



THE SOUTH AFRICAN DENTAL TECHNICIANS COUNCIL



ANNUAL REPORT 2023



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PART 1

INTRODUCTION & GENERAL INFORMATION

1. CORPORATE PROFILE

The South African Dental Technicians Council (SADTC) is a creature of statute, established in terms of section 2 of the Dental Technicians Act, No. 19 of 1979, as amended.

It was established in 1979 as a voice for the organised dental technology profession, and to protect the turf of those who practised the profession. Accordingly, during the year under review the SADTC turned 43 years.

The SADTC is a professional statutory regulator, regulated in terms of its founding legislation: the Dental Technicians Act, No. 19 of 1979.

The SADTC regulates one of the smallest professions in the Republic of South Africa. As at the end of the financial year under review (i.e. 28/2/2023), the SADTC had in its books a total number of 1018 Dental Technicians/Dental Technologists, 7 Dental Traders, 536 Dental Laboratories thus bringing the total of registered persons to 1561.

Despite the relatively small size of the profession that the SADTC regulates, the profession remains relevant to this day, and registered members of the profession still have a role to play in the South African oral healthcare system. This is further evidenced by a number of accredited institutions of higher learning that still offer academic programmes in dental technology, which signifies a demand for professionals in this field of oral health going forward.

2. LIST OF ABBREVIATIONS/ ACRONYMS

ACT	Dental Technicians Act No. 19 of 1979 as amended
AFS	Annual Financial Statements
ARC	Audit and Risk Committee
CPD	Continuing Professional Development
ERMF	Enterprise Risk Management Framework
FY	Financial Year
NHI	National Health Insurance
NDoH	National Department of Health
NDP	National Development Plan
MoU	Memorandum of Understanding
SLA	Service Level Agreement/s
SO	Strategic Objective
ToRs	Terms of Reference

3. FOREWORD BY COUNCIL PRESIDENT

I am pleased to present the Chairperson's report for the SADTC's financial year ending 28 February 2023. The financial year under review marks a period of almost three years since the Council was appointed by the Honourable Minister of Health in 2020.



OVERVIEW OF THE OPERATING ENVIRONMENT

The financial year under review further marks a period of almost three years since the advent of the devastating Covid 19 pandemic during which the South African Government declared a state of national disaster in the country. That period coincided with our appointment as the new Council.

During the period under review, it became clear that the performance of the SADTC as an entity can be influenced by external factors, including political, economic and social. We are still confronted with factors such as a declining Council revenue owing to the impact of a number of externalities, which in turn impact the ability of registered persons and entities to service their registration obligations with Council.

Whilst Covid 19 is behind us, the ongoing Russia-Ukraine conflict has, just like Covid before it, created much uncertainty. It has had an adverse effect on the global economy, as evidenced by the sharp increase in commodity prices, and rising inflation prospects. We are constantly aware of this through the effects of local inflation, and of an economy that is in dire straits. This affects everyone of course, but the dental technology profession is particularly hard hit by the effects all this has ad on the Rand. As vast majority of the materials used in dentistry are imported, overhead costs of dental technology laboratories ae soaring. We are aware of the effect this has on the financial viability of commercial laboratories, and of the difficulties some members have encountered in paying their registration fees.

However, we must also point out that a profession is defined by its regulation, and the very first financial obligation of all health professionals is to maintain their registration with their regulatory body. Failure to do so means incurring a criminal record.

GOVERNANCE

It has been through Council's execution of its mandate in so far as education and training and programme accreditation is concerned, that its governance resilience was tested. There was an attempt by disgruntled students of the Tshwane University of Technology (TUT) to usurp Council's statutory power with its own by demanding that Council lower its regulatory standards and allow students to be passed who did not meet the exacting accreditation standards set by Council in consultation with the Universities of Technology (UoTs). Attempts at exerting undue pressure on Council by trying to influence the Minister of Health and well as Parliament and the

Public Protector did not sway Council's resolve to perform its statutory mandate. We thank the Department of Health for its unwavering support in this regard.

Council remains committed to working with its broad stakeholder base and client base, even where there is no shared understanding of the mandate of Council. It is through continuous engagement that the work of this Council shall be propelled forward with meaningful outcomes that ultimately will be in the best interests of the profession that this Council exists to regulate.

CONCLUSION

The Council wishes to express its appreciation to the Registrar and her team for their commitment to the SADTC. Their resilience was tested during the student insurrection referred to above. The Council remains afloat to this day due to the commitment and tireless devotion of the Registrar and her team.

I would also like to thank the Minister of Health and his team for their unwavering and resolute support and guidance to Council. This became evident during the upheavals referred to above. Without such support the role of Council would have been undermined, and its effectiveness crippled, thereby defeating the purpose for its existence.

I also would like to thank the members of Council and its Committees, without whose hard work and commitment, Council would have been ineffective. Governance and unity remain our key strength within Council, and that did not go unnoticed.

4. REGISTRAR'S OVERVIEW

OPERATING ENVIRONMENT

Whilst the Council President has rightly reflected on the causality between an adverse economic outlook and its impact on registered persons during the financial year under review, it is important to also add a dimension of local environmental issues that have had a direct or indirect adverse impact on the profession that the SADTC exists to regulate, namely, inadequate electricity supply and load shedding. Electricity supply is key to the operations of the registered laboratories. Unreliable power supply has therefore had an adverse impact on their operations and relatedly, their profitability. That challenge has translated into the slow growth of the profession. In addition, this has impacted on the sustainability of the members of the profession to consistently pay their registration fees. That in turn impacted negatively on Council's revenue.

The SADTC's efforts at reforming and strengthening a capable SADTC were met with some challenges inside and outside the SADTC. The President has highlighted these and will not be rehashed herein, except to state that such unfortunate events have taken considerable time that



could have been devoted to deepening, reforming and strengthening a capable SADTC even better than has already been achieved.

Illegal operators remain a concern within the Council and the Profession. Council has noted with concern the proliferation of such persons and operations on Facebook, LinkedIn, and various social media platforms that promote dental services without being registered in any of the categories of registration with Council. These persons advertise denture work. These persons have no education or training in dental technology; thus, their conduct places patients/members of the public at risk and their work will certainly compromise the dental technology profession. SADTC has a memorandum of understanding with the South African Police Services (SAPS) through which all illegal practices are reported and clamped down. SADTC intends to write to Facebook and LinkedIn management to raise concerns about persons who are misleading unsuspecting members of the public.

I would like to thank the Council for its unwavering support towards me as Registrar, as I was the target of intense criticism by those that sought to destabilise the SADTC both internally and externally. I am equally thankful to the Minister for standing by the Council in trying times. Such challenges notwithstanding, the SADTC has again received an unqualified audit opinion from its auditors.

5. COUNCIL'S STRATEGIC OVERVIEW

5.1 Vision: A leading, world-class, just and dynamic regulatory body for the dental technology profession and for all South Africans.

5.2 Mission: To provide an effective and efficient guidance and monitoring of the profession in a transparent manner.

5.3 Corporate Values:

- Professionalism;
- Accountability;
- Honesty;
- Transparency; and
- Ethics.

6. LEGISLATIVE MANDATES

The SADTC is however also subject to other pieces of legislation in the course of its operations, such as:

- The South African Constitution Act No. 108 of 1996, section 22 of which states that every citizen has the right to choose their occupation, trade or profession freely. It states further that any occupation, trade or profession may be regulated. Therefore Council, although established prior to the coming into effect of the Constitution, exists to give effect to this constitutional imperative.

Furthermore, Section 27 of the Constitution further states that everyone has the right to have access to, inter alia, healthcare services. Access to services provided by the individual and laboratories that fall under the remit of the Dental Technicians Act of 1979, undertake what the Constitution of the country refers to as "healthcare services".

→ Dental Technicians Act, No. 19 of 1979, as amended ("the Act")

This Act remains SADTC's founding legislation despite it having been in existence for more than forty years.

Many efforts have been put towards replacing this Act with a new one. Those efforts have been overshadowed by the focus by the Department of Health on legislation such as the National Health Insurance (NHI) Bill, which has, and continues to take centre stage.

The objectives of the SADTC, as set out in Section 3 of the Act are the following:

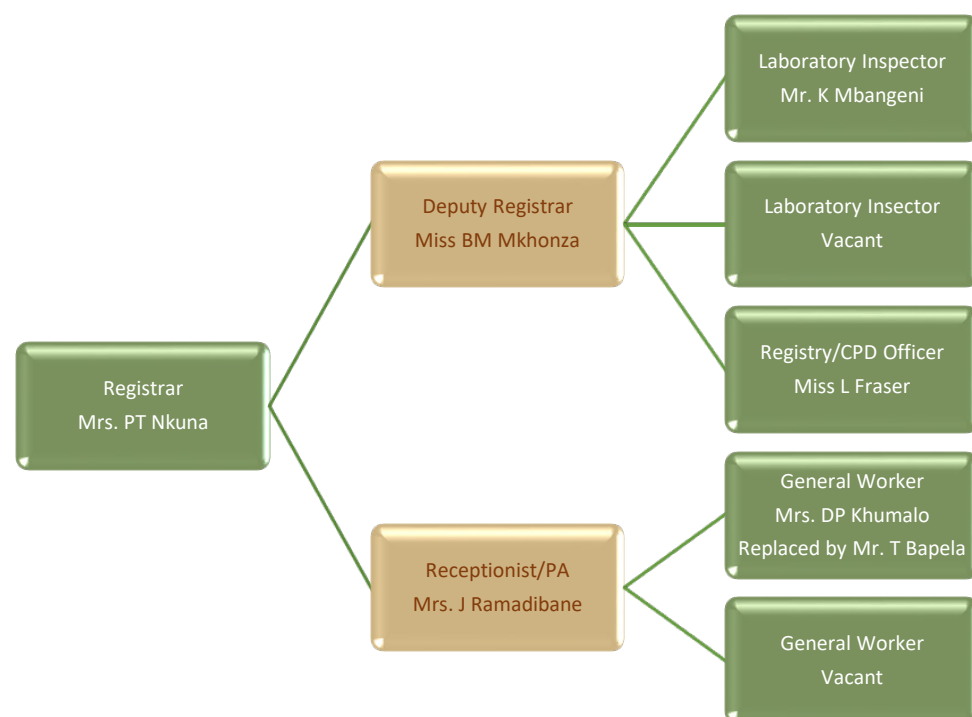
- To assist in the promotion of dentistry in the Republic.
- To control all matters relating to the education and training of dental technicians or dental technologists and the exercising of the practices in the supplying, making, altering or repairing of artificial dentures or other dental appliances or any other work pertaining to such dentures or appliances.
- To promote liaison of the education and training and the manner of the exercise of the practices referred to above, both in the Republic and elsewhere, and to promote the standards of such education and training and the manner of the exercise of such practices in the Republic.
- To promote good relations between dentists, clinical dental technologists, dental technicians and dental technologists and other supplementary dental health services personnel.
- To advise the Minister on any matter falling within the scope of the Act.
- To communicate to the Minister information on matters of public importance acquired by the Council in the course of the performance of its functions under this Act.

7. THE SADTC'S ORGANISATIONAL STRUCTURE

The Council's organisational structure remains unchanged.

As already reported by the President and the Registrar, the adverse effects brought about by externalities in the country has resulted in no marked growth within the profession. This has translated in Council's organisational structure remaining unchanged during the financial year under review.

The SADTC's organisational structure remains as follows:



8. COUNCIL MEMBERSHIP

The table below depicts Council Composition & Administrative Leadership as at the end of the financial year under review:

Name	Designation in terms of Council's Structure	Academic Qualifications & Professional areas of expertise	Date appointed	Date Resigned/ Terminated
COUNCIL				
Prof. C. P. Owen	President of Council Dentist nominated by other dentists.	BDS, MScDent, MChD, FICD, FCD(SA). Specialist Prosthodontist	25 March 2020	Current
Mr. I Noorshib	Vice President of Council Laboratory contractor nominated by other laboratory contractors	National Higher Diploma: Dental Technology Owner & partner in Minnaars Dental Laboratory	25 March 2020	Current

Mr. L Nematswerani	Treasurer of Council Community representative	MBA, Honours Degree (Human resources Dev.), Post Graduate Diploma-Management, BCur Degree	25 March 2020	Current
Dr. LT Moeng-Mahlangu	Member of Council Director- Oral Health, National Department of Health	Master's degree in Dietetics from MEDUNSA, a Post Graduate Diploma in Health management from UCT and PhD in Human Movement Science from NWU	20 October 2021	Current
Mr. L Steenkamp	Member of Council Laboratory contractor nominated by other laboratory contractors	BTech Dental Technology Owner of Luke's Dental Laboratory	25 March 2020	Current
Maj. G. Gunnell	Member of Council Dental Technician nominated by other dental technicians	National Higher Diploma: Dental technology Crown & Bridge Specialist	25 March 2020	Current
Captain N. Ntshikilana	Member of Council Dental Technician nominated by other dental technicians	BTech Dental Technology, Post Grad Diploma (Business Administration, Entrepreneurship Development Programme)	25 March 2020	Current
Dr. A Vahed	Member of Council Dental Technician attached to a training institution where dental technicians / technologists are trained	DTech (Quality) MTech; BTech; NDip (Dental Technology)	25 March 2020	28 February 2023
Prof. P.D. Moipolai	Member of Council Dentist attached to a university having a dental faculty.	BChD; MDent; MEd - Specialist Prosthodontist Head, Department of Prosthodontics, SMU	25 March 2020	Current
Ms. K. Govender	Member of Council Legal Advisor Community representative	BA.LLB, MDP, CPRAC Admitted Attorney and Regulatory Risk and Compliance Specialist	25 March 2020	Current
Ms. N. Madiba ¹	Member of Council Community representative	MDP in Compliance (Risk, project & Change Management), Regulatory Exams (Representative & key Individuals), Certificate in Influential Business Communication), Certificate (Compliance Monitoring), Bachelor of Laws Degree, BA (Media & Communication & Legal Studies)	25 March 2020	Current
MANAGEMENT				
Ms. Pertunia Tintswalo Nkuna	Registrar and Council Secretariat	National Diploma: Accounting, BBTech Business Administration, Certificate: Strategic Management and Corporate Governance, Executive development Program	01 July 2012	Current
Miss B.M. Mkhonza	Deputy Registrar Head: Inspectorate & Admin	National Higher Diploma: Dental Technology, Certificate: Sales & Marketing Management, Certificate: Safety Management, Certificate: Project Management	01 October 2018	Current



Back Row (left to right): Dr. TL Moeng -Mahlangu (Chief Director-Health Promotion, Nutrition & Oral Health); Mr. N. Ntshikilana; Maj. G. Gunnell; Prof. P.D. Moipolai; Mr. L.P. Steenkamp; Mr. L. Nematswerani (Treasurer)
Front Row (left to right): Mrs. K. Govender; Prof. C. P. Owen (President); Mrs. P. T. Nkuna (Registrar); Dr. A. Vahed; Mr. I. Noorshib (Vice President)



PART 2

PERFORMANCE INFORMATION

9. REGULATORY PHILOSOPHY

Effective regulatory performance has to be predicated on a robust regulatory philosophy. This is non-negotiable.

The SADTC exists to primarily deliver on the expectations of its primary clients: the registered persons as well as the Universities that offer academic programmes linked to the profession that Council exists to regulate.

Central to those expectations, is protection against people or laboratories that seek to enjoy the benefits of the profession but without being regulated; and also against, those who are in the Council's register but not fulfilling their registration responsibilities towards Council.

