from taxation in terms of Section 10(1) (cA)(i) of the Income Tax Act.

	2024 R	2023 R
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## 23. Related parties

### Key management remuneration

#### 2024

	Annual salary	Cellphone allowance	Contribution to medical aid and pension funds	Acting allowances	Merit Bonus	Total
Registrar & Chief Executive Officer	2 171 578	31 200	172 273	-	-	2 375 051
Deputy Registrar	1 821 308	26 400	153 811	-	-	2 001 519
Chief Financial Officer(resigned on 30 September 2023)	931 843	13 200	85 163	-	-	1 030 206
Corporate Services Executive	1 935 202	26 400	177 871	-	-	2 139 473
Senior Manager: Legal Affairs	1 310 525	21 600	103 965	-	-	1 436 090
Senior Manager: Human Resources	1 553 937	21 600	153 324	-	17 072	1 745 933
Senior Manager: Professional Practice	1 301 885	21 600	112 605	-	-	1 436 090
Senior Manager: Communication and Marketing	1 350 235	21 600	107 115	-	-	1 478 950
Senior Manager: Learner Affairs	1 288 909	21 600	111 576	-	-	1 422 085
Company Secretary(resigned on 31 May 2023)	407 760	3 600	17 625	-	-	428 985
Senior Manager: Internal audit	1 433 968	21 600	113 757	-	-	1 569 325
Senior Manager: Information & Technology	1 280 269	21 600	120 216	-	-	1 422 085
Senior Manager: Provider Affairs	-	-	-	478 543	-	478 543
Company Secretary(started 01 January 2024)	-	-	-	99 818	-	99 818
Company Secretary(started 01 June 2023 to 31 December 2023)	-	-	-	259 001	-	259 001
Senior Manager: Finance	-	-	-	416 769	-	416 769
	<b>16 787 419</b>	<b>252 000</b>	<b>1 429 301</b>	<b>1 254 131</b>	<b>17 072</b>	<b>19 739 923</b>

	2024 R	2023 R			
<b>23. Related parties (continued)</b>					
<b>2023</b>					
	Annual salary	Cell phone allowance	Pension paid or receivable	Acting allowance / Merit bonus	Total
Registrar & Chief Execative Officer(retired on 30 September 2022)	1 172 242	21 918	84 823	-	1 278 983
Registrar & Chief Executive Officer(started on 01 March 2023)	170 722	2 600	13 543	-	186 865
Deputy Registrar	1 609 219	26 400	136 986	263 614	2 036 219
Chief Financial Officer	1 768 271	19 800	170 327	-	1 958 398
Corporate Services Executive	1 824 385	26 400	169 080	-	2 019 865
Senior Manager: Legal Affairs	1 236 344	22 050	98 080	-	1 356 474
Senior Manager: Human Resources	1 464 402	21 600	146 221	15 487	1 647 710
Senior Manager: Professional Practice	1 227 704	21 600	106 720	-	1 356 024
Senior Manager: Communication and Marketing	1 273 807	21 600	101 052	-	1 396 459
Senior Manager: Learner Affairs	1 215 463	21 600	105 749	-	1 342 812
Company Secretary	1 215 463	21 600	105 749	-	1 342 812
Senior Manager: Internal audit	1 224 103	21 600	97 109	12 704	1 355 516
Senior Manager: Information & Communication Technology	1 206 823	21 600	114 389	-	1 342 812
Senior Manager: Provider Affairs	-	-	-	201 787	201 787
	<b>16 608 948</b>	<b>270 368</b>	<b>1 449 828</b>	<b>493 592</b>	<b>18 822 736</b>

