



ANNUAL **REPORT** 2024-2025



South African Nursing Council
Regulating nursing, advocating for the public

GENERAL INFORMATION

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CELEBRATING

80 *Years*
OF SELF-REGULATION
1944 - 2024

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List of Abbreviations/Acronyms

AFS	Annual Financial Statement	ICT	Information Communication Technology
APC	Annual Practicing Certificate	IMS	Integrated Management System
APP	Annual Performance Plan	MMS	Membership Management System
ARC	Audit and Risk Committee	M&S	Medical and Surgical
ATR	Annual Training Report	MOA	Memorandum of Agreement
BCM	Business Continuity Management	MTDP	Medium-Term Development Plan
BEC	Bid Evaluation Committee	NDoH	National Department of Health
CCMA	Commission for Conciliation, Mediation and Arbitration	NDP	National Development Plan
CFO	Chief Financial Officer	NEA	Nursing Excellence Awards
CHE	Council on Higher Education	NEI's	Nursing Education Institutions
CoT	City of Tshwane	NFP	Not for Profit
COLA	Cost of Living Adjustment	NHI	National Health Insurance
CPI	Consumer Price Index	PABX	Private Automatic Branch Exchange
CPD	Continuing Professional Development	PCC	Professional Conduct Committee
DENOSA	Democratic Nursing Organisation of South Africa	PEE	Professional Entrance Examination
NDoH	National Department of Health	PIC	Preliminary Investigating Committee
DMSA	Data Management and Statistical Analysis	PMDS	Performance Management Development System
ECSACONM	East, Central and Southern Africa College of Nursing and Midwifery	PMO	Project Management Office
ESA	Eastern and Southern Africa	PRAS	Professional Registration Assessment System
EE	Employment Equity	QA	Quality Assurance
ERM	Enterprise Risk Management	RMP	Records Management Plan
ERP	Enterprise Resource Planning	SADC	Southern African Development Community
E&T	Education and Training	SANC	South African Nursing Council
EVP	Employee Value Proposition	SAPC	South African Pharmacy Council
EXCO	Executive Committee	SMT	Senior Management Team
FINCO	Finance Committee	SAQA	South African Qualifications Authority
FY	Financial Year	SCM	Supply Chain Management
HEQSF	Higher Education Qualifications Sub-Framework	SDG	Sustainable Development Goals
HRH	Human Resources for Health	SMS	Short Message Service
HRIS	Human Resources Information Systems	SP	Strategic Plan
HRRC	Human Resources and Remuneration Committee	WHO	World Health Organisation
IC	Impairment Committee	WIL	Work Integrated Learning
ICN	International Council of Nurses	WSP	Workplace Skills Plan



Part A

GENERAL INFORMATION

Message by the Chairperson

Dr Moshibudi C. Molepo



As the 2024/25 Financial Year comes to an end, it is both an honour and a privilege to reflect on the year behind us and present the South African Nursing Council's Annual Report for this period. This year has been momentous, not only for the achievements it has brought, but also for the legacy it has allowed us to celebrate.

Major milestone year for SANC

The year 2024 marked a significant milestone in the history of the South African Nursing Council (SANC), as we proudly celebrated 80 years of dedicated service and regulatory excellence – from 8 November 1944 to 8 November 2024. This historic occasion embodies:

- 80 years of self-regulation.
- 80 years of commitment to the profession of nursing.
- 80 years of regulating nursing practice, education and training.
- 80 years of contributing to and improving the healthcare of the South African communities.

This major milestone was commemorated through a high-profile event with the necessary formalities, attendance by current and previous Council members and by key figures within healthcare, former as well as some current SANC staff members and other valued stakeholders. Prior to the main event, a dedicated internal event was held at the SANC's premises to recognise and appreciate the contributions of current staff members who are the driving force behind our continued success.

We were privileged to host dignitaries from the National Department of Health, South African Military Health Services, as well as former Council Chairpersons and Registrars, all of whom shared their reflections and experiences, reaffirming the enduring impact of the Council's work over the decades. The Nursing and Midwifery Regulatory bodies in the Southern African Development Community (SADC) countries attended the SANC 80th celebration event, reflecting the national and regional significance of the Council's sustained role in advancing nursing and healthcare in South Africa.

In the words of the SANC Council:

"As we celebrate 80 years, we are looking forward to a future marked by innovation, strengthened partnerships,

and continued progress in fulfilling our mandate. Our focus remains on maintaining high standards and improving our service delivery under the hashtag: #buildingabetterSANC."

Five-Year Strategic Plan

The past year had its own challenges, also on a global level, however, under the steadfast leadership of the 17th Council the SANC has once again persevered, demonstrating adaptability and strength while tirelessly working towards achieving its mandate as outlined in the 2024-2029 Five-Year Strategic Plan. The SANC 2024-2029 Strategic Plan signifies a decisive shift towards result-based planning, a continuous commitment to the betterment of the nursing profession, and the advocacy for the public and health care users. It further demonstrates how resources will be strategically allocated and optimally utilised to enhance operational efficiency, drive institutional performance, and ensure the effective delivery of core functions in alignment with national health priorities.

The SANC impact statement for the 2024/2025-2028/2029 period is: "a sustainable nursing profession that cares, protects, advocates, and promotes the dignity of health care users". It is through this impact statement that the following strategic outcomes were developed:

- **Outcome 1: SANC positioned as a credible responsive regulator.**
Improvement of customer experience rating
- **Outcome 2: Regulated ethical and professional nursing practice towards public protection**
Reduction in misconduct cases through professional conduct hearings.
- **Outcome 3: Fit-for-practice registered nurses:**
Professional Registration Assessment System implementation
- **Outcome 4: Well-governed, sustainable, and capable SANC:**
 - External audit outcome for SANC – unqualified audit opinion with no material findings,
 - Improved risk maturity level,
 - Implementation of a fit-for-purpose organisational structure.

Highlights of the year aligned to Outcome 1: SANC positioned as a credible responsive regulator

Stakeholder Engagement and Client Services

The focus areas of Council during the past financial year with regards to stakeholder engagement and client services included the development, implementation and monitoring of the Stakeholder Relation and Collaboration Plan to strengthen stakeholder relations, and also the Customer Service Quality Improvement Plan. The Customer Service Quality Improvement Plan was informed by feedback received through a survey conducted among nurses to assess adherence to the service standards outlined in the SANC Service Standards Charter. Insights gathered from the survey were instrumental in refining and finalising the plan. The Stakeholder Relations and Collaboration Plan was implemented successfully during the year under review. The Customer Service Quality Improvement Plan was made ready for implementation in the 2025/26 financial year.

Concerted efforts were made in the year under review to enhance face-to-face stakeholder engagement. This was evidenced by the successful execution of roadshows, as well as several engagements led by the Office of the Registrar and CEO and other departments with both African and International counterparts. Three notable highlights were the Council's participation in the:

- World Health Organisation (WHO) Global Partners Meeting on Nursing and Midwifery in Geneva, Switzerland that was held on 23-24 May 2024 to take stock of progress on the implementation of the Global Strategic Directions for Nursing and Midwifery 2021-2025 and strengthen the engagement in and data reporting capacity for the State of the World's Nursing 2025 and future State of the World's Midwifery reports,
- 13th International Council of Nurses (ICN) Nurse Practitioner/Advanced Practice Nurse Network Conference that was held in Aberdeen, Scotland to engage on investments in Advanced Practice Nursing towards achieving United Nations Sustainable Development Goals, and Universal Health Coverage, and
- 16th East, Central and Southern College of Nursing and Midwifery (ECSACONM) Scientific Conference, held at the Avani Maseru Hotel in Lesotho from 11-13 September 2024. For the first time the SANC delegation submitted and presented two papers, showcasing the Council's thought leadership and its contribution to advancing nursing research and regulatory practice in the region.

Highlights of the year aligned to Outcome 2: Regulated ethical and professional nursing practice towards public protection

During the period under review, the Professional Conduct Committee (PCC) approved a structured monitoring system designed to track compliance with sanction implementation

requirements. This system will serve as a critical mechanism to ensure accountability and consistency in the enforcement of disciplinary outcomes. In parallel, the Professional Practice Department led the development of a Private Practice Implementation Plan, aimed at strengthening regulatory oversight and guiding the ethical and professional conduct of nurses operating in private practice. These initiatives collectively contribute to enhancing professional standards and reinforcing the Council's mandate to protect the public and uphold the integrity of the nursing profession. The Council embarked on the process of exploring collaborations with health establishments and higher education institutions with Medical Schools and Faculties of Health Sciences with regards to the services of Mental Health Practitioners to strengthen the performance of the Impairment Committee of Council.

Implementation of Continuing Professional Development (CPD)

In the 2024/2025 financial year, the 17th Council advanced a major regulatory milestone through the adoption of a phased-in implementation approach for Continuing Professional Development (CPD). This strategic decision reflects the Council's commitment to fostering a culture of lifelong learning and maintaining high standards of professional competence within the nursing profession. The initial rollout phase was intentionally focused on a representative sample of healthcare institutions, including selected provincial hospitals and leading private hospital groups. This targeted approach was designed to test the effectiveness of CPD processes in diverse clinical settings, gather practical insights, and ensure the development of a responsive and scalable implementation model. The CPD framework is expected to play a critical role in improving the quality of care, aligning professional practice with evolving healthcare demands, and reinforcing the Council's role in safeguarding the public through sustained professional excellence.

Highlights of the year aligned to Outcome 3: Fit-for-practice registered nurses

Work-Integrated Learning Clinical Facilities

With the adoption of competency-based nursing programmes the SANC must approve Work Integrated Learning (WIL) clinical facilities that will provide practical experience that directly aligns with the defined competencies. These facilities must offer a structured environment where learners can apply their knowledge and skills under supervision, fostering the development of clinical competence. During the period under review, the SANC approved 317 clinical facilities, a 43% increase from 221 clinical facilities that were approved in 2023/24 FY. These facilities are located across all nine provinces, and they serve as critical platforms for the clinical placement of both undergraduate nursing students and those pursuing postgraduate diplomas. This national footprint supports the Council's broader objective of strengthening the pipeline of competent, practice-ready nursing professionals aligned with the evolving needs of South Africa's healthcare system.

Professional Registration Assessment System (Licensure Examination)

In line with its commitment to strengthening public protection and ensuring professional readiness, the SANC initiated a significant step towards enhancing regulatory effectiveness through the development and implementation of the Professional Registration Assessment System (PRAS).

During the 2024/25 financial year, the SANC focused on mitigating legal risks associated with the professional entrance examination by transitioning it into a pilot project under the Professional Registration Assessment System (PRAS). This strategic shift aims to ensure that the licensure process is both comprehensive and aligned with regulatory best practices.

This system aims to evaluate the competence of newly qualified nurses to ensure that they can provide safe, effective nursing care upon entry into practice. While the process is ongoing, the Council plans to undertake critical steps, including conducting an in-depth practice/task analysis to identify key areas of competency for assessment.

Although the full implementation and finalisation of the PRAS is still in progress, the initiative represents a major shift towards evidence-based licensure, marking a continued effort to improve regulatory standards, safeguard public health, and uphold the integrity of the nursing profession.

Highlights of the year aligned to Outcome 4: Well-governed, sustainable, and capable SANC

External audit outcome for the SANC

Throughout the 2024/25 financial year, the Council remained committed to sound governance and financial integrity by continuously strengthening internal controls, enhancing operational processes, and ensuring strict compliance with applicable laws and regulatory frameworks. These sustained efforts have ensured the maintenance of the Council's record of a clean audit outcome, free from material findings for the past three consecutive financial years and reinforcing stakeholder confidence in the organisation's accountability and transparency.

Capacitating the SANC (digitisation)

The Information and Communication Technology (ICT) Steering Committee/Project Management Committee was established to prioritise and oversee implementation of the core business digitisation plan, scheduled to be implemented from April 2025. Digitising the SANC systems is intended to lead to continuous improvement of business processes and service delivery. In parallel, significant progress was made in advancing digital transformation through the finalisation of procurement and contracting processes for the planned Membership Management Service (MMS). This initiative is central to the digitisation of core services such as Annual Practising Certificate (APC) payments, restoration processes, and the updating of personal details, and will contribute to a more efficient and user-friendly client service platform.

As part of the commitment to modernisation and operational efficiency, the SANC successfully implemented key modules of the Sage ERP system alongside custom-built in-house applications. These advancements are aimed at streamlining business functions, including procurement, payroll, invoicing, employee self-service, and records management. Strategic investments were made in enhancing digital resilience through the deployment of robust cloud backup solutions, disaster recovery infrastructure, and upgraded wi-fi capabilities. Together, these initiatives not only strengthen the Council's business continuity posture but also position the SANC to deliver more agile, transparent, and technology-enabled services to its stakeholders.

Looking ahead

As we move into the new financial year, our focus remains steadfast on achieving the four strategic outcomes that are central to our mandate. Together with the Council appointed by the Minister of Health, we are looking forward to the evaluation of the performance of Council and its committees using the evaluation tools that are being developed by the National Department of Health. With a continued commitment to regulating the nursing profession in South Africa, our efforts will remain dedicated to ensuring that the highest standards of care, professionalism, and integrity are upheld, ultimately benefiting both nurses and the communities they serve.

Acknowledgements

May I take this opportunity to acknowledge and thank the Vice-Chairperson of Council, all members of the 17th Council, external Committee members, the Executive and Senior Management and all SANC employees. Your unwavering commitment and hard work have been instrumental towards our success in implementing our Strategic Plan through the 2024/25 FY Annual Performance Plan. Special appreciation is extended to relevant structures in the Department of Health and the various stakeholders for their continued support of the SANC initiatives.



Dr MC Molepo
SANC Chairperson

Message by the Registrar and Chief Executive Officer

Prof Ntombifikile G. Mtshali



Introduction

The South African Nursing Council (SANC) continues to exist as a juristic person and is subject to the Nursing Act, 2005 (Act No. 33 of 2005). The Council operates in accordance with its functions as regulated in the Nursing Act, 2005 and its composition is as contemplated in the Act. The 17th Council in its first year of appointment by the Minister of Health developed its five-year Strategic Plan (2024-2029). This plan required the Council to review its mission, vision, and values to align with the adopted Servant Leadership Model, enabling the organisation to reposition and reengineer itself through servant leadership. The implementation of the SANC's 2024–2029 Strategic Plan started with the Annual Performance Plan (APP) for 2024/25 FY, marking the first step towards achieving the Council's long-term strategic outcomes. This APP served as the foundation for realising the strategic goals over the next five years.

Repositioning and Re-engineering the SANC for Improved Service Delivery

In the effort to reposition and reengineer the SANC, the Council approved a new organisational structure that is fit for purpose for improved service delivery. This organisational structure included additional positions in key areas such as in the Information and Communication Technology (ICT) Department and Professional Affairs Division. The Council approved two additional teams in the Inspectorate Section to strengthen compliance of health establishments to nursing practice standards. The SANC managed to keep the vacancy rate below the targeted $\leq 10\%$ vacancy rate to improve operational efficiency and productivity with the intention to improve job satisfaction, service delivery and customer experience. In addition, the SANC managed to fill key strategic positions at senior management level: the Chief Financial Officer: Mr T Mokoena, Company Secretary: Ms M Hlaba, Senior Manager: Ms J Mabala, and Senior Manager: Learner Affairs, Dr M Tshabalala. The SANC also filled vacant positions of three Committee Officers in the office of the Company Secretary to enhance support to Council in executing its mandate.

It is important to note that the SANC experienced a setback in leadership stability with three senior management positions vacated in the year under review: Corporate Services Executive, Senior Manager HR and Senior Manager Internal Audit and Risk Management. The filling of these positions has been prioritised. In the interim the SANC managed to appoint a

Manager: Internal Audit while recruiting the Senior Manager in this Department.

The SANC continues to create opportunities for staff to stay abreast of the latest developments and advances in their fields to improve service delivery. In the year under review the SANC awarded bursaries to 43 employees in areas aligned with their current positions, and which will ultimately benefit the organisation.

Improving the performance of the organisation and fostering the culture of continuous improvement required the SANC to implement the Performance Management and Development System (PMDS) policy in full. Based on the lessons from the 2023/2024 FY, the staff performance instruments were revisited to align Annual Operational Plan goals to Council Strategic outcomes. In addition, midterm assessment of performance provided opportunities for feedback to identify areas of improvement to ultimately contribute to better service outcomes. The approach to implementing the PMDS policy has yielded positive results in that the 2024/2025 report on the organisational performance shows significant improvement in the overall percentage achieved compared to the previous financial years. The set organisational performance target of 70% was exceeded with 7%. Detailed information is provided later in this report under the organisational performance section.

Digitising nurses' records through the SANC multi-year project is one of the initiatives to improve service delivery. The multi-year project is ongoing and an additional 1.8 million records were digitised this year. This initiative aims to ensure better access to nurses' records, improved turnaround time, enhanced service delivery to the profession, and improved compliance with regulatory requirements.

Regulating Nursing Education and Training

The production of adequate numbers of nurses and competent graduates who meet the current and future needs of the health system continues to be the SANC's priority. This relies on the accreditation of institutions and programs, as well as student enrolments and graduation rates. The focus of the Council in this year under review was to improve the turnaround time on the accreditation of institutions and programmes, and the registration of students and nurses with the SANC. The SANC recorded an increase in the number of accredited Nursing Education Institutions (NEIs) from 119 in the previous

year to 124 accredited NEIs in the 2024/2025 FY. This total includes 67 public NEIs, 37 private NEIs, and 20 university-based nursing education departments. It is important to note that all Public Nursing Colleges are now accredited to offer Higher Education Qualifications Sub-Framework (HEQSF)-compliant qualifications that were phased-in in 2020. In the drive to improve on programme evaluation and accreditation turnaround time, the SANC appointed three external curriculum evaluators and filled vacant professional advisor positions in Provider Affairs. Consequently twenty-eight (28) programs were submitted to the Education Committee for recommendation to Council for approval, and 25 of these were approved within the set turnaround time of 11 months.

Notable improvements were observed in the overall registration of both students and nurse practitioners, with the average turnaround time reduced to 60 days. This progress underscores the Council's ongoing commitment to enhancing operational efficiency, promoting accessibility, and strengthening regulatory responsiveness in support of the nursing profession. Following the drop in the production of nurses while phasing in new qualifications, the SANC student register in the past FY shows a year-on-year improvement in student registrations. During the year under review, a total of 6 737 students were registered as learners, with 5 642 registered as undergraduate students and 1 095 registered for postgraduate studies. An increase of 29% was noted from the total of 5 214 students on the register in the previous year. In terms of nurses registered on completion of training, a total of 11 024 registered as nurses with the Council upon completing their undergraduate training, marking a remarkable increase of 34% from 8 251 in the 2023/24 fiscal year. Additionally, 1 285 nurses registered as specialist nurses with the Council, representing a 2% increase from the 1 210 registered last year. There is a need for a collaborative approach in addressing the production of specialist nurses in the country.

Regulating Nursing Practice

A set of regulations were submitted to the National Department of Health for public comments and for promulgation. Among these regulations were Regulations relating to conditions under which a registered nurse may practice as a private nurse. In the year under review, public comments on these regulations were received from the National Department of Health and were considered by the Council. The regulations were then submitted to the National Department of Health for promulgation. The Nursing Practice Standards for use in all health establishments in South Africa were gazetted by the National Department of Health and the SANC also received public comments which are under consideration by the Council. To ensure compliance with the Act the SANC conducted inspections in 44 health establishments which are then followed by health establishments developing their quality improvement plans which are used to monitor progress in addressing issues raised by the Inspectorate team.

Stakeholder Engagement and Collaboration

The SANC implemented its 2024/25 Stakeholder Relations and Collaboration Plan, focusing on fostering continuous, dynamic, and constructive engagement with relevant stakeholders both nationally and internationally. In the year under review,

the SANC prioritised regional collaboration, especially with Nursing and Midwifery Regulators within the Southern African Development Community (SADC). An important milestone was reached with the signing of the Interim Collaboration Protocol on 08 November 2024 by members of the SADC Nursing and Midwifery Regulator Forum. This initiative demonstrates a collective commitment to advancing regional integration, harmonising regulatory frameworks, and enhancing professional standards across member states. The goal is to create a premier platform where member regulators can engage in high-level discussions on the latest innovations, emerging trends, critical issues, and concerns in the fields of governance, nursing, and midwifery regulation. This platform will also facilitate the sharing of practical experiences, challenges faced, and effective solutions implemented by the regulators.

The SANC actively participated in various regional initiatives designed to strengthen the nursing and midwifery workforce. The purpose was to contribute to regional policy document developments, enhance the visibility of the SANC and share best practices. On invitation, the SANC participated in four of the WHO Africa Regional Office initiatives and in the United Nations Population Fund (UNFPA) East and Southern Africa Region workshop on the State of Midwifery in ESA region report. The SANC also participated in a range of meetings by the East, Central, and Southern Africa College of Nursing and Midwifery (ECSACONM) aimed at promoting and strengthening professional excellence in nursing and midwifery and the harmonisation of nursing and midwifery standards. Further, the SANC conducted benchmarking visits to the Nursing Councils in Kenya and Rwanda to learn about their implementation of the Continuing Professional Development (CPD) system, which is linked to the renewal of the Annual Practising Certificates (APCs).

Nationally, the SANC successfully hosted the Registrar's Roadshows in Kimberley and Bloemfontein. These roadshows were designed to encourage ongoing dialogue and engagement with stakeholders, concentrating on key areas such as nursing standards, nursing education and training, as well as professional conduct and practice. A total of 426 delegates attended the roadshows, which provided an interactive platform for exchanging valuable insights and information. Additionally, service desks were established during the roadshows to facilitate convenient transactions, including the payment of restoration fees and the purchase of distinguishing devices. This initiative further enhanced accessibility to essential services for the nursing community. The roadshows reflect the SANC's commitment to fostering a collaborative environment that supports the continuous development of nursing standards and professional practices.

Infrastructural Changes

The SANC owns two adjacent properties which includes a vacant stand that was acquired in 2013 and is used as visitors parking. In the quest to improve security and provide safe parking space for staff and SANC visitors, the SANC in the year under review undertook to consolidate the two properties. Through the services of a Land Surveyor and Town Planner, the two SANC stands were consolidated into one property on the 19th of December 2024. The certificate of consolidated

title property was thereafter received from the Office of the Registrar of Deed.

Further infrastructural changes include a total of nine (09) office spaces that were created to accommodate additional staff in the Accreditation Section, Company Secretary's office and Records Section.

Research Governance and Accessibility

To strengthen research governance and accessibility, the Council approved new guidelines for submitting research applications to conduct studies at the SANC. These guidelines provide a structured framework to help researchers prepare and submit high-quality applications. Their purpose is to ensure alignment with the SANC's mandate, protect organisational integrity, and facilitate timely evaluations and approvals. Ultimately, this initiative enhances research accessibility while safeguarding ethical standards and operational priorities. It lays the groundwork for research that significantly contributes to the advancement of nursing education, regulation, and practice in South Africa. These guidelines are designed to support researchers in creating comprehensive applications, with the aim of streamlining the approval process for their research projects.

The approval of the Service Standards Charter by the Council has significantly improved service delivery to clients in terms of waiting and service times. This charter involves all departments within the SANC. This financial year, the SANC attended to 34 312 walk-in clients, achieving an average waiting time of 8 minutes and 48 seconds, and an average service time of 4 minutes and 11 seconds. Management focused on mobilising resources to enhance the turnaround time for delivering services to our clients.

The structured approach to stakeholder engagement and customer service improvement has not only driven service excellence, but has also strengthened partnerships, ensuring that stakeholder needs and expectations are consistently met through ongoing collaboration and improvement.

The SANC continues to inform, engage, and update nurses on regulatory matters and strategic content through various platforms. The SANC prioritised expanding its media presence and digital reach using a structured approach. In total, the SANC engaged with over 7 358 583 stakeholders via different platforms, including the SANC website, Facebook, LiveChat, the Call Centre, customer service mailbox, service-oriented email addresses, the e-Register, and walk-in services. The SANC has 93 100 Facebook followers and 708 YouTube subscribers. During the year under review, the SANC achieved a Facebook reach of 295 418.

Fraud Management

The SANC launched a new fraud hotline number, **0800 377 377**, effective from 01 July 2024. This initiative reinforces the organisation's commitment to transparency, accountability, and ethical conduct. In addition to the hotline, the SANC expanded its fraud reporting options to include

six additional reporting platforms. This provides various accessible channels for reporting unethical or illegal activities that could compromise the organisation's operations, harm its staff, or negatively impact key stakeholders. The new reporting platforms include email, a website, SMS, a mobile application, fax, and traditional mail, ensuring that stakeholders have diverse and secure options to voice any concerns. This initiative is part of the SANC's broader strategy to promote a culture of integrity and ensure that all activities align with the organisation's core values and legal obligations.

Conclusion

I would like to express my sincere gratitude for the invaluable strategic oversight and guidance provided by the 17th Council Members, under the leadership of the Chairperson of Council, Dr. MC Molepo. Their ongoing support has been crucial in steering the organisation towards achieving its strategic outcomes. Their wisdom, constructive feedback, and engagement with management have significantly contributed to the SANC exceeding its organisational performance targets set for the 2024/25 fiscal year.

I also extend my heartfelt appreciation to the SANC management team and staff for their commitment and dedication in translating the Council's strategic vision into tangible results. Together, we have played a vital role in successfully operationalising the SANC's strategic priorities and fulfilling its mandate.

A special thank you goes to the profession at large, as well as our strategic partners and stakeholders, for their contributions in shaping the ongoing transformation at the SANC. Your collaboration has been instrumental in achieving some of our strategic outcomes for the betterment of the profession.



Prof NG Mtshali
Registrar and Chief Executive Officer (CEO)

SANC HISTORY

1944-2024

The nursing profession in South Africa obtained self-regulation on 08 November 1944. The Council held its first Council meeting, and legally enforceable registration was accomplished.

This was given impetus by pressure from the nursing profession and the memorandum presented to the Commission of Health Services by Sharley Cribb, the Organizing Secretary of the South African Trained Nurses Association.



A process of transformation gained momentum with the approach of democracy. The Nurses' convention in early 1994 was followed by a Ministerial delegation from the four "homeland" Councils, led by the ANC's Ms Cherly Carolus, tasked with drafting a Nursing Act that would reflect democratic principles.

This culminated in the amalgamation of the previously existing Nursing Councils - then named Bophuthatswana, Ciskei, Transkei and South African - to form the South African Interim Nursing Council in 1995.

The existence of the SA Nursing Council as a statutory professional health council brought to an end voluntary registration, which for a long time had compromised public protection. The first Chairman and President of the South African Nursing Council was Col. CA Nothard. The first 24-member Council had a two-year tenure, which ended with elections in 1946. The journey of amending the Nursing Act mirrors the "good, the bad and the ugly":

- Separate registers of Nurses and Midwives by colour - Nursing Act, 1957;
- Creation of "homeland" Nursing Councils;
- Limitation of the practice of nursing by registered persons only, created a "closed" profession, enhancing public protection - Nursing Act, 1972;
- Beginning of transformation by eliminating the stipulation of "whites-only" nurses as Council members. Nursing Act, 1978 and repeal of reference to race - Nursing Act, 1992.

Regulations regarding the Scope of Practice for Nurses and Midwives (No. 2127 of 2 June 2022) was promulgated by the Minister in line with Section 58 of the Nursing Act, 2005 (Act No. 33 of 2005)

In line with the mandate of Section 4(1)(d) of the Nursing Act 2005, a Monitoring and Evaluation Section was established in 2021 to carry out quality control inspections and ensure that accredited NEIs maintained the Education and Training standards. The standards were reviewed and approved by Council in 2022

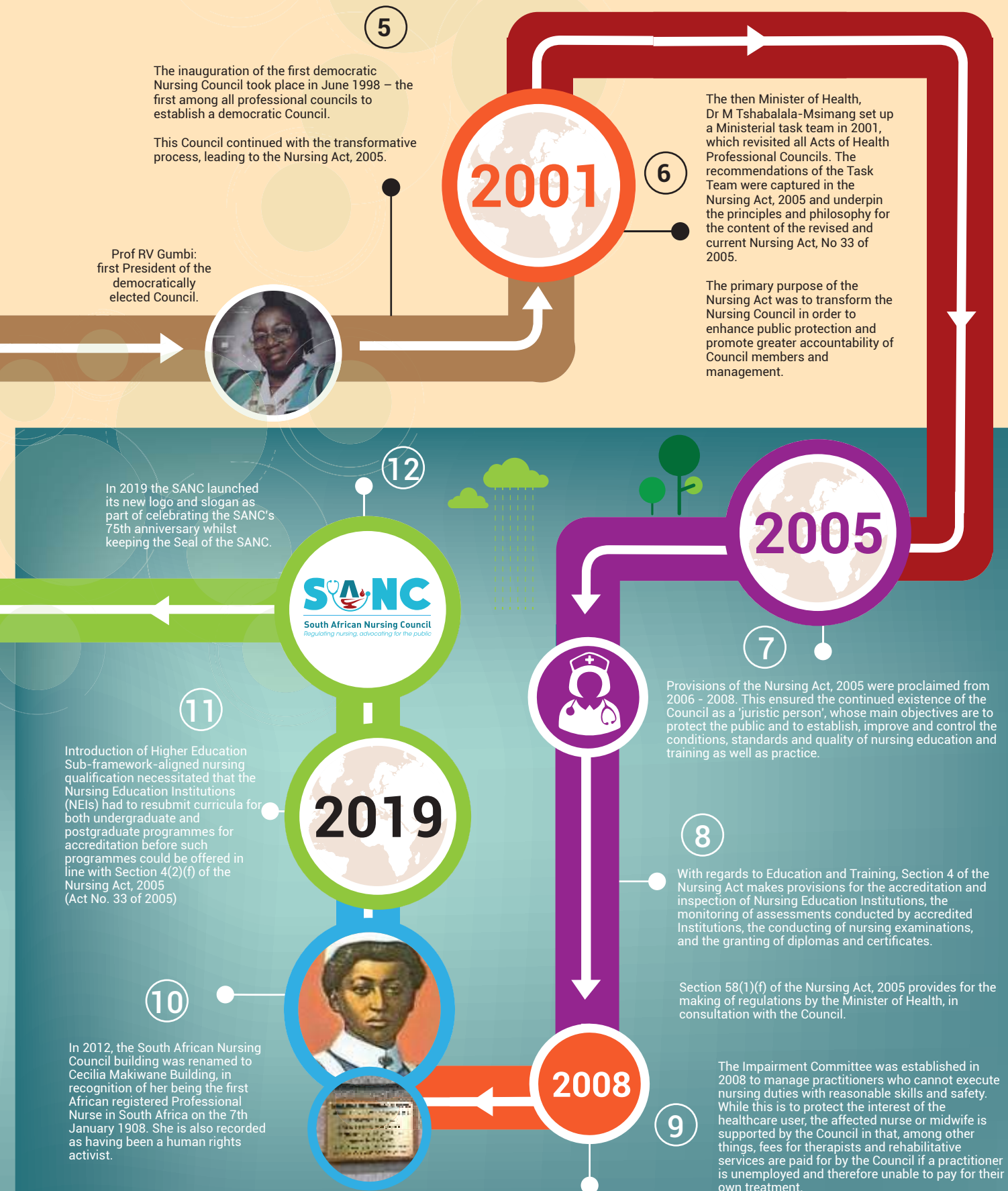
Regulations relating to the approval and the minimum requirements for the education and training of a student leading to registration as a Nurse Specialist or a Midwife Specialist (No. 635 of 5 June 2020)

Regulations regarding the registration for learner/student nurses and learner/student midwives (No. 519 of 11 May 2020)

CPD system prioritised in 2019, Framework approved by Council in 2021. Piloting in all provinces commenced in 2022. CPD rules approved by Council in 2022 and published in the Gazette.

The SANC unveiled a Wall of Remembrance on 29 March 2023 in memory of those nurses who succumbed to the COVID-19 pandemic - a constant reminder about the daily sacrifices that nurses make, often at the cost of themselves and their families and often under difficult conditions.

The SANC introduced the Nursing Excellence Awards (NEA) in May 2023. The aim of the SANC NEA is to confer annual Excellence Awards for outstanding service by nurses, who are in good standing with the SA Nursing Council, and Nursing Institutions, within their chosen field. The Awards aim to motivate nurses to improve and uphold the standard of nursing in South Africa.