In so far as universities are concerned, the expectation is that Council's accreditation of programmes, should be undertaken in such a way that it strikes a delicate balance between university academic autonomy and independence on the one hand, and Council's statutory regulatory mandate on the other.

Council, therefore, in executing its mandate, carries out its performance in a manner that weaves its statutory mandate with the expectations of those that it exists to regulate. A tool used by Council in this regard, is its strategic performance plan.

In the same manner that an investor will expect a return on the investment held by a financial institution, registered persons and Universities equally expect a return in their investment by having an effective regulator.

10. CLIENT EXPECTATIONS

The SADTC relates to its client base primarily through its legislative mandate, but also through its internal policy instruments such as (but not limited to) the registration policy, the CPD policy, the disciplinary code of conduct, well as the university programme accreditation policy. These instruments are an enabler (and not an inhibitor) to the SADTC's role not as a watchdog per se, but also as an entity looking after the interest of its clients and meeting their expectations.

The insurrection by former students of TUT who stormed Council offices unannounced, made Council realize that it is not enough to simply develop robust strategies aimed at meeting client expectations, but also to ensure that there is shared vision, and understanding, between Council and its client base on these expectations.

Council's statutory mandate to regulate the profession (including University programme

accreditation) is not negotiable, or subject to agreement by those it is intended to regulate. Regulation by consensus is not embedded in the Act. That notwithstanding, Council has consistently regulated its client base through an open, transparent, consultative and therefore a participatory process.

Council's regulatory authority cannot be subservient to client expectations.

In order to ensure regulatory inclusivity, Council composition includes members of the registered profession, academics, the legal profession, Dentists, and members of the public. In this manner, Council's regulatory philosophy does not have blind spots, as the diversity of the Council membership ensures that all interests are taken into account.

Council is accordingly satisfied that its regulatory philosophy has been fully aligned with client expectations during the financial year under review.

11. RISK AND REGULATION RE-DEFINED

Effective risk management is key to the effective functioning of any entity. Professional regulation therefore invariably involves risk management.

The SADTC is continuously conscious of the fact that risk management is central to its ability to fully and effectively deliver on its regulatory mandate as well as its continued sustainability as a statutory council. King IV on corporate governance (2016) squarely locates Council, and no-one else, as being responsible to manage risks within the SADTC.

Principle No. 11 of King IV states that the Council (governing body) should govern risk in a manner that supports the organisation in setting and achieving its strategic objectives. Therefore, any strategic plan is meaningless without robust risk management. The externalities highlighted above (depressed economic outlook, Russia-Ukraine War, load shedding, the insurrection by TUT students, etc.) have caught Council exposed in terms of a risk management plan that is responsive, and therefore able to effectively cushion risks associated with those externalities.

At the heart of any effective risk management philosophy and strategy, is the identification, assessment, measurement and prioritisation of, and a response to, risks that are likely to affect the achievement or attainment of strategic goals and objectives of the SADTC. In that case the probability of negative events is minimised.

At the heart of any effective risk management strategy or philosophy, is sound ethical standards. The ethical standards should permeate not only the entity such as the SADTC (i.e. Council, Committees and staff), but should also permeate the Council's client base, namely, registered persons, and universities offering dental technology programmes. Misalignment between Council and any of its clients on ethical standards that should permeate the relationship between Council and its client base, is a recipe for a multifaceted risk environment.

Maintaining high standards of regulation and ensuing full regulatory compliance, including with the laws and regulations of the SADTC as a regulator, is key to effective risk management across the profession. Maintaining strict and high regulatory standards is chiefly geared at ensuing that high academic standards are maintained at universities offering dental technology, which will naturally translated into well-educated and well-trained Dental Technologists and Dental Technicians once they enter the market as practitioners.

Lowering regulatory standards will not only be unethical on SADTC's part, but will also plunge the profession into unprecedented levels of regulatory uncertainty, and the concomitant lowering of standards academically as well as in the practice of the profession.

The SADTC continuously strives to have its client base and stakeholder see this important nexus between risk and professional regulation.

12. STATEMENT OF RESPONSIBILITY REGARDING PERFORMANCE INFORMATION

To the best of our knowledge and belief, we hereby wish to confirm the following:

- All the information and amounts disclosed in the annual report are consistent with the annual financial statements audited by our External Auditors: Snijder & Associates.
- The external Auditors are engaged to express an independent opinion on the annual financial statements.
- Council is responsible for the preparation of the annual financial statements and for the judgements made in this information.
- The annual financial statements have been prepared in accordance with the SA standards of Generally Accepted Recognised Accounting Practice (GARAP) applicable to a statutory council.
- The accounting authority (Council) is ultimately responsible for establishing and implementing a system of internal controls which is designed to provide reasonable assurance as to the integrity and reliability of performance information, human resources information and the annual financial statements.
- The annual report is complete, accurate and free from any omission.
- The annual report has been prepared in accordance with best practice guidelines on the annual report.
- In our opinion as Registrar and President, this annual report fairly reflects the operations, the performance information, the human resources information and the financial affairs of the entity for the financial year ended 28 February 2023.



Name: Mrs. PT Nkuna
Council Registrar



Name: Prof. CP Owen
Council President



13. PERFORMANCE AGAINST KEY STRATEGIC OBJECTIVES

There has not been a change in SADTC's strategic radar from the previous financial year to the current one, as the situational analysis of Council has by and large remained unchanged.

SADTC's strategic thrust during the period under review remains predicated on two key performance areas, which are as follows:

13.1 Key Performance Area 1: Regulation and Guidance of the Profession

A strategic goal underpinning KPA 1 is Registration, educational and professional conduct mandates that are carried out in accordance with the legislative and policy requirements.

Five strategic objectives supporting KPA 1 are as follows:

- Promotion of awareness through education, information and awareness programmes for the profession and the public

There were no road shows or any initiatives that took place during the period under review.

The Council website as well as regular newsletters prepared from the Office of the Registrar remain the primary window through which the Council's client base accesses Council information.

- SAQA accreditation maintained in good standing

The SADTC remains in good standing with the South African Qualifications Authority through sustained accreditation with that Institution by the uploading of data into the National Learners Records Database (NRLD).

- Maintenance of sound stakeholder relations

Stakeholder relations by and large remained effective.

The Council has had two meetings with DENIS, which was a joint effort by DENTASA and the Council to discuss the illegal laboratories claiming directly from the medical aids. The outcome of this joint effort exposed five laboratories that were illegally claiming from the medical aids. The second meeting took place between the Board of Health Care Funders (BHF) and the Council to strengthen the working relationship and curb the unregistered members who are still members of the BHF. The success of these meetings led to all stakeholders agreeing to hold biannual meetings to discuss issues of common interest.

There is still a lot of room for the rebuilding and improvement if sustained good relations with the profession's sole voluntary association: DENTASA.

Council's relations with the registered members of the profession is largely satisfactory.

Council's relations with UoTs is also largely satisfactory.

- Achieve organisational coherence through effective and efficient "Council and Committee Governance" in line with legislation and best practice, and institutional compliance with legislation and institutional policy instruments.

A satisfactory number of Council and Committee meetings were held virtually and physically during the period under review. More details to follow under the Governance report later below.

- Effective and efficient systems to support the execution of organisational strategy.

High levels of internal control and probity by maintaining the previous clean record of unqualified audits remains the order of the day at the SADTC.

A combined assurance model remains in place within the SADTC in order to assure the different aspects of Council’s operations, and in ensuring a coordinated (combined) approach to Council receiving assurances on whether key risks are being managed appropriately within Council. As already reported above, a need to review and align Council’s existing risk management strategy so as to be responsive to unexpected and unanticipated risks of the 2022/23 financial year, is a priority going forward.

Council continues to rely on Management (the Registrar), external auditors, the Audit and Risk Committee in monitoring institutional risks.



13.2 Key Performance Area 2: Organisational excellence

Three strategic objectives supporting KPA 2 are as follows:

- Dental Technicians, Technologists, Clinical Dental Technologists and Dental Laboratories are registered through accessible, fair, transparent and credible systems and globally accepted standards.

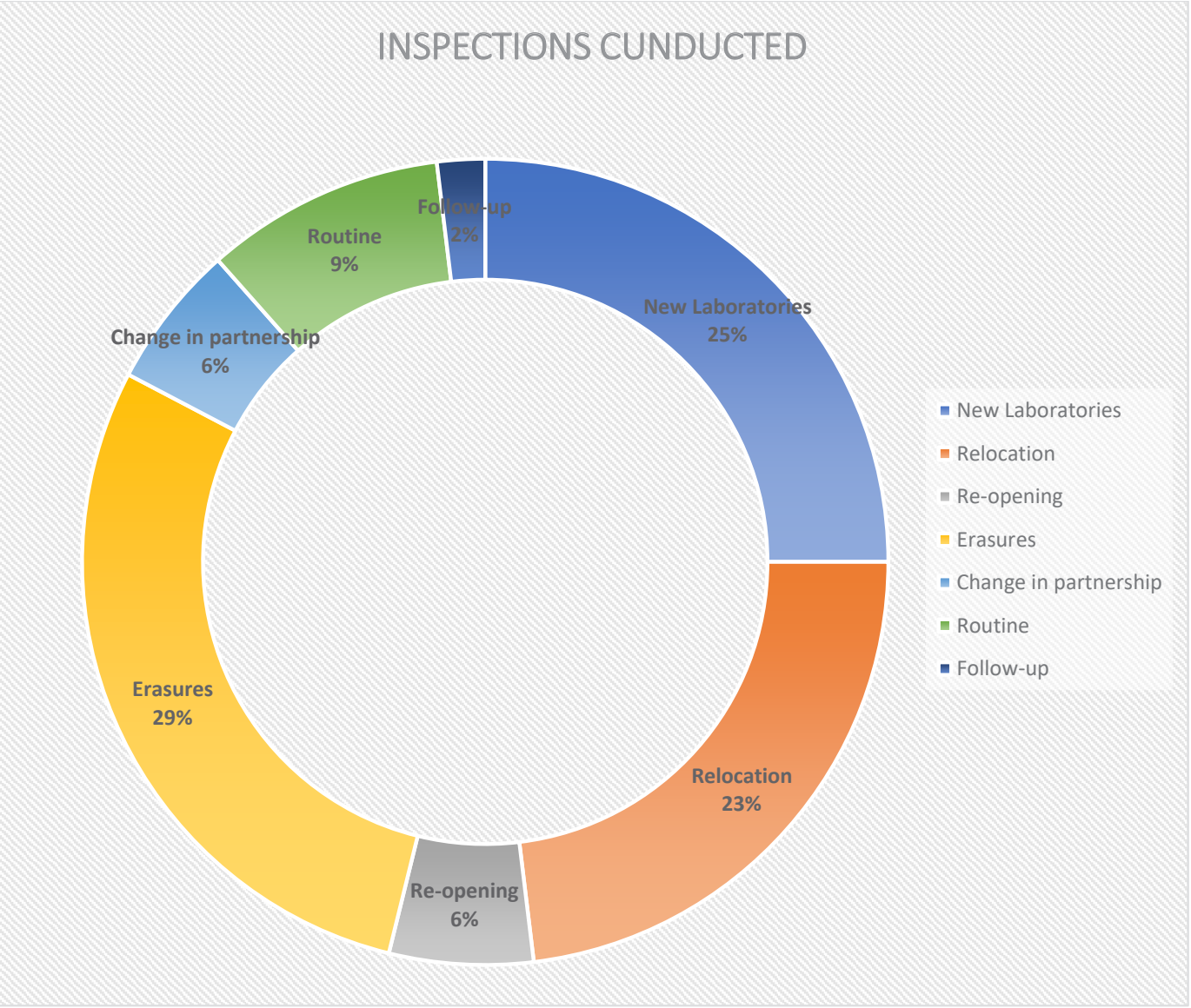
SADTC’s registration mandate is derived from the Dental Technicians Act, specifically, sections 18(1) and (2) and 20 (1).

The situation regarding the retarded increase in the SADTC’s register persisted during the financial year under review due to the externalities highlighted in the President’s and Registrar’s reports above. Likewise with a steady decline of registration renewals for the same reasons as above.

A total of 52 inspections were conducted during the 2022/2023 financial year, and these inspections were divided into the following categories:

CATEGORY	TOTAL
New Registrations / Laboratories	13
Relocation / Change in address	12
Re-opening of existing laboratories	3
Routine Inspections	5
Erasures / Deregistration	15
Change in Partnership	3
Follow-up Inspections	1

Below are Key statistical data in respect of the figures appearing on page 22.



The only categories of inspections that could be conducted, did not assist in providing the Inspectorate with comprehensive data for the purpose of this report, as it was only new, relocating, change in partnership and voluntary erased dental laboratories that were inspected.

The only common issue that could be deduced from all the conducted inspections, was that most dental technicians still do not know what a regulatory body is and its mandate apart from conducting inspections, which is one of the issues that has led to this unpleasant perception that some dental technicians have of the SADTC.

→ Registration of Dental Laboratory Assistants & Informally Trained Persons as Dental Technician Assistants

Notwithstanding this category of Dental Laboratory Assistants being provided for in terms of section 28 of the Act, there is still no register for this category in Council. Likewise with the registration of Informally Trained Persons as Dental Technician Assistants.

→ Continuing Professional Development

This aspect of our work has been in a state of flux, with new and more innovative ways of obtaining CEUs emerging out of the necessity of the COVID-19 pandemic. New criteria and activities have been drafted and a new fee structure to take these into account is currently under discussion. We will continue to keep members informed of this and hope to create an online system for recording and tracking points.

→ Effective and efficient Inspectorate function with focus on compliance.

This strategic objective is primarily achieved through the Inspectorate function of Council. The Inspectorate is a division of the South African Dental Technicians Council that primarily looks at ensuring compliance of all dental laboratories according to the Act and the regulations as contemplated in Government Notice No. R.308 of 26 February 1982. In support of the Council's mandate of protecting the public, this is achieved by conducting inspections of dental laboratories in the Republic of South Africa and effectively enforcing provisions of the Act and its regulations.

The employment of an Inspector has enabled the Inspectorate to detect critical and common compliance issues, such as: laboratories that were never fully registered with the Council and therefore non-compliant but which have been operating for many years without a full registration certificate; laboratory owners employing unqualified people to do the work of dental technicians so that they can spend less on salaries and thus be able to increase the volume of work coming in and therefore give their clients enormous discounts, etc. These and other practices are gradually destroying the Dental Technology profession.

The digitisation of customer documents hampered the normal functioning of the inspectorate which brought about limitations for the Inspectorate to conduct inspections as per the year plan. As a result, only dental laboratories with temporary certificates and dental laboratories that had applied for voluntary removal from the register were inspected resulting in a very low number of inspections being conducted during this reporting period.