**Non-executive (17th and 16th Council)**

**2024**

	Councillors' fees including preparation fees (17th Council appointed from 23 August 2023)
Dr MC Molepo (Chairperson)	161 564
Prof DR Phetlhu (Vice-Chairperson)	73 691
Prof PJ Jordan	64 478
Ms TA Kaseke	90 339
Dr E Kaye-Petersen	112 186
Ms FL Kgatla	13 227
Ms PZ Khumalo-Ntamane	7 558
Ms LCBN Lioma	51 017
Ms JA Maimin	41 569
Ms MM Makgotlho	13 227
Ms RE Malatji	11 337
Dr M Matandela	9 448
Mr B Mgwenya	20 785
Mr SV Mkhathshwa	11 337
Mr TR Moeketsi	17 006
Dr SZ Mthembu	15 116
Ms ST Mthembu	81 719
Ms MM Mutepe	11 337
Mr LL Rabotapi	92 345
Ms MC Ramokotjo	15 116
Mr R Rensburg	69 438

	2024 R	2023 R
<b>23. Related parties (continued)</b>		
Mr S Shandu		20 785
Mr M Tshofela		78 884
Ms NG Zulu-Siwela		11 337
Prof SM Zuma		97 306
		<b>1 192 152</b>
	<b>Councillors' fees including preparation fees (16th Council term ended on 22 August 2023)</b>	<b>Councillors' fees including preparation fees-31 March 2023(16th Council)</b>
Makhene A	77 349	129 902
Nkondo-Mtembu LL	75 223	105 339
Zuma SM (Vice-Chairperson)	99 784	151 631
De Swardt HC	52 079	102 505
Dr MC Molepo (Chairperson)	82 043	123 214
Gihwala DI	71 444	108 174
Ntshabele JT	58 572	94 475
Magoro TM	52 077	113 842
Geyer NM	91 755	158 245
Orton PM	78 645	104 395
Duma SE	65 304	64 243
Rabotapi LL	68 483	126 959
Matsomela MJ	43 459	60 464
Ramaila ZM	56 802	117 621
Newton F	69 082	89 279
Tshimomola R	69 864	106 284
Ally H	72 744	94 947
Kaye-Petersen E	116 317	143 129
Ngidi D	61 053	74 163
Dr SZ Mthembu	11 337	7 558
Ms TA Kaseke	18 895	3 779
	<b>1 392 311</b>	<b>2 080 148</b>

#### 24. Going concern

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

The Councillors believe that the Council has adequate financial resources to continue in operation for the foreseeable future and accordingly the annual financial statements have been prepared on a going concern basis. The Councillors are satisfied that the Council is in a sound financial position and it has sufficient cash resources to meet its foreseeable cash requirements. The Councillors are not aware of any new material changes that may adversely impact the Council. The Councillors are also not aware of any material non-compliance with statutory or regulatory requirements or of any pending changes to legislation which may affect the Council.

#### 25. Events after the reporting period

The Councilors are not aware of any material event which occurred after reporting date and up to the date of this report.

#### 26. Right-of-use assets

The Council have two lease contracts with two service providers leasing eleven printing machines. The average lease term is three years.

The Council does not have the option to purchase the printing machines on completion of the lease term.

Details pertaining to leasing arrangements, where the Council is lessee are presented below:

	2024 R	2023 R
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**26. Right-of-use assets (continued)**

	2024			2023		
	Cost or revaluation	Accumulated depreciation	Carrying value	Cost or revaluation	Accumulated depreciation	Carrying value
Office equipment	808 666	(293 972)	514 694	808 666	(24 417)	784 249

**27. Lease liabilities**

Office equipment	621 166	830 361
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Details pertaining to leasing arrangements, where the Council is lessee are presented in note 26 above.