Report of the Chief Financial Officer

Mr Tumelo Mokoena CA (SA)



3.1 OVERVIEW

The South African Nursing Council (Council) is a body responsible for setting, maintaining and regulating standards of nursing education and practice in the Republic of South Africa. The Council is funded mainly through revenue generated from the rendering of various services to the nurse practitioners as well as the Nursing Education Institutions. This is complemented by the sale of distinguishing devices to the nurse practitioners as well as through investment income that is generated from investing excess funds with the major South African banks. The Council executed its role to manage its finances effectively and efficiently and managed to report a net surplus of R57.6 million (2024: R63.1 million) during the year. This decrease in net surplus for the year is 8.7% when compared to the prior year.

3.2 REVENUE

Total revenue earned amounted to R172.9 million (2024: R165.2 million), representing an increase of 4.7% year-on-year. The annual fees from nurse practitioners of R139.8 million (2024: R132.8 million) remain the core funding source for the Council. During the year under review, annual fees amounted to 80.9% (2024: 80.4%) of the total revenue generated by the Council. The restoration fees decreased to R10.0 million (2024: R10.2 million) and this represents a decrease of 2.3% year-on-year. The decrease in restoration fees can be attributed to the implementation of the PERSAL deductions as well as the direct deposits made by other major Nursing Education Institutions. This change of the payment method allows the employers to identify nurse practitioners whose affairs are not in order with the Council and the employers are able to implement the necessary corrective action as the nurse practitioners are not allowed to practise the profession if their affairs are not in order with the Council. Furthermore, the direct payments by these employer groups also minimise the risk of late payments. It is illegal in South Africa for any nurse practitioner to practise the nursing profession if the nurse practitioner is not registered with the Council.

Registration and verification fees increased to R11.1 million (2024: R9.7 million) and R2.7 million (2024: R3.2 million)

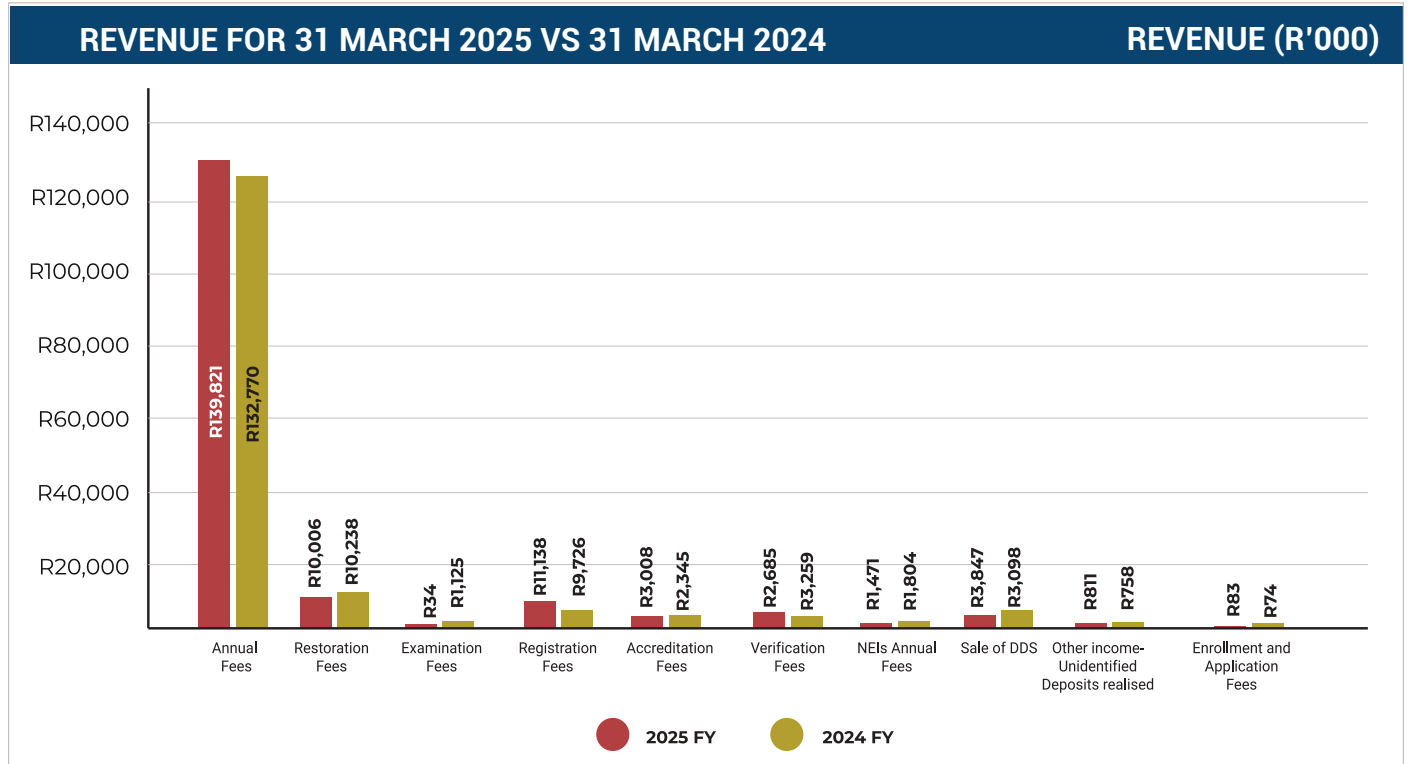
respectively. The increase was mainly attributable to the increase in number of students who are registering for the new qualification programmes as well as the increase in the number of verifications that were performed during the year under review. Examination fees decreased to R0.03 million (2024: R1.1 million), this represents a significant decrease of 97.0% year-on-year, and this is due to the discontinuance of professional entrance examinations which were put in abeyance, only few foreign candidates wrote the admission examinations of which revenue was recognised in the current financial year. Accreditation fees increased to R3.0 million (2024: R2.3 million) during the year under review due to the increased number of accreditation visits.

The Nursing Education Institution Annual Fee decreased to R1.5 million (2024: R1.8 million) during the year under review and this is due to Nursing Education Institutions which had conditional accreditation in the previous year, but were unable to meet the requirements for accreditation in the current year. This fee is payable by all the Nursing Education Institutions which intend to remain accredited with the Council. The Council recognised an amount of R0.8 million (2024: R0.8 million) for Other Income – Unidentified Deposits. This amount relates to the amounts that remain unclaimed over a period of three years. These amounts arise from the inadequately referenced deposits into the accounts of the Council. The Council in collaboration with major banks put measures in place to reduce the number of unidentified deposits.

Revenue from the sale of distinguishing devices showed a slight increase to R3.8 million (2024: R3.1 million) and this is due to the increase in the number of registration of nurses.

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

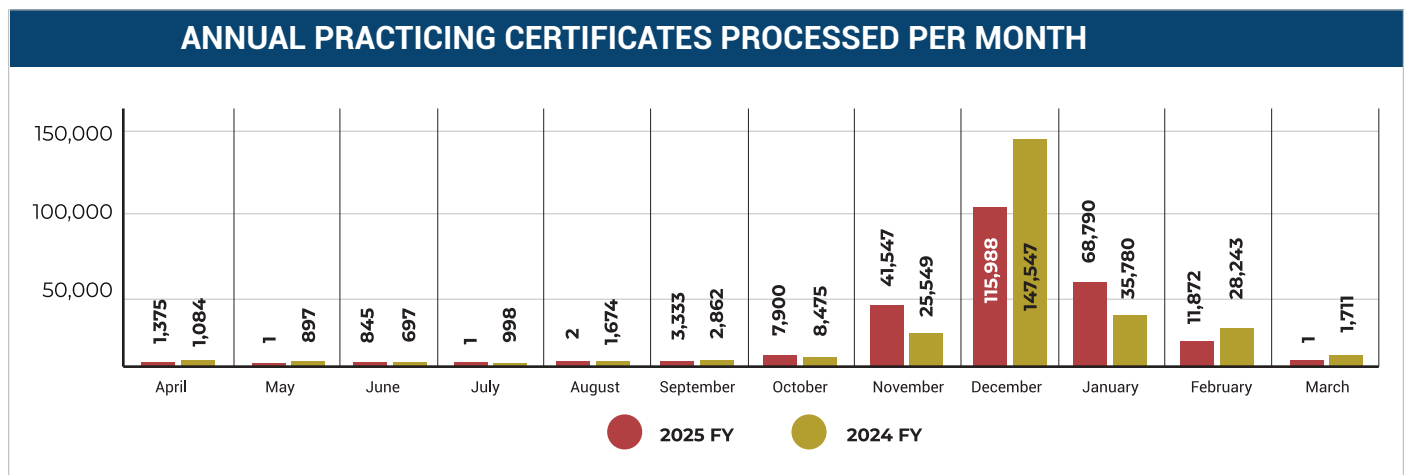
Figure 1: Revenue



3.3 ANNUAL FEES

The annual fee payment period opens on the 01st of July and runs until the 31st of December each year. The nurse practitioners have an option to pay the annual fees directly through a bank account deposit or to pay at the Council premises. The Council prefers the direct bank account deposits; however, some nurse practitioners still prefer making payments at the Council premises. The main reasons behind making direct payments are due to the challenges with the South African Post Office deliveries and fear of removal from the Nurse Register due to the payments reaching the Council after the cut-off date. There are major challenges with the annual practising certificates which are sent through the South African Post Office, but this is exacerbated by the incorrect and outdated nurse practitioners' information in the Nurse Register. This results in Council receiving a large number of annual practising certificates which are returned undelivered. The SANC has introduced independent courier services, as an alternative, to deliver annual practising certificates, to mitigate this risk and improve efficiency. The chart below depicts the number of APCs processed from April to March of each comparative year.

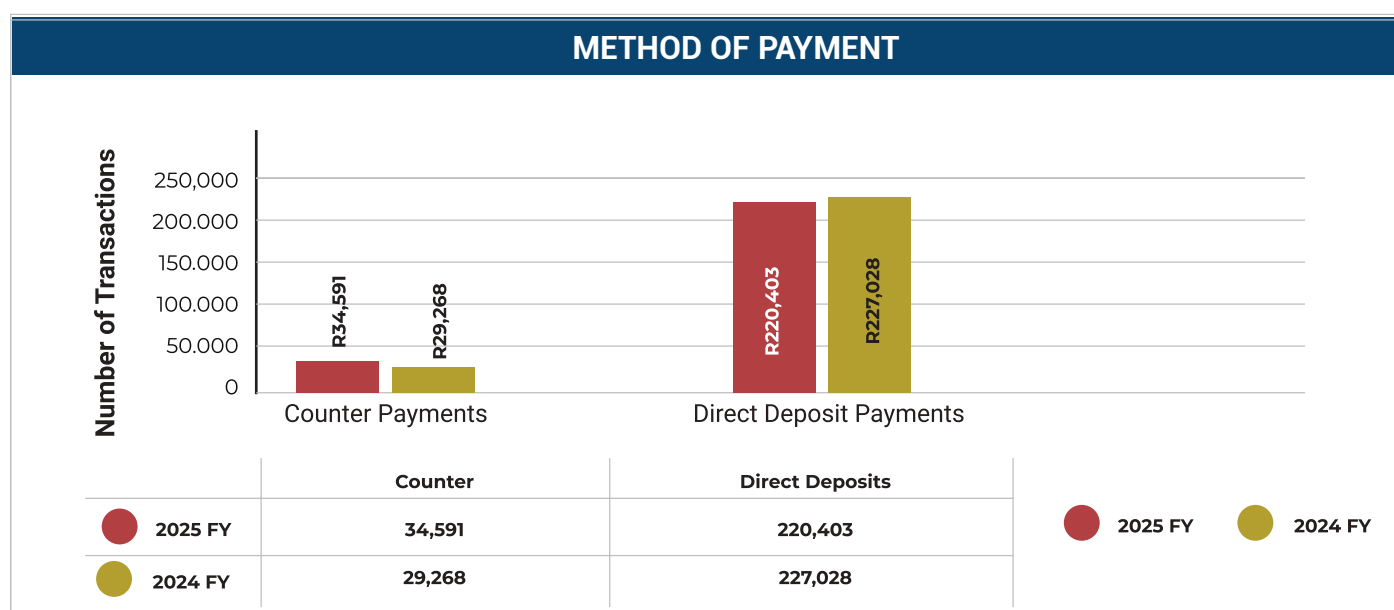
Figure 2: Revenue



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

A total of 258 546 (2024: 255 517) APCs were processed in the 2025 financial year. The direct deposit payment method is still the most preferred method of payment. This payment method is utilised by all the departments that deducts annual fees through PERSAL, private organisations as well as individual nurse practitioners. The use of the direct deposit payment method for APCs processed decreased to 220 403 (86%) (2024: 227 028) (89%) whilst the counter payments increased to 34 591 (14%) (2024: 29 268) (11%). The increase in over-the-counter payments is not significant, the nurse practitioners are still embracing the direct deposit payment method, which is a payment method that the Council prefers. The figure below summarises the methods of payments used by the nurse practitioners during the 2025 and 2024 financial years.

Figure 3: Method of payment



3.4 EXPENDITURE

Expenditure increased by 9.5% year-on-year and this can be attributed mainly to the filling of the vacant positions within the Council, increases in computer licence fees, internal audit fees, loss on derecognition of a prepaid asset, asset derecognised, consulting fees and computer services costs. The employee costs remain the highest cost element within the South African Nursing Council, and this is in line with the activities of the Council. There are still several vacant positions that are expected to be filled during the 2025/26 financial year, and the Council has put measures in place to ensure that all critical vacancies are filled urgently.

3.5 INVESTMENT INCOME

The finance income increased to R67.9 million (2024: R66.4 million) representing 2.3% increase in 2025 because of a prevailing high-interest rate environment. The Council is considering optimal investment strategies in order to grow investments.

3.6 OTHER INCOME

Other income decreased to R1.2 million (2024: R1.4 million) which represents a decrease of 11.8%. This decrease is mainly due to an impairment reversal during the 2024 financial year which increased the income. Other income also includes admission of

guilt fines, refunds for administration fees and donor fund income, amongst others.

3.7 WORKING CAPITAL

The Council managed to maintain a healthy cash balance and was able to settle its liabilities as they fall due, and the Council has put measures in place to ensure that valid invoices are settled within 30 days in line with the provisions of the Nursing Act, 2005. The cash and cash equivalent balances increased by R60.8 million during the year under review and this is mainly due to increased interest income earned by the Council as well as lower spending amongst some operating expenditure and capital expenditure items.

3.8 CAPITAL INVESTMENTS

The South African Nursing Council invested in new laptops, improvements to the building and office furniture to the value of R3.8 million. Furthermore, commitments to the amount of R14.1 million (R9.1million) have been contracted with service providers.

3.9 SUPPLY CHAIN MANAGEMENT

The Council continues to rely on manual systems, resulting in inefficiencies and significant delays in awarding bids within 120 days. To address this, the Council appointed a service provider during the year 2023/24, to automate Supply Chain Management (SCM) processes. This initiative is expected to significantly improve both the quality and efficiency of procurement activities. The development and implementation of the automation system occurred during the 2024/25 financial year. However, the e-Tender module is scheduled for implementation in the 2025/26 financial year. Once operational, this module is expected to significantly enhance the speed, transparency, and overall efficiency of the bidding and tendering process. These improvements are especially vital for meeting strategic outcomes, including the timely appointment of successful bidders within the targeted 120 days' timeframe.


Mr T Mokoena
Chief Financial Officer (CFO)

South African Nursing Council

Councillors' Statement of Responsibility



The Council is responsible for the preparation and fair presentation of the annual financial statements comprising of the statement of financial position as at 31 March 2025, the statement of comprehensive income, the statement of changes in equity, statement of cash flows for the year ended, the notes to the financial statements which include a summary of significant accounting policies and other explanatory notes, and the report of the SANC Council, in accordance with the International Financial Reporting Standards.

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

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

The external Auditors are engaged to express an independent opinion on the annual financial statements. The external Auditors' report is presented on pages 116 - 118. The annual financial statements set out on pages 108 - 152, which have been prepared on a going concern basis, were approved by the Council on 28 July 2025.

In our opinion, this Annual Report fairly reflects the organisational performance information, operations, corporate governance, and financial affairs of the SANC for the financial year ended 31 March 2025.

Dr MC Molepo (Chairperson)





Part B

STRATEGIC OVERVIEW



South African Nursing Council
Regulating nursing, advocating for the public



Mandate, Vision, Mission, and Values

SANC MANDATE

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



VISION

Leadership in regulating nursing and advocating for the public.



MISSION

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

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

2. LEGISLATIVE MANDATES

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

Constitutional Mandate	The Constitution of the Republic of South Africa, 1996 (the Constitution), specifically: • Schedule 4 of the Constitution reflects health services as a concurrent national and provincial legislative competence. • Section 9 of the Constitution states that everyone has the right to equality, including access to health care services. • Section 24 of the Constitution stipulates that: "all South Africans have a right to an environment that is not harmful to their health or well-being, and to have the environment protected for the benefit of present and future generations." • Section 27 of the Constitution states that everyone has the right to have access to health care, food, water, and social security, and that no-one may be refused emergency medical treatment. • Section 28 of the Constitution provides that every child has the right to "basic nutrition, shelter, basic health care services, and social services." • Section 29 of the Constitution provides that everyone has the right to establish an independent educational institution that does not discriminate, is registered with the State, and maintains standards comparable to public educational institutions.
National Health Act, 2003 (Act No. 61 of 2003)	Provides for, amongst others, the establishment of the Forum for Statutory Health Professional Councils, which must, among others, protect the interests of the public and health care users, as well as ensure consistency in the actions and decisions of the statutory health professional councils.
National Health Amendment Act, 2013 (Act No. 12 of 2013)	The act provides for the establishment of the Office of Health Standards Compliance, which, among others, liaises and establishes cooperative relationships with regulatory authorities, such as the SANC, to ensure harmonisation of standards.
Nursing Act, 2005 (Act No. 33 of 2005)	Provides for the continued existence of the SANC and the regulation of the nursing profession by establishing and maintaining the standards of nursing education, training, and practice.
National Health Insurance Bill	• The objective of the National Health Insurance Bill is to provide universal access to quality health care for all South Africans, as enshrined in the Constitution. • In order to achieve Universal Health Coverage, there is a need to address structural inefficiencies within the health system; ensure accountability for the quality of the health services rendered; and ultimately to improve health outcomes particularly focusing on the poor, vulnerable, and disadvantaged groups. The National Health Insurance policy objective is to ensure that everyone has access to appropriate, efficient, affordable, and quality health services.
National Qualifications Framework Act, 2008 (Act No. 67 of 2008)	• Provides for the establishment of the South African Qualifications Authority (SAQA). The SANC has been accredited by SAQA as a Professional Body – the current accreditation is until 29 March 2026 (SAQA 061/21).

South African Nursing Council
Regulating nursing, advocating for the public

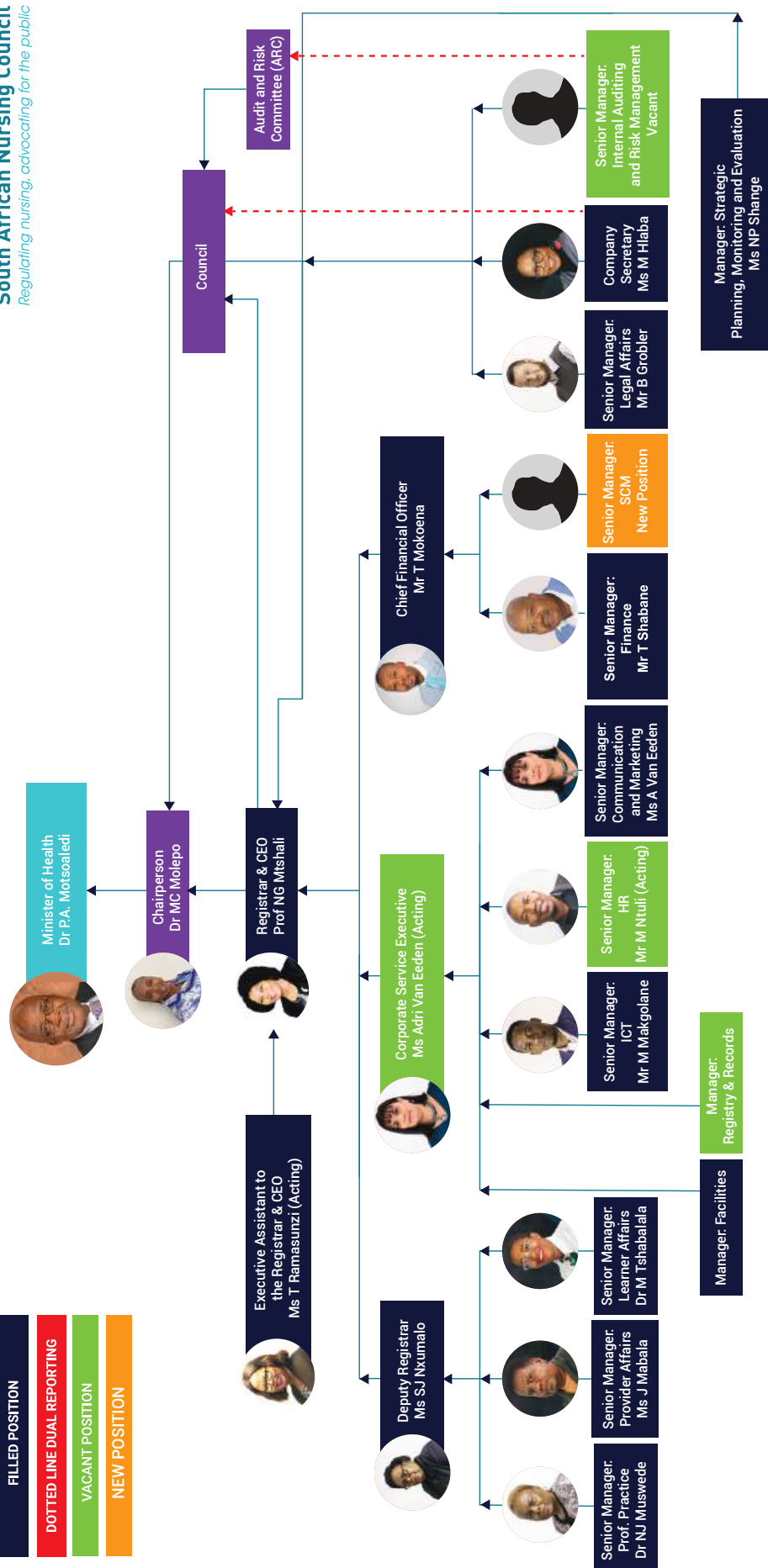


Figure 4: Macrostructure approved by Council - reflecting filled and vacant positions

4. KEY POLICY DEVELOPMENTS AND LEGISLATIVE CHANGES

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

NATIONAL LEGISLATIVE CHANGES

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

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

INTERNAL LEGISLATIVE CHANGES

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

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

- Regulations were published by the National Department of Health (NDoH) for public comment.
- The SANC attended to the public comments on the regulations received from the NDoH.
- Regulations submitted to the Honourable Minister for promulgation.

Section 57 Regulation regarding an appeal against a decision of the South African Nursing Council

- Regulations submitted to Legal Services at the National Department of Health for processing.

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

- Regulations submitted to Legal Services at the National Department of Health for processing

Regulations regarding distinguishing devices for all nurses and midwives

- Regulations were published for public comments by the National Department of Health, the comments were processed and approved by the SANC Council and awaiting promulgation by the Minister of Health.

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

- The draft amendments to the Nursing Act, 2005 (Act No. 33 of 2005) has been submitted to Legal Services at the National Department of Health for processing.

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

- Regulations submitted to Legal Services at the NDoH for public comments.

Nursing Practice Standards for use in all health establishments in South Africa

- Nursing Practice Standards were gazetted and received public comments for analysis.



Part C

ORGANISATIONAL PERFORMANCE

1. STRATEGIC ENVIRONMENT OVERVIEW

Informed by the mandate and strategic focus, the IMPACT statement of the SANC is:

Impact Statement

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

The following are the four Outcomes that direct the effort and focus of the SANC towards achieving its intended impact over the period that started in 2024/25 FY to 2028/29 FY:

- **Outcome 1:** SANC positioned as a credible responsive regulator
- **Outcome 2:** Regulated ethical and professional nursing practice towards public protection
- **Outcome 3:** Fit-for-practice registered nurses
- **Outcome 4:** Well-governed, sustainable, and capable SANC.

PERFORMANCE INFORMATION AGAINST THE ANNUAL PERFORMANCE PLAN FOR 2024/2025 FY

Introduction

The 2024/25 FY was the first year for the SANC to implement and contribute towards achieving the impact and outcomes as outlined in the 2024/25 - 2028/29 SANC Strategic Plan. The 2024/2025 FY was guided by the SANC Annual Performance Plan 2024/2025 FY which was aligned to the outcomes in the SANC five-year Strategic Plan 2024/2025 to 2028/2029.

This section provides feedback against the output indicators, and annual targets in the 2024/25 financial year APP, which are mechanisms to deliver the SANC outcomes. For the 2024/2025 FY SANC had 30 output indicators for which targets were set. Progress reports on the targets were provided quarterly. Organisational performance from the preceding year has been used to provide comparative performance trends. The achievements against planned quarterly and annual targets in the APP are reported and presented to Council to afford Council an opportunity to engage and advise on the progress against planned targets.

Performance Reporting

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

Table 1: Standards used to assess the annual performance report: 2024/2025 FY.

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

OVERALL ORGANISATIONAL PERFORMANCE: 2024/2025 FY

SANC annual performance for the APP 2024/2025 FY

The SANC achieved 77% of its annual performance targets in the financial year under review as shown in Table 2.

Table 2: Annual APP Performance 2024/2025 FY

Planned targets	Achieved targets	Partially achieved	Not achieved	Deferred
30	23	6	1	0
100%	77%	20%	3%	0

PERFORMANCE INFORMATION BY PROGRAMME (2024/2025 FY QUARTERLY REFLECTION)

This section presents organisational performance for the four quarters of the 2024/25 financial year through tables three and four. The tables present the number of planned targets per quarter of the 2024/2025 FY, the number of targets achieved, partially achieved, and not achieved as well as percentages relating to the achieved, partially achieved and not achieved quarterly targets.

Table 3: Quarter 1 and 2 Performance Information APP 2024/2025 FY

2024/2025 FY QUARTERLY ACHIEVEMENT														
		QUARTER 1							QUARTER 2					
Programmes		Achieved		Partially Achieved		Not Achieved			Achieved		Partially Achieved		Not Achieved	
	# of Indicators	#	%	#	%	#	%	# of Indicators	#	%	#	%	#	%
Programme 1	5	1	20%	2	40%	2	40%	5	2	40%	3	60%	0	0%
Programme 2	5	3	60%	2	40%	0	0%	7	7	100%	0	0%	0	0%
Programme 3	4	4	100%	0	0%	0	0%	4	4	100%	0	0%	0	0%
Programme 4	4	3	75%	1	25%	0	0%	5	4	80%	1	20%	0	0%
Totals	18	11	61%	5	28%	2	11%	21	17	81%	4	19%	0	0%

Table 4: Quarter 3 and 4 Performance Information 2024/2025 FY

2024/2025 FY QUARTERLY ACHIEVEMENT														
		QUARTER 3							QUARTER 4					
Programmes		Achieved		Partially Achieved		Not Achieved			Achieved		Partially Achieved		Not Achieved	
	# of Indicators	#	%	#	%	#	%	# of Indicators	#	%	#	%	#	%
Programme 1	5	2	40%	2	40%	1	20%	6	4	67%	2	33%	0	0%
Programme 2	8	8	100%	0	0%	0	0%	11	10	91%	0	0%	1	9%
Programme 3	3	2	67%	1	33%	0	0%	4	2	50%	2	50%	0	0%
Programme 4	4	3	75%	1	25%	0	0%	8	6	75%	2	25%	0	0%
Totals	20	15	75%	4	20%	1	5%	29	22	76%	6	21%	1	3%

The section below presents the comparison between the overall SANC performance for 2023/2024 and 2024/2025 financial years. It is important to note that the 2023/2024 FY targets were from the 16th Council's Strategic plan and the 2024/2025 targets were from the 17th Council's Strategic plan. Therefore, the comparison is on the overall annual performance per programme.

Table 5: Comparison of overall SANC Performance for 2023/2024 FY and 2024/2025 Financial Years.

ANNUAL PERFORMANCE ACHIEVEMENT 2023/2024 FY					ANNUAL PERFORMANCE ACHIEVEMENT 2024/2025 FY				
Programmes	# of Indicators	Achieved	Partially Achieved	Not Achieved	Programmes	# of Indicators	Achieved	Partially Achieved	Not Achieved
Programme	19	15	4	0	Programme	6	3	3	0
(1)		79%	21%	0%	(1)		50%	50%	0%
Programme	9	6	3	0	Programme	11	10	0	1
(2)		67%	33%	0%	(2)		91%	0%	9%
Programme	3	2	0	1	Programme	5	4	1	0
(3)		67%	0%	33%	(3)		80%	20%	0%
Programme	11	5	5	1	Programme	8	6	2	0
(4)		45%	45%	9%	(4)		75%	25%	0%
Totals	42	28	12	2	Totals	30	23	6	1
		67%	28%	5%			77%	20%	3%

Table six below provides a summary of overall performance per programme in the 2024/2025 FY, annual targets that were achieved, partially achieved and those that were not achieved. The total then reflects the organisational performance score for the 2024/2025 financial year.

Table 6: Overall Performance per Programme 2024/2025 FY

PROGRAMMES	Achieved Targets		Achieved Targets		Partially achieved		Not achieved	
	#	%	#	%	#	%	#	%
Programme 1: Governance Division	6	100%	3	50%	3	50%	0	0%
Programme 2: Professional Affairs Division	11	100%	10	91%	0	0%	1	9%
Programme 3: Finance Division	5	100%	4	80%	1	20%	0	0%
Programme 4: Corporate Services Division	8	100%	6	75%	2	25%	0	0%
TOTAL	30	100%	23	77%	6	20%	1	3%

SANC PROGRAMME PERFORMANCE INFORMATION FOR THE 2024/2025 FY**PROGRAMME 1: GOVERNANCE**

Purpose: Provide strategic leadership, management, and support services to the SANC to ensure sound governance and optimised performance through the following sub-programmes:

Description of sub-programmes

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

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

The SANC outcome that this Programme contributes towards is:

Outcome 4: Well-governed, sustainable, and capable SANC

Sub-programme Leadership Management, Strategic Planning Monitoring and Evaluation aimed to achieve 70% in the overall implementation of planned annual targets. By year-end, 77% of the planned annual targets were achieved.

During the reporting periods, 65% of internal audit findings were resolved against a planned annual target of 70%, reflecting meaningful progress towards closure of identified issues. To support full target achievement going forward, intensified follow-ups on outstanding findings and strengthened collaboration with business units will be prioritised to facilitate more timely resolutions. In terms of risk maturity, a level 3 out of 6 was attained in the Risk Management Maturity Assessment, compared to the planned target of level 4. Furthermore, 85% of key risk indicators were maintained within tolerable thresholds, exceeding the annual planned target of 80%.

The Legal Affairs Department, which contributes to regulated ethical and professional nursing practice towards public protection ensured the availability of an approved Monitoring System to track compliance with sanction implementation requirements. The monitoring system approved by the Professional Conduct Committee (PCC) during the financial year under review aims to provide a reliable mechanism to the PCC to monitor and track compliance with sanctions issued by the PCC and approved by the Council. During the reporting period, 24% of Preliminary Investigating Committee (PIC) referrals were concluded against the annual target of 100%. While this represents an area for improvement, it is important to note that the underperformance was primarily due to capacity constraints, as the Legal Affairs Department was operating without a full-time Professional Advisor for most part of the financial year. The Professional Advisor, who was appointed in the final quarter of the 2024/25 FY, is anticipated to enhance performance over the next reporting cycles.

The 2024/25 FY performance report is the first report of the 2024/25 to 2028/29 five-year SANC Strategic Plan, therefore this report will not include audited actual performance of the previous financial years.

PROGRAMME 1: GOVERNANCE						
Sub-Programme 1.1 Leadership Management Department						
Strategic Planning, Monitoring and Evaluation						
Outcome	Output Indicator	Actual Performance 2023/2024 FY	Planned Annual Target 2024/2025 FY	Actual Achievement 2024/2025 FY	Deviation from planned Target to Actual Achievement 2024/2025 FY	Reasons for Deviations
Outcome 4: Well-governed, sustainable, and capable SANC	Percentage achievement of organisational performance 67%	67%	70%	77%	7%	The overall achievement is linked to the Departments' performance in their respective planned targets, the increase in capacity to departments that were under capacitated, Council approval of critical policies, and budget availability.