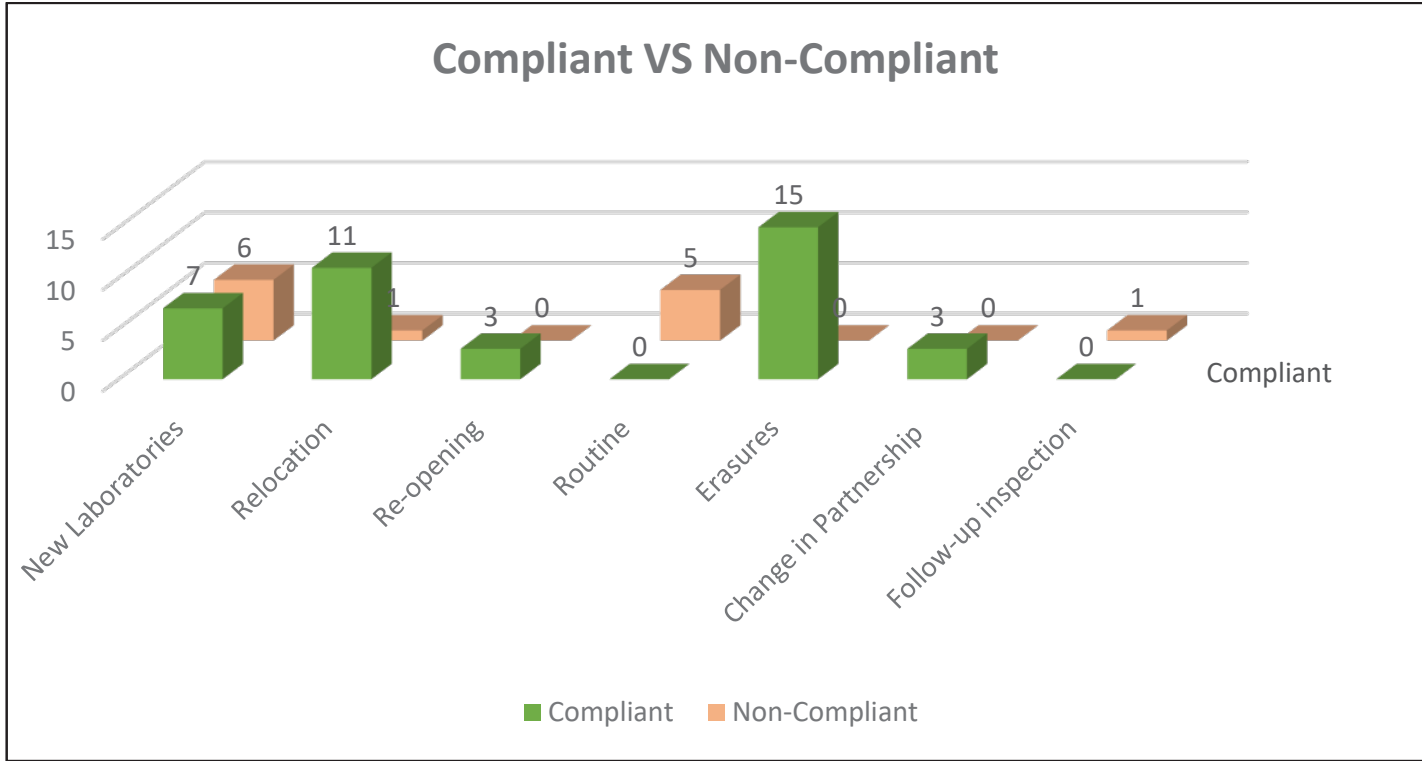
Below is a table showing inspections conducted in each province in the last three financial years:

PROVINCES	INSPECTIONS CONDUCTED		
	2020 - 2021	2021 - 2022	2022 - 2023
Gauteng	37	40	22
Western Cape	25	37	5
Kwa-Zulu Natal	21	35	5
Eastern Cape	7	14	10
Free State	2	4	1
Northern Cape	2	0	1
Mpumalanga	6	2	1
North West	7	9	2
Limpopo	3	0	5
TOTAL	110	141	52

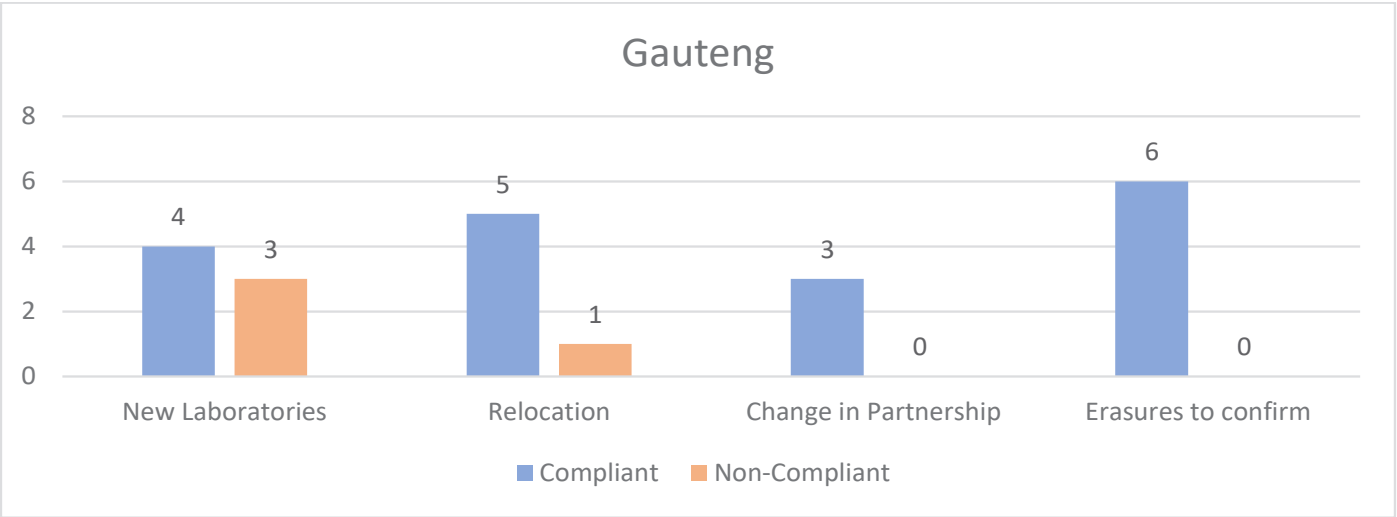
The overall rate of compliance in the financial year under review was 75%, with 24 dental laboratories recommended for full registration.

Although 13 new dental laboratories were added to the register, 15 dental laboratories were erased voluntarily, and closure of all of those was confirmed.

Below are Key statistical data in respect of the above narrat



1. GAUTENG PROVINCE INSPECTIONS



Category of Inspection	No. of Inspections	Compliant	Non-Compliant
New Laboratories	7	4	3
Relocations	6	5	1
Change in Partnership	3	3	0
Erasures to Confirm	6	6	0

Inspection Summary:

Labs Inspected	22	
Compliant	18	81,8%
Non-Compliant	4	18,2%

The Gauteng Province has two 254 ² active and fully registered dental laboratories, and 8 active but not yet fully registered dental laboratories, with a compliance rate of 81,8% from the 22 inspections conducted in the 2022/2023 financial year.

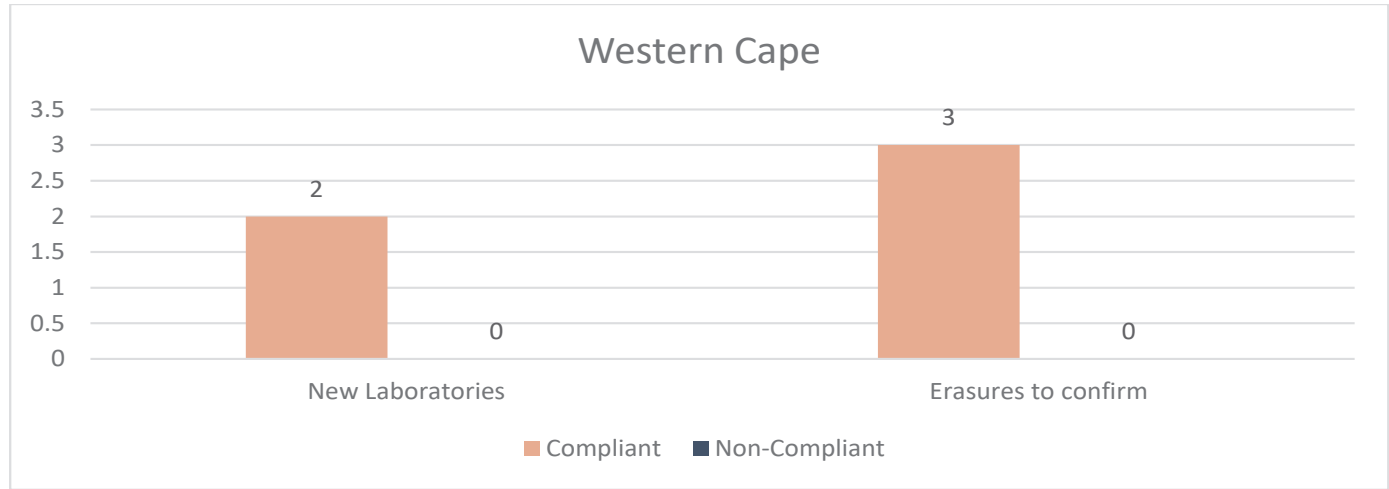
Gauteng province has the highest compliance rate and continues to show a high level of professionalism and understanding of the laws and regulations that govern the Dental technology profession.

The 4 dental laboratories that were not compliant were inspected on the 10th of November 2022 and will be sent final notice of non-compliance letters on the 10th of March 2023.

2

Figures correct prior to Council erasures of 28 February 2023

2. WESTERN CAPE PROVINCE INSPECTIONS



Category if Inspections	No. of Inspections	Compliant	Non-Compliant
New Laboratories	2	2	0
Erasures to Confirm	3	3	0

Inspection Summary:

Labs Inspected	5	
Compliant	5	100%
Non-Compliant	0	0%

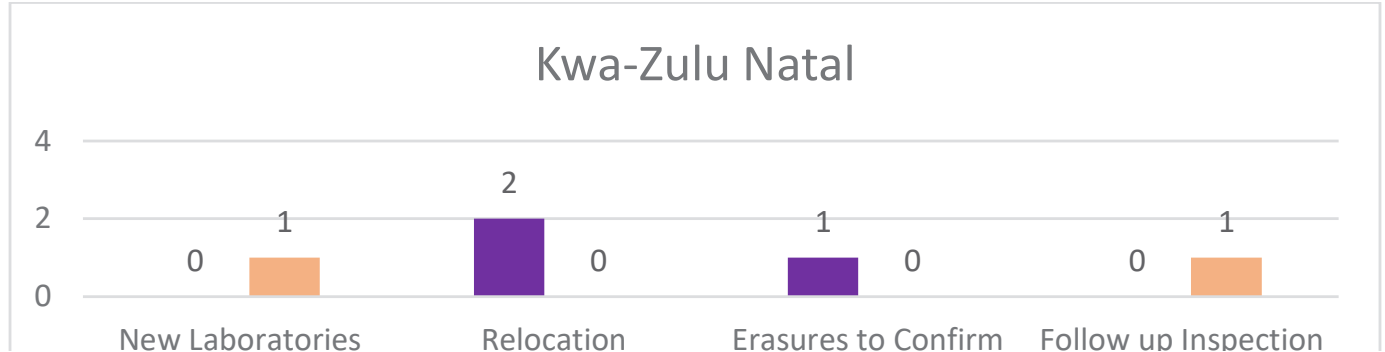
The Western Cape Province has 148 ³ active and fully registered dental laboratories, and (10 active but not yet fully registered dental laboratories, with a compliance rate of 100% from the 5 inspections conducted in the 2022/2023 financial year.



3.

³ Figures correct prior to Council erasures of 28 February 2023

4. KWA-ZULU NATAL PROVINCE INSPECTIONS



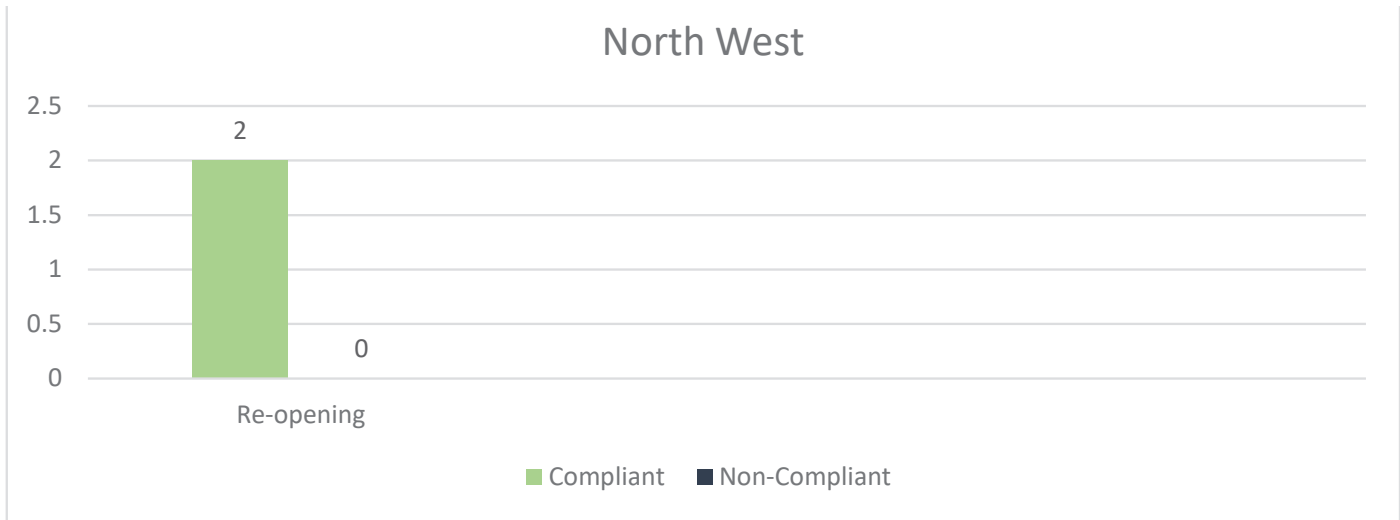
Category of Inspections	No. of Inspections	Compliant	Non-Compliant
New Laboratory	1	0	1
Relocation	2	2	0
Erasures to Confirm	1	1	0
Follow-up Inspection	1	0	1

Inspection Summary:

Labs Inspected	5	
Compliant	3	60%
Non-Compliant	2	40%

The Kwa-Zulu Natal Province has 76 ⁴ active and fully registered dental laboratories, and 8 active but not yet fully registered dental laboratories, with a compliance rate of just 60% from the 10 inspections conducted in the 2022/2023 financial year. At some point, close to 200 dental laboratories were registered with the SADTC.

This province always has the lowest compliance rate, with the most non-compliance issues that



⁴ Figures correct prior to Council erasures of 28 February 2023

have a negative impact on the Dental Technology profession. Most dental laboratory owners in this province continue to employ unqualified people to do work of qualified and registered dental technicians and dental technologists. This practice continues to erode the dental technology profession. Recommendations were made to Council to call those laboratory owners who were found flouting the law in this fashion for a disciplinary hearing. The office will report on this once the disciplinary processes have been concluded.