	Note(s)	2024 R	2023 R
<b>Revenue</b>			
Sale of distinguishable devices		3 098 293	3 724 906
Annual fees-registered and enrolled Nurses		132 769 638	126 457 367
Restoration fees		10 237 626	10 441 303
Examination fees		1 125 167	1 770 537
Annual fees-Nursing Education Institutions		1 803 827	1 743 218
Enrollment and Application fees		74 137	118 205
Verification fees		3 259 290	2 338 707
Accreditation fees		2 345 264	3 172 329
Registration fees		7 422 074	5 432 502
Other income-unidentified deposits realised		758 467	9 841 559
	14	<b>162 893 783</b>	<b>165 040 633</b>
<b>Other income</b>			
Admission of guilt fine		23 840	5 000
Insurance claims and other minor income		189 700	67 314
Donor fund income		887 692	841 739
Sale of waste paper		1 269	3 116
Parking fees		20 140	19 870
Impairment loss reversal		227 990	393 273
Refunds admin fees		20 017	18 331
	15	<b>1 370 648</b>	<b>1 348 643</b>
<b>Expenses (Refer to page 138)</b>		<b>(167 681 381)</b>	<b>(149 052 495)</b>
<b>Operating (deficit) surplus</b>	16	<b>(3 416 950)</b>	<b>17 336 781</b>
Investment income	17	66 360 728	44 649 597
Interest paid	18	(2 142 516)	(2 535 695)
<b>Surplus for the year</b>		<b>60 801 262</b>	<b>59 450 683</b>

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

	Note(s)	2024 R	2023 R
<b>Operating expenses</b>			
Staff bursaries		(7 302)	(220 677)
Advertising		(623 923)	(463 961)
Amortisation and impairment losses		(624 370)	(4 187 647)
Auditor's remuneration - external audit	16	(370 948)	(340 258)
Auditor's remuneration - internal audit	16	(850 920)	(361 216)
Expected credit loss allowance		-	(200 459)
Bank charges		(455 626)	(570 116)
Cleaning		(815 175)	(757 754)
Consulting fees		(3 869 767)	(2 328 157)
Computer expenses		(2 993 972)	(2 298 239)
Meeting expenses Members' allowances and reimbursive expenses		(2 814 223)	(2 384 532)
Provident fund administrative costs		(6 538 818)	(6 132 951)
Depreciation		(7 379 387)	(6 189 300)
Transport and freight		(1 113 734)	(934 931)
Employee costs		(104 309 774)	(94 892 962)
Catering and refreshments		(1 187 316)	(964 115)
Profit /(Loss) on disposal of property, plant and equipment		1 042	17 633
Loss on share consolidation		-	(12 561)
Hire of equipment and venue		(91 355)	(169 910)
Recruitment costs and employee assistance		(661 417)	(969 336)
Insurance		(222 521)	(213 020)
Software expenses		(5 030 160)	(2 603 186)
General expenses		(395 322)	(583 831)
Gifts and promotional items		(390 038)	(78 394)
Motor vehicle expenses		(38 188)	(43 977)
Utility charges		(4 101 389)	(3 634 733)
Meeting expenses accommodation		(1 481 779)	(1 311 670)
Meeting expenses translation and transcribing services		(862 492)	(728 677)
Legal expenses		(3 121 779)	(2 277 025)
Postage		(704 074)	(1 024 509)
Printing and stationery		(979 616)	(1 154 456)
Functions, seminars and workshops		(2 468 017)	(224 450)
Repairs and maintenance		(941 235)	(1 526 641)
Publications		(21 211)	(13 158)
CPD development expenses		(888 605)	(841 739)
Security		(1 265 578)	(1 270 616)
Meeting expenses transport allowances		(528 064)	(438 997)
Subscriptions		(58 424)	(99 112)
Meeting expenses examiners and invigilators		(247 303)	(513 299)
Telephone and fax		(943 876)	(842 231)
Training		(286 447)	(215 279)
Purchase of materials		(2 384 907)	(2 532 242)
Travel - local		(2 835 443)	(2 519 804)
Records improvement project		(2 777 928)	-
		<b>(167 681 381)</b>	<b>(149 052 495)</b>

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



**South African Nursing Council**

*Regulating nursing, advocating for the public*



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