Sub-Programme 1.3 Internal Audit and Risk Management

Outcome	Output Indicator	Actual Performance 2023/2024 FY	Planned Annual Target 2024/2025 FY	Actual Achievement 2024/2025 FY	Deviation from planned Target to Actual Achievement 2024/2025 FY	Reasons for Deviations
Outcome 4: Well-governed, sustainable, and capable SANC	Percentage of Internal Audit findings resolved	New indicator	70%	65%	5%	Six internal audit findings could not be resolved by the financial year-end, 10 were partially resolved and 1 was not assessed.
	Risk management maturity assessment level	New indicator	Level 4 of 6	Level 3 of 6	Level 1	Underperformance is attributed to unresponsive market to the efforts of sourcing the service provider to conduct risk management maturity assessment level.
	Percentage of key risk indicators within tolerable thresholds	New indicator	80%	85%	5%	A greater proportion of output indicators were within tolerable thresholds, resulting in overall improved performance.

Sub-Programme 1.4 Legal Affairs

Outcome 2: Regulated ethical and professional	Percentage of PIC referrals concluded	67%	100%	24%	76%	Capacity constraint following the resignation of the full time Professional Advisor within the Legal Affairs Department.
	Availability of an approved monitoring system to track compliance with sanction implementation requirements	New indicator	Monitoring system to track compliance with sanction implementation requirements approved	A monitoring system to track compliance with sanction implementation requirements was approved by PCC.	None	N/A

PROGRAMME 2: PROFESSIONAL AFFAIRS DIVISION

Purpose: Regulate nursing education and training;
Regulate nursing practice; and
Promote nursing research to facilitate the professionalisation of the nursing profession through continued professional development, and to conduct compliance inspections in NEIs and health institutions through the following sub-programmes:

Description of sub-programmes

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

- Provider Affairs (Accreditation, Monitoring and Evaluation);
- Learner Affairs (Registration, Assessment); and
- Professional Practice (Preliminary Investigations, Impairment, Continuing Professional Development, Private Practice, Inspectorate).

Programme 2 contributes to the following outcomes:

Outcome 2: Regulated ethical and professional nursing practice towards public protection

Outcome 3: Regulated fit-for-practice registered nurses.

Provider Affairs Department

During the financial year under review, the Provider Affairs Department had two output indicators in the APP.

- Turnaround time for the registration of students and nurses
- Percentage implementation of the Practice Analysis Project Plan.

In pursuit of improved accuracy, efficiency, and transparency in performance measurement, the Council approved a strategic refinement of the first indicator following a formal submission by the Provider Affairs Department. The original indicator combined the registration turnaround times for both students and nurses, which presented challenges in calculating and monitoring performance effectively.

To address this, the indicator was disaggregated into two distinct measures to enhance clarity, accountability, and operational focus:

- Percentage of complete learner applications registered within 60 days
- Percentage of complete nurse applications registered within 60 days

This strategic refinement allowed for more precise monitoring, improved operational efficiency, and a targeted approach to optimising registration processes. It also aligns with the Council's commitment to streamlining administrative functions and ensuring timely registration of healthcare professionals in support of national healthcare priorities.

Learner Affairs Department

Learner Affairs Department achieved 100% of complete learner applications registered within 60 days and achieved 100% of complete nurse applications registered within 60 days. The planned target of 25% for the output indicator "percentage implementation of Practice Analysis Project plan" was not achieved due to the process of appointing a service provider to execute the project not being concluded by the end of the financial year. Following a thorough review of the output indicator, the Council resolved that for the 2025/26 financial year, the focus should be strategically refined to "Develop the Nursing Practice Analysis Project Plan" - a decision which reflects the Council's commitment to a structured, phased approach in advancing nursing practice analysis.

Professional Practice Department

In alignment with the SANC's mandate to regulate the nursing profession and uphold professional standards, the Professional Practice Department achieved all the key deliverables during the 2024/2025 financial year. The Private Practice Implementation Plan was developed and approved. This reinforces the Council's commitment to structured oversight and support for private nursing practice. The Professional Practice Department also worked on ensuring the enforcement of accountability within the profession by successfully concluding 100% of complete allegations of unprofessional conduct.

To strengthen compliance and quality of care, 40 inspections were conducted in health establishments, along with 4 inspections of private nursing practices, further demonstrating the Council's proactive regulatory approach. Lastly, 54% was achieved against a target of 10% on the output indicator "Percentage of nurses who comply with CPD requirements". The commendable overachievement is attributed to a higher-than-expected level of compliance with CPD requirements among the sampled nurse practitioners who participated in the activities, despite the phased implementation approach.

PROGRAMME 2: PROFESSIONAL AFFAIRS DIVISION						
Sub-Programme 2.1 Provider Affairs Department						
Outcome	Output Indicator	Actual Performance 2023/2024 FY	Planned Annual Target 2024/2025 FY	Actual Achievement 2024/2025 FY	Deviation from planned Target to Actual Achievement 2024/2025 FY	Reasons for Deviations
Outcome 3: Regulated fit-for-practice registered nurses	Percentage of complete nursing curricula applications evaluated within 11 months.	New indicator	100%	100%	None	None
	Percentage of complete nursing curricula applications accredited by Council within 11 months.	New indicator	100%	100%	None	None
	Number of accredited NEIs monitored for E&T standards compliance	New indicator	17	16	1	The NEI rescheduled the planned monitoring visit by the SANC.



Sub-Programme 2.2 Professional Practice Department						
Outcome	Output Indicator	Actual Performance 2023/2024 FY	Planned Annual Target 2024/2025 FY	Actual Achievement 2024/2025 FY	Deviation from planned Target to Actual Achievement 2024/2025 FY	Reasons for Deviations
Outcome 2: Regulated ethical and professional nursing practice towards public protection	Availability of an approved Private Practice Implementation Plan	New indicator	Approved Private Practice Implementation Plan	Approved Private Practice Implementation Plan	None	None
	Percentage of complete allegations of unprofessional conduct concluded	100%	100%	100%	0	None
	Number of inspections conducted in health establishments	24	40	40	0	None
	Number of private nursing practices inspected	New indicator	4	4	0	None
	Percentage of nurses who comply with CPD requirements	New indicator	10%	54%	44%	More nurse practitioners participated in the CPD roll-out than planned and the intensive support that was provided to nurse practitioners to comply with CPD requirements.
Sub-Programme 2.3 Learner Affairs Department						
Outcome 2: Regulated ethical and professional nursing practice towards public protection	Percentage of complete learner applications registered within 60 days.	New indicator	100%	100%	0	None
	Percentage of complete nurse applications registered within 60 days.	New indicator	100%	100%	0	None
	Percentage implementation of Practice Analysis Project Plan	New indicator	25%	0	25%	The appointment of a service provider for the Practice Analysis project was impacted by limited market responsiveness, which affected the achievement of the set target.

PROGRAMME 3: FINANCE DIVISION

Purpose: Provide the financial information that other business functions require to operate effectively and efficiently, to support business planning and decision-making towards remaining a sustainable business through the following sub-programmes:

- Financial Accounting
- Supply Chain Management.

Outcome 4: Well-governed, sustainable, and capable SANC

In response to Outcome 4 of the SANC's five-year Strategic Plan, "a well-governed, sustainable, and capable SANC" the Finance Department successfully achieved an unqualified audit opinion with no material findings for the 2024/25 financial year, as planned. This reflects sound financial management, effective internal controls, and full compliance with statutory financial reporting standards. Additionally, the department resolved 100% of external audit findings, further demonstrating the commitment to continuous improvement and governance excellence.

In the 2024/25 financial year, the SANC set a target to achieve a liquidity ratio of 5:1. The actual liquidity ratio achieved was significantly higher at 15:1, primarily due to strong cash reserves. Furthermore, the Council exceeded its target for above-inflation revenue growth. Against a planned annual target of 1%, the SANC achieved a growth rate of 3.7%. This positive variance was largely attributable to an increase in the number of nurse practitioners applying for restoration resulting in an unexpected increase in the restoration fees paid, as well as the annual fees. Abeyance of PEE leading to the increase in numbers directly registering as nurses on completion of training, also contributed.

Supply Chain Management had set a target to award 70% of qualifying tenders within 90 days from the respective closing dates. During the reporting period, 50% of the tenders were awarded within the targeted timeframe. Due to a less responsive market, the appointment process for the Practice Analysis project could not be completed in time to meet the planned target. Although the bid evaluation process progressed, there was an additional consultative step to ensure due diligence in the process which extended the decision-making timeline beyond the planned 90-day period.

PROGRAMME 3: FINANCE DIVISION**Sub-Programme 3.1 Financial Accounting**

Outcome	Output Indicator	Actual Performance 2023/2024 FY	Planned Annual Target 2024/2025 FY	Actual Achievement 2024/2025 FY	Deviation from planned Target to Actual Achievement 2024/2025 FY	Reasons for Deviations
Outcome 4: Well-governed, sustainable, and capable SANC	Clean audit outcome for the SANC	Unqualified audit opinion with no material audit findings for the 2022/23 Financial Year	Unqualified audit opinion with no material audit findings for the 2023/24 Financial Year	Unqualified audit opinion with no material audit findings for the 2023/24 Financial Year	None	None
	Percentage of external audit findings that are due resolved	New indicator	100%	100%	None	None
	Liquidity ratio	13:1	5:1	15:1	10	Favourable variance due to healthy cash resources
	Percentage of above inflation revenue growth	New indicator	1%	3.7%	2.7%	Increase in the number of nurse practitioners applying for restoration and paying restoration fees, and the improved capacity in registration section to register nurses and learners within 60 days. This resulted in the increase in revenue.

Sub-Programme 3.2 Supply Chain Management						
Outcome	Output Indicator	Actual Performance 2023/2024 FY	Planned Annual Target 2024/2025 FY	Actual Achievement 2024/2025 FY	Deviation from planned Target to Actual Achievement 2024/2025 FY	Reasons for Deviations
Outcome 4: Well-governed, sustainable, and capable SANC	Percentage of tenders for qualifying bids awarded within 90 days from the closing date	New indicator	70%	50%	20%	The bid for the nursing practice/ task analysis for licensure examination was not concluded at the time of reporting due to a due diligence process that had to be followed to ensure that a competent service provider was appointed.



PROGRAMME 4: CORPORATE SERVICES DIVISION

Purpose: Oversee all human resources related matters, provide information communication technology business enablement, oversee internal and external communication and marketing as well as client services, guide and coordinate records management and services; manage and facilitate the provision of facilities services through the following sub-programmes:

Description of sub-programmes

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

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

Programme 4 contributes to the following Outcomes:

Outcome 1: SANC positioned as a credible responsive regulator

Outcome 4: Well-governed, sustainable, and capable SANC.

During the period under review, the Human Resources Department aimed to maintain a vacancy rate of $\leq 10\%$ of approved and funded positions, in line with organisational efficiency and capacity objectives. The actual vacancy rate achieved was 9%, reflecting a successful adherence to the target and contributing positively to workforce stability and operational effectiveness.

Contributing to Outcome 4 of the SANC five-year Strategic Plan 2024/25-2028/29, a well-governed, sustainable, and capable SANC, the ICT Department planned to digitise three core business processes. However, implementation was impacted by challenges in appointing a service provider for the MMS, primarily due to limited responsiveness in the market. Despite these setbacks, significant progress was made with the implementation of several SAGE ERP modules. Key modules including eProcurement, payroll, inventory, invoicing, employee self-service, and records management were successfully deployed.

As part of efforts to position the SANC as a credible and responsive regulatory body, the Communication and Marketing Department ensured that the Customer Service Quality Improvement Plan was finalised and approved by the Communication and Marketing Committee, laying the foundation for enhanced service delivery and stakeholder engagement.

In alignment with the Stakeholder Relations and Collaboration Plan, 80% of planned activities were successfully implemented, demonstrating the SANC's commitment to proactive and meaningful stakeholder engagement. A stakeholder collaboration was established with the World Health Organisation (WHO), facilitated through the Office of the Registrar and CEO. This partnership reflects the SANC's growing influence and alignment with global health regulatory standards, further enhancing its credibility and responsiveness within the healthcare ecosystem.

PROGRAMME 4: CORPORATE SERVICES DIVISION						
Sub-Programme 4.1 Human Resources Department						
Outcome	Output Indicator	Actual Performance 2023/2024 FY	Planned Annual Target 2024/2025 FY	Actual Achievement 2024/2025 FY	Deviation from planned Target to Actual Achievement 2024/2025 FY	Reasons for Deviations
Outcome 4: Well-governed, sustainable, and capable SANC	Vacancy rate of approved and funded positions	New indicator	≤10%	9%	None	None
	Percentage implementation of Employee Value Proposition Improvement plan	New indicator	50%	75%	25%	The Council approval of key HR policies, including a comprehensive Total Rewards Policy, which enabled the HR Department to focus on implementing EVP elements in 2024/25 contributed to the over-achievement.
Sub-Programme 4.2 Information and Communication Technology						
Outcome	Output Indicator	Actual Performance 2023/2024 FY	Planned Annual Target 2024/2025 FY	Actual Achievement 2024/2025 FY	Deviation from planned Target to Actual Achievement 2024/2025 FY	Reasons for Deviations
Outcome 4: Well-governed, sustainable, and capable SANC	Number of core business processes digitised	New indicator	3	1	2	The finalisation of the appointment of the MMS service provider took longer than anticipated due to limited responsiveness from the market, which resulted in a later than-planned commencement of the process to digitise core operations.
	Percentage of planned milestones achieved in Digitisation Plan (ERP, MMS, and CPD)	New indicator	100%	54%	46%	The finalisation of the appointment of the MMS service provider took longer than anticipated due to limited responsiveness from the market, which resulted in a later-than-planned commencement of the process to digitise core operations.

Sub-Programme 4.3 Communication and Marketing						
Outcome	Output Indicator	Actual Performance 2023/2024 FY	Planned Annual Target 2024/2025 FY	Actual Achievement 2024/2025 FY	Deviation from planned Target to Actual Achievement 2024/2025 FY	Reasons for Deviations
Outcome 1: SANC positioned as a credible and responsive regulator	Customer service quality improvement plan approved	New indicator	Customer service quality improvement plan approved	Customer Service Quality Improvement Plan approved by Communication and Marketing Committee on 24 March 2025 and recommended to Council for approval.	None	N/A
	Percentage implementation of Stakeholder relations and collaboration plan	New indicator	80%	80%	None	N/A
	Stakeholder satisfaction survey approved	New indicator	Stakeholder satisfaction survey approved	Stakeholder satisfaction survey approved	None	N/A
	Number of new stakeholder collaborations established	New indicator	1	WHO (via Office of the Registrar and CEO).	None	N/A

ANNUAL PERFORMANCE PER STRATEGIC OUTCOME

The table below provides the performance of the organisation per strategic outcome and related output indicators. Strategic Outcome 1 had four output indicators, Outcome 2 had seven output indicators, Outcome 3 had six output indicators and Outcome 4 had 13 output indicators. Tables 7, 8, 9, 10 and 11 below present performance per strategic outcome and targets that were achieved, partially achieved, and not achieved per outcome.

Table 7: Annual performance per Strategic Outcome and related Output Indicators

Strategic Outcomes	Number of Outputs	Number of Output Indicators	PERFORMANCE PER STRATEGIC OUTCOME AND RELATED OUTPUT INDICATORS					
			Achieved		Partially achieved		Not achieved	
			#	%	#	%	#	%
1	2	4	4	100%	0	0%	0	0%
2	4	7	6	86%	1	14%	0	0%
3	4	6	5	83%	0	0%	1	17%
4	3	13	8	62%	5	38%	0	0%
TOTAL	13	30	23	77%	6	20%	1	3%

PERFORMANCE PER STRATEGIC OUTCOME

The section below reports on the performance of the organisation per strategic outcome, the targets that were achieved, partially achieved, and not achieved. See Tables 8, 9, 10, and 11. It is important to note that the reasons for deviation are not included at this stage because they are provided early under the performance of the organisation per programme and sub-programme.

STRATEGIC OUTCOME 1: SANC POSITIONED AS A CREDIBLE RESPONSIVE REGULATOR.

All four output indicators under strategic Outcome 1 on the SANC being positioned as a credible responsive regulator were achieved in the year under review, as per Table 8 below.

Table 8: Organisational Performance on Strategic Outcome 1

Output	Output indicators	Output indicators	Assessment	Performance per Output Indicator	
				#	%
1.1. Approved customer service quality improvement plan.	1.1.1. Customer service quality improvement plan approved	Customer service quality improvement plan approved.	Achieved	4 of 4	100%
1.2. Stakeholder Relations and Collaboration plan implemented	1.2.1 % implementation of Stakeholder relations and collaboration plan	80%	80% (Achieved)		
	1.2.2. Stakeholder satisfaction survey approved	Stakeholder satisfaction survey approved	Achieved		
	1.2.3. Number of new stakeholder collaborations established	1	2 (Achieved)		



Strategic Outcome 2: Regulated ethical and professional nursing practice towards public protection.

Outcome 2 on regulated ethical and professional nursing practice towards public protection had seven output indicators. Six (86%) of these indicators were achieved and one was partially achieved.

Table 9: Organisational Performance on Strategic Outcome 2

Output	Output indicators	Output indicators	Assessment	Performance per Output Indicator	
				#	%
2.1. Approved Private Practice Implementation Plan	2.1.1. Availability of an approved Private Practice Implementation Plan	Approved Private Practice Implementation Plan	Achieved	6 of 7	86%
2.2. Managed unprofessional conduct	2.2.1. % of complete allegations of unprofessional conduct concluded	100%	100% (Achieved)		
	2.2.2. Availability of an approved monitoring system to track compliance with sanction implementation requirements	Monitoring system to track compliance with sanction implementation requirements approved	Achieved		
2.3. Compliant health establishments with legislation and prescribed nursing practice standards	2.3.1. Number of inspections conducted in health establishments	40	40 (Achieved)		
	2.3.2. Number of private nursing practices inspected	4	4 (Achieved)		
2.4. CPD compliant nurses and midwives	2.4.1. % of nurses who comply with CPD requirements	10%	54% (Achieved)	1 of 7	14%
Managed unprofessional conduct	2.4.2. 2.1.7. % of PIC referrals concluded	100%	24% (Partially Achieved)		

Outcome 3: Regulated fit-for-practice registered nurses

Outcome 3 on regulated fit-for-practice registered nurses had six output indicators. Five (83%) output indicators were achieved, with one that was not achieved. Indicators

Table 10: Organisational Performance on Strategic Outcome 2

Output	Output indicators	Target	Assessment	Performance per Output Indicator	
				#	%
3.1. Reduced TAT for nursing curricula accreditation	3.1.1. % of complete nursing curricula applications evaluated within 11 months.	100%	100%	5 of 6	83%
	3.1.2. % of complete nursing curricula applications accredited by Council within 11 months.	100%	100%		
3.2. Reduced TAT for registration of students and nurses	3.2.1. % of complete Learner applications registered within 60 days	100%	100%		
	3.2.2. % of complete Nurse applications registered within 60 days.	100%	100%		
3.3. Compliant NEIs following E&T standards monitoring	3.3.1. Number of accredited NEIs monitored for E&T standards compliance	17	16 (Achieved)		
3.4. Approved and implemented Practice Analysis Project Plan	3.4.1. Percentage implementation of practice analysis project plan	25%	0% (Not Achieved)	1 of 6	17%

Strategic Outcome 4: Well-governed, sustainable, and capable SANC

Strategic outcome 4 on well governed, sustainable and capable SANC had 13 output indicators. Eight (62%) targets were achieved, and five (38%) were partially achieved. See Table 11.

Table 11: Organisational Performance on Strategic Outcome 4

Output	Output indicators	Target	Assess ment	Performance per Output Indicator	
				#	%
4.1. Optimised organisational performance	3.1.1. Percentage achievement of organisational performance	70%	77% (Achieved)	8 of 13	62%
4.2. Audit outcome for the SANC	3.1.2. Clean audit outcome for the SANC	Unqualified audit opinion with no material audit findings for the 2023/24 Financial Year	Achieved		
	3.2.1.				
4.3. Resolved external audit findings	3.2.2. Percentage of external audit findings that are due resolved	100%	100 (Achieved)		
4.4. Sustainable financial position Maintained	3.3.1 Liquidity ratio	5:1	15:1		
	3.4.1. Percentage of above inflation revenue growth	1%	3.7%		
Capacitated SANC	Vacancy rate of approved and funded positions	Vacancy rate maintained <10%	9%		
	Percentage implementation of Employee Value Proposition Improvement plan	50%	75%		
Approved independent risk management maturity (RMM) assessment plan	Percentage of key risk indicators within tolerable thresholds	80%	85%	5 of 13	38%
Tenders for qualifying bids awarded within 90 days from the closing date	Percentage of tenders for qualifying bids awarded within 90 days from the closing date	70%	50%		
Resolved Internal Audit findings	Percentage of Internal Audit findings resolved	70%	65%		
Approved independent risk management maturity (RMM) assessment plan	Risk management maturity assessment level.	Level 4 of 6	Level 3 of 4		
Capacitated SANC	Number of core business processes digitised.	3	1		
	Percentage of planned milestones achieved in Digitisation Plan (ERP, MMS, and CPD)	100%	54%		

DEFERRED TARGETS

Three targets were deferred to the 2025/2026 FY. Two of the targets were partially achieved and one was not achieved. The targets were carried over to the next financial year reporting period.

The deferred targets fall under the following strategic outcomes:

Strategic Outcome 3: Regulated Fit-for-practice: Programme 3

- Implementation of Practice Analysis Project Plan

Strategic Outcome 4: Well-governed, sustainable, and capable SANC

- Core business processes digitisation.
- Digitisation Plan (ERP, MMS, and CPD) milestones achievement.

CORE OPERATIONS: PROFESSIONAL AFFAIRS DIVISION

Ms Suyekiye J Nxumalo - Deputy Registrar



2.1. OVERVIEW

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

Therefore, the Professional Affairs Division is responsible for executing the core mandate of the Council.

The Professional Affairs Division is comprised of three Departments namely:

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

The Professional Affairs Department supports the following Council Committees:

- Education Committee;
- Laws, Practice and Standards Committee and its Sub-committee on CPD;
- Impairment Committee; and
- Preliminary Investigating Committee.

The key achievements of the Division are as follows:

- Turnaround time for accreditation of nursing programmes was reduced to 11 months for complete applications for both undergraduate and postgraduate Diploma programmes to assist in ensuring that the country produces nurses to meet the national needs of the country.
- Commencement of the phased-in approach to CPD implementation.
- Inspections and investigations were conducted in health establishments and NEIs.
- Enquiries were held for nurses who were alleged to be unfit to render nursing care with reasonable skill and safety.
- Statutory registrations were done in line with the Nursing Act, 2005 (Act No. 33 of 2005).
- Regulations regarding distinguishing devices for all nurses and midwives were published for public comments by the National Department of Health; the comments were processed and approved by the Council and awaiting promulgation by the Minister of Health.
- Information sharing with the profession on education and nursing practice during the virtual Stakeholder Forum.
- The nursing practice standards were gazetted and public comments received for analysis
- Public comments received from the gazetted Private Practice Regulations were considered. Private Practice Regulations were approved by Council and submitted to the NDoH for promulgation.
- Through the Impairment Committee, the Council explored collaboration with universities and mental healthcare institutions in order to have memoranda of agreement with specialists who could assess respondents under the impairment programme.

2.2. PROVIDER AFFAIRS DEPARTMENT

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

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

In compliance with the Nursing Act, 2005 (Act No. 33 of 2005), the Provider Affairs Department performed as follows in the 2024/25 financial year:

2.2.1. ACCREDITATION SECTION

ACCREDITED NURSING EDUCATION INSTITUTIONS (NEIs)

In 2024/25 FY the SANC register had 124 accredited NEIs to offer new nursing programmes. It is important to note that all public Nursing Education Institutions in nine Provinces are now accredited to offer the new HEQSF-compliant qualification. See Table 12. Five NEIs were accredited in the year under review with one of them being Henrietta Stockdale College of Nursing in the Northern Cape. This was the only outstanding public nursing college. As of this year all public nursing Colleges in the Provinces are accredited to offer the new programmes. The Henreitta Stockdale College is accredited to offer the three-year Diploma in Nursing leading to registration with the SANC as a general nurse, and one-year Higher Certificate in Nursing leading to registration with the SANC as an Enrolled Nursing Auxiliary.

Table 12: Number of accredited NEIs in 2024/25 FY

ACCREDITED NURSING EDUCATION INSTITUTIONS	TOTAL ACCREDITED
Private NEIs	37
Public NEIs	67
Universities	20
TOTAL	124

ACCREDITED NURSING EDUCATION PROGRAMMES

In 2024/25 FY the SANC accredited 19 undergraduate programmes namely, Higher Certificate in Nursing, Diploma in Nursing, Advanced Diploma in Midwifery and Bachelor of Nursing.

Table 13: Accredited undergraduate programmes in 2023/24 FY

ACCREDITED PROGRAMMES	NUMBER OF ACCREDITED PROGRAMMES
Higher Certificate in Nursing	10
Diploma in Nursing	06
Advanced Diploma in Midwifery	02
Bachelor of Nursing	01
TOTAL	19

The Council continued to prioritise the accreditation of postgraduate diploma programmes to upscale the production of specialist nurses in the country¹. A total of 30 programmes were accredited compared to the total of 19 in 2023/2024 FY. See Table 14 depicting the total number of accredited programmes per area of specialisation.

Table 14: Accredited postgraduate nursing diploma programmes in 2024/25 FY

POSTGRADUATE NURSING DIPLOMAS	TOTAL ACCREDITED
Postgraduate Diploma in Adult Critical Care Nursing	02
Postgraduate Diploma in Perioperative Nursing R. 635	03
Postgraduate Diploma in Mental Health Nursing R. 635	03
Postgraduate Diploma in Midwifery R. 635	02
Postgraduate Diploma in Emergency Nursing R. 635	02
Postgraduate Diploma in Nephrology Nursing R. 635	01
Postgraduate Diploma in Orthopaedic Nursing R. 635	02
Postgraduate Diploma in Occupational Health Nursing R. 635	01
Postgraduate Diploma in Primary Care Nursing R. 635	04
Postgraduate Diploma in Ophthalmic Nursing R. 635	02
Postgraduate Diploma in Health Service Management R. 635	02
Postgraduate Diploma in Nursing Education R. 635	03
Postgraduate Diploma in Child Nursing R. 635	02
Postgraduate Diploma in Oncology and Palliative Nursing R. 635	01
Total	30

APPROVED CLINICAL FACILITIES FOR WORK-INTEGRATED LEARNING IN THE 2024/25 FY

In 2024/2025 FY the SANC approved 317 clinical facilities which shows a 43% increase from 221 clinical facilities approved in 2023/24 FY. The clinical facilities are spread across all nine Provinces and are for the placement of both undergraduate and postgraduate diploma students. Clinical facilities included public and private health establishments including community-based clinical settings and emergency response services.

Table 15: Number of approved clinical facilities by type in 2024/25 FY

TYPE OF CLINICAL FACILITY	APPROVED NUMBERS
Public Hospitals	74
Private Hospitals	29
Community Health Centres	82
Public Clinics	114
Old Age Homes/Frail Care	05
Industry Clinics	04
Private Clinics	04
Emergency Medical Response Services	05
Total	317

¹ While the Council accredited 30 programmes during the 2024/25 FY, it needs to be noted that the enrolment of students into the postgraduate qualification is not within the control of the SANC.

2.2.2. MONITORING AND EVALUATION SECTION

The Monitoring and Evaluation (M&E) Section works hand-in-hand with the Accreditation Section. The Accreditation Section sets the initial bar for nursing education providers with regards to the nursing education and training standards to be met for accreditation. The M&E Section ensures compliance to the standards by monitoring that the quality of education and training remains at the required level throughout the institution's accredited period. The Section is dedicated to continuously assess accredited institutions to ensure they maintain the education and training standards and adhere to the regulations set by the SANC.

The M&E Section's primary functions are to conduct audit visits, quality control inspections and inspection in loco or unannounced visits to NEIs. This Section enhances the accreditation process by ensuring ongoing compliance with SANC standards.

In the year under review a total of 23 audit visits, quality control inspections, and inspections in locos were conducted in NEIs and 34 in clinical facilities. This was a significant improvement from the total of 6 audit visits, quality control inspections and inspections in loco that were conducted to NEIs and 27 to clinical facilities in the 2023/24 FY. See Table 16.

Table 16: Number of conducted audit visits and quality control inspections in 2024/25 FY

NUMBER OF AUDIT VISITS AND QUALITY CONTROL INSPECTIONS CONDUCTED IN 2024/25 FY		
TYPE OF CLINICAL FACILITY	NURSING EDUCATION INSTITUTIONS	CLINICAL FACILITIES
Audit Visits	07	21
Quality Control Inspections	14	13
Inspections In Loco	2	0
Total	23	34

2.3. LEARNER AFFAIRS DEPARTMENT

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

- Register learner nurses and/or learner midwives;
- Register nurses on completion of training;
- Conduct admission examination for nurses with international qualifications, conduct examinations and grant certificates in respect of such examinations;
- Process applications for registrations of internationally qualified nurses and midwives and issue limited registrations,
- Issue duplicate and replacement certificates, and
- Register Community Service Practitioners on commencement and completion of the community service.

In compliance with the Nursing Act, 2005 (Act No. 33 of 2005), the Learner Affairs Department performed as follows in the 2024/25 financial year:

2.3.1. REGISTRATION SECTION

The section is responsible for the registration of learner nurses and/or learner midwives and registration of nurses on completion of training.

LEARNER REGISTRATION

In terms of the Nursing Act, 2005 (Act No. 33 of 2005), Section 32, 33 and 34, the SANC must register learners from commencement of education and training until completion, including additional qualifications. The SANC also provides statistics of students who register and pass/fail the examinations.

In the year under review the SANC register had a total number of 6 737 students registered as learners in both undergraduate and post graduate programmes. Of this total, 5 642 were undergraduate students with 5 603 were registered as students under the Higher Education Qualifications Sub-Framework (HEQSF)-compliant undergraduate programmes and 39 under the legacy

programmes. A total of 1 056 students were registered in the HEQSF-compliant postgraduate diploma programmes in nursing, and 78 learners were registered for legacy postgraduate qualifications. The 78 learners for the legacy programmes were those that resumed training and were not affected by the pronouncement by the Minister of Higher Education and Training in 2019 to phase out the legacy qualification.

The table below demonstrates the registered students as learners in the year 2024.

Table 17: Registered students as learners in 2024

PROGRAMME	TOTAL LEARNER NURSES REGISTERED
UNDERGRADUATE NURSING PROGRAMMES	
HEQSF COMPLIANT UNDERGRADUATE PROGRAMMES	
Higher Certificate in Nursing	1 379
Diploma in Nursing	2 453
Bachelor of Nursing	1 236
Advanced Diploma in Midwifery	535
Total	5 603
LEGACY PROGRAMMES	
Four-year Diploma/Degree program	39
TOTAL FOR UNDERGRADUATE NURSING	5 642
POSTGRADUATE NURSING DIPLOMA PROGRAMMES	
HEQSF-COMPLIANT POSTGRADUATE PROGRAMMES	
Health Services Management	177
Mental Health Nursing	47
Primary Care Nursing	351
Midwifery	131
Nursing Education	119
Perioperative Nursing	20
Adult Critical Care - Nursing	52
Occupational Health Nursing	118
Emergency Nursing	41
Total	1 056
LEGACY PROGRAMMES	
Course in Clinical Nursing Science leading to registration of an additional qualification	7
Diploma in Occupational Health Nursing	6
Diploma in Nursing Administration	26
TOTAL	39
TOTAL OF POSTGRADUATE STUDENTS	1 095
GRAND TOTAL OF STUDENTS IN THE SANC REGISTER	6 737

NURSES REGISTERED ON COMPLETION OF BASIC QUALIFICATIONS IN 2024

Section 31(1) of the Nursing Act, 2005 (Act No. 33 of 2005) stipulates that no person may practise as a nurse practitioner unless he or she is registered to practise in at least one of the prescribed categories. In the year 2024, the SANC registered a total number of 11 024 nurses on completion of basic qualifications. A total of 6 224 were registered on completion of legacy and 4 800 registered on completion of the new qualifications as per Table 18 below.