5. NORTH WEST PROVINCE INSPECTIONS

Category of Inspections	No. of Inspections	Compliant	Non-Compliant
Re-opening	2	2	0

Inspection Summary:

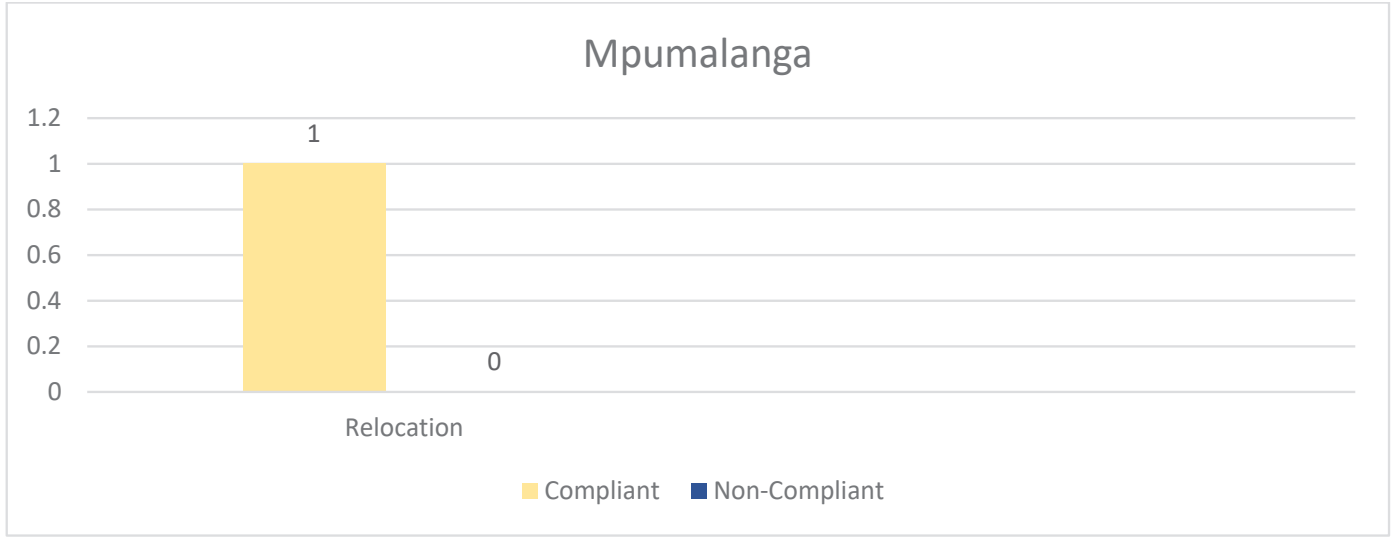
Labs Inspected	2	
Compliant	2	100%
Non-Compliant	0	0%

The North West Province has 24 ⁵ active and fully registered dental laboratories, and 1 active but not yet fully registered dental laboratory, with a compliance rate of 100% from the 2 inspections conducted in the 2022/2023 financial year.



5 Figures correct prior to Council erasures of 28 February 2023

6. MPUMALANGA PROVINCE INSPECTIONS



Category of Inspections	No. of Inspections	Compliant	Non-Compliant
Relocations	1	1	0

Inspection Summary

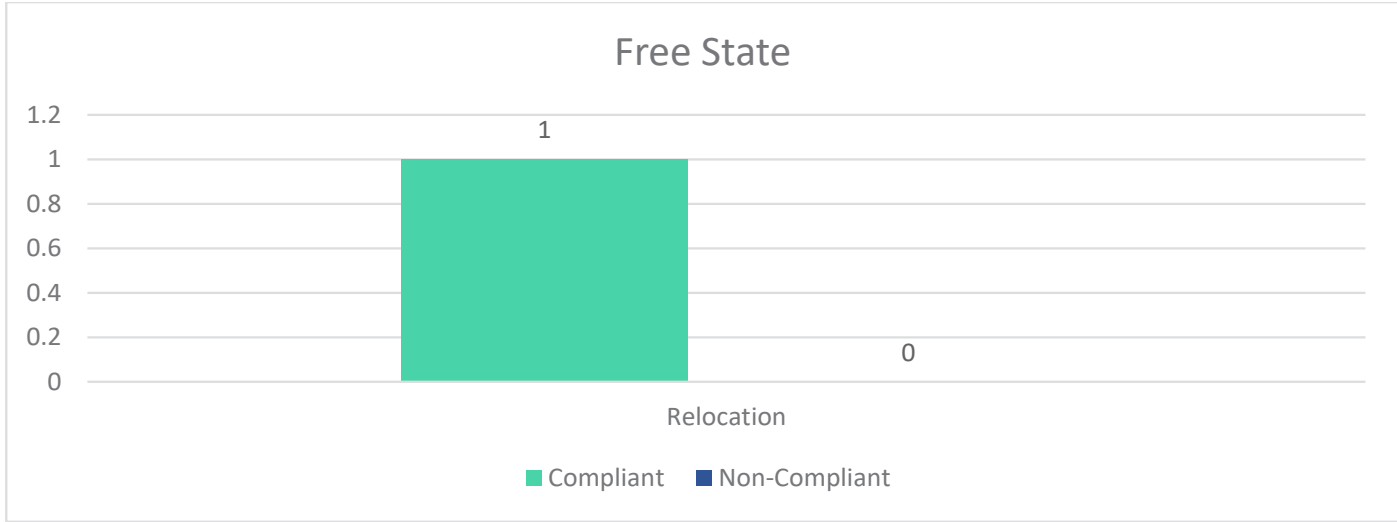
Labs Inspected	1	
Compliant	1	100%
Non-Compliant	0	0%

The Mpumalanga Province has 24 ⁶ active and fully registered dental laboratories, and 3 active but not yet fully registered dental laboratories, with a compliance rate of 100% from the 1 inspection conducted in the 2022/2023 financial year.



6 Figures correct prior to Council erasures of 28 February 2023

7. FREE STATE PROVINCE INSPECTIONS



Category of Inspections	No. of Inspections	Compliant	Non-Compliant
Relocation	1	1	0

Inspection Summary:

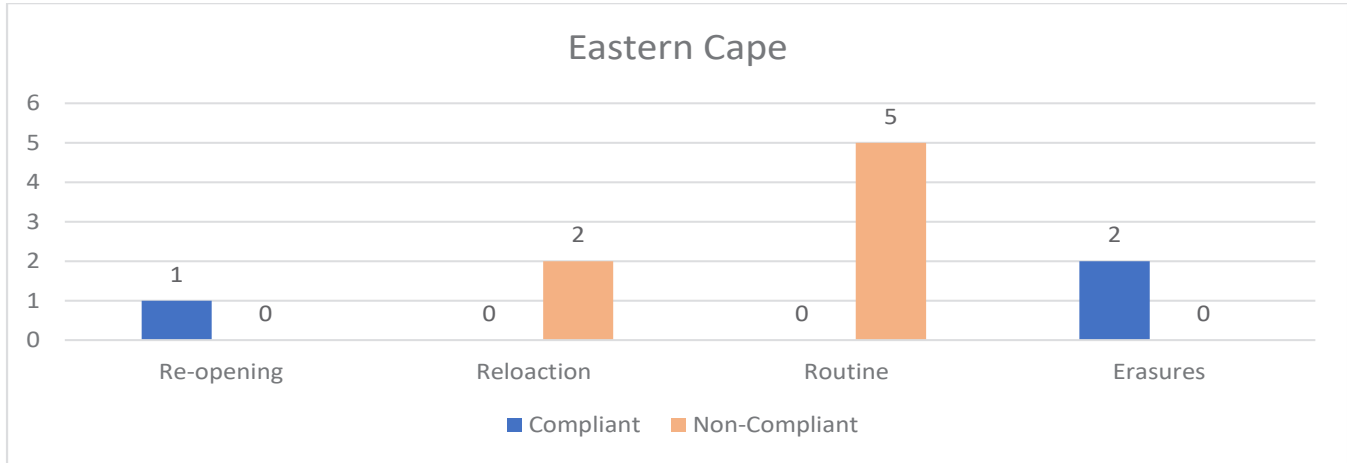
Labs Inspected	1	
Compliant	1	100%
Non-Compliant	0	0%

The Free State Province has 23 ⁷ active and fully registered dental laboratories, with a compliance rate of 100% from the 1 inspection conducted in the 2022/2023 financial year.



⁷ Figures correct prior to Council erasures of 28 February 2023

8. EASTERN CAPE PROVINCE INSPECTIONS



Category of Inspections	No. of Inspections	Compliant	Non-Compliant
Re-opening	1	1	0
Relocation	2	0	2
Routine Inspection	5	0	5
Erasures to Confirm	2	2	0

Inspection Summary:

Labs Inspected	10	
Compliant	3	30%
Non-Compliant	7	70%

The Eastern Cape Province has 25 ⁸ active and fully registered dental laboratories, with a compliance rate of 30% from the 10 inspections conducted in the 2022/2023 financial year.



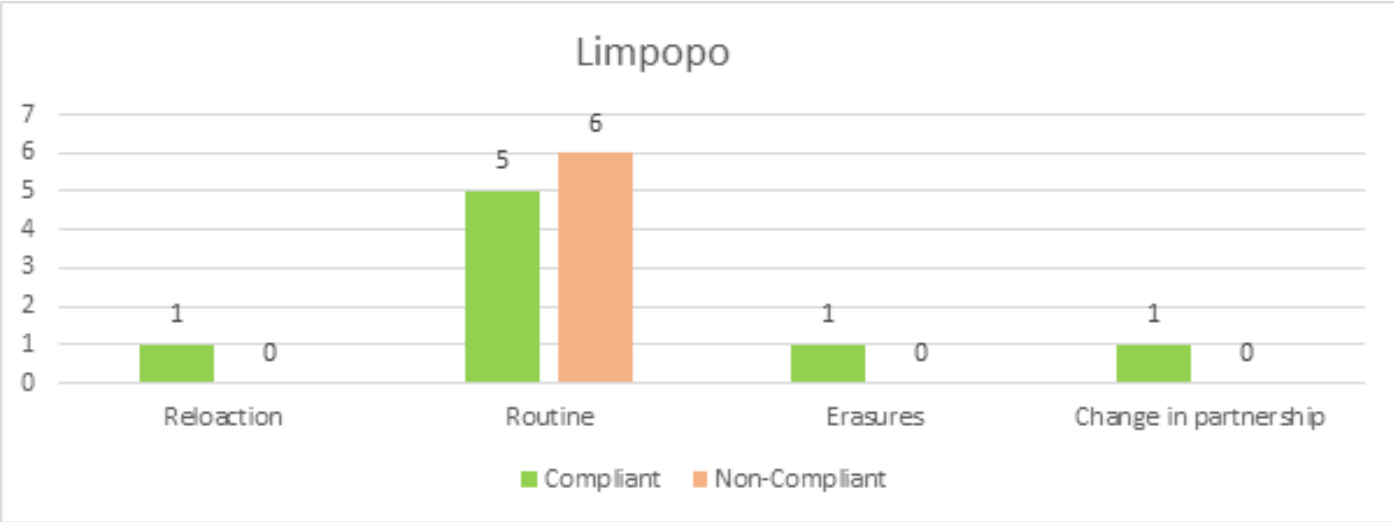
⁸ Figures correct prior to Council erasures of 28 February 2023

9. LIMPOPO PROVINCE INSPECTIONS

Category of Inspections	No. of Inspections	Compliant	Non-Compliant
New laboratories	1	1	0
Relocation	1	1	0
Erasures to Confirm	3	3	0

Inspection Summary:

Labs Inspected	5	
Compliant	5	100%
Non-Compliant	0	0%

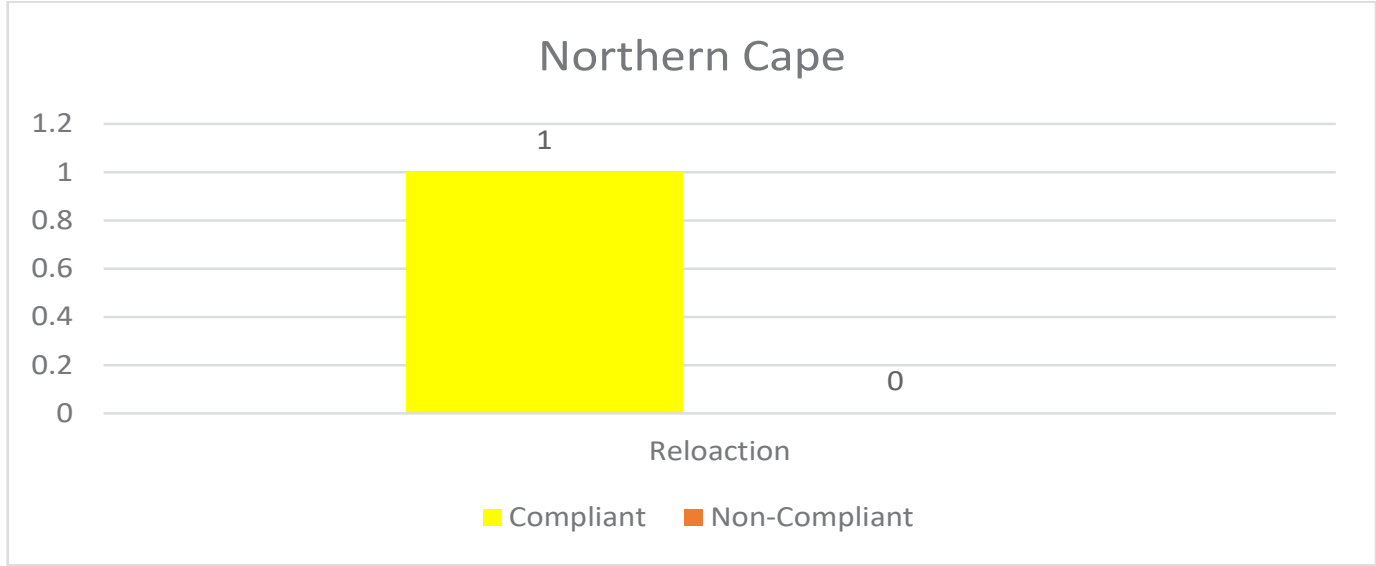


Limpopo Province has 22⁹ active and fully registered dental laboratories, with a compliance rate of 100% from the 5 inspections conducted in the 2022/2023 financial year.



9 Figures correct prior to Council erasures of 28 February 2023

10. NORTHERN CAPE PROVINCE INSPECTIONS



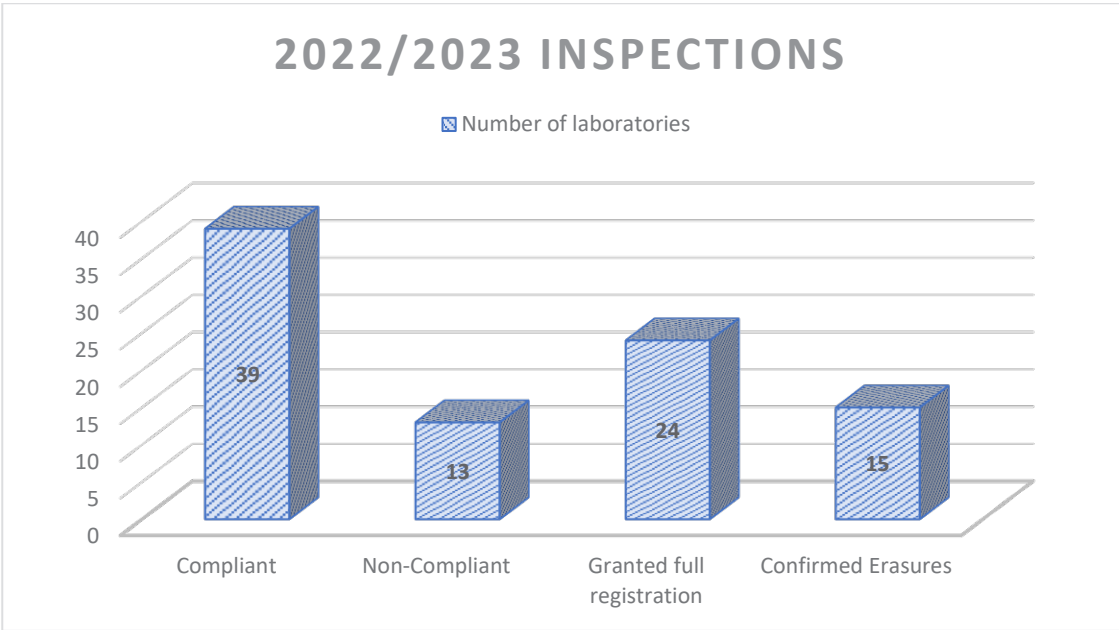
Category of Inspections	No. of Inspections	Compliant	Non-Compliant
Relocation	1	1	0

Inspection Summary:

Labs Inspected	1	
Compliant	1	100%
Non-Compliant	0	0%

Northern Cape Province has 5 active and fully registered dental laboratories, with a compliance rate of 100% from the 1 inspection conducted in the 2022/2023 financial year.