Table 18: Nurses registered on completion of basic qualification in 2024

BASIC QUALIFICATIONS	TOTAL
LEGACY QUALIFICATIONS	
Nursing Auxiliary	101
Enrolled Nurses	45
General Nurses	1 690
Nurse (General, Psychiatric and Community and Midwife) – Old degree and four-year diploma	2 633
Midwife	387
Psychiatric Nurse	02
Community Service Practitioner	1466
Total	6 224
HEQSF-COMPLIANT NURSING QUALIFICATIONS	
Auxiliary Nurse	1 482
General Nurse	1 690
Community Service Practitioners for R174	1 465
Professional Nurse and Midwife	163
TOTAL	4 800
GRAND TOTAL OF STUDENTS IN THE SANC REGISTER	11 024

NURSES REGISTERED ON COMPLETION OF ADDITIONAL QUALIFICATIONS IN 2024

Section 34(1) of the Nursing Act, 2005 (Act No. 33 of 2005) states that the Council must register the additional qualification of a person who is registered in terms of Section 31 of the Act. The SANC registered a total number of 1 487 nurses on completion of training leading to registration with the SANC as a specialist nurse, with 991 nurses produced through the legacy programmes and 487 from new qualifications. See Table 19 on page 47.



Table 19: Nurses registered on completion of Additional Qualifications/Postgraduate Diplomas in 2024/2025 FY

ADDITIONAL QUALIFICATIONS		POSTGRADUATE QUALIFICATIONS		TOTAL NURSES REGISTERED PER SPECIALIST AREA
LEGACY QUALIFICATIONS	TOTAL	HEQSF-COMPLIANT NURSING QUALIFICATIONS	TOTAL	
CLINICAL SPECIALISATIONS				
Clinical Nursing Science, Health Assessment, Treatment and Care	29	Primary Care Nursing	193	222
Post-Basic Occupational Health Nursing	87	Occupational Health Nursing	63	150
Post-Basic Psychiatric Nursing- Child Psychiatric Nursing	12	Mental Health Nursing	34	46
Post-basic Child Nursing Science	2	Child Nursing	0	2
Community Health Nursing	23	Community Health Nursing	0	23
		Midwifery	71	71
Medical and Surgical Nursing Science:				
• Operating Theatre Nursing	4	Perioperative Nursing	17	14
• Critical Care Nursing-General	19	Critical Care Nursing (Adult)	0	19
• Critical Care Nursing - Trauma	8	-	-	8
• Emergency Nursing	3	Emergency Nursing	0	6
• Nephrology Nursing	3	Nephrology Nursing	0	3
• Trauma and Emergency	3	Emergency Nursing	0	3
NON-CLINICAL SPECIALISATIONS				
Nursing Administration	419	Health Service Management	71	
Nursing Education	379	Nursing Education	38	
Total	991		487	1 478

2.3.2. ASSESSMENT SECTION

The Assessment Section conducts admission examination for nurses with international qualifications, conduct professional entrance examinations for nurses prepared through SANC accredited NEIs and grant certificates in respect of such examinations. In terms of Section 4(1)(c) of the Nursing Act, 2005 (Act No. 33 of 2005), the Council must "conduct examinations, appoint examiners and moderators and grant diplomas and certificates in respect of such examinations". Section 4(1)(n) further states that the Council must "monitor the assessments by education and training providers, including the recognition of prior learning, register constituent assessors and moderators and grant diplomas and certificates in accordance with the requirements of this Act and any other law".

SANC EXAMINATIONS

The numbers of nurses undergoing the SANC examinations dropped drastically following the Council resolution in the 24-25 June 2024 meeting regarding putting professional entrance examinations in abeyance. The aim was to enhance the system's regulatory effectiveness through evidence informed Professional Registration Assessment System (PRAS). Therefore, the SANC in the year under review did not conduct professional entrance examinations, until the practice task analysis is done, and the blueprint of the Licensure examination determined.

The SANC, however, continues to conduct admission examinations for nurses with international qualifications. Examaminations for foreign applicants (General Nurse and Midwife) were held on 15 March 2024, 12 July 2024 and 08 November 2024.

SCHEDULE AND PERFORMANCE IN THE SANC EXAMINATIONS

Table 20 below presents the performance of these applicants for the calendar year 2024.

Table 20: Examination schedule and statistics for the calendar year 2024

EXAMINATIONS	TOTAL CANDIDATES	PASSED		FAILED	
		NUMBER	%	NUMBER	%
Foreign Applicants (General Nurse)	66	38	58%	28	42%
Foreign Applicants (Midwife)	4	4	100%	N/A	100%

ASSESSORS AND MODERATOR REGISTRATIONS

In terms of the Nursing Act, 2005 (Act No. 33 of 2005), the South African Nursing Council, as a regulatory body and responsible for quality assurance is required to monitor assessment and facilitate moderation by nursing education institutions. Registered nurses who hold an additional qualification in nursing education and registered with the South African Nursing Council are deemed as constituent assessors and moderators upon application and payment of a fee as determined by the Council. Registered nurses who do not hold an additional qualification in nursing education but are formally involved in assessment/moderation have to undergo assessor/moderator training with the provider that is accredited by the Education, Training and Development Practices Sector for Education and Training (ETDPSETA) and thereafter may register with the SANC as assessors and moderators.

In line with the Nursing Act, 2005 (Act No. 33 of 2005) a total of 370 Assessors and 371 Moderators were registered in the calendar year 2024.

Table 21 below shows the Assessors and Moderators registered in the 2024 calendar year.

Table 21: Assessors and Moderators registered in the 2024 calendar year.

Assessors	370
Moderators	371
Total	741

REPLACEMENT CERTIFICATES ISSUED DURING JANUARY-DECEMBER 2024

In accordance with Section 45(1)(a)(b)(c) of the Nursing Act, 2005 (Act No. 33 of 2005) "the Registrar may, on application by a Practitioner, issue a duplicate/replacement certificate of registration provided the practitioner meets the requirements. The duplicate/replacement registration certificate is issued once. A confirmation letter is thereafter issued if the practitioner loses the replacement certificate that was issued by the Council.

A total of 1 020 replacement certificates were issued during the 2024 calendar year. Table 22 below provides a breakdown per qualification/category.

Table 22: Replacement certificates issued per qualification/category in the 2024 calendar year.

REPLACEMENT CERTIFICATES PER QUALIFICATION CATEGORY	TOTAL CANDIDATES
Nurse (General, Psychiatric and Community) and Midwife	150
General Nurse and Midwife	7
General Nurse	100
Psychiatric Nurse	5
Midwife	20
Enrolled Nurse	50
Enrolled Nursing Auxiliary	70
TOTAL	402
ADDITIONAL QUALIFICATIONS	
Clinical Nursing Science Health Assessment, Treatment and Care	29
Post-Basic Child Nursing Science	2
Post-Basic Midwifery and Neonatal Nursing Science	12
Post-Basic Occupational Health Nursing Science	87
Post-Basic Psychiatric Nursing Science	12
Post-Basic Community Nursing Science - Occupational Health	1
Medical and Surgical	
• Operating Theatre Nursing	41
• Ophthalmological Nursing	1
• Critical Care Nursing - General	19
• Trauma and Emergency	8
• Emergency Nursing	3
Assessor	4
Moderator	3
NON-CLINICAL	
Nursing Education	379
Nursing Administration	419
TOTAL	1 020

VERIFICATION AND TRANSCRIPT STATISTICS ISSUED IN THE 2024 CALENDAR YEAR

Verifying and authenticating transcripts through SANC is crucial for ensuring the competency and qualifications of nurses, ultimately safeguarding public health and safety. This process confirms that individuals claiming to be nurses have the required education and training to practice safely and effectively. In the 2024 calendar year, the SANC received a total number of 1 559 requests for verifications and transcripts. Table 23 depicts the nurses who requested verifications of qualifications and/or transcripts of training to be sent, mostly to the United States of America [USA] (439), United Kingdom [UK] (180), Australia (149) and agencies (593) within different countries.

Table 23: Verification and Transcript Statistics issued in the 2024 calendar year

Country	Jan	Feb	Marc	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
Agencies	16	78	32	84	84	49	58	27	52	42	25	46	593
Australia	4	27	13	0	1	22	16	20	12	17	5	12	149
Cayman Island	2	0	1	0	0	2	2	1	0	0	2	2	12
Danish Island	0	1	0	0	0	2	0	0	0	0	0	0	3
Ireland	2	8	6	1	2	6	1	3	4	3	1	4	41
Namibia	0	0	0	0	0	1	0	1	2	0	1	1	6
New Zealand	0	4	0	0	0	3	2	5	4	7	1	10	36
Swaziland	0	1	0	0	0	0	0	0	0	0	0	0	1
United Arab Emirates	0	2	3	5	10	4	4	5	3	10	4	10	60
UK	4	32	20	18	20	16	11	12	8	17	12	10	180
USA	24	48	20	0	18	67	58	34	45	40	25	60	439
Universities	0	4	2	0	0	9	4	3	2	2	2	5	33
Virgin Islands	0	0	1	0	0	0	0	0	0	0	0	0	1
Zimbabwe	0	4	0	0	0	0	0	0	0	0	0	0	5
MONTH TOTALS	52	209	98	108	135	181	156	112	132	138	78	160	1559

Note:

- The above figures indicate the number of persons who have requested that verifications of qualifications and/or transcripts of training be sent to the countries indicated only, and **NOTHING ELSE**.
- It is specifically stated that nurses are not required to notify the Council if they do leave the country.
- The fact that a nurse has requested a verification be sent does not necessarily mean that she/he has taken up the offer of a position in another country.

REGISTRATION OF INTERNATIONALLY QUALIFIED NURSES AND MIDWIVES AND/OR FOREIGN QUALIFICATIONS WITH THE SANC

In executing the function of registration of foreign nurses and qualifications from foreign countries, the SANC takes cognisance of the policy of the National Department of Health on recruitment and employment of foreign health professionals in the Republic of South Africa.

The South African Nursing Council (SANC) in the year under review received a total of 248 applications from internationally qualified nurses seeking registration with the SANC. The highest number of applications came from nurses in India, with 95 applications, followed by Zimbabwe with 79 applications. Additionally, there were 23 applications from Nigeria. Other countries represented include Lesotho (14 applications), the Democratic Republic of Congo (10), Eswatini (4), Zambia (4), Ghana (3), Canada (3), Rwanda (2), the USA (2), the UK (2), and one application each from Pakistan, the Philippines, Malawi, Australia, Namibia, Turkey, and Botswana. Among these applications, the majority (224) were submitted by nurses seeking to register as registered nurses and midwives.

2.4 PROFESSIONAL PRACTICE DEPARTMENT

The Professional Practice Department manages all professional/nursing practice related matters of nurse practitioners who are registered in terms of Section 31(1) of the Nursing Act, 2005 (Act No. 33 of 2005). It is responsible for developing a regulatory framework for nursing practice and for developing standards, rules and ethical codes for nursing practice, investigation of alleged unprofessional conduct by nurses, development of a CPD system, impairment management and development of a Private Practice management system, amongst others.

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

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

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

2.4.1. CONDUCTING INSPECTIONS AND INVESTIGATIONS OF HEALTH ESTABLISHMENTS

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

HEALTH ESTABLISHMENTS INSPECTED IN 2024/25 FY

During the year under review, the Inspectorate Section inspected 44 health establishments as per Table 24. The purpose is to assess and enforce compliance with nursing practice standards, to improve the quality of the nursing care provision. Inspection reports were compiled and sent to all health establishments in line with the policy and procedures.

Table 24: The table depicts the number of health establishments inspected in 2024/25 FY.

HEALTH ESTABLISHMENT TYPE	NUMBER
Public Hospitals	12
Private Hospitals	06
Military Hospital	01
Community Health Centres	06
Primary Health Care Clinics	13
Old Age Home	02
Nurse led Private Practises/Clinics	4
Total	44

2.4.2. CONTINUING PROFESSIONAL DEVELOPMENT

The Council adopted a phased-in approach in the implementation of Continuing Professional Development (CPD). In the 2024/2025 financial year, the target was for 10% of registered nurse practitioners who participated in the first year of Implementation to have complied with CPD requirements. Implementation was successfully rolled out across all nine provinces, with three public hospitals per province selected, along with identified facilities from private healthcare groups including Mediclinic, Life Healthcare, Netcare, Clinix Health Group and the National Hospital Network. The participant sample comprised of Operational Managers from these facilities, who engaged in CPD activities aligned to the five themes of the current CPD cycle, with the goal of earning 15 CPD points. Completion and submission of the required CPD documentation were coordinated through the Nursing Services Directorate at provincial level and within the respective private health groups and submitted to the Council as part of ongoing monitoring and compliance efforts.

The table below indicates the number of nurse practitioners who participated in CPD activities and those who complied with CPD requirements by 31 March 2025:

Table 25: Number of nurse practitioners who participated in CPD activities and complied with CPD requirements

Province/ Private Hospital group	Number of nurse practitioners who participated in the CPD activities	Number of nurse practitioners who complied with CPD requirements by 31 March 2025
Gauteng	68	66
Mpumalanga	46	36
Free State	44	0
Western Cape	104	3
Northern Cape	49	22
KwaZulu-Natal	72	48
Eastern Cape	81	28
Limpopo	49	42
Northwest	43	8
Mediclinic	97	22
Netcare	128	112
Life Healthcare	125	110
Clinix Health Group	12	0
Total	918	497

The percentage of nurses who complied with the CPD requirements by 31 March 2025 was 54%. It is important to note that the CPD cycle continues until 30 June 2025 and the total percentage for the CPD cycle year will be determined then.

2.4.3. MANAGING UNPROFESSIONAL CONDUCT - PRELIMINARY INVESTIGATIONS

The Preliminary Investigating Committee (PIC) is responsible for handling cases of alleged unprofessional conduct in terms of the Nursing Act, 2005 (Act No. 33 of 2005). Cases of unprofessional conduct are received from the media, members of the public, and managers in both private and public healthcare establishments. Only cases relating to nurses whose names are in the SANC Nurse Register are investigated.

The table below depicts the number of cases received for alleged unprofessional conduct.

Table 26: Number of cases received for alleged unprofessional conduct

FY 2024/25	Q1	Q2	Q3	Q4	TOTAL
Complaints attended to	15	13	15	20	63
Outside jurisdiction	8	5	0	4	17
TOTAL	23	18	15	24	80

The table below shows the number of cases whereby the investigation into the alleged unprofessional conduct was still in progress.

Table 27: Cases in progress

CUMULATIVE CASES	Q1	Q2	Q3	Q4	TOTAL
2023	12	9	5	5	31
2024	14	17	10	12	53
2025	0	0	0	0	17
TOTAL	26	26	15	34	101

The table below illustrates the number of cases presented to Preliminary Investigating Committee.

Table 28: Cases presented to the Preliminary Investigating Committee

CASES	Q1	Q2	Q3	Q4	TOTAL
Midwifery	5	2	5	4	16
General	7	7	8	4	26
Unethical conduct	3	2	2	2	9
Mental Health	0	2	0	3	5
Education and Training	0	0	0	7	7
TOTAL	15	13	15	20	63

The table below depicts the Preliminary Investing Committee decisions during the 2024/25 FY.

Table 29: Committee decisions

Committee Decision	Q1	Q2	Q3	Q4	TOTAL
No case	1	1	4	1	7
Cautioned	0	2	1	0	3
PCC referral	10	9	5	10	34
Flagged	1	0	0	0	1
Fine	1	0	1	8	10
In abeyance/deferred	2	1	4	1	8
TOTAL	15	13	15	20	63

The table below shows the type and the number of persons who reported the complaint.

Table 30: Persons who reported the complaint

CASES REPORTED BY	Q1	Q2	Q3	Q4	TOTAL
Members of the public	10	9	14	8	41
Nursing Manager	5	4	0	5	14
Internal referral Education/Impairment Committee	0	0	0	7	7
Media	0	0	1	0	1
TOTAL	15	13	15	20	63

The table below shows the place of incidence or the place the case was reported from.

Table 31: Place of incidence

REPORTED FROM	Q1	Q2	Q3	Q4	TOTAL
Private healthcare establishment	8	5	3	6	22
Public healthcare establishment	7	8	12	7	34
Internal (Education/Impairment Committee)	0	0	0	7	7
TOTAL	15	13	15	20	63

The table below depicts the categories of nurses referred to the Professional Conduct Committee (PCC) including the qualifications

Table 32: Category of nurses referred to the Professional Conduct Committee

QUALIFICATION		GP	KZN	WC	EC	NC	NW	FT	MP	GP	TOTAL
Registered Nurse	4 year Diploma/Degree	12	13	1	1	0	1	0	0	3	31
	2 year Bridging Course	11	2	2	1	0	0	0	0	0	16
Midwife		7	5	0	0	0	2	0	3	0	17
Enrolled Nurse		7		1	0	0	0	0	0	0	8
Auxiliary Nurse		4	7	0	0	0	1	0	0	0	12
TOTAL		41	27	4	2	0	4	0	3	3	84

The table below shows the cases presented per province.

Table 33: Cases presented per province

CASES REPORTED BY	Q1	Q2	Q3	Q4	TOTAL
Gauteng	15	6	5	7	23
KwaZulu-Natal	4	3	2	3	12
Northwest	1	0	3	4	8
Eastern Cape	2	0	1	1	4
Western Cape	1	1	2	2	6
Northern Cape	0	0	0	0	0
Limpopo	1	1	1	1	4
Mpumalanga	0	1	0	1	2
Free State	1	1	1	1	4
TOTAL	15	13	15	20	63

The table below depicts the type of allegations received.

Table 34: Type of allegations received

TYPE OF ALLEGATIONS OF PRESENTED CASES	Q1	Q2	Q3	Q4	TOTAL
Mismanagement /negligence of a pregnant woman or a woman in labor	4	3	5	4	16
Failure/delay to seek medical assistance	1	0	0	0	1
Poor nursing care	3	7	8	2	20
Unethical conduct: Bringing the profession into disrepute (through theft /fraud/assault)	4	3	2	5	14
Medication error	2	0	0	0	2
Education: Contravention of Section 32 of the Act	0	0	0	7	7
Acting beyond the Scope of Practice	1	0	0	2	3
TOTAL	15	13	15	20	63

2.4.4. MANAGING UNFITNESS TO PRACTICE - IMPAIRMENT

The inquiries into alleged unfitness to practice are conducted by the Impairment Committee, as mandated by Section 51 of the Nursing Act, 2005 (Act No. 33 of 2005). Employers, colleagues, and the public report cases of unfitness to practice to the Council. The SANC balances the interest of the public and the wellness of the nurse practitioners by ensuring that practitioners with physical or mental health challenges or any other such condition which renders them impaired, are assisted and rehabilitated.

The table below shows the impairment cases presented to the Impairment Committee.

Table 35: Cases presented to the Impairment Committee

CASES	NUMBER OF RESPONDENTS			
	Q1	Q2	Q3	Q4
New cases	0	0	0	3
Cases in progress	9	17	9	5
Limitation to practice	0	0	0	1
Administrative removal/suspension	11	10	13	13
Restored	0	1	0	0
Discharged/closed	0	1	2	1
Abeyance	0	0	2	0
Inquiries	3	2	2	2
Referred to PIC	0	0	0	0
TOTAL	23	31	28	25

The table below illustrates the categories of nurses under impairment review.

Table 36: Categories of nurses who are under impairment review

CATEGORY OF NURSES	GENDER	Q1	Q2	Q3	Q4
Registered Nurse	F	9	13	10	8
	M	1	3	1	1
Enrolled Nurse	F	2	3	3	1
	M	0	0	0	1
Enrolled Nursing Auxiliary	F	0	1	1	1
	M	0	0	0	0
Learner		0	0	0	0
TOTAL		12	20	15	12

The table below represents the administrative removals due to non-compliance category of nurses.

Table 37: Administrative removals due to non-compliance per category

CATEGORY	GENDER	Q1	Q2	Q3	Q4
Registered Nurse	F	6	7	8	8
	M	3	4	4	3
Enrolled Nurse	F	2	0	0	1
	M	0	0	1	1
Enrolled Nursing Auxiliary	F	0	0	0	0
	M	0	0	0	0
TOTAL		11	11	13	13

The table below depicts the number of nurses from different provinces whose cases were managed by the Impairment Committee.

Table 38: Cases per province

PROVINCE	NUMBER OF CASES
Gauteng	2
KwaZulu-Natal	4
Western Cape	5
Free State	0
Eastern Cape	0
Northwest	1
Northern Cape	0
Limpopo	0
Mpumalanga	0
TOTAL	12

The table below depicts the number of nurses per province who were removed from the Register administratively for non-compliance.

Table 39: Administrative removals per province due to non-compliance

PROVINCE	NUMBER OF CASES
Gauteng	4
KwaZulu-Natal	2
Western Cape	5
Northwest	0
Northern Cape	1
Limpopo	0
Free State	1
Mpumalanga	0
Eastern Cape	0
TOTAL	13

Legal and Regulatory Affairs



3.1. OVERVIEW OF LEGAL AFFAIRS

The Legal Affairs Department is responsible for assisting with various targets on the SANC Annual Performance Plan (APP) and has two output indicators on Program two:

The core functions of the Legal Affairs Department are to:

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

The Legal Affairs Department of the South African Nursing Council consists of a staff compliment of seven staff members. The Professional Conduct hearings do form a large part of the Legal Affairs Department's work amongst other work that the Legal Affairs Department is responsible for.

This performance indicator on Strategic Objective was achieved and below follows a breakdown of hearings held:

3.2. PROFESSIONAL CONDUCT COMMITTEE (PCC) MATTERS

CRITICAL MILESTONES:

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

3.2.1. PROFESSIONAL CONDUCT COMMITTEE

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

During the period under review, the Committee had six (06) sittings:

First was in KZN Province where the SANC had 13 cases: two were finalised, two were withdrawn, five were postponed and four were partly heard.

Second was Gauteng Province, with 12 cases: five were finalised, two were administratively removed from the SANC Nurse Register and five were postponed.

Third was KZN Province, where the SANC had eight cases: two cases were finalised, two were withdrawn, one was struck off the role and three were postponed.

Fourth was Gauteng Province, where the SANC had seven cases: one case was finalised, one was withdrawn, one was administratively removed from the SANC nurse register, two were postponed and two were partly heard.

Fifth was Gauteng Province, where the SANC had five cases: three cases were finalised, one was withdrawn and one was postponed.

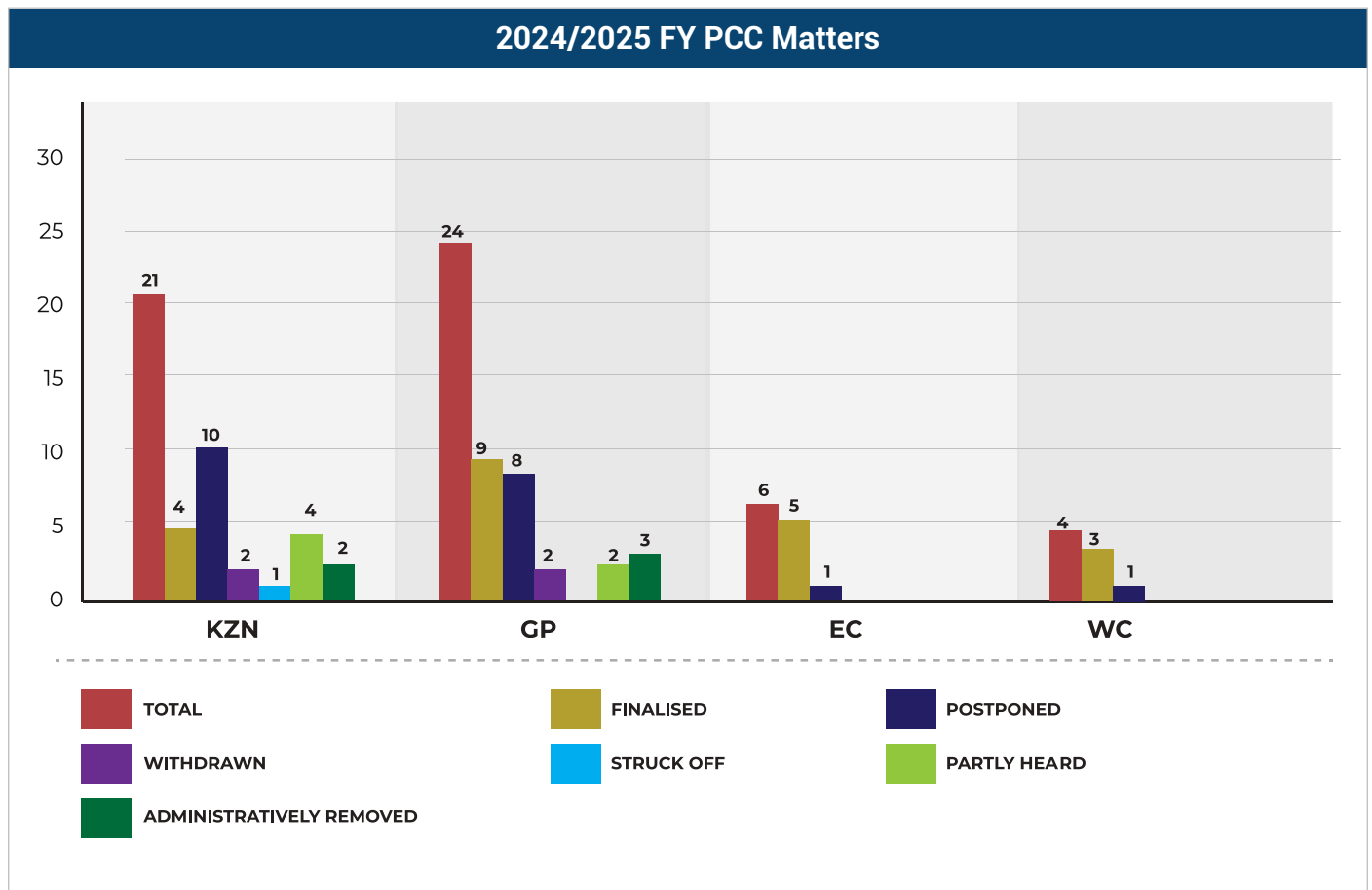
Sixth was:

(i) Eastern Province, where the SANC had six cases: five cases were finalised, and one was postponed, and

(ii) Western Cape Province, where the SANC had four cases: three cases were finalised and one was postponed.

The figure below depicts the cases for the financial year under review.

Figure 4: PCC Cases 2024/25 FY



3.2.2. LITIGATION MATTERS

During the period under review the SANC attended to various legal matters, all of which were successfully defended by the SANC. These ranged from urgent applications to various other forms of applications, mainly Nursing Education Institutions and bodies representing same brought against the SANC. Very few matters were brought against the SANC by individuals and usually if an individual is the applicant, they are represented by either a trade union or other form of organisation. One matter to be highlighted was a matter brought by a service provider on a contract for the Membership Management System and the matter is ongoing.

3.2.3. APPEALS

Section 15(4) appeals of the Nursing Act, 2005

The SANC received three appeals in terms of Section 15(4) of the Nursing Act, 2005 (Act No. 33 of 2005) against the decision of the Professional Conduct Committee. All these appeals are waiting for the appointment of the new Committee, which is underway. In the Eastern Cape the SANC had two cases, and one case in Western Cape.

Section 57 appeals of the Nursing Act, 2005

For the period 2024-2025, the South African Nursing Council had received five appeals in terms of Section 57 of the Nursing Act, 2005 (Act No. 33 of 2005) which are appeals to the Appeals Committee appointed by the Minister of Health in terms of Section 57 of the Nursing Act, 2005.

There are two Professional Conduct cases in which sanctions were overturned by the Council; and both cases are now under appeal in terms of Section 57 of the Nursing Act, 2005 (Act No 33 of 2005). Defendants and their representatives have been notified about the Council's decision.

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



INTERNAL AUDIT AND RISK MANAGEMENT



4.1. OVERVIEW

Internal Audit and Risk Management play a pivotal role in contributing to Outcome 4 of the SANC five-year Strategic Plan 2024/25 – 2028/2029, which focuses on ensuring a well-governed, sustainable, and capable SANC. Internal Audit and Risk Management functions provide objective assurance and advisory services designed to add value and improve the SANC's operations. Thus, strengthening accountability, supporting informed decision-making at all levels of the organisation, and enhancing overall institutional resilience and sustainability. By applying a systematic and disciplined approach, this Department evaluates the effectiveness of risk management, internal controls, and governance processes, enabling the organisation to achieve its strategic objectives while fostering continuous improvement.

To preserve independence, the Internal Audit activity reports administratively to the Registrar and CEO and functionally to the Audit and Risk Committee (ARC), ensuring alignment with both operational priorities and governance best practices.

4.2. INTERNAL AUDIT

The purpose, authority, and responsibilities of the Internal Audit function are formally established in the Internal Audit Charter, as approved by the Audit and Risk Committee (ARC). Internal Audit's scope of activities encompasses the independent assessment of the adequacy and effectiveness of the SANC's governance, risk management, and control processes, consistent with management's design and representations. This ensures:

- Risk Oversight: Risks are systematically identified, assessed, and mitigated.
- Integrity of Information: Financial, operational, and management reporting is accurate, reliable, and timely.
- Compliance: Employee actions align with policies, ethical standards, legal/regulatory requirements, and contractual obligations.
- Resource Stewardship: Resources are procured cost-effectively, utilized efficiently, and safeguarded against loss.
- Strategic Alignment: Organisational objectives are achieved through robust controls.
- Continuous Improvement: Control processes evolve to enhance quality and adaptability.
- Regulatory Agility: Emerging legislative and regulatory risks are proactively identified and addressed.

Internal Audit Plan Execution and Oversight (2024/25 FY)

A risk-based Internal Audit Three-Year Rolling Plan (2024/25–2026/27), approved by the Audit and Risk Committee (ARC), was developed to support the SANC's strategic outcomes and address its evolving risk profile. This plan was formulated through robust consultation with executive leadership and key stakeholders, ensuring alignment with organisational priorities and a focus on high-risk areas. The resulting framework enabled eleven (11) proactive, value-driven assurance engagements in the reporting period, concentrating resources on critical and emerging risks. This approach optimised resource allocation, enhanced governance practices, and strengthened organisational resilience. The completed audits addressed key operational and compliance challenges across the following areas:

Completed Audits (2024/25 FY):

- Annual Financial Statements
- Quarterly Organisational Performance Reporting
- Client Services and Stakeholder Management
- Governance Processes
- Professional Conduct Committee and Appeals Processes
- Procurement and Contract Management
- Risk Management Framework
- Performance Management and Development System (PMDS), Talent Management, and Probation Processes
- Strategic Plan and Annual Performance Plan Development and Monitoring
- Inspectorate Function
- IT Vulnerability and Penetration Testing.

Key Initiatives and Governance Reporting:

- Quarterly Follow-Up Audits: Performed four follow-up audits to monitor management's implementation of action plans addressing findings from internal and external reports.
- Management Reporting: Presented internal audit reports to Management, including actionable recommendations to strengthen controls and process effectiveness.
- Committee and Council Reporting: Provided four quarterly progress reports to the ARC on plan execution and action plan status. Additionally, submitted two summarised audit activity reports to the Council, highlighting significant findings and overall assurance levels.

4.3. RISK MANAGEMENT

The Risk Management Section is responsible for rendering risk management support to the SANC to ensure that key risks are identified, assessed and mitigated. It is further responsible for the coordination of combined assurance, business continuity management and fraud management within the SANC.

The Council has adopted a Council-wide Risk Management Policy and Framework aligned to the requirements of the King Report on Corporate Governance for South Africa (King IV) and the ISO 31000 Risk Management Standards. The policy and framework set out the process of risk identification, analysis, evaluation, monitoring and reporting to ensure a structured approach to the management of risk within the Council approved risk appetite.

Risk assessments were conducted regularly to identify emerging risks and evaluate the effectiveness of risk response strategies. Strategic risk identification is integrated into the strategic planning process and the strategic risk profile represents the top risks faced by the SANC during the financial year, managed at an Executive and Senior Management level and overseen by the Audit and Risk Committee.

A combined assurance approach has been adopted to optimise all assurance activities and functions for effective management of risk and improvement of the overall control environment.

Business continuity and resilience remain an integral component of our risk management approach for business sustainability and continued operations in the event of disruption. The Business Continuity Plan was implemented in the 2024/25 financial year to ensure that the SANC can effectively respond to disruptive events and restore operations to acceptable predefined levels.

4.4. FRAUD MANAGEMENT

The SANC Fraud Management policy promotes a culture of ethics, integrity and accountability and encompasses controls for the prevention, detection and response to fraudulent activities.

The SANC has an independent whistle-blowing hotline in place for reporting suspected fraudulent activities or unethical behaviour. Fraud cases received through the fraud hotline and other reporting channels are investigated and reported quarterly to the ARC and to the Council.