Below are Key statistical data in respect of the overall narrative of this report.



The financial year under review was unfortunately not a productive year for the Inspectorate, as already explained above, as a result there are no significant data on issues picked up from the 2022/2023 inspections. However, the challenges the Inspectorate continues to face with regards to illegal practicing remain the same, and it requires collaboration with the HPCSA, Dental Suppliers, SAPS and registered Members to overcome this issue.

Although we receive information about unregistered dental laboratories and unqualified people doing the work of registered dental technicians daily, the challenges are: -

- a. Registered members are reluctant to follow through on the processes of formally lodging a complaint as per the internal businesses processes of the SADTC making it difficult to pursue the matter further.
- b. The transgressors are sometimes Dentists, whom we have no jurisdiction over, and therefore require assistance from HPCSA, which presents a challenge to follow through if the information received is incomplete.
- c. SAPS are not keen on assisting, as they are uninformed about the Act and do not understand how it involves them.
- d. Unqualified transgressors who change addresses as soon as they are aware that they are being investigated.
- e. Registered members inform other non-compliant Dental laboratories of the presence of Inspector/s in their area.

The implications of dental laboratories who operate illegally has a negative cost implication for both the registered dental laboratories and the SADTC. Dentists who continue to utilise the services of unqualified and unregistered “dental laboratories” are the bane of the profession. Until we all work together to fight this stumbling block, it will always remain a challenge.

Dentists and Dental Therapists

The Inspectorate still requires assistance from the Council to get the Health Professions Council of South Africa (HPCSA) to come on board in assisting with unregistered dental laboratories operated by their members (Dentists and even Dental Therapists).

Several complaints about Dentists and Dental Therapists operating dental laboratories and employing unregistered people to do the work are still being received by the Inspectorate.

Criminal Matters

The issue of opening criminal cases with the South African Police Services (SAPS) and maintaining their focus on investigations until conclusion, still remains a challenge for the Inspectorate. No criminal Cases were opened by the inspectorate in the financial year under review.

- Dental Technology practitioners are recognised through excellent, relevant and globally accepted educational standards.

University Programme Accreditation

This objective exists to assist the SADTC to ensure that Universities that are accredited to offer Dental Technology programmes, do so within the SADTC pre-determined policy instruments and regulations. All UoTs are aware of Council’s regulatory mandate in this regard.

Council is assisted primarily by its Education Committee in executing this mandate. This Committee has and continues to be an effective tool through which Council carries out its accreditation function.

Three Universities of Technology (UoTs) offer Dental Technology Programmes that are accredited by the SADTC. They are Tshwane University of Technology, Durban University of Technology and Cape Peninsula University of Technology.

All three UoTs were previously granted provisional accreditation for the new first-year level programmes, only. The accreditation of the remaining years of the programmes is still outstanding, as the documentation submitted by the UoTs has not yet met the accreditation requirements. Last year Council was invited by Universities South Africa (USAF) to assist the UoTs with the curriculum documents. The Universities have been given another opportunity to submit their curriculum documents for consideration by Council.



Exit-level Practical Examinations

In 2019, accreditation visits to each UoT revealed the disparity between the results of the UoT internal and external examiners, and the Council examiners. Consequently, Council established an examination panel consisting of established discipline-specific dental technicians to assess the standards of the work being produced in the final practical examinations. Unfortunately, the disparity continues to persist, and standards have been deemed not sufficient for professional registration. Unfortunately, the UoTs went ahead and qualified the students which had failed to meet the standards, and now these students are in limbo. Council has had several meetings with the UoTs, facilitated by

Universities South Africa, and is committed to continuing to assist the UoTs in raising the standards of the work of their students to a level that is acceptable for professional registration with Council.

Furthermore, Council has developed a document detailing the exit-level outcomes and associated assessment criteria and practices which will form the basis of the minimum standards for dental technology. Council is also revising the Self Evaluation Questionnaire, which a university must submit for accreditation, which details the criteria used to assess the programmes.

The TUT Pipeline Students saga

Council's unwavering execution of its university programme accreditation mandate has not been without controversy and difficulties. Council's insistence on accrediting a programme of TUT triggered wide-spread resistance and lobbying of the Department of Health, the Portfolio Committee of the Department of Health in Parliament and the Public Protector.

On 2 March 2022, a group of "pipeline students" from TUT (i.e. students who were graduated by TUT unilaterally and independent of and against the advice of Council as they failed to meet the minimum requirements to be pass their Diplomas), gathered at the SADTC's offices and demonstrated outside, and also made threats to burn down Council offices. They presented a memorandum of demands at the heart of which was the demand that Council allow them to be passed as qualified dental technicians and technologists despite the deficiencies identified by Council in the academic programme of their cohort, where only two students were eligible for graduation and concomitantly, Council registration.

These students had sat for the final practical exit-level examinations in May 2022 and were have graduated by TUT despite not meeting the minimum registration requirements and therefore could not register with the Council.

The Council had, prior to those students being passed by TUT, been engaging TUT for a number of years regarding the declining standards of TUT's Dental Technology programmes, which according to the Council, have not been adequately preparing graduates thereof to register and practice as dental technicians and dental technologists. This led to the Council appointing its own examiners, in line with Act and Regulations. In 2019 and 2020 the examiners concluded that the work was of a poor standard, and not sufficient for professional registration. Their report concluded by requiring a re-examination of those students. However, the University, knowing that only two of the students had been passed by the Council examiners, chose to ignore Council's directive, and graduated those students.

At the request of the Minister of Health, the Council proposed a compromise solution to enable the registration of those students, as they refused to take a re-examination. That solution was accepted by the Minister but is yet to be implemented to date.

The Department of Health as well as the profession are being constantly kept abreast of the developments regarding this matter.

PART 3

GOVERNANCE

14. EXECUTIVE AUTHORITY

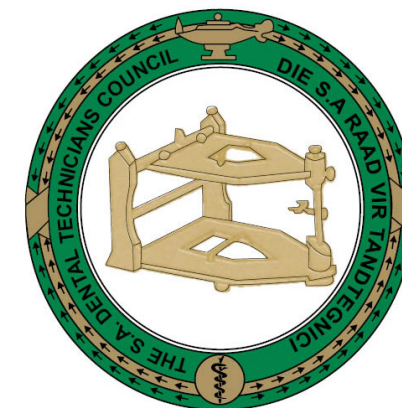
Council, in fulfilling its statutory mandate, subscribed to, and is committed to best practice in institutional/ corporate governance, integrity and ethics. So seriously does Council uphold these principles that it has adopted a zero-tolerance stance towards any practice within its ranks that points to a disregard, or a breach of these sacrosanct principles of governance, integrity and ethics, and has demonstrably taken steps to decisively deal with such instances where they occurred.

The Council has, since its appointment almost three years to date, also consistently operated on the principles of accountability, fairness, transparency, integrity and competency in all its dealings. These principles are embedded in King IV Code of corporate governance, to which Council subscribes to, and consistently strives to abide by its spirit, purport and content.

Council executes its mandate through Administration led by the Registrar, who derives support and guidance from Council Committees due to the small size of the administrative team. The Registrar is therefore expected to ensure that they, in giving effect to Council and Committee decisions, do so within and in compliance with applicable laws, regulations, standards and policies.

Council has a number of Committees through which it carries out its oversight and support work to the administrative arm. Committees of Council are processing Committees in respect of matters that will later require Council decision. Therefore Committees, unless the Delegations of Authority Framework dictates otherwise, only recommend and submit reports to Council and therefore do not have decision-making powers.

Each Committee operates within the sphere of Council-approved terms of reference, which outline what their responsibilities are, as well as their meeting protocols.



CURRENT COUNCIL COMMITTEES

Committee	Members	Designation	Attendance Pattern
Executive Committee (EXCO)	Prof. CP Owen	Chairperson/President	1
	Mr. I Noorshib	Vice president	1
	Mr. L Nematswerani	Treasurer	1
	Dr. TL Moeng-Mahlangu	Member	1
	Mr. Steenkamp	Member	1
	Ms. K Govender	Member	1
	*Ms. N Madiba	Member	*On special leave
Disciplinary Committee	Ms. K Govender	Chairperson	No meetings
	Mr. I Noorshib	Deputy Chairperson	No meetings
	Other co-opted members to be nominated	Members	No meetings
Education Committee	Dr. A Vahed	Chairperson	6
	Prof. PD Moipolai	Deputy Chairperson	6
	Prof. CP Owen	Member	6
	Mr. I Noorshib	Member	6
	Dr. TL Moeng-Mahlangu	Member	5
	Mr. N Ntshikilana	Member	6
	Mr. Louis Steyn	Chief Education Inspector	6
	Prof. AHA Ross	Member	6
	Mrs. M Bezuidenhout	CPUT Representative	6
	Mrs. Y Ngombane	DUT Representative	6
	Mr. H Moyane	TUT Representative	6
	Mr. RJ Heynemann	Advisory member of the profession	6
	Mrs. AD Dennis	Education Inspector (per invitation)	3
	Mr. ST Nembahe	Education Inspector (per invitation)	1
	Capt. KE Veldschoen	Education Inspector (per invitation)	1
	Ms. MG Roets	Education Inspector (per invitation)	2
CPD Committee	Capt. N Ntshikilana	Chairperson	No meetings
	Mr. I Noorshib	Deputy Chairperson	No meetings
	Mr. LG Maguga	Co-opted member from training UoT Representative (EDCO)	No meetings
	Ms. M Roets	Member elected by the profession	No meetings
	Prof CP Owen	Co-opted members	No meetings
	Maj. G Gunnell		No meetings
Audit Risk & Compliance Committee	Mr. N Goosen	Chairperson	3
	Mr. L Nematswerani	Member	3
	Ms. N Madiba	Member	On special leave

Committee	Members	Designation	Attendance Pattern
Legal Committee	Ms. K Govender	Chairperson	2
	Prof CP Owen	President of Council	2
	Mr. I Noorshib	Vice President of Council	2
	Dr. TL Moeng-Mahlangu	Member	2
	Mr. L Steenkamp	Member from DT Profession	1
	Prof. PD Moipolai	Member	2
	Mr. LA Steyn	Member	2
	Ms. N Madiba	Vice Chairperson	On special leave
Evaluation Panel	Prof. CP Owen	Chairperson	7
	Prof. PD Moipolai	Member	8
	Mr. I Noorshib	Member	7
	Dr. TL Moeng-Mahlangu	Member	7
	Dr. A Vahed	Member	1
	Prof AHA Ross	Member	5
	Mr. Steyn	Head: Education Inspector	8
	Mr. G Bass	Member	7
	Mrs. AD Dennis	Education Inspector (per invitation)	1
	Capt. ST Nembahe	Education Inspector (per invitation)	1
	Capt. KE Veldschoen	Education Inspector (per invitation)	1
Education Inspectorate Committee (Evaluation of practical Sample Work from UoT's)	Mr. Steyn	Head: Education Inspector	6
	Mrs. DA Dennis	Education Inspector	4
	Capt. ST Nembahe	Education Inspector	6
	Mr. K Mbangeni	Education Inspector	4
	Ms. MG Roets	Education Inspector	6
	Capt. KE Veldschoen	Education Inspector	6
	Ms. TM Mtolo	Education Inspector	4
	Mr. AH Thage	Education Inspector	5
	Ms. SB Selepe	Education Inspector	5

Committee	Members	Designation	Attendance Pattern
Stakeholder meeting with DENTASA	Prof. CP Owen	President of Council	2
	Mr. I Noorshib	Vice President of Council	2
	Dr. A Vahed	Council Member (Chairperson: Education Committee)	2
	Prof. PD Moipolai	Council Member (Deputy Chairperson: Education Committee)	1
	Mr. L Nematswerani	Treasurer of Council	2
	Ms. K Govender	Council Member	2
	Dr. TL Moeng-Mahlangu	Council Member (Chief Director Oral Health)	2
	Mr. LP Steenkamp	Council Member (Dental Contractor on Council)	1
	Mr. LA Steyn	Head: Education Inspector	2

- Council and Committee remuneration: All Council and Committee members receive a fee for their contribution in Council and Committees in which they serve. The rate is determined by Council on pre-determined intervals. All Council and Committee members also get reimbursed for out-of-pocket expenses incurred on Council's behalf. Further information on this subject appears under the financial statements later below.

- Audit and Risk Committee: This committee, which is chaired by an independent non-executive member, exists to be a watchdog on all issues related corporate governance, compliance, internal controls, risk management and audit processes.

The members of the SADTC's Audit and Risk Committee are the following:

Mr. N. Goosen (Chairperson)

Mr. L. Nematswerani (Treasurer)

*Ms. N. Madiba (Member)

Three (3) meetings of this Committee were held during the period under review, the details of which are as follows:

1. 05 August 2022
2. 14 October 2022
3. 24 February 2022

* Member currently on special leave at the behest of the Minister of Health.

- Managing Conflict of Interest

Members of Council and Council personnel are expected to sign the declarations of interest at the beginning of the year and at every meeting attended. A conflict of interest policy has been approved by Council.

- Delegations of Authority: Part of the Council's authority is to delegate some of its responsibilities to either its committees, or to the Registrar with the sole aim of ensuring that the SADTC remains a viable and sustainable Council.

The day-to-day running of the SADTC is delegated to the Registrar. She has a team which comprises the Deputy Registrar, the Inspectorate and other administrative personnel who assist her in carrying out day-to-day administrative responsibilities delegated to her by Council. She also plays the role of Secretariat and through that role, is tasked with ensuring that the decisions of Council and its Committees are implemented.

- Council Induction and Orientation: All new Council members are taken through formal induction and orientation of the SADTC business, with the objective of ensuring that they know the legislative and governance framework under which the SADTC operates.

- Skills, race and gender mix and balance in Council and its Committees: The SADTC embraces diversity. Therefore Council and its Committees are evenly balanced in terms of the skills set, race and gender.

- Council Code of Conduct: All members of Council signed the code of conduct at the beginning of their term, and the document is reviewed annually. This Code has been enforced by Council where circumstances warranted such action.

- Fraud and Corruption: Council is yet to develop and adopt a fraud and corruption strategy. The current mechanisms of reporting fraud and corruption are through affidavits submitted to Council, as well as by telephone calls to Council.

Council is committed to protecting its funds and other assets, and in this regard, has adopted a zero-tolerance stance to fraudulent activities. Council has also established a solid relationship with law enforcement agencies in the Republic, to whom fraudulent activities are reported once detected. Resources permitting, Council plans to open a secure fraud hotline in future.