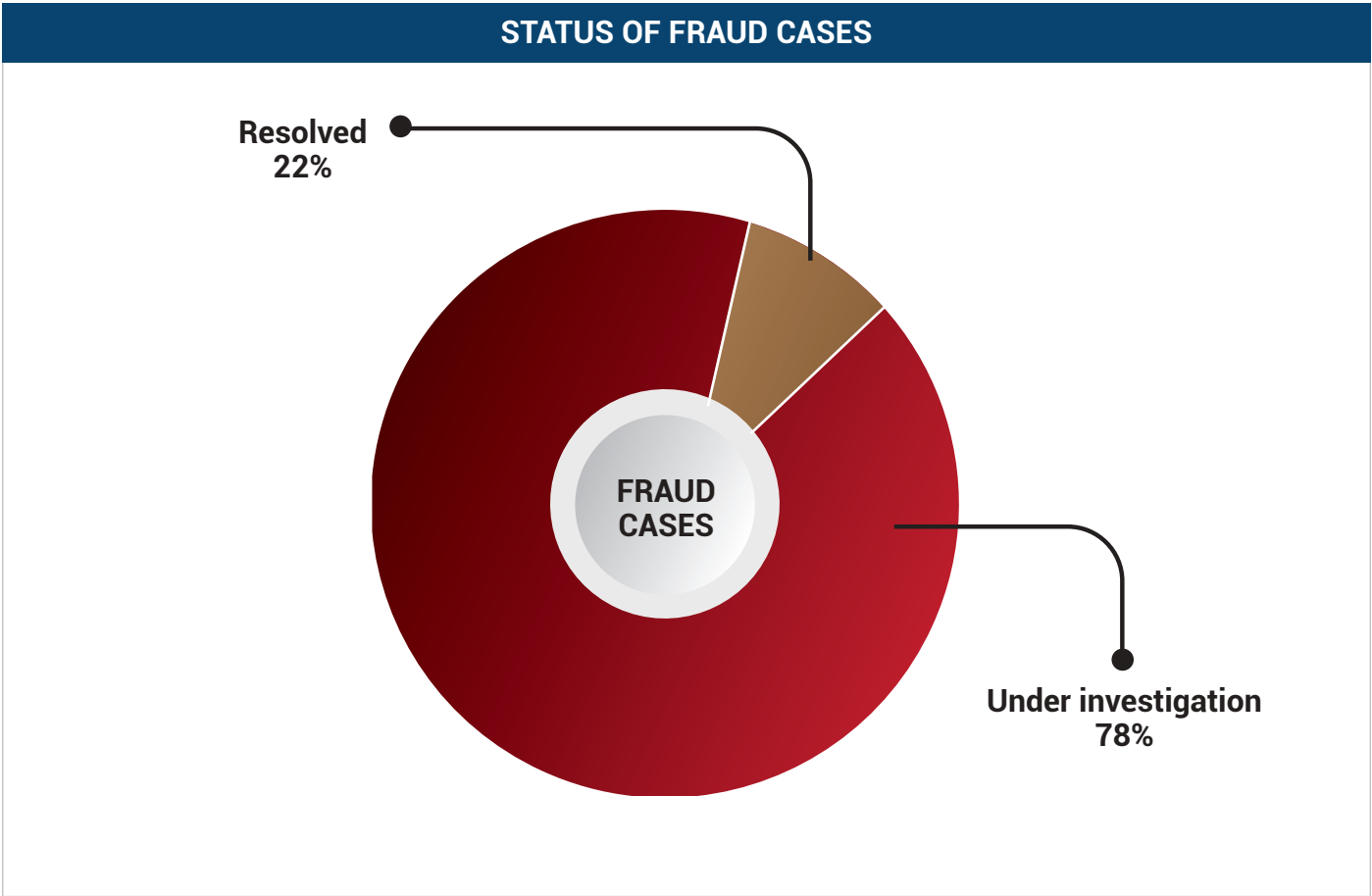
The table below depicts fraud related cases reported through the Fraud Hotline during the 2024/25 financial year.

Table 40: Fraud related cases reported through the Fraud Hotline during the 2024/25 financial year

Fraud related cases	Status of cases		Total
	Under Investigation	Resolved	
	14	4	18

The figure below shows the status of fraud cases, cases that were resolved and those that were still under investigation during the 2024/25 financial year.

Figure 5: Status of fraud cases



CORPORATE SERVICES

*Ms. A. Van Eeden –
Acting Corporate Services Executive*



5.1. OVERVIEW

The Corporate Services Division is proud to reflect on a range of significant achievements that were realised over the course of the 2024/25 financial year - detailed information is available in each respective report e.g. Information and Communication Technology, Human Resources, and Communication, Marketing and Client Services. A summary of significant achievements:

- **Information and Communication Technology (ICT) Department, including the Project Management Office (PMO)** made significant progress regarding digital transformation of the SANC processes with the successful implementation of several SAGE ERP modules (more information is below under the ICT Department report) and the finalisation of the Membership Management System (MMS) contract in March 2025. Eight of the thirteen eTransformation projects have been completed as can be read in the ICT Department report, taking the SANC another step closer to #buildingabetterSANC.
- **Client Services Department** continued its drive towards improved service delivery under the hashtag, #buildingabetterSANC and also focussed on developing a Customer Service Quality Improvement Plan for implementation in the new FY. Monthly service statistics like the Queueing and Rating report on walk-in clients is shared monthly with Management for monitoring and follow-through where applicable.
- **Communication and Marketing Department** implemented the Stakeholder Relations and Collaboration Plan in a concerted drive to improve engagement and specifically face-to-face engagement with the SANC's key stakeholders. Consistent engagement with the media is an ongoing priority, including daily media scanning and reporting. The Department hosted a number of events in the past financial year, of which three bears special mention: The SANC 80th celebration, the 2024 Nursing Excellence Awards and the Registrar's Roadshows that were hosted in February 2025.
- **Human Resources Department** joined the move towards digitisation through a new online recruitment (application) site as of October 2024 on the SANC website, thereby successfully eradicating all manual capturing of applications and thus contributing towards faster recruitment processes. In addition, the SANC fit-for-purpose organisational structure was approved by the Council in the year under review, the Performance Management and Development System (PMDS) for all levels was successfully finalised with the completion of assessments and moderation by the respective Moderation Committees for the different levels, and a new online leave system, SAGE ESS was introduced since September 2024, to name but a few of the achievements.
- **Registry and Records Section** scanned six million nurse records (since 2023 up to the end of the year under review), appointed Record Champions throughout the organisation, and disposed of more than 20 000 inactive records in its move towards digitisation.
- **Facilities Management Section** had three major focus areas in the past financial year and all three have been achieved:
 - The conduction of an assessment of the SANC building to ensure the electrical compliance of the building and the issuing of the certificate of compliance (CoC).
 - The updating of the fire protection systems at the SANC - the building was subsequently equipped with newly installed fire detection and sprinklers system to delay the spread of fire from one floor to another.
 - A focus on security by way of removing the old fence around the SANC premises and replacing it with a new welded mesh fence.

5.2. HUMAN RESOURCES

5.2.1. OVERVIEW

The Human Resources function aligns with the SANC's five-year strategic plan for the 2024/25 to 2028/29 financial years, contributing specifically to the achievement of:

- Outcome 4: ***"Well-governed, sustainable, and capable SANC"***,
- Outcome Indicator 4.3: ***"Percentage implementation of fit-for-purpose organisational structure"***.

5.2.2. LEADERSHIP STABILITY

At the beginning of the first quarter of the 2024/25 financial year, three out of four Executive positions were substantively filled, while one remained vacant. The positions of Registrar and CEO, Deputy Registrar, and Executive: Corporate Services were already filled, however, the Chief Financial Officer (CFO) position was vacant. To ensure operational continuity, an internal staff member from the Finance Division was appointed in an acting capacity while the recruitment process for the Chief Financial Officer (CFO) role was fast-tracked. The CFO position was successfully filled on 01 June 2024, ahead of the close of the first quarter of the 2024/25 financial year.

5.2.3. VACANCY RATE

The SANC successfully surpassed its target of maintaining a vacancy rate of $\leq 10\%$ and below by achieving an annual vacancy rate of 9% for approved and funded positions. This highlights the effectiveness of the SANC's Employee Value Proposition (EVP) which continues to position the organisation as an employer of choice through its focus on meaningful work, professional development, and a supportive workplace culture grounded in the SANC's day-to-day operations.

5.2.4. EMPLOYEE VALUE PROPOSITION

Employee Value Proposition Improvement Plan

In 2024/25, the SANC exceeded its goal of 50% EVP Improvement Plan implementation, achieving 75% completion. This success is a result of the development and approval of the Total Rewards Policy, Bursary Policy, Learning and Development Policy, Remuneration Policy, Resettlement Policy, and the Organisational Development and Employee Mobility Policy, which enabled the HR Department to focus on implementing EVP elements in 2024/25 FY.

Implementation of the Bursary Policy

With the successful introduction of the SANC Internal Bursary policy as stated above, a total of forty-three (43) internal staff bursaries were awarded and effectively implemented, enabling employees to pursue further education and skills development. This milestone reflects the SANC's dedication to excellence, professionalism, and accountability, while also reinforcing a culture of lifelong learning within the organisation.

Implementation of the SANC Graduate Internship Policy

The SANC also successfully implemented the Graduate Internship Policy during the 2024/25 financial year as a cornerstone of the SANC's efforts to bridge the gap between education and employment, providing valuable opportunities for recent graduates to gain practical experience and enhance their employability. As a result, the SANC successfully appointed four graduate interns - two placed in the Finance Department and two in the Human Resources Department.

Affiliation to Professional Bodies

The SANC continued to advance its commitment to professional growth and excellence through the ongoing implementation of Professional Membership Affiliation for staff members.

This strategic initiative has yielded significant benefits, contributing to organisational success by promoting knowledge sharing, continuous professional development, enhanced credibility, and expanded networking opportunities. By enabling staff to engage with peers across diverse sectors, the SANC reinforces its values of professionalism, excellence, collaboration, and accountability in driving institutional growth and impact.

Remuneration and PayScale Design

In the 2024/25 financial year the SANC appointed Emergence Growth as part of the SANC Remuneration and PayScale Design Project. The following key milestones were achieved:

- Approval of the organisational structure;
- Development and review of the job profiles on the reviewed organisational structure;
- Job grading; and
- Remuneration benchmarking.

5.2.5. ORGANISATIONAL DEVELOPMENT AND TALENT MANAGEMENT

Fit-for-purpose organisational structure

The Council approved the SANC organisational structure in July 2024. This approval followed a comprehensive review process aimed at establishing a fit-for-purpose organisational structure that aligns with the Council's mandate and enhances its ability to deliver services effectively in a rapidly changing environment while being cognisant of budget allowances. The purpose of reviewing and implementing the revised structure was to ensure that the SANC remains responsive, strategically positioned, and operationally capable of achieving its service delivery objectives and fulfilling its legislative mandate.

Performance Management and Development System (PMDS)

The 2024/25 PMDS cycle was implemented successfully, with the performance moderation process conducted effectively for all levels within the organisation, marking a key milestone.

Human Resources Information Systems (HRIS)

The SANC has successfully transitioned from its legacy leave management system to the Sage 300 Leave Management System, as part of the modernisation of its human resource operations and in support of the *#buildingabetterSANC*-campaign. This transition, supported by the finalisation of the Payroll and Employee Self-Service (ESS) People Blueprint, has enabled the Human Resources Department to generate and consistently submit quarterly reports—along with monthly leave data—to the Finance Department, thereby enhancing the accuracy of leave accruals and overall payroll integrity.

As part of strengthening leave governance, leave balances are now also visible on employee payslips, and the Sage 300 platform offers functionality to generate monthly leave reports.

In addition, the SANC has implemented a biometric system to enhance attendance tracking. Attendance records captured through the system will be reconciled monthly with Sage leave reports to identify and resolve any discrepancies, thereby strengthening internal controls and improving alignment between attendance and leave management.

Acquisition of online recruitment platform

In the 2024/25 FY, the SANC moved away from the traditional manual recruitment process workflow, where functions such as response handling, tracking, and pre-screening were managed manually by HR personnel. To enhance efficiency and modernise recruitment practices, the HR Department moved from a manual application to an online application system, which was subsequently followed by the appointment of PNet as a service provider to advertise all SANC vacancies online and assist with online applications. This transition to an online recruitment platform will significantly improve the recruitment process by automating administrative tasks, reducing human error, and accelerating response times.

Ultimately, this shift is expected to expedite the hiring process while promoting a more streamlined, transparent, and effective recruitment workflow for the SANC in order to achieve a more timely, efficient, and transparent approach to recruitment.

5.2.6 HUMAN RESOURCES GOVERNANCE MATTERS

Workplace Skills Plan and Annual Training Reporting

The SANC successfully developed, implemented and submitted its 2024/25 Workplace Skills Plan (WSP) and Annual Training Report (ATR) to the relevant Sector Education and Training Authority (SETA). As part of its ongoing commitment to capacity building, the organisation facilitated staff participation in various professional development initiatives. These included conference attendances, attendance of special training including training on drafting, negotiating, and managing commercial contracts, ICT Security Management, Change Management, amongst others.

In alignment with its commitment to continuous learning and development, the organisation invested in employee training and development, with associated costs detailed as follows in Table 41:

Table 41: Training costs

PROGRAMME/ ACTIVITY/ OBJECTIVE	PERSONNEL EXPENDITURE (R'000)	TRAINING EXPENDITURE (R'000)	TRAINING EXPENDITURE EXP. AS A % OF PERSONNEL COST (R'000)	NO. OF EMPLOYEES	AVERAGE TRAINING COST PER EMPLOYEE (R'000)
All Staff	118 117	1 656	1.4%	181	9

Employment Equity Reporting

The Employment Equity Report was submitted by the 15th of January 2025 to the Department of Employment and Labour in line with the Employment Equity Act, 1998 (Act No. 55 of 1998).

An Employment Equity Strategy and five-year Employment Equity Plan was developed and submitted to the Human Resources and Remuneration Committee.

5.2.7 EMPLOYEE RELATIONS, HEALTH AND WELLNESS MANAGEMENT

The SANC acknowledges that a healthy workforce is fundamental to enhancing productivity, reducing absenteeism, minimising workplace incidents, and lowering healthcare demands -ultimately contributing to long-term organisational sustainability.

In alignment with the SANC's value of caring and excellence, the organisation continued to implement the revised Employee Health and Wellness Policy in partnership with Lyra Southern Africa (Pty) Ltd. As part of this commitment, the Human Resources Department facilitated key wellness initiatives, including the Spring Day celebration held on 6 September 2024 and the Organisational Wellness Day hosted on 14 February 2025, both aimed at promoting holistic employee well-being and fostering a supportive work environment.

Collective Bargaining

The SANC successfully concluded and signed the 2024/2025 FY Cost of Living Adjustment (COLA) agreement with the labour union through the Bargaining Forum and signed the collective agreement on 06 September 2024, backdated with effect from 1 April 2024.

Grievances

During the 2024/2025 financial year, two grievances were lodged and resolved, both relating to the minimum requirements for an advertised promotional post, as per the table below:

Table 42: Grievances received in 2024/2025 FY

LEVELS	NUMBER OF GRIEVANCES	NATURE OF GRIEVANCE
Unskilled	0	N/A
Semi-Skilled	0	N/A
Junior Management	0	Unfair Labour Practice - Promotion
Middle Management	1	Unfair Labour Practice - Promotion
Senior Management	1	N/A
Executive Management	0	N/A
Total	2	

Misconduct and Commission for Conciliation, Mediation and Arbitration (CCMA) Matters

During the reporting period, formal disciplinary proceedings were concluded in cases involving serious misconduct, including gross insubordination and failure to comply with lawful instructions. In parallel, disputes referred to the Commission for Conciliation, Mediation and Arbitration (CCMA) encompassed a range of labour-related matters, including alleged unfair labour practices concerning benefits under the Pay Progression framework, as well as claims of unfair suspension, procedural irregularities in disciplinary processes, and unfair dismissal.

5.2.8. HUMAN RESOURCES OVERSIGHT STATISTICS**TALENT MANAGEMENT**

The attraction and retention of talented employees to support the mandate of the SANC remains a priority through the implementation of relevant policies and employment equity imperatives. The personnel cost per salary band and programme is provided in the tables below:

Table 43: Personnel cost per salary band

LEVEL	PERSONNEL EXPENDITURE (R'000)	% OF PERSONNEL EXPENDITURE TO TOTAL PERSONNEL COST (R'000)	NO. OF EMPLOYEES	AVERAGE PERSONNEL COST PER EMPLOYEE (R'000)
Unskilled	539	0,5%	3	179
Semi-Skilled	31 890	27,0%	73	426
Junior Management	41 703	35,3%	66	631
Middle Management	25 310	21,4%	26	973
Senior Management	11 072	9,4%	9	1 230
Executive Management	7 662	6,5%	4	1 915

The below table depicts the Personnel cost by programme/activity/objective.

Table 44: Personnel cost by programme/activity/objective

PROGRAMME/ACTIVITY/OBJECTIVE	PERSONNEL TOTAL EXPENDITURE FOR THE ENTITY (R'000)	PERSONNEL EXPENDITURE (R'000)	PERSONNEL EXPENDITURE AS A % OF TOTAL EXPENDITURE (R'000)	NO. OF EMPLOYEES	AVERAGE PERSONNEL COST PER EMPLOYEE (R'000)
Core Divisions	167 440	52 291	31%	79	647
Support Divisions		65 886	39%	102	652

The attraction and retention of talented employees to support the mandate of the SANC remains a priority through the implementation of relevant policies and employment equity imperatives. Table 45 below shows employee equity statistics per employee grouping.

Table 45: Employment equity statistics per employee grouping

LEVELS	African Male	Coloured Male	Indian Male	White Male	African Female	Colored Female	Indian Female	White Female
Unskilled	2	0	0	0	1	0	0	0
Semi-Skilled	19	0	0	0	47	0	0	4
Junior Management	17	0	1	0	44	2	0	1
Middle Management	11	0	0	1	13	0	0	0
Senior Management	2	0	0	1	3	0	0	1
Executive Management	1	0	0	0	2	0	0	0

The table below shows the skills levels and employment changes.

Table 46: Employment changes

LEVELS	01 April 2024	Appointments	Terminations	31 March 2025
Unskilled	2	0	1	2
Semi-Skilled	19	5	3	75
Junior Management	17	7	4	69
Middle Management	11	1	4	23
Senior Management	2	2	1	6
Executive Management	1	1	1	3

5.3 INFORMATION AND COMMUNICATION TECHNOLOGY (ICT)

5.3.1 OVERVIEW

The Information and Communication Technology (ICT) Department operates within the Corporate Services Division. It comprises of three Sections namely: ICT Operations, Business Applications and Project Management Office (PMO), and Registry and Records Management. The Department is mandated to automate and optimise the SANC business processes as well as managing records effectively. To achieve this, the ICT Department supports and contributes to the realisation of

Strategic Outcome 1: Well-Governed, Sustainable, and Capable SANC.

At the heart of this outcome is the digitisation of core business processes, including the Membership Management Systems (MMS), Continuous Professional Development (CPD), and Sage Enterprise Resource Planning (ERP).

The 2024/2025 financial year marked a period of significant progress for the ICT Department in advancing digital transformation within the SANC. Through strategic initiatives which include Security by Design, Digital First, Culture and Capacity Building and Digitalisation of Process, the department has successfully enhanced ICT infrastructure, strengthened cybersecurity measures, and streamlined business applications to improve operational efficiency. The multi-year project for digitising nurses' records was completed during this financial year, with an additional one million eight hundred thousand records digitised. This achievement marks a milestone that ensures better accessibility and compliance with regulatory requirements.

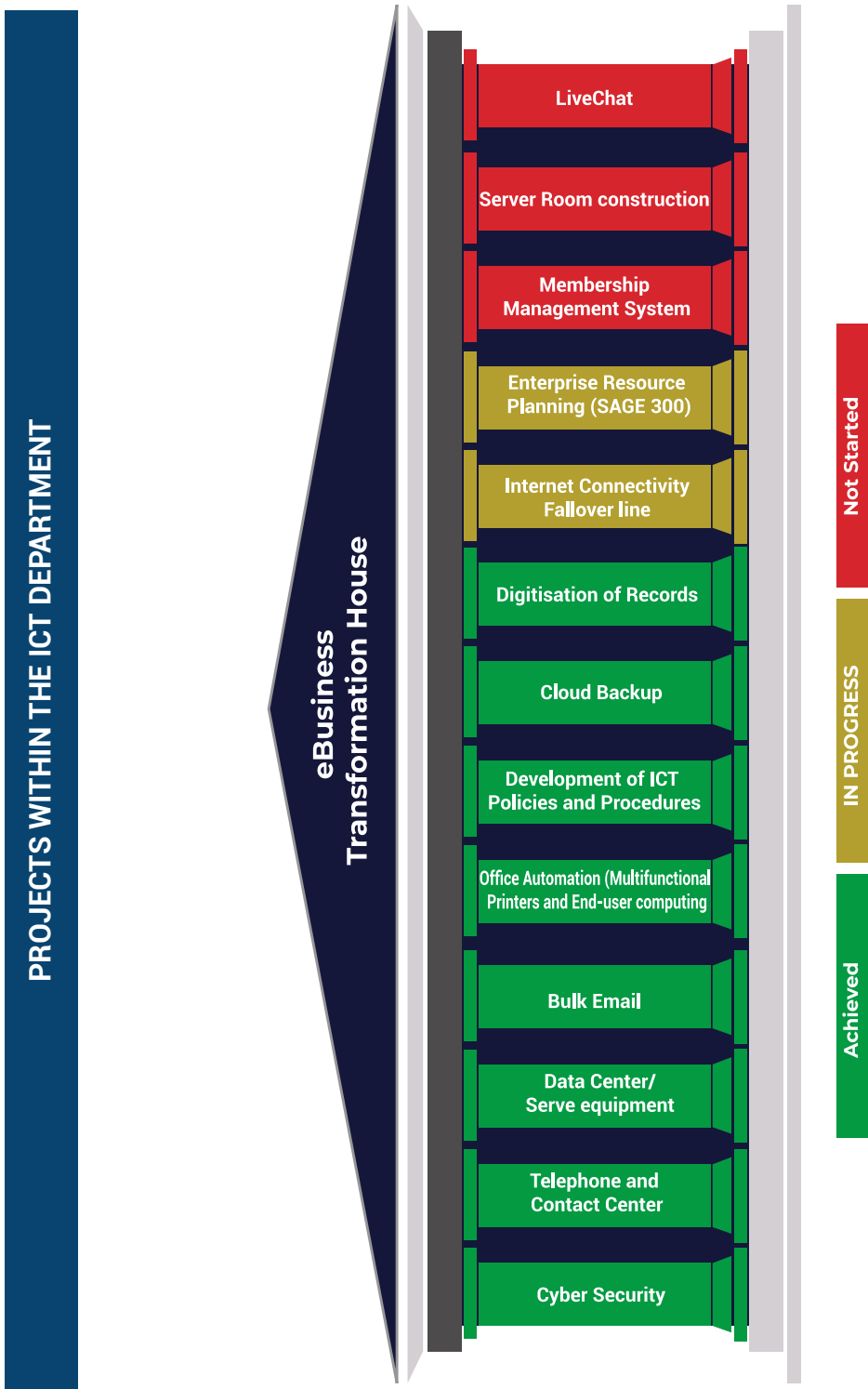
The SANC's commitment to modernisation has also seen the implementation of critical Sage ERP modules and in-house applications optimising key business processes such as procurement, payroll, invoicing, employee self-service and records management. Additionally, investments in cloud backup solutions, disaster recovery systems, and Wi-Fi infrastructure upgrades have reinforced our resilience against potential disruptions.

5.3.2 BUSINESS APPLICATIONS AUTOMATION AND OPTIMISATION

The Council has approved a total of 13 multi-year strategic projects in alignment with the strategic outcome of establishing a well-governed, sustainable, and capable SANC. These projects are set to be implemented under the eBusiness Transformation Programme. Of these initiatives, eight were successfully finalised to date:

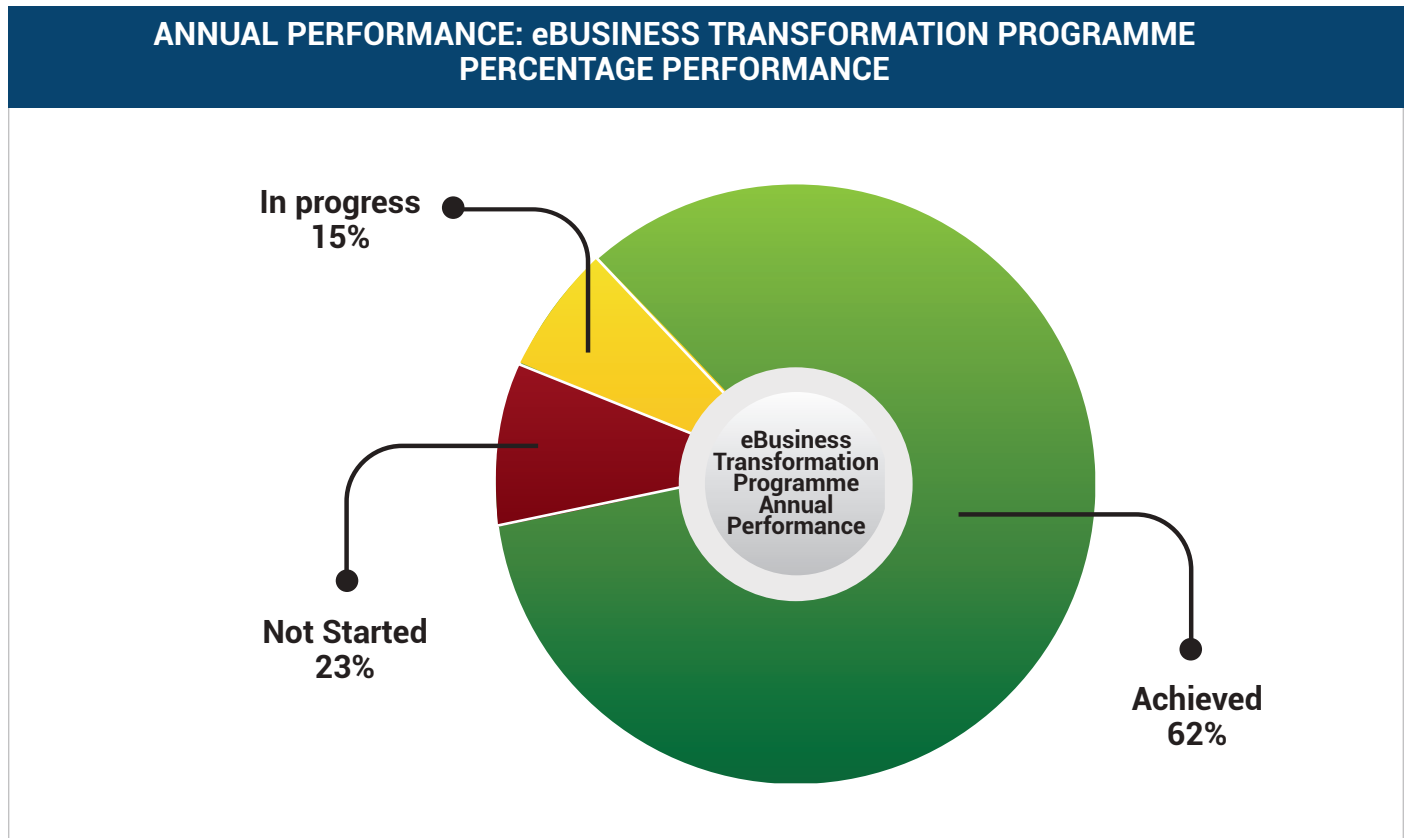
Figure 6 below shows the status of eBusiness Transformation Programme.

Figure 6: eBusiness Transformation Programme status



The figure below represents the overall eBusiness Transformation Programme percentage (%) performance during the 2024/2025 financial year.

Figure 7: eBusiness Transformation Programme Annual Performance



The implementation of the Sage ERP modules and in-house business applications aims to optimise efficiencies and reflects the SANC's ongoing commitment to the digitisation of its operations, thereby facilitating improved service delivery to clients. It has been carried out successfully to automate and enhance the business processes of the SANC. The following modules were implemented successfully:

Sage ERP

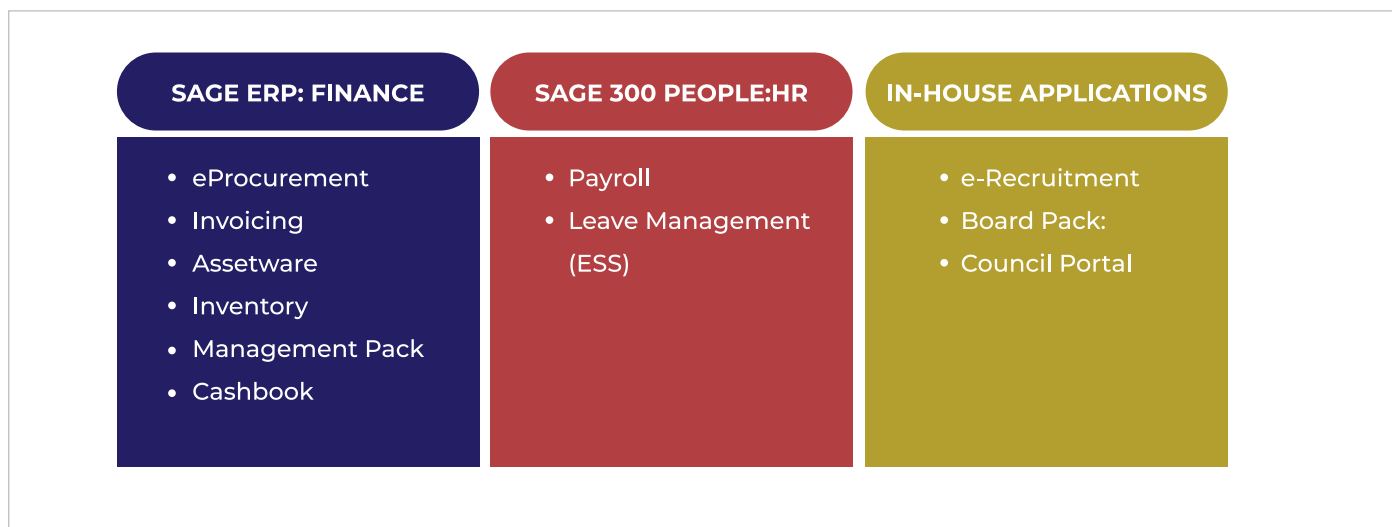
- **eProcurement:** This module is designed to modernise and optimise the SANC procurement process which boost efficiency, cut costs, and improve transparency and compliance.
- **Finance (Invoicing, Assetware, Inventory, Management Pack and Cash Book) Modules:** These modules work together to manage the SANC's financial activities, which include documenting transactions, monitoring assets, and managing cash flow.

Sage 300 People HR

- **Payroll Module:** The system is designed to efficiently handle employees' salary management.
- **Self-Service Leave Management Module:** An HR system created to enable employees to handle their own leave requests, monitor their balances, and obtain necessary information, simplifying the procedure and providing the option of regular reports to assist line managers.
- **In-House Applications**
- **e-Recruitment:** A digital application platform designed to simplify the recruitment workflow, allowing the SANC to handle applications online, which lead to a more efficient and cost-effective hiring process.
- **Board Pack:** A digital solution designed to improve and simplify communication, collaboration, and information-sharing among Council members, enabling effective management of meetings, documents, and governance activities.

The figure below shows the SAGE and in-house modules that were implemented during the 2024/2025 FY:

Figure 8: SAGE and in-house modules implemented in FY 2024/2025.



5.3.3 ICT INFRASTRUCTURE IMPROVEMENT

The ICT operations section has successfully implemented the following projects:

- Cloud Backup and Disaster Recovery (DR) Site that provides essential solutions for safeguarding data and ensuring business continuity.
- Internet connectivity failover line to guarantee uninterrupted internet connectivity.
- Wi-Fi infrastructure upgrade which has significantly enhanced connectivity and overall network performance.
- Server room physical security and environmental controls upgrade to ensure optimal protection and operational integrity.

5.3.4 CYBERSECURITY ENHANCEMENT

The SANc places a strong emphasis on the significance of cybersecurity. Consequently, a range of cybersecurity initiatives has been implemented to enhance protection and ensure the integrity of sensitive information:

- Organisational cybersecurity end-user awareness and training to empower employees to identify, prevent, and respond to cyber threats, ultimately reducing the risk of data breaches and security incidents.
- Participated in the World Cybersecurity Awareness Month.
- Logical security improvement to safeguard the organisation's digital assets.

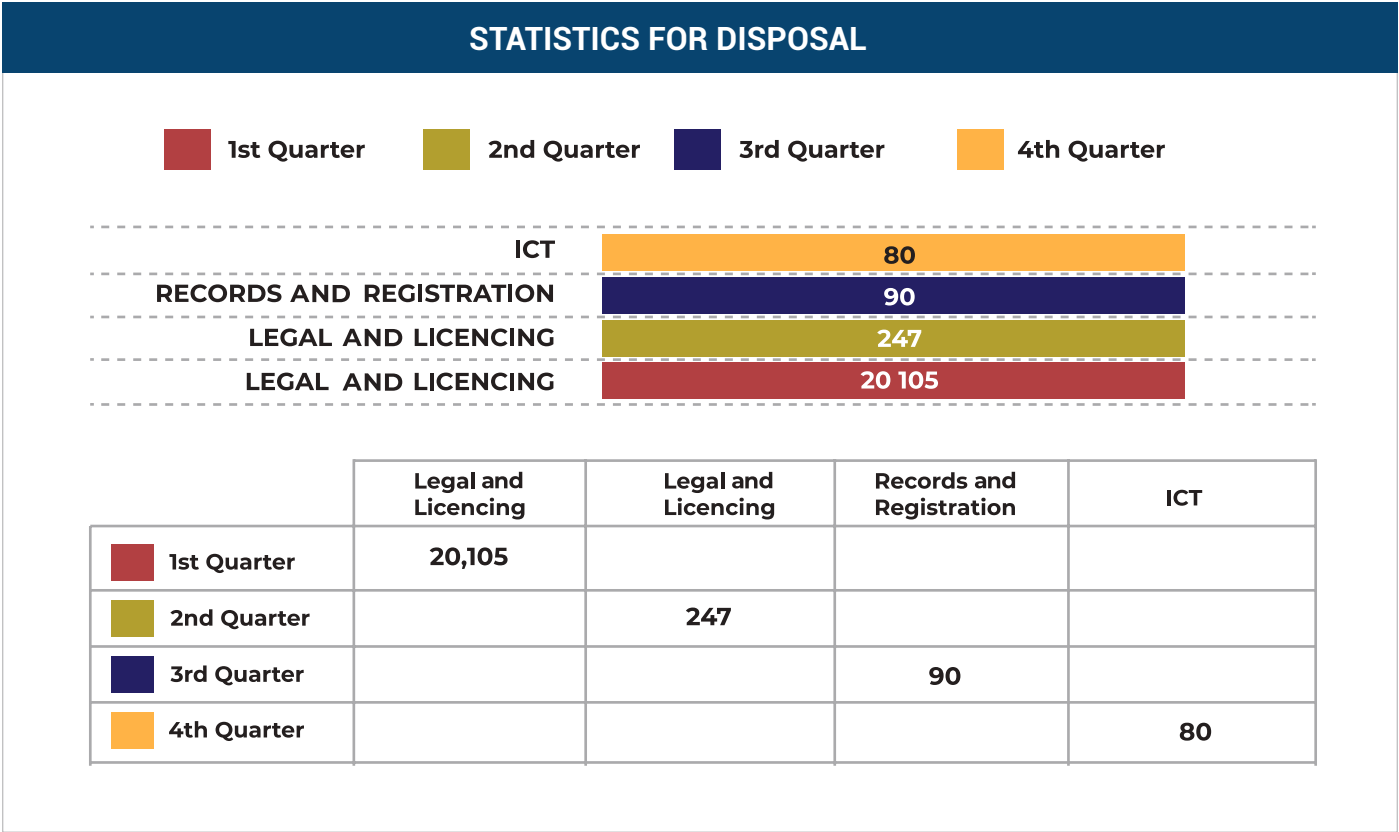
5.3.5 REGISTRY AND RECORDS MANAGEMENT IMPROVEMENT

Demonstrating its commitment to excellence and efficiency in managing and preserving vital information, the Registry and Records Section has successfully met the following planned targets:

- Since the launch of the digitisation initiative in the 2023/2024 financial year, a total of six million nurse records were successfully digitised with 4.2 million records digitised in 2023/2024 and a further 1.8 million in 2024/2025. This achievement marks a significant milestone in strengthening records management, enhancing data accessibility, and supporting more efficient and compliant service delivery.
- Appointment of the organisational Records Champions to promote and support effective records management practices within their respective departments, ensuring compliance and facilitating easy access to information.
- A total of seven batches of inactive records, totalling 20 522 records, were disposed of in accordance with the provisions outlined in the National Archives and Records Service of South Africa Act, 1996 (Act No. 43 of 1996).

The figure below represents the overall percentage of records disposed of during the 2024/2025 financial year:

Figure 9: Records Disposal Statistics.



5.3.6 CONCLUSION

The ICT Department remains focused on continuous innovation, ensuring that technology serves as a key enabler in achieving the SANC's strategic outcomes. By embracing digital transformation, enhancing security protocols, and fostering a culture of technological excellence, we aim to further support the Council's mission of delivering high-quality nursing regulation in South Africa.



5.4 COMMUNICATION, MARKETING AND CLIENT SERVICES

5.4.1 OVERVIEW

The Communication and Marketing Department aligned its activities to the following outcome as included in the SANC Council's five-year strategy, 2024/25 – 2028/29:

- Outcome 1: SANC positioned as a credible and responsive regulator.

5.4.2 INTERNAL COMMUNICATION

Organisational (new) Values drive

During the 2024/25 financial year, the SANC initiated another Values Campaign for its employees due to the 17th Council updating the SANC values as part of its five-year strategy. The Values were promoted under the acronym, CAPECA, please refer to the SANC values under Part B (Strategic Overview) on page 20 of this Annual Report.

The SANC Intranet

The SANC Intranet, called the SANCPulse contains, amongst other documents, the SANC-approved Policies for easy access by all employees.

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

- SANC policies published: 26
- #buildingabetterSANC-campaign: 21
- Survey: 1.

Internal Communication statistics

The SANC uses a number of platforms to communicate with its staff.

In the past financial year, a total of 318 communications were sent to staff :

- Take Note-emailers
- In-the-News daily media scanning
- SANC Circulars
- HR communications
- Newsletters
- Values Campaign communication.

5.4.3 SERVICE DELIVERY

Customer Service Quality Improvement Plan

As part of its five-year strategy, the Council Annual Performance Plan contains the development and finalisation of a Customer Service Quality Improvement Plan for the 2024/25 Financial Year. This plan has been finalised, its action plan being based on feedback from the SANC Service Standards Survey that was conducted during October 2024 (see point 3.2 below) and was approved by the Communication and Marketing Committee on 24 March 2025.

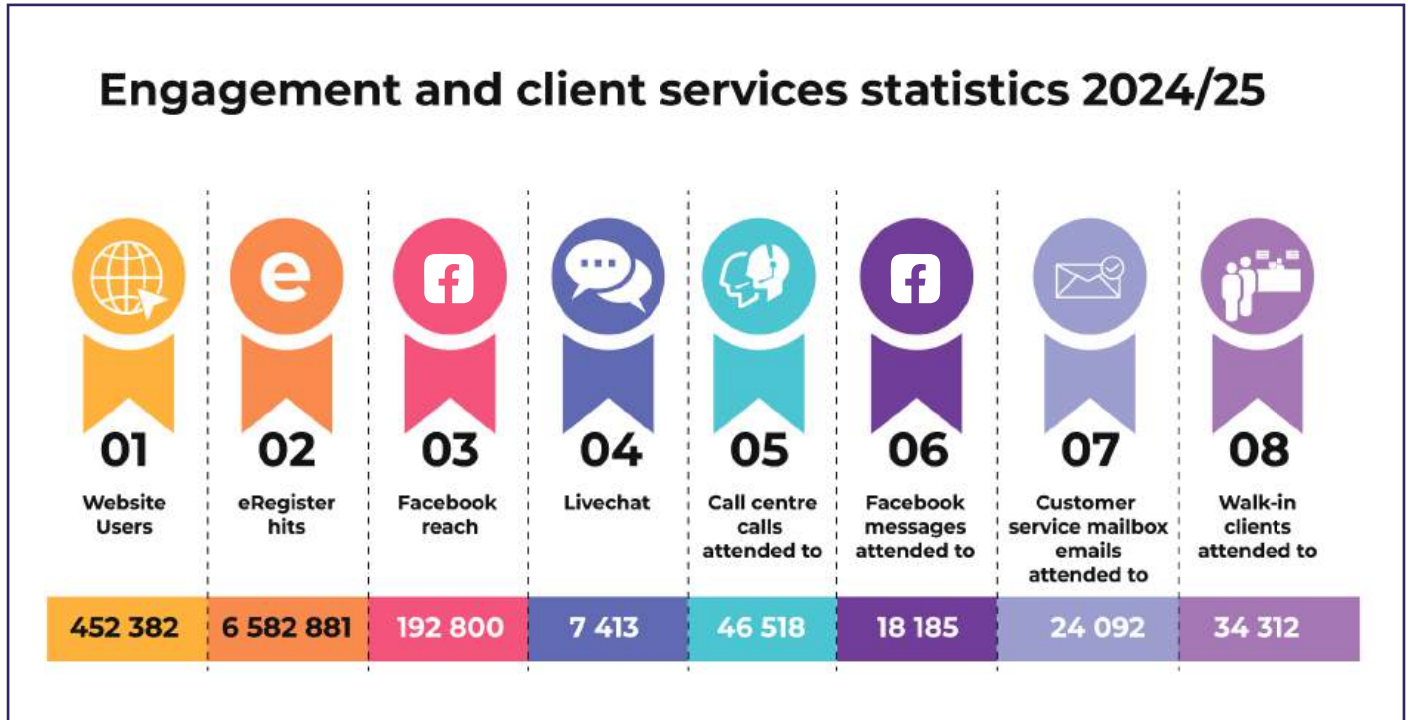
Service Standards Survey

Service delivery is a key item on the 2024 – 2029 Council Strategic Plan with one of the targets being a survey based on the service standards as encapsulated within the SANC Service Standards Charter. The purpose of the survey was for the survey results to be included in the final draft of the SANC Customer Service Quality Improvement Plan (see 3.1 above). The SANC Service Standards Charter is available on the SANC website: <https://www.sanc.co.za/sscharter/>

SANC Service Statistics

The statistics for client services during the year under review are reflected below:

Figure10: Engagement and Client Service Statistics 2024/25 FY



5.4.4 STAKEHOLDER ENGAGEMENT

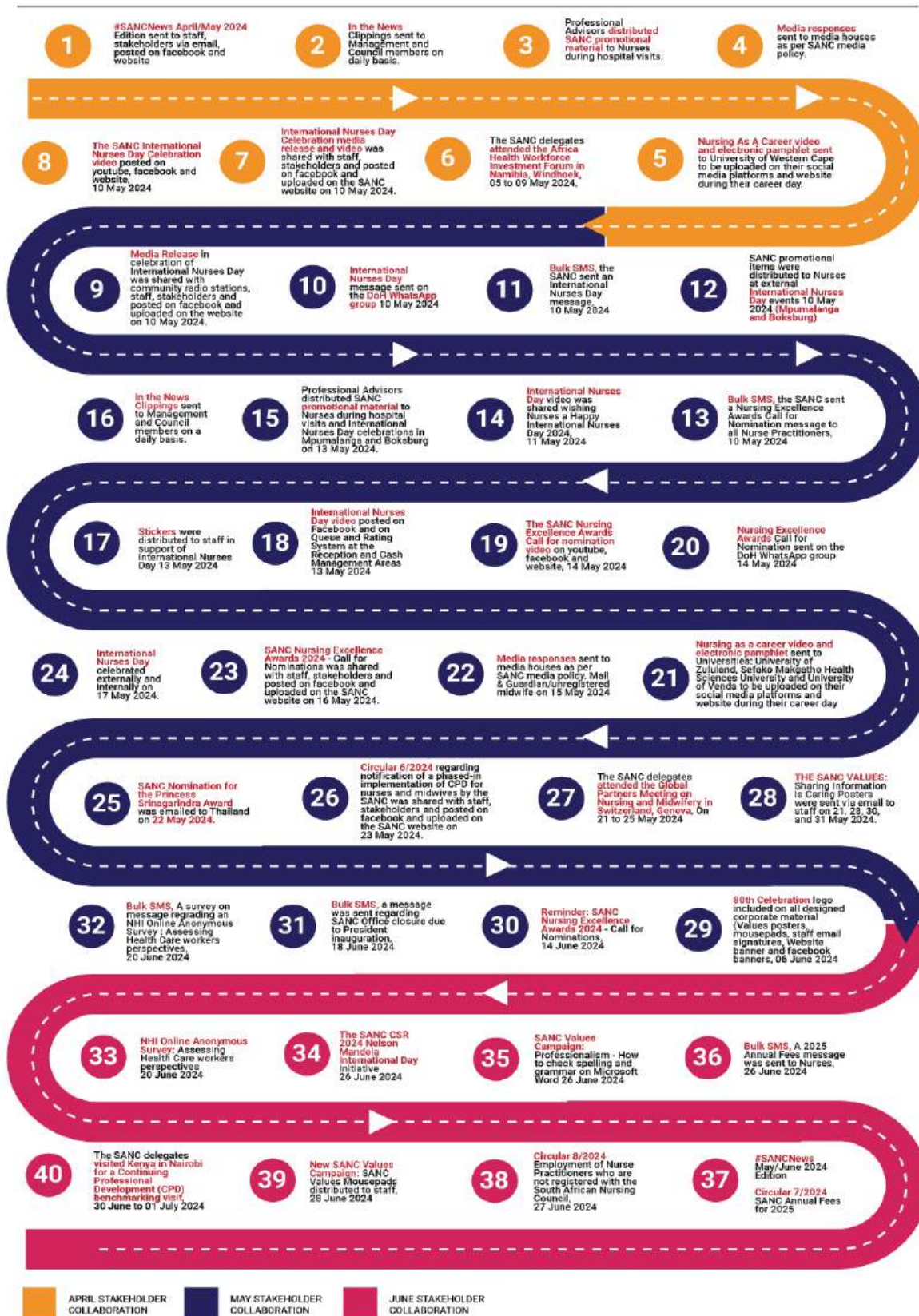
Stakeholder Relations and Collaboration Plan

The SANC Stakeholder Relations and Collaboration Plan was effectively executed in the year under review. The Plan provides a strategic approach to stakeholder relations and collaboration. It includes stakeholder engagement under King IV, the SANC Values applied to engagement, engagement principles, barriers to engagement, the SANC communication protocol and the SANC engagement process. The Plan was monitored quarterly as part of the Council's Annual Performance Plan (APP) monitoring and feedback was provided in the form of actual engagement that took place in particular quarters, by way of a roadmap as depicted in figure 11 on page 76:



Figure 11: Stakeholder Engagement Roadmap for Q1 of 2024/25:

Stakeholder Relations and Collaboration Plan - Q1 Progress Report



Social Media

The Annual Operational Plan and Stakeholder Relations and Collaboration Plan focussed on consistent communication with stakeholders via Facebook, emails, the SANC website, YouTube, videos, etc.

Facebook

The SANC Facebook page has 93 100 followers since the start of the page in 2020. For the 2024/25 Financial Year, the Facebook reach was 295 418 and 220 400 Facebook page visits were recorded.

SANC Website

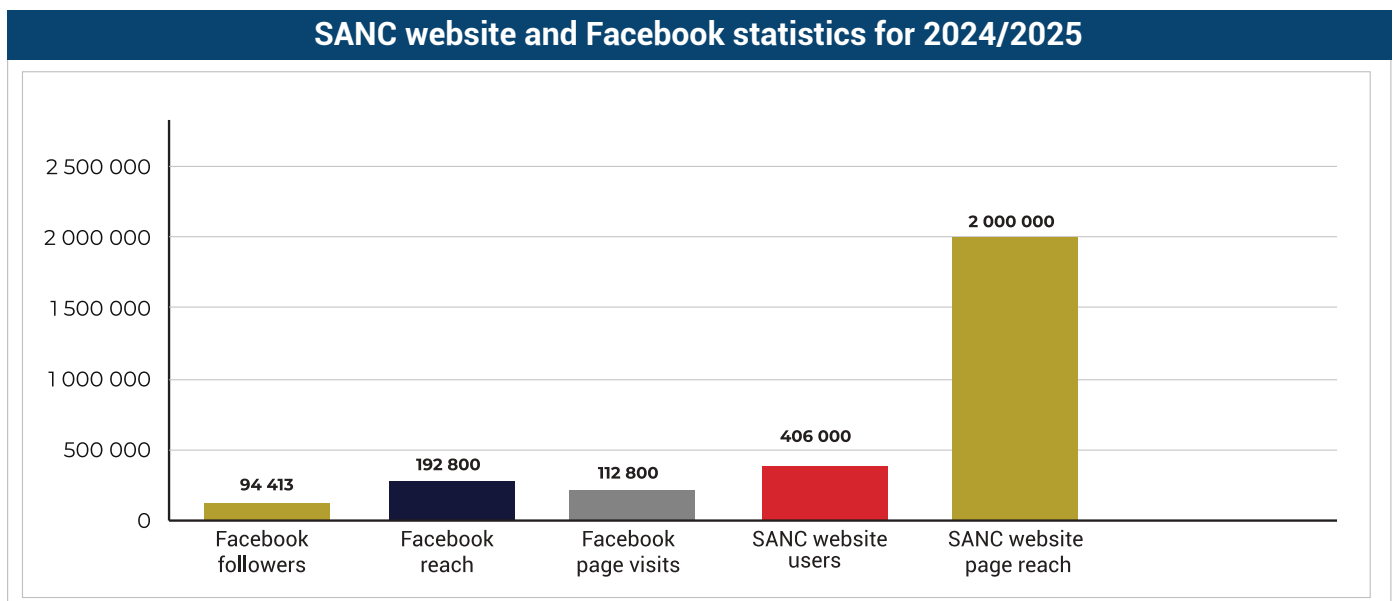
The SANC website, www.sanc.co.za reflected 406 000 users and 2 000 000 page views, with the average engagement time of 1 minute 07 seconds per session. The website is updated consistently and communication to stakeholders is shared on the website. Monthly analytical reports are distributed to management to monitor usage patterns and track the efficiency of the website.

YouTube

The SANC has its own YouTube channel, called SANCTV. SANCTV has 708 subscribers, and the videos are also flighted on the SANC's Facebook page and website.

The figure below shows social media statistics for the 2024/25 FY:

Figure 12: Social Media Statistics 2024/25 FY



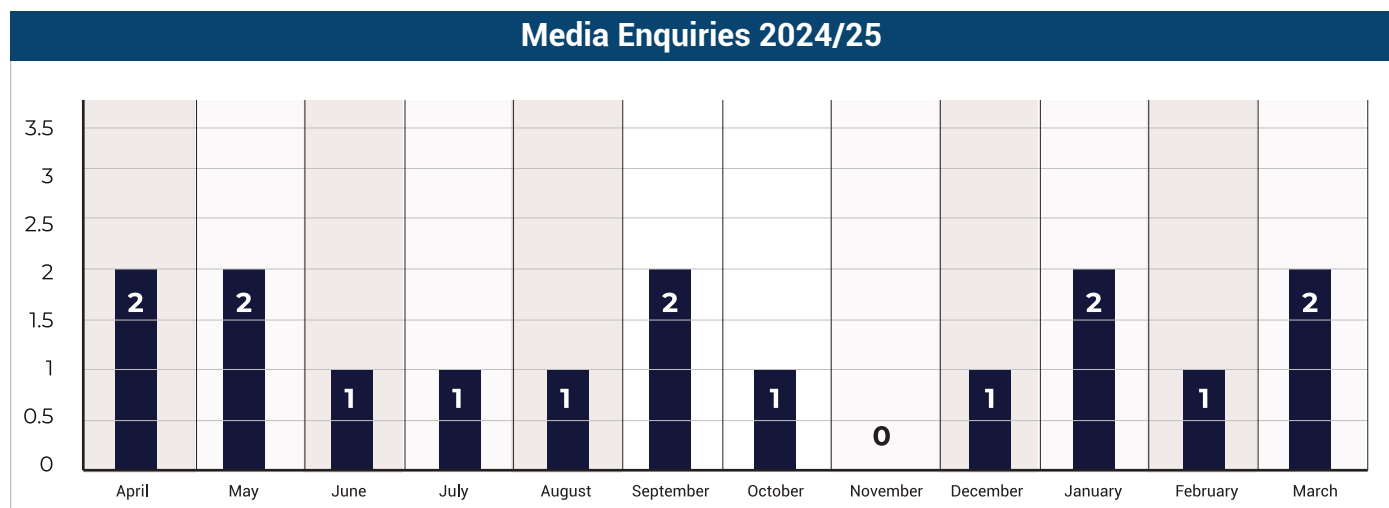
Media Engagement

The SANC's In-the-News is a daily email to members of Council and Management that tracks, monitors and highlights news coverage about the SANC, nursing and healthcare.

The SANC also consistently responds to media enquiries. From 01 April 2024 to 31 March 2025 sixteen media enquiries were received from the following media platforms: Health-e News, ETV, ENCA, Newsroom Afrika, Radio Riverside, News24, Pretoria FM, Rekord Newspaper, Spotlight, Mail & Guardian, Independent Online, and China Global Television.

The figure below demonstrates the media enquiries statistics for the 2024/25 FY.

Figure 13: 2024/2025 Media Enquiries statistics



Media Releases

Media releases issued in 2024/25 FY include:

- SA Nursing Council strongly condemns violence against Nurses
- Re-accreditation of Nursing Programmes for Chris Hani Baragwanath Nursing College
- SANC celebrating 80 years of self-regulation
- International Nurse's Day.

Circulars Issued

The SANC Circulars are formal communication to stakeholders and are often based on resolutions made by the Council. In 2024/25 the SANC issued 08 Circulars:

Table 47 below shows the circulars issued during the 2024/25 FY.

Table 47: SANC Circulars issued

Subject	Date Issued
Circular 13/2024 - South African Nursing Council year-end closure	06/12/2024
Circular 12/2024 Examination Schedule for 2025	03/12/2024
Circular 11/2024 SANC Year-End Closure 2024	31/10/2024
Circular 10/2024 Intention to discontinue the practice of printing APCs as proof of Nurse Practitioner's registration	28/08/2024
Circular 9/2024 Procedure for payments made by individual Nurse Practitioner	04/07/2024
Circular 8/2024 Employment of Nurse Practitioners who are not registered with the South African Nursing Council	26/06/2024
Circular 7/2024 Annual Fees for 2025	25/06/2024
Circular 6/2024 Notification of a phased-in implementation of CPD for nurses and midwives	22/05/2024

Newsletter

The SANC electronic newsletter, the #SANCnews is distributed every two months to stakeholders via email and is also shared on the SANC website and its Facebook page.



Roadshows

On the 12th and 14th of February 2025 the SANC hosted Registrar's roadshows in Kimberley and Bloemfontein as part of its Stakeholder Relations and Collaboration Plan 2024/25. The Roadshows' focus was to promote and maintain engagement with all stakeholders regarding nursing standards, and in particular standards of nursing education and training and professional conduct and practice.

Both roadshows had a total of 426 delegates in attendance. The format of the roadshows was presentations followed by questions and answers session with service desks in the foyer area allowing nurses to pay restoration fees, buy distinguishing devices, etc.

Corporate Social Responsibility (CSR)

The SANC hosted its **2024 Corporate Social Responsibility (CSR) campaign** in celebration of Nelson Mandela International Day on Thursday, 18 July 2024.

The SANC participated in 67 minutes of caring (also a SANC Value) by donating recyclable materials to Love Our City Klean (LOCK), a waste management start-up founded in 2016 based in the City of Johannesburg. LOCK's primary focus is creating awareness about the benefits of recycling and waste management. The donated recyclable material allows the community to earn points and redeem them to access food and other essential items.

External Surveys

The following external surveys were done via email and the SANC website:

- Client Service Survey: SANC Service Standards on 15 October 2024
- Survey: The SANC virtual Stakeholder Forum meeting hosted on 27 November 2024.

Partner and Governing Bodies

Through the office of the Registrar and CEO, or those designated by her, a number of high-profile engagements took place throughout the year. The table below depicts the partners and governing bodies engaged by the SANC during the 2024/25 FY.

Table 48: Partner and Governing Bodies Engagement 2024/25 FY

No.	STAKEHOLDER ENGAGEMENTS	AREA	DATE
1	WHO Africa Conference	Namibia, Windhoek	05 to 09 May 2024
2	NDoH International Nurses Day	Western Cape, Cape Town	12 to 13 May 2024
3	WHO Geneva Conference	Switzerland, Geneva	22 to 25 May 2024
4	CP Benchmarking with Kenya and Rwanda Nursing Councils	Kenya and Rwanda	31 to 05 July 2024
5	International Pharmaceutical Federation (FIP) in collaboration with the Pharmaceutical Society of South Africa, and the South African Pharmacy Council	Western Cape, Cape Town	03 to 04 September 2024
6	International Council of Nurses (ICN) Conference	Scotland, Aberdeen	07 to 13 September 2024
7	Annual Nurses Graduation	KwaZulu-Natal, KZNCON	19 to 20 September 2024
8	Africa Health Conference	Western Cape, Cape Town	24 to 26 October 2024
9	SADC Forum Signing Ceremony	Pretoria, Capital Hotel	08 November 2024
10	Curriculum development advisor Committee meeting	Zambia, Lusaka	11 to 16 November 2024
11	Universal Health Coverage Day 2024 Workshop	Pretoria East	12 December 2024

5.4.5 EVENT MANAGEMENT

The SANC organised two major events during the past FY:

SANC 80th Celebration

The South African Nursing Council celebrated 80 years of self-regulation (1944 – 2024) on 08 November 2024. The main event was hosted at The Capital Hotel Menlyn Maine, Pretoria East.

This major milestone was celebrated with the necessary formalities, attendance by current and previous Council members, key figures within healthcare, previous SANC staff members as well as some current SANC staff. Prior to the main event, a separate event was hosted for all SANC staff on the SANC premises.

The programme was preceded by a Guard of Honour and Bagpipe Player hosted by the Military Nurses, ushering in the formalities to the great delight of all guests while setting the stage for an event of note. The day's programme concluded with the unveiling of the 80th commemorative plaque and cutting of an 80th-shaped cake.

In the words of Council Chairperson, Dr MC Molepo:

"Today, we gather to honour our past, embrace our future and celebrate 80 unbelievable years of self-regulation. We do this with immense gratitude to the heart of the SANC: its nurses; its people."

A video of the SANC 80th event can be viewed on the SANC YouTube channel: [@sanc-tv](#), search for **SANC - 80th Birthday Commemoration** or via this link: www.youtube.com/watch?v=Q1aZBPkW2ds

Nursing Excellence Awards 2024

The 2024 NEA nominations closed on 15 July 2024 with 133 nominations for the six award categories:

- Cecilia Makiwane Award - Nursing Practice	: 77
- SANC Chairperson's Award	: Discretionary
- Student Community Development Award	: 7
- Henrietta Stockdale Award	: 7
- Nurse Researcher Award; and	: 9
- Lifetime Achievement Extra-Ordinary Service Award	: 33

A Council-appointed NEA Committee adjudicated the awards, and award recipients were informed and invited to the Nursing Excellence Awards dinner on 08 November 2024. The dinner was hosted on the same day as the SANC 80th celebration.



Part D

CORPORATE GOVERNANCE

6.1. GOVERNANCE FRAMEWORK

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

6.2. EXECUTIVE AUTHORITY

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

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

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

6.3. COMPANY SECRETARY

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

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

6.4. COUNCIL COMPOSITION

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

The Chairperson of the Council is appointed by the Minister of Health after consultation with the Council. The term of office for the Council is five years, which commenced on the 23rd of August 2023 and will end on the 22nd of August 2028.

Following the process of nomination by fellow practitioners, qualifying members are appointed by the Minister of Health in terms of Section 5 of the Nursing Act, 2005 (Act No. 33 of 2005) as shown in table 49 on page 83.