- Health, safety and environmental issues: Council complies with health and safety matters and municipal by-laws. Reasonable precautions are taken to ensure a safe working environment. Employees are constantly informed about health and safety issues and measures at the workplace.

There is compliance by Council with the Occupational Health and Safety Act of 1995 and other relevant legislation.

Members of the profession are requested to provide a municipal permission letter when they apply for laboratory registrations.

- Council and Committee Appraisal/ Evaluation: How the SADTC Council as a collective and as individuals, and how its committees as a collective and as individuals perform, is important to the principle of good corporate governance that the SADTC upholds.

Council and Committee appraisal/ evaluation is a potent form of development for those that are the subject of the evaluation, in that they will be identify areas of weakness (if any) and improve thereon.

Council and Committee appraisal/ evaluation was not undertaken during the period under review, owing primarily to disruptions arising from Covid-19 restrictions.

- Managing Conflict of Interest: Members of Council and Council personnel are expected to sign the declarations of interest at the beginning of the year and at every meeting attended.
- Corporate Social Responsibility: There are currently no corporate social outreach projects in the SADTC on account of budgetary constraints. It is envisaged that this will remain the case for the short to medium term.
- Council Secretariat: This role is carried out by Council's Registrar, who reports to Council. She ensures that Council complies with all applicable legal, governance and statutory requirements as well Council's policy obligations. It is further her duty to keep Council members informed of their legal and governance responsibilities, ensure the smooth running of Council operations, plays an advisory role to Council on all legal, governance, strategy, financial and all related matters, keep Council abreast of the latest developments and trends in the sphere of corporate governance, ensures Council training and development, and also ensures that Council appraisal is carried out on pre-determined intervals.



15.AUDIT

This report seeks to provide confirmation that the SADTC's auditors have been effective in assisting the SADTC Council and Management in identifying and addressing significant risks as well as driving efficiencies whilst providing ongoing assurance to the SADTC.

Report of the Audit and Risk Committee (ARC)

The ARC reports that it has adopted formal terms of reference as its ARC Charter, has regulated its affairs in compliance with that Charter, and has discharged all its responsibilities contained therein, except where changes in accounting policies and practices have not been reviewed.

Audit and Risk Committee Responsibility

The ARC consists of one external member and two Council members. The ARC Chairperson is an external member. The ARC assesses SADTC's risks, with reference to the Council's available resources, expertise, and experience of financial management. The ARC has a policy that outlines its terms of reference.

The role of the ARC is to assist Council to ensure that:

- The SADTC has implemented an effective policy and plan for Risk Management that will enhance the SADTC's ability to achieve its strategic objectives.
- The disclosure regarding risk is comprehensive, timely, and relevant.
- Review the annual financial statements, summarised integrated information, any other intended release of price-sensitive information and prospectuses.
- Comment on the annual financial statements, the accounting practices and the effectiveness of the internal financial controls.
- Review the disclosure of sustainability issues in the annual report to ensure that it is reliable and does not conflict with the financial information.
- Recommend to Council the engagement of an external assurance provider on material sustainability issues.
- Consider whether the external auditor should perform assurance procedures on the interim results.
- Review the content of the summarised information for whether it provides a balanced view.
- Engage the external auditors to provide assurance on the summarized financial information.

The ARC has satisfied itself that its objectivity and independence remain intact, and the continued relevance of the internal audit charter on which it operates.

External Audit Plan

The ARC has reviewed the external audit plan as presented by the auditors. That plan is in line with best practice and audit standards and takes into account the Council's risk register for the financial year under review.

The ARC has reviewed the annual financial statements and the annual report for the financial year ended 28 February 2023, and is satisfied that, in all material respects, those reports comply with GARAP, and therefore fairly present the financial position and performance of the SADTC. The Committee reviewed and discussed the annual financial statements and annual report with management.

Accordingly, the Audit and Risk Committee has recommended the financial statements and performance report for the year ended 28 February 2023, to Council for approval.



Chairperson of ARC on behalf of the ARC
SADTC

PART 4

HUMAN RESOURCE MANAGEMENT

16. INTRODUCTION

One of Council's key enablers to the execution of its mandate, is its workforce. Council's administrative staff, small as it may be, are dedicated to ensuring that the SADTC delivers on its mandate and meets the expectations of its client base.

Due to the relatively small size of the SADTC, Human Resources strategies which larger institutions employ in the Human Resources space such as: talent management, employee relations, learning & development, retention, compensation and benefits management, organisational design and development, are being implemented within an integrated Human Resources administration/ regime at a small scale, aimed at ensuring that the small SADTC staff complement remains motivated, and it functions within a secure and predictable Human Resources environment.

17. STAFF TURNOVER PROFILE

Reason	Number
Death	0
Resignation	0
Dismissal	0
Retirement	0
Ill health	0
Expiry of contract	1

18. LABOUR RELATIONS: MISCONDUCT AND DISCIPLINARY ACTION

Nature of Disciplinary Action	Number
Verbal Warning	0
Written Warning	0
Final Written Warning	0
Dismissal	0
Dispute Resolution	0

19. LEARNERSHIP PROGRAMME

In view of Council's relatively small size and budgetary constraints, it has been and continues to be, unable to participate in a key Government initiative aimed at social upliftment by the employment of young, previously disadvantaged graduates, especially those from Dental Technology background, as interns. There is therefore no internship programme within the SADTC.

The SADTC had previously planned to submit its workplace skills plan (WSP) to the Health and Welfare Sector Education and Training Authority (HWSETA) so as to possibly unlock funding for interns that will assist with the workload within Council. Due to Covid restrictions this has not been explored.

20. EMPLOYEE WELLNESS

There is no employee wellness programme within the SADTC. This is also due to the relatively small size of the SADTC workforce. However the Registrar is vigilant and responsive to staff issues that may impede their wellness and performance and where interventions to end support arise, these are put into effect.

21. SOCIAL ACTIVITIES

On account of budgetary constraints and Covid restrictions during the year under review, there were no planned social activities for the workforce.

Going forward, and subject to budgetary sufficiency, Management will consider activities such as wellness day, Mandela Day, and a year-end function.

PART 5

FINANCIAL INFORMATION

22. REPORT OF THE REGISTRAR

Financial highlights and challenges

These annual financial statements have been prepared on the basis of accounting policies applicable to a going concern for the next twelve months.

This basis presumes that the funds will be available to finance current and future operations and that the realisation of assets and settlement of liabilities, contingent obligations and commitments will occur in the ordinary course of business.

Nothing has come to the attention of the SADTC to indicate that the organisation will not remain a going concern in the foreseeable future, based on forecasts and its liquidity.

The going concern assumption is valid in the light of the continuing funding by the profession, and the likelihood of future fundraising initiatives by Council.

As previously reported, it should however be noted that the funding made available by the registered members of the profession is in the long term insufficient for the SADTC to fulfil its full mandate. Thus, funding remains a constraint.

As at 28 February 2023, the SADTC reported a surplus of R2 807 231 (2022: R2 885 387) following a loss of R78 156 for the year under review (2022: R 959 545 profit); and the total assets exceeded its liabilities by R5 218 278 (2022: R5 296 434).

The SADTC has not been able to raise any additional funding through fundraising initiatives and partnerships, due to resource and capacity constraints to embark in such an exercise.

Annual Performance

A detailed report on the performance against objectives is listed in the Performance Information section above.

Human Resources

The HR policies were fully complied with during the financial year under review. Further information is provided in the Human Resource Report above.

→ Fraud

There were no cases of fraud reported and identified.

→ Events after the reporting date

The impasse between the SADTC and TUT regarding the registration of pipeline students had not been resolved as at 28 February 2023. That issue has since escalated into a protest demonstration by aggrieved students outside the SADTC offices, and threats of further demonstrations, which necessitated the SADTC to approach the courts for an interdict against protesting students. The continued impasse may result in the escalation of the dispute, including possible further legal action either by the SADTC, or against it. These events as identified by SADTC arising after the end of the financial year 2022/2023 could have a material effect on the financial statements.

→ Audit Matter

The SADTC has maintained a clean, unqualified audit outcome for the period under review. It should be noted that the SADTC has been a recipient of unqualified/ clean audit outcomes since 2015.

→ Legal form

A Statutory Council.

23. AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

- i. My 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 my opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with the 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 aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.
- ii. A further description of my responsibilities for the audit of the financial statements is included in the annexure to this auditor's report.

23.1 Report on the audit of the annual performance report

23.1.1 Introduction and scope

- i. I have a responsibility to report material findings on the reported performance information against predetermined objectives for selected programmes presented in the annual performance report. I performed procedures to identify findings but not to gather evidence to express assurance.
- ii. My procedures address the reported performance information, which must be based on the approved performance planning documents of the entity. I have not evaluated the completeness and appropriateness of the performance indicators included in the planning documents. My procedures also did not extend to any disclosures or assertions relating to planned performance strategies and information in respect of future periods that may be included as part of the reported performance information. Accordingly, my findings do not extend to these matters.
- iii. I evaluated the usefulness and reliability of the reported performance information in accordance with the criteria developed from the performance management and reporting framework, as defined in the general notice, for the selected programmes presented in the annual performance report of the entity for the year ended 28 February 2022.
- iv. I performed procedures to determine whether the reported performance information was properly presented and whether performance was consistent with the approved performance planning documents. I performed further procedures to determine whether the indicators and related targets were measurable and relevant, and assessed the reliability of the reported performance information to determine whether it was valid, accurate and complete.

23.1.2 Achievement of planned targets

Refer to the annual performance report above, (i.e. performance information) on page 45 for information on the achievement of planned targets for the year and explanations provided for the over achievement of a number of targets.

23.1.3 Adjustment of material misstatement

No material misstatement was detected in the annual performance report submitted for audit. It is for that reason that I did not raise any material findings on the usefulness and reliability of the reported performance information.

23.2 Report on the audit of compliance with legislation

23.2.1 Introduction and scope

- i. I have a responsibility to report material findings on the compliance of the entity with specific matters in key legislation. I performed procedures to identify findings but not to gather evidence to express assurance.
- ii. I did not raise material findings on compliance with the specific matters in key legislation: the Dental Technicians Act and its Regulations.

23.2.2 Other information

- i. The accounting authority (Council) is responsible for the other information. The other information comprises the information included in the annual report. The other information does not include the financial statements, the auditor's report and those selected programmes presented in the annual performance report that have been specifically reported in this auditor's report.
- ii. My opinion on the financial statements and findings on the reported performance information and compliance with legislation do not cover the other information and I do not express an audit opinion or any form of assurance conclusion thereon.
- iii. In connection with my audit, my responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements and the selected programmes presented in the annual performance report, or my knowledge obtained in the audit, or otherwise appears to be materially misstated.
- iv. I did not receive the other information prior to the date of this auditor's report. When I do receive and read this information, and if I conclude that there is a material misstatement therein, I am required to communicate the matter to those charged with governance and request that the other information be corrected. If the other information is not corrected, I may have to retract this auditor's report and reissue an amended report as appropriate. However, if it is corrected this will not be necessary.

23.2.3 Internal control deficiencies

I considered internal control relevant to my audit of the financial statements, reported performance information and compliance with applicable legislation; however, my objective was not to express any form of assurance on it. I did not identify any significant deficiencies in internal control.



THE SOUTH AFRICAN DENTAL
TECHNICIANS COUNCIL

ANNUAL FINANCIAL STATEMENTS FOR THE
YEAR ENDED 28 FEBRUARY 2023

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Audited Financial Statements

in compliance with the Dental Technicians Act, No. 19 of 1979

Prepared by: P Dry

Professional designation: AGA (SA)

Title: External Accountant

Reviewed by: TC van Wyk

Professional designation: CA (SA)

Title: External Auditor

Date published: 24 July 2023

GENERAL INFORMATION

COUNTRY OF INCORPORATION AND DOMICILE	South Africa
NATURE OF BUSINESS AND PRINCIPAL ACTIVITIES	The Council is established in terms of the Dental Technicians Act, 1979 (Act No. 19 of 1979), as amended, to regulate the professions of dental technicians and dental technologists, and to protect the interests of the public.
COUNCIL MEMBERS	Prof. CP Owen (Appointed 25 March 2020) Mr. I Noorshib (Appointed 25 March 2020) Mr. L Nematswerani (Appointed 25 March 2020) Dr. TL Moeng-Mahlangu (Appointed 20 October 2021) Mr. LP Steenkamp (Appointed 25 March 2020) Maj. G Gunnell (Appointed 25 March 2020) Mr. N Ntshikilana (Appointed 25 March 2020) Prof. PD Moipolai (Appointed 25 March 2020) Ms. K Govender (Appointed 25 March 2020) Ms. N Madiba (Appointed 25 March 2020)
REGISTERED OFFICE	954 Arcadia street Cnr Hill street Arcadia Pretoria 0083
POSTAL ADDRESS	PO Box 14617 Hatfield 0028
BANKERS	ABSA
LEVEL OF ASSURANCE	These financial statements have been audited as required by the Dental Technicians Act, No. 19 of 1979. In compliance with the disclosure requirements of the Dental Technicians Act, No. 19 of 1979 and the International Financial Reporting Standard for Small and Medium-sized Entities, these financial statements have been prepared by Intégro Accounting on behalf of The South African Dental Technicians Council.
PUBLIC INTEREST SCORE OF THE COUNCIL	15
CHARTERED ACCOUNTANTS CA(SA)	Snijder & Associates Inc 11 Villaggio North 2 Quintin Brand Street Persequor Techno Park Pretoria 0081

GENERAL INFORMATION

PREPARER	Intégro Accounting Associate General Accountants (SA) 27 Shield Drive Wapadrand Pretoria 0081
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COUNCIL MEMBERS' RESPONSIBILITIES AND APPROVAL

The council members are required by the Dental Technicians Act, No. 19 of 1979 to maintain adequate accounting records and are responsible for the content and integrity of the annual financial statements and related financial information included in this report. It is their responsibility to ensure that the annual financial statements satisfy the financial reporting standards with regards to form and content and present fairly the statement of financial position, results of operations and business of the Council, and explain the transactions and financial position of the business of the Council at the end of the financial year. The annual financial statements are based upon appropriate accounting policies consistently applied throughout the Council and supported by reasonable and prudent judgements and estimates.

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

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

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

The annual financial statements have been audited by the independent auditing firm, Snijder & Associates Inc, who have been given unrestricted access to all financial records and related data, including minutes of all meetings of the council member, the council members and committees of the council members. The council members believe that all representations made to the independent auditor during the audit were valid and appropriate. The external auditor's unqualified audit report is presented on pages 7 to 8.

The annual financial statements set out on pages 9 to 23, and the supplementary information set out on pages 24 to 25 which have been prepared on the going concern basis, were approved by the council members and were signed on 24 July 2023 on their behalf by:



Prof. CP Owen

COUNCIL MEMBERS' REPORT

The council members present their report for the year ended 28 February 2023.

1. Review of financial results and activities

Main business and operations

The Council is established in terms of the Dental Technicians Act, 1979 (Act No. 19 of 1979), as amended, to regulate the professions of dental technicians and dental technologists, and to protect the interests of the public. There were no major changes herein during the year.

The Council generated a deficit for the year ended 28 February 2023 of R78,156 (2022: surplus of R959,545).

The Council's revenue increased from R7,082,418 in the prior year to R7,127,712 for the year ended 28 February 2023.