Members of the 16th and 17th Council during this year under review*Table 49: Category appointment of the Members of the 17th Council*

No	NAME AND SURNAME	DESIGNATION	APPOINTMENT CATEGORY
1.	Dr Moshibudi C. Molepo	Chairperson	Appointed in terms of Section 5 (1) (b) (i) of the Act
2.	Prof Deliwe R. Phetlhu	Vice-Chairperson	Appointed in terms of Section 5 (1) (b) (i) of the Act
3.	Prof Portia J. Jordan	Council Member	Appointed in terms of Section 5 (1) (b) (i) of the Act
4.	Prof Sibusiso M. Zuma	Council Member	Appointed in terms of Section 5 (1) (b) (i) of the Act
5.	Ms Lillian CBN Lioma	Council Member	Appointed in terms of Section 5 (1) (b) (i) of the Act
6.	Dr Sindisiwe Z. Mthembu	Council Member	Appointed in terms of Section 5 (1) (b) (i) of the Act
7.	Mr Sifiso V. Mkhathshwa	Council Member	Appointed in terms of Section 5 (1) (b) (i) of the Act
8.	Dr Mboniseni M. Mutepe	Council Member	Appointed in terms of Section 5 (1) (b) (i) of the Act
9.	Ms Patience Z. Khumalo-Ntamane	Council Member	Appointed in terms of Section 5 (1) (b) (i) of the Act
10.	Mr Tebogo R. Moeketsi	Council Member	Appointed in terms of Section 5 (1) (b) (i) of the Act
11.	Ms Masebina C. Ramokotjo	Council Member	Appointed in terms of Section 5 (1) (b) (i) of the Act
12.	Dr Elizabeth Kaye-Petersen	Council Member	Appointed in terms of Section 5 (1) (b) (i) of the Act
13.	Ms Refilwe E. Malatji	Council Member	Appointed in terms of Section 5 (1) (b) (i) of the Act
14.	Ms Mary M. Makgotlho	Council Member	Appointed in terms of Section 5 (1) (b) (i) of the Act
15.	Dr Mirriam Matandela	Council Member	Appointed in terms of Section 5 (1) (b) (i) of the Act
16.	Ms Trudy A. Kaseke	Council Member	Appointed in terms of Section 5 (1) (b) (ii) of the Act
17.	Mr Sifiso Shandu	Council Member	Appointed in terms of Section 5 (1) (b) (iii) of the Act
18.	Ms Jacqueline A. Maimin	Council Member	Appointed in terms of Section 5 (1) (b) (iv) of the Act
19.	Ms Nontuthezelo G. Zulu-Siwela	Council Member	Appointed in terms of Section 5 (1) (b) (v) of the Act
20.	Mr Lehlohonolo L. Rabotapi	Council Member	Appointed in terms of Section 5 (1) (b) (vi) of the Act
21.	Ms Sinenhlanhla T. Mthembu	Council Member	Appointed in terms of Section 5 (1) (b) (vii) of the Act
22.	Mr Mbulelo Tshofela	Council Member	Appointed in terms of Section 5 (1) (b) (vii) of the Act
23.	Mr Russell Rensburg	Council Member	Appointed in terms of Section 5 (1) (b) (vii) of the Act
24.	Ms Florence L. Kgatla	Council Member	Appointed in terms of Section 5 (1) (b) (viii) of the Act
25.	Mr Bhekithemba Mgwenya	Council Member	Appointed in terms of Section 5 (1) (b) (viii) of the Act

The SANC 17th Council has the following competencies within its composition:

- Nursing education specialists
- Community health specialist
- Primary health care specialists
- Occupational and mental health specialists
- Midwifery specialists
- Internal Audit Specialist
- ICT Specialists
- Finance and accounting specialists

17th Council: 2023-2028



Dr Moshibudi Molepo
Chairperson of the Council



Prof Deliwe Phetlhu
Vice-Chairperson of the Council;
Research Committee Chairperson



Prof Portia Jordan
Education Committee
Chairperson



Ms Trudy Kaseke
Laws, Practice and
Standards Committee
Chairperson



Dr Elizabeth Kaye-Petersen
CPD Committee Chairperson



Ms Patience Khumalo
Professional Conduct,
Committee Chairperson
NEA Chairperson



Ms Lillian Lioma
Communication and
Marketing Committee
Chairperson



Mr Bhekithemba Mgwenya
Human Resources and
Remuneration Committee
Chairperson



Ms Mavis Mutepe
Impairment Committee
Chairperson



Mr Lehlohonolo Rabotapi
ICT Governance Committee
Chairperson



Mr Russell Rensburg
Audit And Risk Committee
Chairperson



Mr Sifiso Shandu
Finance Committee
Chairperson



Dr Sibusiso Zuma
Preliminary Investigation
Committee Chairperson



Ms Lerato Kgatla



Ms Jacqueline Maimin



**Ms Mmadiepetsane
Makgotlho**



Ms Refilwe Malatji



Dr Mirriam Matandela



Mr Sifiso Mkhathswa



Mr Tebogo Moeketsi



Dr Sindisiwe Mthembu



Ms Sinenhlanhla Mthembu



Ms Masebina Ramokotjo



Mr Mbulelo Tshofela



**Ms Nontuthezelo
Zulu-Siwela**

6.5. COUNCIL COMMITTEES

Figure 14: The Council Structure

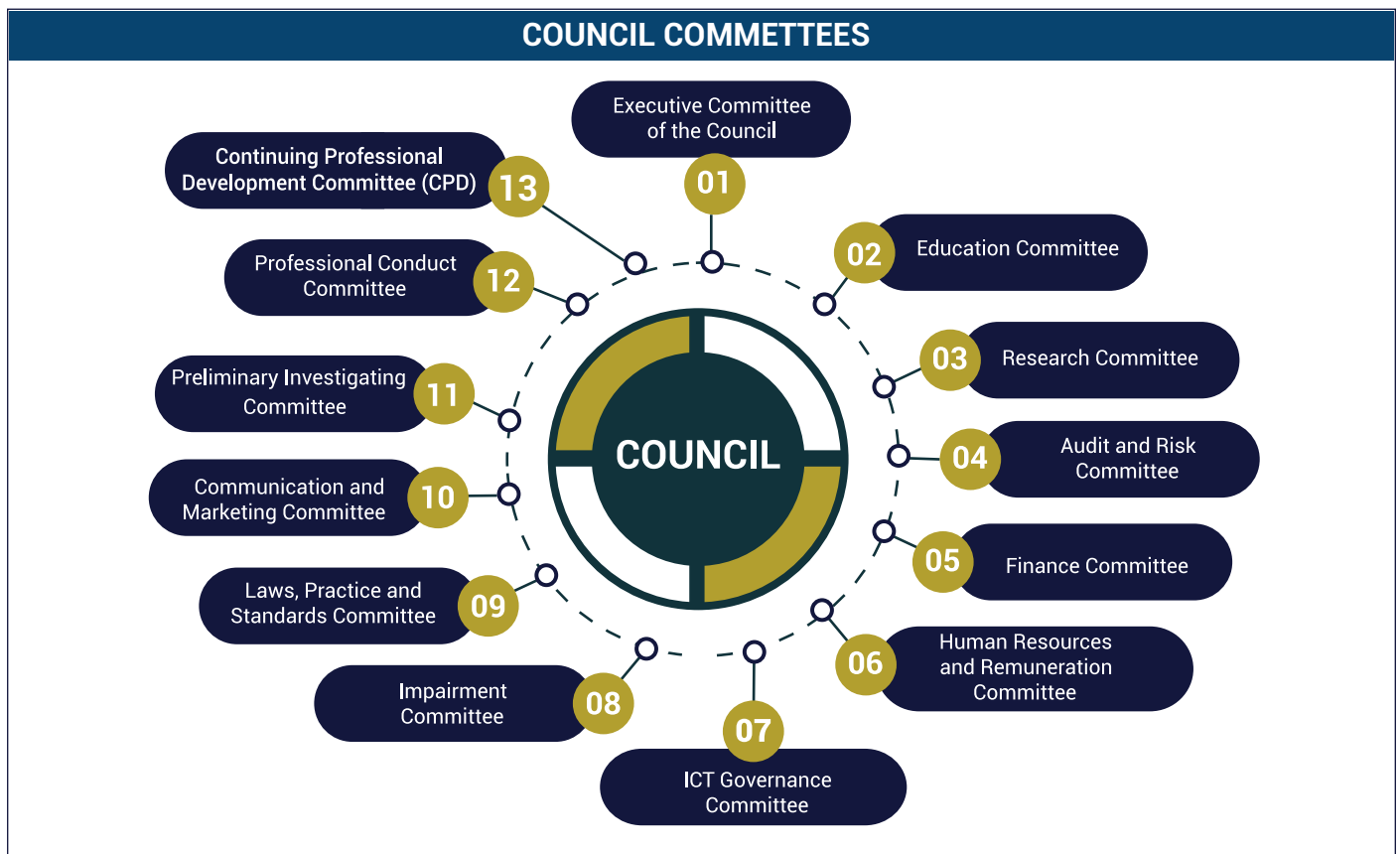


Figure 15: Gender profile of Council members

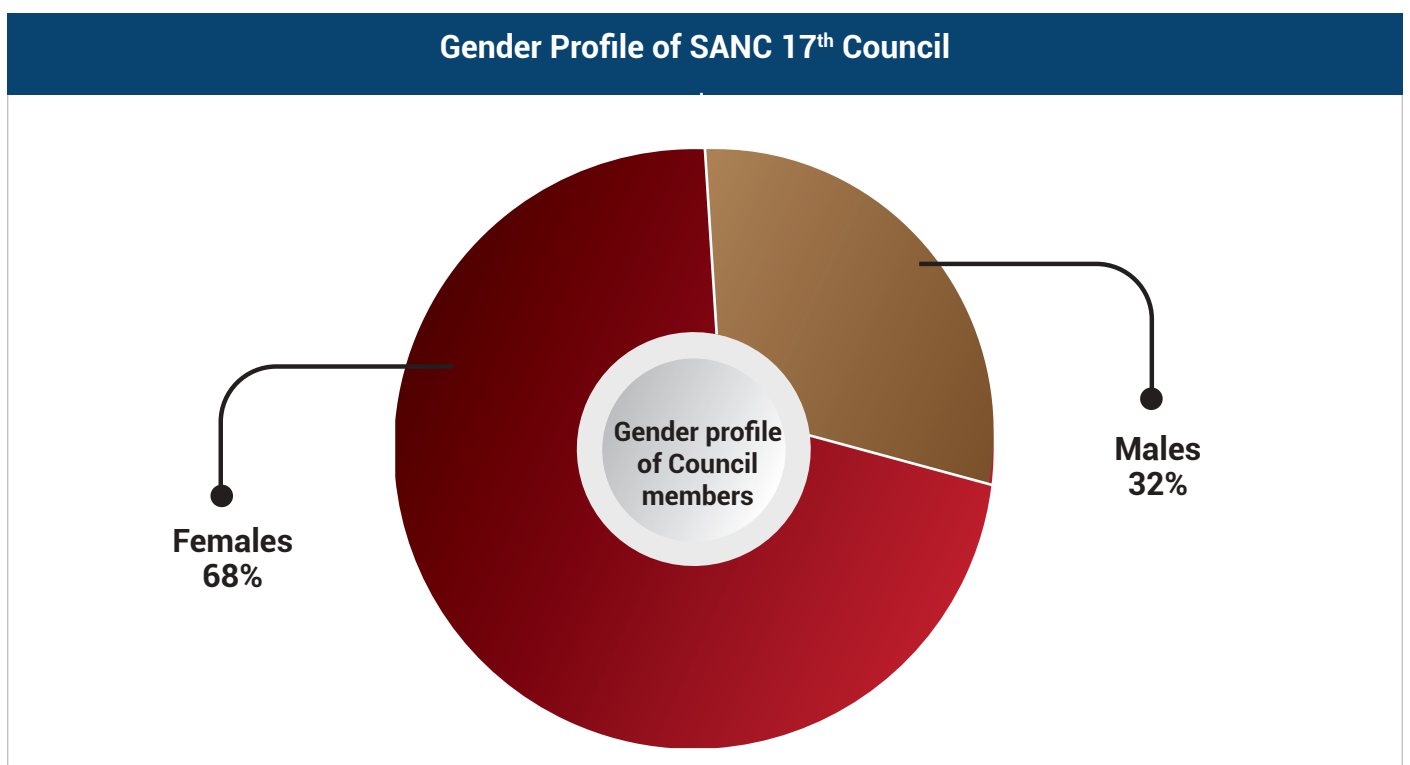
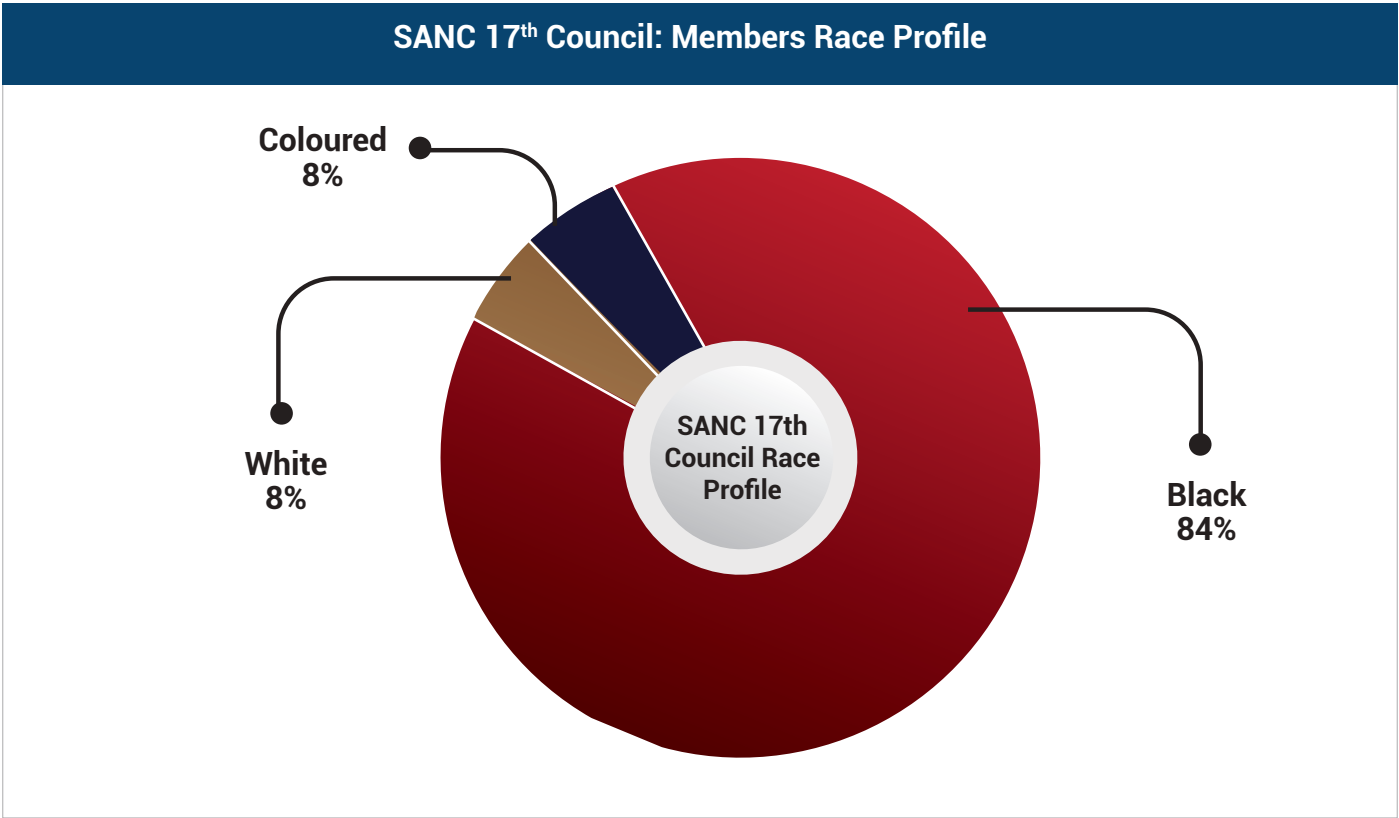


Figure 16: Racial profile of Council members



6.6. ATTENDANCE OF COUNCIL MEETINGS FROM 1 APRIL 2024 TO 31 MARCH 2025

The 2024/25 financial year was the first full financial year sitting of the 17th Council. Council held the following categories of meetings as shown in the table below:

Table 50: Council meetings held in 2024/2025 FY

Number of ordinary meetings	Number of special meetings	Total number of meetings	Total number of meeting days
4	5	9	13

Table 51 on page 87 illustrates the attendance of Council meetings by date from 1 April 2024 to 31 March 2025.

Table 51: Attendance of Council Meetings by date from 1 April 2024 to 31 March 2025

Meeting Type	Meeting Dates	Total No. of members in Attendance
Ordinary	04/04/2024	23
Ordinary	05/04/2024	23
Special	*25/04/2024	19
Ordinary	27/06/2024	23
Ordinary	28/06/2024	24
Special	*12/07/2024	18
Ordinary	29/07/2024	20
Ordinary	26/09/2024	18
Special	27/09/2024	19
Special	*03/10/2024	22
Special	29/11/2024	22
Ordinary	06/02/2025	23
Ordinary	07/02/2025	24

***Continuation of Ordinary/planned Special Council meetings**

During the year under review, the Council made considerable resolutions to impact the implementation of the approved organisational strategy and organisational oversight in line with the organisation's mandate. Key and notable decisions of the 17th Council in the 2024/25 financial year as recommended by various Council Committees were as follows:

- a. Extensive review of the SANC five-year Strategic Plan and the development of the 2025/26 financial year Annual Performance Plan
- b. Approval of the organisational structure and measures for implementation processes
- c. Approval of Council Evaluation policy and other key organisational policies which include:
 - i. SCM Policy
 - ii. ICT Digital Strategy
 - iii. Criteria for Recognition of CPD providers
 - iv. Language Policy
 - v. Communication Policy
 - vi. Social Responsibility Policy
 - vii. Criteria for the Nursing Excellence Awards.
- d. Development and approval of the SANC Colour Coded Reporting Standards to guide the assessment and reporting of performance on SANC programmes.
- e. During the reporting period, the Council also advanced efforts to finalise key organisational documents, such as
 - i. The Revenue Recovery and Enhancement Strategy
 - ii. Conditions of Service
 - iii. HR policies including the Leave Management Policy, Bursary Policy, the Learning and Development Policy and the organisational PayScale Design.

6.7. COUNCIL COMMITTEES

6.7.1. EXECUTIVE COMMITTEE

The Executive Committee (EXCO) of Council is established in terms of Section 14 of the Nursing Act, 2005 (Act No. 33 of 2005). EXCO may, subject to the directives of the Council, exercise all the powers, other than a power referred to in Chapter 3 of the Act, and may perform all the functions of the Council during periods between meetings of the Council.

EXCO Composition

The Act explicitly determines the membership of the Committee based on the category of appointment onto the Council. The composition of the Committee during the 2024/25 financial year was as shown on table 52 below:

Table 52: EXCO Composition

No.	MEMBER	DESIGNATION	SECTION OF THE NURSING ACT	NOTE
1	Dr M Molepo	Chairperson	Section 14(1)(a)	
2	Prof D Phetlhu	Vice-Chairperson	Section 14(1)(b)	
3	Prof P Jordan	Committee Member	Section 14(1)(c) - three persons appointed in terms of section 5(1)(a) - registered in terms of section 31(1)(a) and (b) appointed by the Minister of Health taking into account their expertise in nursing education, nursing, community health, primary health care, occupational health and mental health; and	S14(2) – to be elected by the Council
4	Ms M Ramokotjo	Committee Member		
5	Prof S Zuma	Committee Member		
6	Dr M Matandela	Committee Member	Section 14(1)(d) - a person appointed in terms of section 5(1)(b)(i) - Official from the National Department of Health	
7	Mr S Shandu	Committee Member	Section 14(1)(e) - a person appointed in terms of section 5(1)(b)(iii) - Special knowledge of financial matters	
8	Mr M Tshofela	Committee Member	A person appointed in terms of section 5(1)(b)(vii) - must represent communities	S14(2) – to be elected by the Council

Meeting Attendance Statistics

The table below shows the Executive Committee Meetings.

Table 53: Executive Committee Meetings: 2024/25 FY

Number of ordinary meetings	Number of special meetings	Total number of meetings	Total number of meeting days
3	1	4	4

The below table depicts the Committee Meeting Attendance

Table 54: Committee Meeting Attendance

Total number of Committee members	8
Required attendance of quorum	5

The below table shows the member's attendance at Executive Committee Meetings during the 2024/2025 FY.

Table 55: Members' attendance at Executive Committee Meetings: 2024/2025 FY

Executive Committee Meeting Dates				
Meeting Type	Ordinary	Ordinary	Special	Ordinary
Meeting Dates	31/05/2024	23/08/2024	21/02/2025	31/03/2025
Total No. in Attendance	8	7	5	6

Key Committee Achievements: 2024/2025 FY

During the year under review, the Committee engaged on matters within their mandate and considered and made the following key recommendations for the organisation:

- Improvement of SANC ICT infrastructure to deter criminally charged activities from occurring in the future, related to APCs.
- Engaged on the facilitation of the process of the consolidation of two SANC properties. The consolidation process afforded the SANC to create a safe and easily accessible parking space for both the profession and staff.
- Considered and interrogated the arrangements regarding the Nursing Practice/Task Analysis for the purpose of Licensure Examination to enable the implementation of the Professional Entrance Exam (PEE) for nurse practitioners who have completed the normal study of a nursing programme.
- Considered and finalised the performance moderation of its Executive and Senior Management to maintain staff excellence and motivation, and to assess that the existing leadership's performance was in alignment with the long-term strategic objectives of the SANC. This is in alignment to the SANC principles of a capable and competent leadership.

6.7.2. PROFESSIONAL CONDUCT COMMITTEE (PCC)

The Committee is established to ensure that a transparent and fair process is followed in the enquiry into allegations of nursing practitioners who are accused of misconduct or unprofessional conduct and that in doing so, the public interest is protected as enshrined within Section 3 of the Nursing Act, 2005 (Act No. 33 of 2005).

The Committee had the following membership for 2024/25 FY as depicted in the table on page 90.

Table 56: Professional Conduct Committee membership

No.	Council Member	Designation
1.	Ms PZ Khumalo-Ntamane	Committee Chairperson
2.	Ms MM Makgotlho	Vice Chairperson
3.	Ms JA Maimin	Committee Member
4.	Mr SV Mkhathswa	Committee Member
5.	Dr MM Mutepe	Committee Member
6.	Ms MC Ramokotjo	Committee Member

Meeting Attendance Statistics

The table below shows the Professional Conduct Committee meetings.

Table 57: Professional Conduct Committee Meetings

Number of ordinary meetings	Number of special meetings	Total number of meetings	Total number of meeting days
5	1	5	21

The table below shows the Professional Conduct Committee membership attendance.

Table 58: Professional Conduct Committee Membership Attendance

Total number of Committee members	6
Required attendance of quorum	4

The below table shows Members' attendance at PCC Meetings during the 2024/2025 FY

Table 59: Members' attendance at PCC Meetings: 2024/2025 FY

Meeting Type	Meeting Dates	Total No. of members in Attendance
Special	23/04/2024	5
Ordinary	13/05/2024	7
	14/05/2024	7
	15/05/2024	7
	16/05/2024	7
Ordinary	08/07/2024	7
	09/07/2024	5
	10/07/2024	7
	11/07/2024	7
Ordinary	09/09/2024	7
	10/09/2024	6
	11/09/2024	7
	12/09/2024	7
Ordinary	11/11/2024	5
	12/11/2024	5
	13/11/2024	5
Ordinary	03/03/2025	6
	04/03/2025	6
	05/03/2025	5
	06/03/2025	5
	07/03/2025	6



6.7.3. IMPAIRMENT COMMITTEE

The Committee is established to fulfil the mandate of the Council in terms of the Nursing Act, 2005 (Act No. 33 of 2005) to:

- Conduct inquiries into alleged unfitness to practice due to disability or impairment in terms of Section 51 of the Act and the relevant regulations; and
- Assist and support the practitioners and students referred to the Committee.

Committee Composition

The below table depicts the Impairment Committee membership

Table 60 Impairment Committee membership

No.	Council Member	Designation
1.	Dr M Mutepe	Chairperson
2.	Mr T Moeketsi	Vice-Chairperson
3.	Mr B Mgwenya	Committee Member
4.	Dr S Mthembu	Committee Member

Meeting Attendance Statistics

The table below shows the number of Impairment Committee meetings held during the 2024/25 FY.

Table 61: Impairment Committee Meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
4	4	0	8

The below table shows the Impairment Committee membership attendance

Table 62: Impairment Committee Membership Attendance

Total number of Committee members	4
Required attendance of quorum	3

The below table shows the attendance at Impairment Committee meetings in the 2024/2025 FY

Table 63: Attendance of Impairment Committee Meetings in the 2024/2025 FY

Impairment Committee Meetings					
Meeting Type	Ordinary				
Meeting Dates	02/05/2024	03/05/2024	01/08/2024	02/08/2024	17/10/2024
Total No. in Attendance	4	4	4	4	4

Key Committee Achievements: 2024/2025 FY

The Impairment Committee strives to support nurse practitioners on the recovery journey through various interventions, including financial assistance in line with the financial assistance policy. Through the Registrar's Roadshows, the Impairment programme is emphasised as not intended to be a punitive process, but endeavours to ensure that nurse practitioners provide quality care to their patients while being mentally and physically fit to do so.

During the year under review, key successes of the Committee were notable as follows:

- a. Maximising support to nurse practitioners engaged with identified stakeholders for purposes of collaborating in the provision of support through services sharing such as the use of various specialists (multi-disciplinary Team) to ensure that the support provided to nurse practitioners was not compromised. The collaboration efforts were further extended to universities that had shown great enthusiasm to be involved in the initiative for the betterment of nurse practitioners.
- b. The Committee is a progressive structure that is constantly engaged in improving its strategic endeavours. An Impairment Management benchmarking process was successfully completed with the Health Professions Council of South Africa (HPCSA) and the South African Pharmacy Council (SAPC).

6.7.4. LAWS, PRACTICE AND STANDARDS COMMITTEE

- a. The Laws Committee was established by the Council to provide a framework to regulate the practice, capacity (roles), capability (competence), performance, and conduct of practising nurses/ midwives in South Africa in such a manner that quality nursing services are provided to the public.
- b. The Committee reinforces the following objects of the Council, but not limited to:
 - i. Maintaining practice standards for practitioners with the ambit of any applicable laws;
 - ii. Advising the minister through the Council on the amendment or adaptation of the Nursing Act regarding matters pertaining to nursing.

Table 64 below shows the Laws, Practice and Standards Committee composition.

Table 64: Committee Composition

No.	17 th Council	Designation
1.	Ms TA Kaseke	Chairperson
2.	Dr M Matandela	Vice-Chairperson
3.	Dr E Kaye-Petersen	Committee Member
4.	Ms M Makgotlho	Committee Member
5.	Ms R Malatji	Committee Member
6.	Ms M Ramokotjo	Committee Member

Meeting Attendance Statistics

The below table depicts the Laws, Practice and Standards Committee Meetings

Table 65: Laws, Practice and Standards Committee Meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
4	4	0	8

The below table depicts the Laws, Practice and Standards Committee membership attendance

Table 66: Laws, Practice and Standards Committee Membership Attendance

Total number of Committee members	6
Required attendance of quorum	4

The table below shows the attendance of Laws, Practice and Standards Committee meetings during the 2024/2025 FY

Table 67: Attendance of Laws, Practice and Standards Committee Meetings in the 2024/2025 FY

Meeting Type	Ordinary		Ordinary		Ordinary		Ordinary	
Meeting Dates	06/05/2024	07/05/2024	05/08/2024	06/08/2024	05/11/2024	06/11/2024	17/03/2025	18/03/2025
Total No. in Attendance	6	6	5	5	5	4	6	6

Key Committee Achievements: 2024/2025 FY

- a) The Committee reviewed and gazetted the following Regulations:
 - Regulations relating to unfitness to practice due to impairment of persons registered in terms of the Nursing Act, 2005 (Act No. 33 of 2005);
- b) Additionally, the following were considered and finalised by the Committee:
 - Consideration of inputs and/or comments received on published private regulations
 - Guidelines for issuing permits to professional nurses in terms of clause 22A(15) by a task team led by the South African Pharmacy Council (SAPC)
 - Draft Operating Theatre Inspection tool; and
 - Successfully developed Nursing Practice Standards.
- c) The Committee in its advocacy for the nursing profession achieved the submission of the list of all the nursing sub-specialities to be sent to the Board of Healthcare Funders to advise that nurse practitioners are classified according to their sub-specialities instead of classifying them as general nurses.

6.7.5. CONTINUING PROFESSIONAL DEVELOPMENT (CPD) COMMITTEE

The CPD Committee is a sub-Committee of the Laws, Practice and Standards Committee.

The mandate of the Committee is aligned to Section 39 of the Act. The Committee is established to ensure rollout of the CPD phased-in pilot project. As part of its responsibilities, the Committee is required to:

- Determine conditions, nature and extent of CPD to be undergone by practitioners;
- Determine the criteria for recognition by Council of CPD activities and accreditation of institutions; and
- Standardise data collection and reporting systems by provinces and institutions with regards to CPD.

The table below shows the Continuing Professional Development Committee (CPD) composition.

Table 68: Continuing Professional Development Committee Composition

No.	Council Member	Designation
1.	Dr E Kaye-Petersen	Chairperson
2.	Ms M Ramokotjo	Vice-Chairperson
3.	Ms M Makgotlho	Committee Member

Meeting Attendance Statistics

The table below shows the CPD Committee Meetings for the financial year under review.

Table 69: CPD Committee Meetings: 2024/25 FY

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

The below table shows the CPD membership attendance.

Table 70: CPD Membership Attendance

Total number of Committee members	3
Required attendance of quorum	3

The below table shows the CPD Committee meetings during the 2024/2025 FY.

Table 71: CPD Committee Meetings in the 2024/2025 FY

CPD Committee Meetings				
Meeting Type	Ordinary	Ordinary	Ordinary	Ordinary
Meeting Dates	19/04/2024	15/07/2024	14/10/2024	17/02/2025
Total No. in Attendance	3	3	3	3

Continuing Professional Development Committee Highlights: 2024/2025 FY

The Council views professional development as important because it has the potential to open opportunities for career advancement, such as promotions and additional related certifications. Additionally, it assists in honing existing skills and for nurse practitioners to learning new skills.

- a. The CPD Committee has from the commencement of 2024/2025 financial year, successfully rolled out the CPD Pilot programme and concurrently started with the implementation of the CPD Phased in approach in all provinces across South Africa including Private Health Establishments: Mediclinic, Netcare, Life Healthcare and Clinix Health Group.

6.7.6. EDUCATION COMMITTEE

The primary mandate of the EDCO Committee is to:

- a. Review written accreditation applications submitted by institutions intending to conduct a nursing education and training programme in order to prepare persons for practice in any one of the nursing categories
- b. conduct inspections and investigations of nursing education institutions, nursing education programmes and health establishments, in order to ensure compliance with the Nursing Act, 2005 (Act No. 33 of 2005) and the rules and standards determined by the Council in terms of this Act;
- c. monitor the assessment by education and training providers, including the recognition of prior learning, register constituent assessors and moderators and grant diplomas and certificates in accordance with the requirements of this Act and any other law;

Table 72 below shows the Education Committee composition.

Table 72: Committee Composition

No.	Council member	Designation
1.	Prof PJ Jordan	Chairperson
2.	Dr SZ Mthembu	Vice-Chairperson
3.	Ms NG Zulu-Siwela	Committee Member
4.	Dr E Kaye-Petersen	Committee Member
5.	Dr M Matandela	Committee Member
6.	Prof SM Zuma	Committee Member

Meeting Attendance Statistics

The table below shows the Education Committee meetings.

Table 73: Education Committee Meetings

Number of ordinary meetings	Number of special meetings	Total number of meetings	Total number of meeting days
4	0	4	8

The table below shows the Education Committee membership attendance.

Table 74: Education Committee Membership Attendance

Total number of Committee members	6
Required attendance of quorum	4

The table below shows the Education Committee Meetings during the 2024/25 FY.

Table 75: Education Committee Meetings in the 2024/2025 FY

Meeting Type	Ordinary		Ordinary		Ordinary		Ordinary	
Meeting Dates	09/05/2024	10/05/2024	21/08/2024	22/08/2024	21/11/2024	22/11/2024	27/03/2025	28/03/2025
Total No. in Attendance	5	5	4	4	5	4	6	6

Key Committee Achievements: 2024/2025 FY

- a) The Committee successfully convened an Education Workshop to discuss the way forward on the Professional Entrance Examination (PEE). The following Nursing Education Institutions were invited to share their experiences with the Committee on the PEE:
 - i. Mpumalanga College of Nursing; and
 - ii. Netcare Education.
- b) The increase in capacity with external curriculum evaluators was expedited by the Committee to fast-track the evaluation of curricula for NEIs and to increase the rate of quality control inspections to avoid interruptions in the provision of programmes in an academic year.

6.7.7. PRELIMINARY INVESTIGATING COMMITTEE

The PIC is established as a Committee of Council to ensure that a transparent and fair process is followed in the enquiry into allegations of nursing practitioners who are accused of misconduct or unprofessional conduct and that in doing so, the public interest is protected as enshrined within Section 3 of the Nursing Act, 2005. The table below depicts the Committee composition:

Table 76: Committee Composition: 2024/25 FY

No.	Council member	Designation
1.	Prof SM Zuma	Chairperson
2.	Ms RE Malatji	Vice-Chairperson
3.	Prof DR Phetlhu	Committee Member
4.	Ms ST Mthembu	Committee Member
5.	Ms FL Kgatla	Committee Member

Meeting Attendance Statistics

The below table shows the Preliminary Investigating Committee meetings.

Table 77: Preliminary Investigating Committee Meetings

Total number of meetings	Number of ordinary meetings	Number of special meetings	Total number of meeting days
4	4	0	8

Table 78 below shows the Preliminary Investigating Committee membership attendance.

Table 78: Preliminary Investigating Committee membership attendance

Total number of Committee members	5
Required attendance of quorum	3

The below table shows the attendance of Preliminary Investigating Committee meetings during the period under review.

Table 79: Attendance of Preliminary Investigating Committee meetings in the 2024/2025 FY

Preliminary Investigating Committee Meetings						
Meeting Type	Ordinary	Ordinary	Ordinary	Ordinary	Ordinary	Ordinary
Meeting Dates	03/06/2024	04/06/2024	04/09/2024	05/09/2024	30/10/2024	31/10/2024
Total No. in Attendance	5	5	4	4	4	4

Key Committee Achievements: 2024/2025 FY

- a) The Preliminary Investigating Committee was proactive in the implementation of its mandate, and identified the following concerning trends:
 - i. Understaffing in maternity units. The understaffing trend was reported to the Council and health establishments were identified for research purposes to establish the root causes.
 - ii. Concern regarding abuse of mental health care users. The Committee engaged on the possibility of developing mental health care standards that would regulate the standards and quality of care provided to mental health care users.
 - iii. The Committee was successful in its identification of the use of Enrolled Nurses and Enrolled Nursing Auxiliaries as Anaesthetic nurses, which opened up a debate and further exploration of training requirements for ENs and ENAs.
- b) The Committee successfully submitted abstracts to the East Central and Southern African College of Nursing Conference (ECSACON), which was hosted in Lesotho from 11 to 13 September 2024.
- c) Through PIC, the Council submitted and presented two abstracts at the East, Central and Southern Africa College of Nursing (ECSACON) Conference held in Lesotho on 11-13 September 2024.

6.7.8. RESEARCH COMMITTEE

The Mandate of the Research Committee is closely aligned to the National Research Agenda.

The Committee is established to oversee the scientific review of research proposals in order to ensure that only well-designed and scientifically sound research is submitted and approved. The Committee also guides the development of the SANC's strategic research priorities and objectives and monitors research performance within the framework of the SANC's Strategic Plan. The table below shows the Research Committee composition:

Table 80: Committee Composition

No.	Council Member	Designation
1.	Prof DR Phetlhu	Chairperson
2.	Prof PJ Jordan	Vice-Chairperson
3.	Dr SZ Mthembu	Committee Member
4.	Ms NG Zulu-Siwela	Committee Member

Meeting Attendance Statistics

The table below shows the Research Committee meetings.

Table 81: Research Committee meetings

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

The below table shows the Research Committee membership attendance

Table 82: Research Committee membership attendance

Total number of Committee members	4
Required attendance of quorum	3

The below table shows the Research Committee meetings during the 2024/2025 FY

Table 83: Research Committee meetings in the 2024/2025 FY

Research Committee Meetings			
Meeting Type	Ordinary	Ordinary	Ordinary
Meeting Dates	10/06/2024	23/09/2024	14/03/2025
Total No. in Attendance	3	3	4

Key Committee Achievements: 2024/2025 FY

The Research Committee developed and is in the process of implementing the SANC Research Agenda with the aim of sharing it with the South African public/community.