The Council's cash flows from operating activities changed from an inflow of R144,700 in the prior year to an inflow of R253,316 for the year ended 28 February 2023.

2. Going concern

The financial statements have been prepared on a going concern basis for the next twelve months. The council members believe that the council has limited financial resources to continue in operation for the foreseeable future and are not aware of any material non-compliance with statutory or regulatory requirements or of any pending changes to legislation which may affect the council.

The SADTC receives no funding from the Department of Health, the fiscus and government grants.

The council is totally reliant on the funding it receives from member subscriptions to fund its monthly running costs and liabilities and any material reduction thereof will adversely affect the council's ability to operate as a going concern.

3. Events after reporting date

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

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

4. Council members' interest in contracts

To our knowledge none of the council members had any interest in contracts entered into during the year under review.

COUNCIL MEMBERS' REPORT

5. Council members

The council members of the Council during the year and up to the date of this report are as follows:

- Prof. CP Owen (Appointed 25 March 2020)
- Mr. I Noorshib (Appointed 25 March 2020)
- Mr. L Nematswerani (Appointed 25 March 2020)
- Dr. TL Moeng-Mahlangu (Appointed 20 October 2021)
- Mr. LP Steenkamp (Appointed 25 March 2020)
- Maj. G Gunnell (Appointed 25 March 2020)
- Mr. N Ntshikilana (Appointed 25 March 2020)
- Prof. PD Moipolai (Appointed 25 March 2020)
- Ms. K Govender (Appointed 25 March 2020)
- Ms. N Madiba (Appointed 25 March 2020)

6. Property, plant and equipment

There was no change in the nature of property, plant and equipment of the council or in the policy regarding their use.

As at 28 February 2023 the council's investment in property, plant and equipment amounted to R3 162 957, compared to R3 155 884 of the previous year. During the 2023 financial year, additions of R47 122 was made, compared to R79 583 of the previous year.

The additions for the current and prior financial year were as follows:

Additions:	2023	2022
Fixtures and fittings	5,521	-
Office equipment	4,086	52,282
Computer equipment	37,515	27,301
	47,122	79,583

No valuation was done during the 2023 financial year, as the property value is in line with current market prices. The property will be revalued during the 2024 financial year, in line with previous valuation intervals - every 3 years. (2018 - 2021)

7. Independent Auditors

Snijder & Associates Inc were the independent auditors for the year under review.

8. External Accountants

Intégro Accounting were the external accountants for the year under review.



SNIJDER & ASSOCIATES INCORPORATED
AUDITING ACCOUNTING TAXATION

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Persequor Techno Park, Lynnwood
2 Quintin Brand Street
P.O. BOX 31061, Totuilsdal, 0134

Independent Auditor's Report

To the Board of The South African Dental Technicians Council

Opinion

We have audited the annual financial statements of The South African Dental Technicians Council (the organisation) set out on pages 10 to 26, which comprise the statement of financial position as at 28 February 2023, statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and the notes to the annual financial statements, including a summary of significant accounting policies.

In our opinion, the annual financial statements present fairly, in all material respects, the financial position of The South African Dental Technicians Council as at 28 February 2023, and its financial performance and cash flows for the year then ended in accordance with the International Financial Reporting Standard for Small and Medium-sized Entities and the requirements of the Dental Technicians Act, 1979 (Act No. 19 of 1979).

Basis for Opinion

We conducted our audit in accordance with International Standards on Auditing. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Annual Financial Statements section of our report. We are independent of the organisation 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 annual 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 board are responsible for the other information. The other information comprises the information included in the document titled "The South African Dental Technicians Council annual financial statements for the year ended 28 February 2023", which includes the Board' Report as required by the Dental Technicians Act, 1979 (Act No. 19 of 1979) and the supplementary information as set out on pages 18 to 20. The other information does not include the annual financial statements and our auditor's report thereon.

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

Directors
H SNIJDER CA (SA) | GJ COETZEE CA (SA) | TC VAN WYK CA (SA)
CF ENGELBRECHT CA (SA)
Reg No. 1999/014998/21

Effective. Trusted.

Independent Auditor's Report

Responsibilities of the Board for the Annual Financial Statements

The board are responsible for the preparation and fair presentation of the annual financial statements in accordance with the International Financial Reporting Standard for Small and Medium-sized Entities and the requirements of the Dental Technicians Act, 1979 (Act No. 19 of 1979), and for such internal control as the board determine is necessary to enable the preparation of annual financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the annual financial statements, the board are responsible for assessing the organisation'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 board either intend to liquidate the organisation or to cease operations, or have no realistic alternative but to do so.

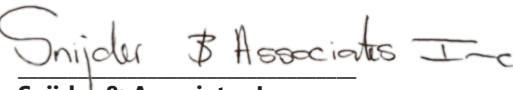
Auditor's Responsibilities for the Audit of the Annual Financial Statements

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

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

- Identify and assess the risks of material misstatement of the annual financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the organisation's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the board.
- Conclude on the appropriateness of the board' use of the going concern basis of accounting and based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the organisation's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the annual financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the organisation to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the annual financial statements, including the disclosures, and whether the annual financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the board 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.


Snijder & Associates Inc.
TC van Wyk CA (SA)
Chartered Accountants (SA)
Registered Auditors

24 July 2023
Pretoria

STATEMENT OF FINANCIAL POSITION

Figures in R	Notes	2023	2022
ASSETS			
Non-current assets			
Property, plant and equipment	4	3,162,957	3,155,884
Current assets			
Trade and other receivables	5	336,112	673,263
Cash and cash equivalents	6	2,474,635	2,268,437
Total current assets		2,810,747	2,941,700
Total assets		5,973,704	6,097,584
EQUITY AND LIABILITIES			
Equity			
Accumulated surplus		2,807,231	2,885,387
Other non-distributable reserves		2,411,047	2,411,047
Total equity		5,218,278	5,296,434
Liabilities			
Non-current liabilities			
Mortgage bonds	10	32	32
Current liabilities			
Provisions	8	137,245	255,000
Trade and other payables	9	618,149	546,118
Total current liabilities		755,394	801,118
Total liabilities		755,426	801,150
Total equity and liabilities		5,973,704	6,097,584

STATEMENT OF COMPREHENSIVE INCOME

Figures in R	Notes	2023	2022
Revenue	11	7,127,712	7,082,418
Other income	12	-	53,241
Administrative expenses	14	(345,141)	(390,437)
Other expenses	15	(7,038,221)	(6,290,697)
(Deficit) / surplus from operating activities	16	(255,650)	454,525
Investment income	17	177,494	73,491
(Deficit) / surplus from continuing operations		(78,156)	528,016
Other gains/losses		-	431,529
(Deficit) / surplus for the year		(78,156)	959,545



STATEMENT OF CHANGES IN EQUITY

Figures in R	Other non-distributable reserve	Accumulated surplus	Total
Balance at 1 March 2021	2,411,047	1,925,842	4,336,889
Changes in equity			
Surplus for the year	-	959,545	959,545
Total comprehensive income for the year	-	959,545	959,545
Balance at 28 February 2022	2,411,047	2,885,387	5,296,434
Balance at 1 March 2022	2,411,047	2,885,387	5,296,434
Changes in equity			
Deficit for the year	-	(78,156)	(78,156)
Total comprehensive income for the year	-	(78,156)	(78,156)
Balance at 28 February 2023	2,411,047	2,807,231	5,218,278



STATEMENT OF CASH FLOWS

Figures in R	Notes	2023	2022
Net cash flows from operations	18	75,822	71,209
Interest received		177,494	73,491
Net cash flows from operating activities		253,316	144,700
Cash flows used in investing activities			
Proceeds from sales of property, plant and equipment		5	5
Purchase of property, plant and equipment		(47,123)	(79,583)
Cash flows used in investing activities		(47,118)	(79,578)
Net increase in cash and cash equivalents		206,198	65,122
Cash and cash equivalents at beginning of the year		2,268,437	2,203,315
Cash and cash equivalents at end of the year	6	2,474,635	2,268,437



ACCOUNTING POLICIES

1. General information

The South African Dental Technicians Council ('the Council') is established in terms of the Dental Technicians Act, 1979 (Act No. 19 of 1979), as amended, to regulate the professions of dental technicians and dental technologists, and to protect the interests of the public.

The Council is incorporated as a Council and domiciled in South Africa. The address of its registered office is 954 Arcadia street Cnr Hill street, Arcadia, Pretoria, 0083.

2. Basis of preparation and summary of significant accounting policies

The annual financial statements of The South African Dental Technicians Council have been prepared in accordance with the International Financial Reporting Standard for Small and Medium-sized Entities and the Dental Technicians Act, No. 19 of 1979. The annual financial statements have been prepared under the historical cost convention, as modified by the revaluation of investment property, certain property, plant and equipment, biological assets and derivative financial instruments at fair value. They are presented in South African Rand.

The preparation of financial statements in conformity with the International Financial Reporting Standard for Small and Medium-sized Entities requires the use of certain critical accounting estimates. It also requires management to exercise its judgement in the process of applying the Council's accounting policies. The areas involving a higher degree of judgement or complexity, or areas where assumptions and estimates are significant to the annual financial statements are disclosed in note 3.

The principal accounting policies applied in the preparation of these annual financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated.

2.1 Property, plant and equipment

Property, plant and equipment is stated at historical cost less accumulated depreciation and any accumulated impairment losses. Historical cost includes expenditure that is directly attributable to bringing the asset to the location and condition necessary for it to be capable of operating in the manner intended by the council members.

The Council adds to the carrying amount of an item of property, plant and equipment the cost of replacing parts of such an item when that cost is incurred if the replacement part is expected to provide incremental future benefits to the Council. The carrying amount of the replaced part is derecognised. All other repairs and maintenance are charged to surplus or deficit during the period in which they are incurred.

Land is not depreciated. Depreciation on other assets is charged so as to allocate the cost of assets less their residual value over their estimated useful lives, using the straight-line method. The estimated useful lives range as follows:

Asset class	Useful life / depreciation rate
Buildings	Not depreciated
Fixtures and fittings	16.67% or 6 years
Office equipment	20.00% or 5 years
Computer equipment	33.33% or 3 years
Computer software	50.00% or 5 years

The assets' residual values, useful lives and depreciation methods are reviewed, and adjusted prospectively if appropriate, if there is an indication of a significant change since the last reporting date.

ACCOUNTING POLICIES

Basis of preparation and summary of significant accounting policies continued...

An asset's carrying amount is written down immediately to its recoverable amount if the asset's carrying amount is greater than its estimated recoverable amount.

Gains and losses on disposals are determined by comparing the proceeds with the carrying amount and are recognised within 'other gains / (losses)' in the statement of comprehensive income.

2.2 Financial instruments

Trade and other receivables

Trade receivables are recognised initially at the transaction price. They are subsequently measured at amortised cost using the effective interest method, less provision for impairment. A provision for impairment of trade receivables is established when there is objective evidence that the Council will not be able to collect all amounts due according to the original terms of the receivables.

Trade and other receivables are classified as debt instruments and loan commitments at amortised cost.

Other financial assets

Other financial assets are recognised initially at the transaction price, including transaction costs except where the asset will subsequently be measured at fair value.

Where other financial assets relate to shares that are publicly traded, or where fair values can be measured reliably without undue cost or effort, these assets are subsequently measured at fair value with the changes in fair value being recognised in profit or loss. Other investments are subsequently measured at cost less impairment.

Debt instruments are subsequently stated at amortised cost. Interest income is recognised on the basis of the effective interest method and is included in finance income.

Commitments to receive a loan that meet the conditions in paragraph 11.8(c) are measured at cost less impairment.

Cash and cash equivalents

Cash and cash equivalents includes cash on hand, demand deposits and other short-term highly liquid investments with original maturities of three months or less. Bank overdrafts are shown in current liabilities on the statement of financial position.

Trade and other payables

Trade payables are recognised initially at the transaction price and subsequently measured at amortised cost using the effective interest method.

Other financial liabilities

Other financial liabilities are recognised initially at the transaction price, including transaction costs except where the liability will subsequently be measured at fair value.

Where the fair value of other financial liabilities can be measured reliably without undue cost or effort, these liabilities are subsequently measured at fair value with the changes in fair value being recognised in surplus or deficit.

Debt instruments are subsequently stated at amortised cost. Interest expense is recognised on the basis of the effective interest method and is included in finance costs.

Other financial liabilities are classified as current liabilities unless the Council has an unconditional right to defer settlement of the liability for at least 12 months after the reporting date.

ACCOUNTING POLICIES

Basis of preparation and summary of significant accounting policies continued...

2.3 Prepayments

Prepayments consist of various payments that have been made in advance for goods and services to be received in future. Prepayments are measured at amortised cost, and are derecognised when the goods and services to which the prepayment relate have been received.

2.4 Provisions

Provisions for restructuring costs and legal claims are recognised when: the Council has a present legal or constructive obligation as a result of past events; it is probable that a transfer of economic benefits will be required to settle the obligation; and the amount can be reliably estimated. Restructuring provisions comprise lease termination penalties and employee termination payments. Provisions are not recognised for future operating losses.

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

2.5 Revenue

Revenue is measured at the fair value of the consideration received or receivable. Revenue is shown net of value-added tax, returns, rebates and discounts.

When the outcome of a transaction involving the rendering of services can be estimated reliably, revenue associated with the transaction is recognised by reference to the stage of completion of the transaction at the end of the reporting period. The outcome of a transaction can be estimated reliably when all the following conditions are satisfied:

- the amount of revenue can be measured reliably; and
- it is probable that the economic benefits associated with the transaction will flow to the entity; and
- the stage of completion of the transaction at the end of the reporting period can be measured reliably; and
- the costs incurred for the transaction and the costs to complete the transaction can be measured reliably.

When the outcome of transactions involving the rendering of services cannot be estimated reliably, revenue is recognised only to the extent of the expenses recognised that are recoverable.

Interest income is recognised using the effective interest method.

2.6 Employee benefits

Short-term employee benefits

Compensation paid to employees for the rendering of services are recognised at the undiscounted amount paid or expected to be paid in the accounting period in which the services were rendered.

Where employees accumulate entitlement for paid absences, an expense is recognised as the additional amount that the entity expects to pay as a result of the unused entitlement that has accumulated at the end of the reporting period. In the case of non-accumulating paid absences, the expense is recognised only when the absences occur.

The expected cost of profit-sharing and bonus payments are recognised when there is a present legal or constructive obligation to make such payments as a result of past events, and a reliable estimate of the obligation can be made. A present obligation exists when there is no realistic alternative but to make the payments.

ACCOUNTING POLICIES

Basis of preparation and summary of significant accounting policies continued...

Defined contribution plans

Defined contribution plans are post-employment benefit plans under which an entity pays fixed contributions into a separate entity (a fund) and will have no legal or constructive obligation to pay further contributions if the fund does not hold sufficient assets to pay all employee benefits relating to employee service in the current and prior periods.

When an employee has rendered service to an entity during a period, the contribution payable to a defined contribution plan in exchange for that service is recognised:

- as a liability, after deducting any contribution already paid. Where the contribution already paid exceeds the contribution due for service before the end of the reporting period, the excess is recognised as an asset to the extent that the prepayment will lead to a reduction in future payments or a cash refund.
- as an expense, except where the amount is allowed as an inclusion in the cost of an asset.

Defined benefit plans

Defined benefit plans are post-employment benefit plans other than defined contribution plans.

For defined benefit plans, the cost of providing benefits is determined using the projected unit cost method, with actuarial valuations being carried out at the end of each period. Remeasurement comprising actuarial gains and losses, the effect of changes to the asset ceiling, and the return on plan assets is reflected immediately in the statement of financial position with a charge or credit recognised in other comprehensive income in the period in which they occur. Remeasurement recognised in other comprehensive income is reflected immediately in retained earnings and will not be reclassified to surplus or deficit. Past service cost is recognised in surplus or deficit in the period of a plan amendment. Net interest calculated by applying the discount rate at the beginning of the period to the net defined benefit liability or asset. Defined benefit costs are categorised as follows:

- Service costs
- Net interest expense or income
- Remeasurement.

The first two components of defined benefit costs are presented in surplus or deficit in the line item other operating expenses. Curtailment gains and losses are accounted for as past service costs.

The retirement benefit obligation recognised in the statement of financial position represents the actual deficit or surplus in the defined benefit plans. Any surplus resulting from this calculation is limited to the present value of any economic benefits available in the form of refunds from the plans or reductions in future contributions to the plans.

Termination benefits

A liability for termination benefit is recognised at the earlier of when the offer can no longer be withdrawn and when the related restructuring costs are recognised.

2.7 Government grants

Grants from the government are recognised at their fair value in profit or loss where there is a reasonable assurance that the grant will be received and the Council has complied with all attached conditions. Grants received where the Council has yet to comply with all attached conditions are recognised as a liability (and included in deferred income within trade and other payables) and released to income when all attached conditions have been complied with. Government grants received are included in 'other income' in profit or loss.

3. Critical accounting estimates and judgements

Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.



NOTES TO THE ANNUAL FINANCIAL STATEMENTS

Figures in R

Property, plant and equipment continued...

Reconciliation for the year ended 28 February 2022

Balance at 1 March 2021

At cost	3,079,865	65,382	39,889	133,146	155,230	3,473,512
Accumulated depreciation	-	(61,093)	(39,882)	(114,396)	(155,220)	(370,591)
Carrying amount	3,079,865	4,289	7	18,750	10	3,102,921

Movements for the year ended 28 February 2022

Additions from acquisitions	-	-	52,282	27,301	-	79,583
Depreciation	-	(3,131)	(9,268)	(14,216)	-	(26,615)
Disposals	-	-	(1)	(4)	-	(5)
Property, plant and equipment at the end of the year	3,079,865	1,158	43,020	31,831	10	3,155,884

Closing balance at 28 February 2022

At cost	3,079,865	65,382	92,171	132,348	155,230	3,524,996
Accumulated depreciation	-	(64,224)	(49,151)	(100,517)	(155,220)	(369,112)
Carrying amount	3,079,865	1,158	43,020	31,831	10	3,155,884

NOTES TO THE ANNUAL FINANCIAL STATEMENTS

Figures in R

4. Property, plant and equipment

4.1 Balances at year end and movements for the year

	Buildings	Fixtures and fittings	Office equipment	Computer equipment	Computer software	Total
Reconciliation for the year ended 28 February 2023						
Balance at 1 March 2022						
At cost	3,079,865	65,382	92,171	132,348	155,230	3,524,996
Accumulated depreciation	-	(64,224)	(49,151)	(100,517)	(155,220)	(369,112)
Carrying amount	3,079,865	1,158	43,020	31,831	10	3,155,884
Movements for the year ended 28 February 2023						
Additions from acquisitions	-	5,521	4,086	37,515	-	47,122
Depreciation	-	(6,660)	(14,542)	(18,842)	-	(40,044)
Disposals	-	-	1	(6)	-	(5)
Property, plant and equipment at the end of the year	3,079,865	19	32,565	50,498	10	3,162,957
Closing balance at 28 February 2023						
At cost	3,079,865	70,903	96,257	169,858	155,230	3,572,113
Accumulated depreciation	-	(70,884)	(63,692)	(119,360)	(155,220)	(409,156)
Carrying amount	3,079,865	19	32,565	50,498	10	3,162,957

NOTES TO THE ANNUAL FINANCIAL STATEMENTS

Figures in R	2023	2022
<i>Property, plant and equipment continued...</i>		
4.2 Property details		
4.2.1 Stand 481/R, Cnr Hill & Arcadia Streets		
Purchase price	460,000	460,000
Additions since purchase or valuation	2,619,865	2,619,865
	3,079,865	3,079,865

4.3 Detail of market value and cost of properties

	Market value 2023	Cost 2023	Market value 2022	Cost 2022
Stand 481/R, Cnr Hill & Arcadia Streets	3,079,865	460,000	3,079,865	460,000

Land and Buildings consist of the office building situated on Stand 481/R, Cnr Hill & Arcadia Streets.

The property was revalued in the 2021 financial year from R2,900,000 to R3,079,856.

No valuation was done during the 2023 financial year, as the property value is in line with current market prices. The property will be revalued during the 2024 financial year, in line with previous valuation intervals - every 3 years. (2018 - 2021)

5. Trade and other receivables**5.1 Trade and other receivables comprise:**

Trade receivables	139,666	1,884,258
Provision for bad debts	(0)	(1,441,480)
Value added tax	196,446	230,485
	336,112	673,263

5.2 Provision for bad debts

No provision was made for bad debts on 28 February 2023, as all outstanding debts were written off on that date in accordance with Section 23 of the Dental Technicians Act. The previous year's provision was sufficient to cover the write-off.

NOTES TO THE ANNUAL FINANCIAL STATEMENTS

Figures in R	2023	2022	
6. Cash and cash equivalents			
Cash and cash equivalents included in current assets:			
Cash			
Cash on hand	783	902	
Balances with banks	288,956	260,130	
	289,739	261,032	
Cash equivalents			
Short term deposits	2,184,896	2,007,405	
	2,474,635	2,268,437	
7. Reserves			
Revaluation of property			
Revaluation reserve - Fixed property	2,411,047	2,411,047	
8. Provisions			
1 Provisions comprise:			
Provisions for employee benefits	71,250	-	
Other provisions	65,995	255,000	
Current portion	137,245	255,000	
2 Provisions for employee benefits			
	Provision for ex-gratia bonuses	Provision for employee benefits	Total
Balance at 1 March 2022	-	-	-
New provisions	60,000	11,250	71,250
Total changes	60,000	11,250	71,250
Balance at 28 February 2023	60,000	11,250	71,250
9. Trade and other payables			
Trade and other payables comprise:			
Annual fees received in advance	171,540	360,176	
Admission of Debt settlements received	163,850	-	
Accrued liabilities - SARS Payroll taxes	182,759	85,942	
Grants received in advance - International benchmarking	100,000	100,000	
Total trade and other payables	618,149	546,118	

NOTES TO THE ANNUAL FINANCIAL STATEMENTS

Figures in R	2023	2022
10. Mortgage bonds		
10.1 Mortgage bonds comprise:		
ABSA Bond	32	32
10.2 Additional disclosures		
The mortgage bond is settled and has no monthly repayments		
11. Revenue		
Revenue comprises:		
Fees received	7,127,712	7,082,418
12. Other income		
Other income comprises:		
Insurance claim	-	53,241
13. Employee benefits expense		
Employee benefits expense comprises:		
Basic	3,591,355	3,342,548
Medical aid - company contributions	220,643	210,874
	3,811,998	3,553,422
14. Administrative expenses		
Administrative expenses comprise:		
Accounting fees	234,000	269,285
Auditors remuneration - Fees	39,700	50,900
Bank charges	25,461	24,372
Telecommunication	45,980	45,880
Total administrative expenses	345,141	390,437

NOTES TO THE ANNUAL FINANCIAL STATEMENTS

Figures in R	2023	2022
15. Other expenses		
Other expenses comprise:		
Bad debts	200,785	407,503
Cleaning	738	-
Computer and software expenses	260,849	265,809
Conferences	94,459	-
Council claims	308,607	178,999
Depreciation	40,044	26,615
Employee benefit expenses	3,811,998	3,553,422
Entertainment	2,357	-
Exhibitions and marketing	107,602	10,819
Gifts	5,575	3,500
Honoraria	1,333,432	741,340
Inspectorate	122,341	125,923
Insurance	44,946	43,968
Legal expense	269,827	499,434
Municipal charges	41,514	78,383
Office consumables	19,435	15,329
Operating lease expense	36,100	31,372
Postage	45,127	38,451
Printing and stationery	125,788	153,283
Repairs and maintenance	35,837	92,695
Security	1,714	8,852
Training	16,473	15,000
Workman's Compensation	112,673	-
Total other expenses	7,038,221	6,290,697
16. (Deficit) / surplus from operating activities		
(Deficit) / surplus from operating activities includes the following separately disclosable items		
Other operating expenses		
Property plant and equipment - depreciation	40,044	26,615
Leases - operating lease minimum lease rentals	36,100	31,372
Audit fees		
Auditors remuneration - Fees	39,700	50,900
17. Investment income		
Investment income comprises:		
Interest received	177,494	73,491

NOTES TO THE ANNUAL FINANCIAL STATEMENTS

Figures in R	2023	2022
18. Cash flows from operations		
(Deficit) / surplus for the year	(78,156)	959,545
Adjustments for:		
Finance income	(177,494)	(73,491)
Depreciation and amortisation expense	40,044	26,615
Impairment losses and reversal of impairment losses recognised in surplus or deficit	200,785	407,503
Change in working capital:		
Trade and other receivables	136,367	(1,056,899)
Adjustments for decrease in other operating receivables		398,418
Trade and other operating payables	72,031	(243,592)
Movements in provisions	(117,755)	(346,890)
Net cash flows from operations	75,822	71,209



DETAILED INCOME STATEMENT

Figures in R	Notes	2023	2022
Revenue	11		
Fees		7,127,712	7,082,418
Other income	12		
Insurance claim received		-	53,241
Administrative expenses	14		
Accounting fees		(234,000)	(269,285)
Auditors remuneration - Fees		(39,700)	(50,900)
Bank charges		(25,461)	(24,372)
Telecommunication		(45,980)	(45,880)
		(345,141)	(390,437)
Other expenses	15		
Bad debts		(200,785)	(407,503)
Cleaning		(738)	-
Computer and software expenses		(260,849)	(265,809)
Conferences		(94,459)	-
Council claims		(308,607)	(178,999)
Depreciation - property, plant and equipment		(40,044)	(26,615)
Employee costs - salaries		(3,811,998)	(3,553,422)
Entertainment		(2,357)	-
Exhibitions and marketing		(107,602)	(10,819)
Gifts		(5,575)	(3,500)
Honoraria		(1,333,432)	(741,340)
Inspectorate		(122,341)	(125,923)
Insurance		(44,946)	(43,968)
Legal expense		(269,827)	(499,434)
Municipal expenses		(41,514)	(78,383)
Office consumables		(19,435)	(15,329)
Operating lease expense		(36,100)	(31,372)
Postage		(45,127)	(38,451)
Printing and stationery		(125,788)	(153,283)
Repairs and maintenance		(35,837)	(92,695)
Security		(1,714)	(8,852)
Training		(16,473)	(15,000)
Workman's Compensation		(112,673)	-
		(7,038,221)	(6,290,697)
(Deficit) / surplus from operating activities	16	(255,650)	454,525
Investment income	17		
Interest received		177,494	73,491
(Deficit) / surplus from continuing operations		(78,156)	528,016

DETAILED INCOME STATEMENT

Figures in R	Notes	2023	2022
Other items			
Reversal of provision for Act renewal		-	400,000
Gain on stolen items		-	31,529
		-	431,529
(Deficit) / surplus for the year		(78,156)	959,545



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



24. REGISTER 2023

		2021/22	2022/23	POPULATION GROUPS AS PREVIOUSLY DESIGNATED		GENDER		GEOGRAPHICAL LOCATION															
DENTAL TECHNICIANS	1152	1018	<table><tr><td>Black</td><td>139</td></tr><tr><td>Coloured</td><td>70</td></tr><tr><td>Indian</td><td>75</td></tr><tr><td>White</td><td>730</td></tr><tr><td>Other</td><td>4</td></tr></table>		Black	139	Coloured	70	Indian	75	White	730	Other	4	<table><tr><td>Female</td><td>231</td></tr><tr><td>Male</td><td>787</td></tr></table>		Female	231	Male	787	Eastern Cape		39
					Black	139																	
					Coloured	70																	
					Indian	75																	
					White	730																	
					Other	4																	
					Female	231																	
					Male	787																	
					Free State		29																
					Gauteng		449																
KwaZulu-Natal		133																					
Limpopo		22																					
Mpumalanga		33																					
North West		32																					
Northern Cape		6																					
Western Cape		271																					
Overseas		4																					
LAB OWNERS (DENTAL TECHNICIANS/ TECHNOLOGISTS)	622	536	<table><tr><td>Black</td><td>25</td></tr><tr><td>Coloured</td><td>15</td></tr><tr><td>Indian</td><td>36</td></tr><tr><td>White</td><td>460</td></tr><tr><td>Other</td><td>0</td></tr></table>		Black	25	Coloured	15	Indian	36	White	460	Other	0	<table><tr><td>Female</td><td>51</td></tr><tr><td>Male</td><td>485</td></tr></table>		Female	51	Male	485	Eastern Cape		22
					Black	25																	
					Coloured	15																	
					Indian	36																	
					White	460																	
					Other	0																	
					Female	51																	
					Male	485																	
					Free State		16																
					Gauteng		224																
KwaZulu-Natal		64																					
Limpopo		17																					
Mpumalanga		20																					
North West		19																					
Northern Cape		3																					
Western Cape		151																					
Overseas		0																					
LAB OWNERS (DENTISTS)	76	73	<table><tr><td>Black</td><td>5</td></tr><tr><td>Coloured</td><td>2</td></tr><tr><td>Indian</td><td>16</td></tr><tr><td>White</td><td>50</td></tr><tr><td>Other</td><td>0</td></tr></table>		Black	5	Coloured	2	Indian	16	White	50	Other	0	<table><tr><td>Female</td><td>11</td></tr><tr><td>Male</td><td>62</td></tr></table>		Female	11	Male	62	Eastern Cape		2
					Black	5																	
					Coloured	2																	
					Indian	16																	
					White	50																	
					Other	0																	
					Female	11																	
					Male	62																	
					Free State		6																
					Gauteng		26																
KwaZulu-Natal		12																					
Limpopo		0																					
Mpumalanga		2																					
North West		9																					
Northern Cape		3																					
Western Cape		13																					
Overseas		0																					
STATE-OWNED LABORATORIES	15	13					Eastern Cape		0														
							Free State		0														
							Gauteng		4														
							KwaZulu-Natal		2														
							Limpopo		1														
							Mpumalanga		0														
							North West		1														
							Northern Cape		0														
							Western Cape		5														
							Overseas		0														

		2021/22	2022/23	POPULATION GROUPS AS PREVIOUSLY DESIGNATED	GENDER	GEOGRAPHICAL LOCATION	
DENTAL TRADERS	7	7					

Number of registered persons according to different registration categories

CATEGORY	NUMBER OF REGISTERED PERSONS	
	2022	2023
Dental Contractors/Lab Owners (Technicians)	622	542
Dental Contractors/Lab Owners (Dentists)	68	75
Dental Contractors/Lab Owners (State Owned)	15	13
Dental Technicians	530	476
Dental Traders	7	7
CPD Providers	1	5
TOTAL	1243	1118



THE SOUTH AFRICAN DENTAL TECHNICIANS COUNCIL



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