6.7.9. INFORMATION AND COMMUNICATION TECHNOLOGY (ICT) GOVERNANCE COMMITTEE

The Committee is mandated by the Council to promote and support the effective use of information and communications technology (ICT) across the organisation. The Committee is also tasked with improving alignment between ICT and business strategy, and accountability for ICT decisions in five critical areas: investments, projects, risk, services, and data. The table on page 100 shows the ICT Governance Committee composition:

The table below shows the ICT Governance Committee composition:

Table 84: Committee Composition

No.	Member Details	Designation
1.	Mr L Rabotapi	Chairperson
2.	Mr S Shandu	Vice-Chairperson
3.	Prof D Phetlhu	Committee Member
4.	Mr S Mkhathshwa	Committee Member
5.	Dr C Motau	External Independent Member
6.	Mr L Ndaba	External Independent Member

Meeting Attendance Statistics

The below table shows the ICT Governance Committee Meetings.

Table 85: ICT Governance Committee Meetings

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

The table below shows the ICT Governance Committee membership attendance.

Table 86: ICT Governance Committee Membership Attendance

Total number of Committee members	6
Required attendance of quorum	4

The below table shows attendance of ICT Governance Committee.

Table 87: Attendance of ICT Governance Committee in the 2024/2025 FY

ICT Governance Committee Meetings				
Meeting Type	Ordinary	Ordinary	Ordinary	Ordinary
Meeting Dates	06/06/2024	08/08/2024	18/11/2024	24/02/2025
Total No. in Attendance	6	4	5	5

Key Committee Achievements: 2024/2025 FY

- a) The SANC through its ICT Governance Committee, is excited to report the successful appointment of the service provider for the long-awaited Management Membership System (MMS). This system is anticipated to bridge the divide between the SANCs manual processes and online processes.
- b) The MMS will manage nurse practitioners' membership and will enable the SANC to integrate and automate its critical tasks. The MMS is envisaged to:
 - i. Simplify the interaction between the SANC and nurse practitioners;
 - ii. The payment of annual practice fees will be done at a click of button,
 - iii. NEIs will be able to electronically interface with the SANC.

6.7.10. HUMAN RESOURCES AND REMUNERATION COMMITTEE (HRRC)

The Human Resources and Remuneration Committee (HRRC)'s primary objectives is to assist the Council in fulfilling its oversight responsibility in relation to areas related to human resources and remuneration which includes the following:

- i. Ensuring that there is appropriate human capital and resources for the optimal functioning of the Council;
- ii. Providing oversight function and advisory services to guide the effective implementation of identified strategic focus areas of the SANC;
- iii. Ensuring that decisions taken at the Council level are in support of the effective and efficient implementation of policies and programmes of the Human Resources Department.

The below table shows the HRRC composition.

Table 88: HRRC Composition

No.	Council Member	Designation
1.	Mr B Mgwenya	Committee Chairperson
2.	Ms ST Mthembu	Vice-Chairperson
3.	Mr LL Rabotapi	Committee Member
4.	Ms LCBN Lioma	Committee Member
5.	Mr R Rensburg	Committee Member
6.	Mr C Marais	Independent Members
	Prof S Singh	Independent Members

Meeting Attendance Statistics

The below table shows the HRRC Committee meetings.

Table 89: HRRC Meetings

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

The table below shows the HRRC membership attendance.

Table 90: HRRC Membership Attendance

Total number of Committee members	7
Required attendance of quorum	4

The below table shows the HRRC meetings during the 2024/2025 FY.

Table 91: HRRC meetings in the 2024/2025 FY

HRRC MEETINGS					
Meeting Type	Ordinary	Special	Ordinary	Ordinary	Ordinary
Meeting Dates	07/06/2024	09/07/2024	02/09/2024	28/11/2024	25/03/2025
Total No. in Attendance	7	5	7	5	6

Key Committee Achievements: 2024/2025 FY

Human resources is a critical aspect for the progressive functioning of any organisation, and the SANC is no exception. The HRRC successfully facilitated the approval of the SANC's organisational structure by the Council to ensure the continued functionality of the SANC. The approved organisational structure has aided in the following:

- Implementation of efficient decision-making processes;
- Imposition of a moratorium on the filling of administrative clerk positions;
- The shaping of work is organised, coordinated, and managed within an SANC; and
- Provide a framework for allocating resources, making decisions, and achieving strategic objectives effectively.

6.7.11. AUDIT AND RISK COMMITTEE

The Committee's obligations is to provide independent oversight of the external and internal audit processes, risk management, combined assurance, ethics, compliance with laws and regulations, and to provide an oversight role to ensure the integrity of reports relating to the roles and responsibilities of the Committee. The table below shows the Audit and Risk Committee composition.

Table 92: Committee Composition

No.	Member Details	Designation
1.	Mr R Rensburg	Chairperson
2.	Ms N Ngema	Vice-Chairperson, Independent Member
3.	Mr M Tshofela	Committee member
4.	Ms TA Kaseke	Committee Member
5.	Ms ZL Ngwepe	Independent member
6.	Mr KJ Sello	Independent member

Meeting Attendance Statistics

The below table shows the Audit and Risk Committee Meetings

Table 93: Audit and Risk Committee Meetings

Number of ordinary meetings	Number of special meetings	Joint ARC and FINCO	Total number of meetings	Total number of meeting days
4	2	2	6	8

Table 94 below shows the Audit and Risk Committee membership attendance.

Table 94: Audit and Risk Committee Membership Attendance

Total number of Committee members	6
Required attendance of quorum	4

Table 95 below shows the attendance of Audit and Risk Committee meetings during the 2024/2025 FY

Table 95: Attendance of Audit and Risk Committee Meetings in the 2024/2025 FY

Meeting Type	Special	Ordinary	Special	Ordinary	Ordinary	Ordinary
Meeting Dates	22/04/2024	24/05/2024	11/06/2024	26/08/2024	26/11/2024	26/03/2025
Total No. in Attendance	4	5	5	4	5	5

Key Committee Achievements: 2024/2025 FY

- The Audit and Risk Committee during the year under review ensured the appointment of external auditors for a period of five years. The external auditors provide an objective and independent opinion on the financial affairs of the Council.
- The Committee, in conjunction with the Finance Committee, was responsible for the vetting of the SANC 2023/24 FY Financial Statements.

6.7.12. FINANCE COMMITTEE

The Finance Committee is tasked with providing oversight on financial and tax-related matters of the organisation. This entails recommending financial policies, goals and budgets that support the mission, values, and outcomes of the SANC.

The Committee is mandated to:

- Review the organisation's financial performance against its targets.
- Ensure that the SANC is financially sound, viable and sustainable; and complies with all the applicable financial legislation and standards.

The below table shows the Finance Committee composition.

Table 96: Committee Composition

No.	Member Details	Designation
1.	Mr S Shandu	Chairperson
2.	Ms JA Maimin	Vice-Chairperson
3.	Prof PJ Jordan	Council Members
4.	Mr TR Moeketsi	Council Members
5.	Mr S Maharaj	Independent Member

Meeting Attendance Statistics

The below table shows the Finance Committee meetings.

Table 97: Finance Committee Meetings

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

The table below shows the Finance Committee Membership attendance.

Table 98: Finance Committee Membership Attendance

Total number of Committee members	5
Required attendance of quorum	3

The below table shows attendance of Finance Committee meetings in the 2024/2025 FY

Table 99: Attendance of Finance Committee meetings in the 2024/2025 FY

FINANCE COMMITTEE MEETINGS				
Meeting Type	Ordinary	Ordinary	Ordinary	Ordinary
Meeting Dates	12/06/2024	30/08/2024	01/11/2024	19/03/2025
Total No. in Attendance	5	5	4	3

Key Committee Achievements: 2024/2025 FY

The Finance Committee was instrumental in the approval of funding for the International Business Machines (IBM) Nurse Register Server Replacement by Council. This system is responsible for ensuring that nurse records are safely stored at the SANC premises in accordance with the Nursing Act, 2005 (Act No. 33 of 2005), S19(1) which requires that the SANC keeps the registers of practitioners and must on the instruction of the Council enter in the appropriate register the name, physical address, qualifications, date of registration and such other particulars.

6.7.13. COMMUNICATION AND MARKETING COMMITTEE

The Committee is mandated by the Council to promote a positive image of the SANC and ensure effective and auditable governance of communication and marketing matters within the organisation in line with relevant provisions of the Act, as well as ensure effective, accurate, and timeous communication with all the relevant SANC stakeholders.

The table below shows the Communication and Marketing Committee composition.

Table 100: Communication and Marketing Committee Composition

No.	Member Details	Designation
1.	Ms LCBN Lioma	Chairperson
2.	Mr TR Moeketsi	Vice-Chairperson
3.	Ms NG Zulu-Siwela	Committee member
4.	Ms FL Kgatla	Committee Member
5.	Mr B Mgwenya	Committee Member

Meeting Attendance Statistics

The table below shows the Communication and Marketing Committee meetings.

Table 101: Communication and Marketing Committee Meetings

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

The table below shows the Communication and Marketing Committee membership attendance.

Table 102: Communication and Marketing Committee Membership Attendance

Total number of Committee members	5
Required attendance of quorum	3

The table below shows the Communication and Marketing Committee meetings.

Table 103: Attendance of Communication and Marketing Committee Meetings

Communication and Marketing Committee Meeting				
Meeting Type	Ordinary	Ordinary	Ordinary	Ordinary
Meeting Dates	27/05/2024	16/08/2024	25/11/2024	24/03/2025
Total No. in Attendance	5	5	5	5

Key Committee Achievements: 2024/2025 FY

The Committee reviewed its policies during the year under review as follows:

- i. SANC Marketing and Branding Policy
- ii. Events Management Policy
- iii. Corporate Social Responsibility Policy.

6.7.14. NURSING EXCELLENCE AWARDS AD HOC COMMITTEE

The Nursing Excellence Awards is an ad hoc Committee of Council established for a period of two years at a time to oversee and manage the SANC awards process, ensuring fairness, transparency, and the proper recognition of nurse practitioners who have contributed positively to the profession.

The Nursing Excellence Awards concept strives to contribute towards nurse practitioner staff morale and motivation. The Committee composition for the Nursing Excellence Awards Ad hoc Committee is shown in table 107 below.

Table 104: Committee Composition

No.	Member Details	Designation
1.	Ms PZ Ntamane-Khumalo	Chairperson
2.	Mr L Rabotapi	Vice-Chairperson
3.	Mr S Mkhathshwa	Committee Member
4.	Prof S Zuma	Committee Member
5.	Dr M Mutepe	Committee Member

Meeting Attendance Statistics

The table below shows Nursing Excellence Awards Ad Hoc Committee meetings.

Table 105: Nursing Excellence Awards Ad Hoc Committee Meetings

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

The table below shows the Nursing Excellence Awards Ad Hoc Committee membership attendance.

Table 106: Nursing Excellence Awards Ad Hoc Committee Membership Attendance

Total number of Committee members	5
Required attendance of quorum	3

The table below shows the Nursing Excellence Awards Ad Hoc Committee meetings during the 2024/2025 FY

Table 107: Nursing Excellence Awards Ad Hoc Committee Meetings in the 2024/2025 FY

Nursing Excellence Awards Ad Hoc Committee Meetings				
Meeting Type	Ordinary	Ordinary	Ordinary	Ordinary
Meeting Dates	07/05/2024	07/08/2024	06/09/2024	09/10/2024
Total No. in Attendance	5	5	5	5

Key Committee Achievements: 2024/2025 FY

- a) The Committee successfully hosted the 2nd Nursing Excellence Awards on 08 November 2024. The awarded categories were as follows:
 - i. The Cecilia Makiwane Award: Nursing Practice: Most prestigious award;
 - ii. The Chairperson's award;
 - iii. The Student Community Development Award: Clinical and practical all-rounder;
 - iv. The Henrietta Stockdale Award: Education and Training Award aimed at NEIs; and
 - v. The Nurse Research Award: Awarded to any SANC registered nurse who publishes their research.
- b) The Committee submitted a nominee for the 2024 Princess Srinagarindra Award in Thailand, in its effort to strengthen collaborations with international Nursing Councils.





Part E

FINANCIAL

INFORMATION

South African Nursing Council General Information

Annual Financial Statements for the year ended 31 March 2025

Country of incorporation and domicile	South Africa
Nature of business and principal activities	Regulation body that sets, maintains and regulates standards of nursing education and nursing practice in the Republic of South Africa.
Registered office	602 Pretorius Street Arcadia Pretoria 0083
Postal address	Private Bag X 132 Pretoria 0001
Auditors	MNB Chartered Accountants Registered Auditors
Company Secretary	Ms Mapula Hlaba (appointed on 01 June 2024)
Level of assurance	These annual financial statements have been audited in compliance with the applicable requirements of the Nursing Act, 2005 (Act No. 33 of 2005).
Preparer/Compiler	The annual financial statements were internally compiled by the Senior Manager Finance, Mr Thulani Shabane.
Supervised by	The annual financial statements were prepared under the direction and supervision of the Chief Financial Officer, Mr Tumelo Mokoena.

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

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Statement of Financial Performance	120
Statement of Changes in Equity	121
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The following supplementary information does not form part of the annual financial statements and is unaudited:	
Detailed Income Statement	151-152

The Councillors have pleasure in submitting their report on the annual financial statements of the South African Nursing Council for the year ended 31 March 2025.

1. Nature of business

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

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

2. Review of financial results and activities

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

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

3. Councillors

17th Council Members

Dr MC Molepo (Chairperson)
Prof DR Phetlhu (Vice-Chairperson)
Prof PJ Jordan
Ms TA Kaseke
Dr E Kaye-Petersen
Ms FL Kgatla
Ms PZ Khumalo-Ntamane
Ms LCBN Lioma
Ms JA Maimin
Ms MM Makgotlho
Ms RE Malatji
Dr M Matandela
Mr B Mgwenya
Mr SV Mkhathswa
Mr TR Moeketsi
Dr SZ Mthembu
Ms ST Mthembu
Ms MM Mutepe
Mr LL Rabotapi
Ms MC Ramokotjo
Mr R Rensburg
Mr S Shandu
Mr M Tshofela
Ms NG Zulu-Siwela
Prof SM Zuma

4. Going Concern

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

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

5. External Auditors

MNB Chartered Accountants were appointed during the year for a five year term that begin on 2024/25 financial year.

We are pleased to present our report for the financial year ended 31 March 2025.

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

COMPOSITION AND ATTENDANCE OF COMMITTEE MEETINGS

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

The Audit and Risk Committee Charter provides for the Committee to meet at least four times per annum. The Committee held four (4) ordinary meetings and four (4) special meetings during the financial year.

The composition of the Committee and the attendance of meetings by its members for the 2024/25 financial year are set out below:

NAME OF MEMBER	MEMBERSHIP	NUMBER OF MEETINGS ATTENDED	TERM OF OFFICE EXPIRY
Mr R Rensburg	Council member (Chairperson)	8	22 August 2028
Ms N Ngema	Independent external member(Vice-Chairperson)	5	09 November 2026
Ms TA Kaseke	Council member	8	22 August 2028
Mr N Tshofela	Council member	7	22 August 2028
Ms Z Ngwepe	Independent external member	5	09 December 2026
Mr KJ Sello	Independent external member	7	17 March 2025 (his appointment has been extended until 31 December 2025)

RESPONSIBILITIES OF THE AUDIT AND RISK COMMITTEE

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

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

EXTERNAL AUDIT

MNB Chartered Accountants is responsible for performing the external regulatory audit function for the 2024/25 financial year. The Audit and Risk Committee has satisfied itself that the audit firm and designated auditor are in good standing with the Independent Regulatory Board for Auditors.

The Audit and Risk Committee is satisfied with the independence and objectivity of the external auditors, including the consideration of the auditor's previous appointments, the extent of other work undertaken, and compliance with criteria relating to independence or conflict of interest as prescribed by the Independent Regulatory Board for Auditors.

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

INTERNAL AUDIT

The Audit and Risk Committee is responsible for ensuring that the Internal Audit function is independent and has the necessary resources, standing and authority within the organisation to enable it to fulfil its duties. The internal audit function is capacitated through a co-source model.

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

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

ENTERPRISE-WIDE RISK MANAGEMENT

The Audit and Risk Committee supports the Council with its governance responsibility for the effective management of risk within the organisation.

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

The Audit and Risk Committee monitored the implementation of risk management strategies and their effectiveness in addressing risks. Management continues to improve the organisations risk maturity through the implementation of various strategies to manage the risk exposure of the SANC.

THE EFFECTIVENESS OF INTERNAL CONTROLS

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

An assessment of internal and external audit findings indicates that while controls are in place some weaknesses were identified in other areas of the business and the control environment requires improvement.

Management has committed to taking the necessary measures to address the control weaknesses identified by internal and external auditors. The implementation of the management action plans is monitored on a quarterly basis and reported as such to the Council.

EVALUATION OF AUDITED ANNUAL FINANCIAL STATEMENTS

The Audit and Risk Committee has:

- Reviewed and discussed the audited annual financial statements to be included in the annual report, with the external auditors and the Registrar and CEO;
- Reviewed the external auditor's management letter and management's response thereto; and
- Reviewed adjustments resulting from the audit after the 2024/25 audit was finalised.

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

We would like to thank the Council, the Executive Management Team and staff for their support throughout the year. Special appreciation goes to the Internal Audit team and MNB Chartered Accountants for their support and professionalism in the performance of their mandates.

Russell Rensburg

Mr R Rensburg

Chairperson of the Audit and Risk Committee

Independent Auditor's Report

To the Councillors of the South African Nursing Council

Opinion

We have audited the financial statements of South African Nursing Council (SANC) set out on pages 119 to 150, which comprise the statement of financial position as at 31 March 2025; and the statement of comprehensive income; the statement of changes in equity; and the statement of cash flows for the year then ended; and notes to the financial statements, including material accounting policy information.

In our opinion, the financial statements present fairly, in all material respects, the financial position of South African Nursing Council as at 31 March 2025, and its financial performance and cash flows for the year then ended, in accordance with International Financial Reporting Standards (IFRS) Accounting Standards as issued by the International Accounting Standards Board and the requirements of the Nursing Act of South African (Act No. 33 of 2025).

Basis for Opinion

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

Other matter

We draw attention to the matter below. Our opinion is not modified in respect of this matter.

Previous period audited by a predecessor auditor

The annual financial statements were audited by Nexia SAB&T Incorporated, who issued an unqualified opinion on 31 July 2024.

Other Information

The council members are responsible for the other information. The other information comprises the information included in the document titled "South African Nursing Council's Financial Statements for the year ended 31 March 2025", which includes the Councillors' Report and the

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Audit and Risk Committee Report and the Detailed Income Statement. The other information does not include the financial statements and our auditor's report thereon.

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

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

Responsibilities of the Council Members for the Financial Statements

The council members are responsible for the preparation and fair presentation of the financial statements, in accordance with IFRS Accounting Standards as issued by the International Accounting Standards Board and the requirements of the Nursing Act of South African (Act No. 33 of 2025), and for such internal control as the council members determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

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

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

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

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

Report on Other Legal and Regulatory Requirements

In terms of the IRBA Rule published in Government Gazette Number 39475 dated 4 December 2015, we report that MNB Chartered Accountants has been the auditor of SANC for 1 years.

MNB Chartered Accountants Inc.

MNB Chartered Accountants

Cathrine Itumeleng Makhubela

Director

Registered Auditor

31 July 2025

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		2025	2024
	Note(s)	R	Restated R
ASSETS			
Non-Current Assets			
Property, plant and equipment	2	56 970 544	57 044 413
Right-of-use assets	28	245 141	514 694
Intangible assets	3	2 405 308	1 129 716
Other financial assets	4	1 299 602	1 103 806
		60 920 595	59 792 629
Current Assets			
Inventories	5	1 848 767	1 618 140
Trade and other receivables	6	8 057 196	14 800 698
Cash and cash equivalents	7	877 166 186	816 408 421
		887 072 149	832 827 259
Total Assets		947 992 744	892 619 888
EQUITY AND LIABILITIES			
EQUITY			
Reserves	9	77 650 755	77 454 961
Retained income		791 293 012	737 453 429
		868 943 767	814 908 390
LIABILITIES			
Non-Current Liabilities			
Lease liabilities	29	-	621 166
Retirement benefit obligation	10	22 648 000	19 691 000
		22 648 000	20 312 166
Current Liabilities			
Trade and other payables	11	11 935 473	12 756 305
Lease liabilities	29	336 756	-
Deferred income	12	43 133 529	43 719 503
Employee benefit obligation	13	995 219	923 524
		56 400 977	57 399 332
Total Liabilities		79 048 977	77 711 498
Total Equity and Liabilities		947 992 744	892 619 888

		2025	2024
	Note(s)	R	Restated R
Revenue	14	172 905 731	165 198 635
Other operating income	15	1 209 392	1 370 648
Operating expenses		(182 363 521)	(167 681 381)
Net (deficit) surplus from operations	16	(8 248 398)	(1 112 098)
Investment income	17	67 914 725	66 360 728
Interest expense	18	(2 050 013)	(2 142 516)
Net Surplus for the year		57 616 314	63 106 114
Other comprehensive income:			
Items that will not be reclassified to profit or loss:			
Remeasurements on net defined benefit liability/asset	10	(3 776 731)	2 117 206
Fair Value Through Other Comprehensive Income	4	195 794	173 425
Revaluation surplus	9	-	3 028 236
Total items that will not be reclassified to profit or loss		(3 580 937)	5 318 867
Other comprehensive income for the year		(3 580 937)	5 318 867
Total comprehensive income		54 035 377	68 424 981

	Revaluation reserve	Reserve for valuation of investments	Total reserves	Retained income	Total equity
	R	R	R	R	R
Opening balance as previously reported	73 633 749	619 551	74 253 300	668 201 640	742 454 940
Adjustments					
Prior period errors-Deferred income cleared to revenue. Note 26.	-	-	-	4 028 469	4 028 469
Balance at 01 April 2023 as restated	73 633 749	619 551	74 253 300	672 230 109	746 483 409
Surplus for the year	-	-	-	63 106 114	63 106 114
Other comprehensive income	3 028 236	173 425	3 201 661	2 117 206	5 318 867
Total comprehensive income for the year	3 028 236	173 425	3 201 661	65 223 320	68 424 981
Balance at 01 April 2024 restated	76 661 985	792 976	77 454 961	737 453 429	814 908 390
Surplus for the year	-	-	-	57 616 314	57 616 314
Other comprehensive income	-	195 794	195 794	(3 776 731)	(3 580 937)
Total comprehensive income for the year	-	195 794	195 794	53 839 583	54 035 377
Balance at 31 March 2025	76 661 985	988 770	77 650 755	791 293 012	868 943 767

Note(s)

9

	Note(s)	2025 R	2024 Restated R
Cash flows from operating activities			
Cash receipts from customers		174 286 420	163 860 806
Cash paid to suppliers and employees		(172 583 175)	(154 980 290)
Cash generated from operations	19	1 703 245	8 880 516
Interest income	17	67 521 286	65 938 681
Dividends received	17	73 189	54 271
Interest paid	18	(44)	(1 185)
Interest paid-Lease liability	18	(54 969)	-
Net cash from operating activities		69 242 707	74 872 283
Cash flows from investing activities			
Purchase of property, plant and equipment	2	(3 809 943)	(4 280 023)
Proceeds from disposal of property, plant and equipment		-	37 346
Acquisition of intangible assets	3	(1 575 858)	(207 448)
Net cash utilised by investing activities		(5 385 801)	(4 450 125)
Cash flows from financing activities			
Cash repayments on lease liabilities	29	(284 410)	(292 524)
Net payments on defined benefit obligations	10	(2 814 731)	(2 791 794)
Net cash from financing activities		(3 099 141)	(3 084 318)
Total cash movement for the year		60 757 765	67 337 840
Cash and cash equivalent at the beginning of the year		816 408 421	749 070 581
Cash and cash equivalents at the end of the year	7	877 166 186	816 408 421

Material accounting policy information

Basis of preparation

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

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

1.1 Material judgements and key sources of estimation uncertainty

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

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

Prior year comparatives

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

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

Calculation of expected credit loss (ECL)

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

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

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

Defined benefit obligations

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

1.2 Financial instruments

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

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

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

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

Financial assets which are equity instruments:

- Designated as at fair value through other comprehensive income.

Financial assets which are debt instruments:

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

Financial liabilities:

- Amortised cost

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

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

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

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

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

Trade and other receivables

Classification

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

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

1.2 Financial instruments (continued)

Recognition and measurement

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

They are subsequently measured at amortised cost.

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

Impairment

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

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

Measurement and recognition of expected credit losses

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

Write off policy

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

Credit risk

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

Investments in equity instruments

Classification

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

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

Recognition and measurement

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

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

1.2 Financial instruments (continued)

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

Impairment

Investments in equity instruments are not subject to impairment provisions.

Trade and other payables

Classification

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

Recognition and measurement

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

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

The effective interest method is a method of calculating the amortised cost of a financial liability and of allocating interest expense over the relevant period.

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

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

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

Offsetting

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

Cash and cash equivalents

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

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

1.3. New Standards and Interpretations

1.3.1 Standards and interpretations effective and adopted in the current year

In the current year, the Council did not adopt new standards and interpretations that are effective for the current financial year and that are relevant to its operations

1.4 Revenue

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

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

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

1.5 Property, plant and equipment

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

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

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

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

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

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

1.5 Property, plant and equipment (continued)

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

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

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

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

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

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

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

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

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

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

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

1.6 Intangible assets

An intangible asset is recognised when:

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

1.6 Intangible assets (continued)

Intangible assets are initially recognised at cost.

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

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

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

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

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

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

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

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

Item	Useful life
Computer software	10 years

1.7 Inventories

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

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

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

1.8 Impairment of non-financial assets

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

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

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

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

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

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

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

1.9 Employee benefits

Short-term employee benefits

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

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

Defined contribution plans

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

Defined benefit plans

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

For defined benefit plans the cost of providing the benefits is determined using the projected unit credit method. Actuarial valuations are conducted on an annual basis by independent actuaries.

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

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

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

1.10 Leases

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

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

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

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

Council as lessee

A lease liability and corresponding right-of-use asset are recognised at the lease commencement date, for all lease agreements for which the Council is a lessee, except for short-term leases of 12 months or less, or leases of low value assets.

Details of leasing arrangements where the Council is a lessee are presented in note 28 Leases (Council as lessee).

Lease liability

The lease liability is initially measured at the present value of the lease payments that are not paid at the commencement date, discounted by using the rate implicit in the lease. If this rate cannot be readily determined, the Council uses its incremental borrowing rate.

Lease payments included in the measurement of the lease liability comprise the following:

- fixed lease payments, including in-substance fixed payments, less any lease incentives;
- variable lease payments that depend on an index or rate, initially measured using the index or rate at the commencement date;
- the amount expected to be payable by the Council under residual value guarantees;
- the exercise price of purchase options, if the Council is reasonably certain to exercise the option;
- lease payments in an optional renewal period if the Council is reasonably certain to exercise an extension option; and
- penalties for early termination of a lease, if the lease term reflects the exercise of an option to terminate the lease.

Variable rents that do not depend on an index or rate are not included in the measurement of the lease liability (or right-of-use asset). The related payments are recognised as an expense in the period incurred and are included in operating expenses (note 28).

The lease liability is presented as a separate line item on the Statement of Financial Position.

The lease liability is subsequently measured by increasing the carrying amount to reflect interest on the lease liability (using the effective interest method) and by reducing the carrying amount to reflect lease payments made. Interest charged on the lease liability is included in interest paid (note 18).

Right-of-use assets

Right-of-use assets are presented as a separate line item on the Statement of Financial Position.

Right-of-use assets are subsequently measured at cost less accumulated depreciation and impairment losses.

Right-of-use assets are depreciated over the shorter period of lease term and useful life of the underlying asset. However, if a lease transfers ownership of the underlying asset or the cost of the right-of-use asset reflects that the Council expects to exercise a purchase option, the related right-of-use asset is depreciated over the useful life of the underlying asset. Depreciation starts at the commencement date of a lease.

For right-of-use assets which are depreciated over their useful lives, the useful lives are determined consistently with items of the same class of property, plant and equipment. Refer to the accounting policy for property, plant and equipment for details of useful lives.

The residual value, useful life and depreciation method of each asset are reviewed at the end of each reporting year. If the expectations differ from previous estimates, the change is accounted for prospectively as a change in accounting estimate. Each part of a right-of-use asset with a cost that is significant in relation to the total cost of the asset is depreciated separately.

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

1.11 Provisions and contingencies

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

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

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

Provisions are not recognised for future operating losses.

If an entity has a contract that is onerous, the present obligation under the contract shall be recognised and measured as a provision.

After their initial recognition contingent liabilities recognised in business combinations that are recognised separately are subsequently measured at the higher of:

- the amount that would be recognised as a provision; and
- the amount initially recognised less cumulative amortisation.

Contingent assets are possible assets whose existence will be confirmed by the occurrence or no-occurrence of uncertain future events that are not wholly within the control of the entity. However, when the inflow of benefits is virtually certain an asset is recognised in the statement of financial position, because is no longer considered to be contingent.

Contingent assets and liabilities are not recognised. Contingent liabilities are disclosed in note 20. and Contingent assets in note 27.

2. Property, plant and equipment

	2025		2024	
	Cost or revaluation	Accumulated depreciation	Cost or revaluation	Accumulated depreciation
Land	15 710 000	-	15 710 000	-
Buildings	34 737 557	(2 431 268)	33 190 000	-
Office equipment and furniture	22 175 340	(17 699 571)	21 741 801	(19 116 407)
Motor vehicles	973 594	(908 488)	973 594	(767 439)
IT equipment	15 034 877	(10 621 497)	13 814 595	(8 501 731)
Total	88 631 368	(31 660 824)	85 429 990	(28 385 577)
				57 044 413

Figures in Rand	2025	2024
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2. Property, plant and equipment (continued)

Reconciliation of property, plant and equipment - 2025

	Opening balance	Additions	Disposals	Change in accounting estimate	Change in useful life	Depreciation	Total
Land	15 710 000	-	-	-	-	-	15 710 000
Buildings	33 190 000	1 547 556	-	-	-	(2 431 267)	32 306 289
Office equipment and furniture	2 625 394	970 873	-	(537 334)	386 972	1 029 864	4 475 769
Motor vehicles	206 155	-	-	-	(43)	(141 006)	65 106
IT equipment	5 312 864	1 291 514	(12 168)	-	(601 544)	(1 577 286)	4 413 380
	57 044 413	3 809 943	(12 168)	(537 334)	(214 615)	(3 119 695)	56 970 544

Reconciliation of property, plant and equipment - 2024

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

	2025 R	2024 R
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2. Property, plant and equipment (continued)

Changes in estimates

The Council reassesses the useful lives and residual values of items of Council at the end of each reporting period, in line with the accounting policy and IAS 16 Property, plant and equipment. These assessments are based on historic analysis, benchmarking, and the latest available and reliable information.

During the year, the Council revised the estimated useful life of certain IT equipment, Motor vehicle, Equipment and furniture with an average useful lives of three years from the beginning of the financial year. This change in accounting estimate has been applied prospectively, resulting in a decrease in depreciation expense in the current year. The impact on prior periods was not material and therefore not disclosed.

The Council procured Office equipment (Landline phones and related systems) during 2023/24 financial year with limited information that was available at the time best estimate was used to determine the cost of the asset and the asset was therefore raised through an accrual. The procurement of this asset was subsequently approved by the Executive Committee of the Council and was also retified by full Council. The service provider provided the final invoice which the cost was different from the initial estimate. The accounting standard IAS16 states that when assets are raised through an accrual in a prior year and then reversed in the current year, the reversal is treated as a change in accounting estimate under IAS 8. This means the reversal is accounted for prospectively, starting from the current year, and doesn't affect prior year period financials. The Council has complied with the accounting standard when reversing this asset, refer to the above note for details.

Other information

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

Land and buildings are revalued every three years and the last revaluation was done on 31 March 2024.



Figures in Rand

	2025	2024
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3. Intangible assets

	2025	2024
Cost / Valuation	Accumulated amortisation and impairment	Accumulated amortisation and impairment
Asset under construction	(3 992 268)	(3 992 268)
Application Systems	(1 799 368)	(1 499 101)
Total	(5 791 636)	(5 491 369)

Reconciliation of intangible assets - 2025

	Opening balance	Additions	Transfers	Amortisation	Total
Asset under construction	207 448	-	(207 448)	-	-
Application Systems	922 268	1 575 858	207 448	(300 266)	2 405 308
	1 129 716	1 575 858	-	(300 266)	2 405 308

Reconciliation of intangible assets - 2024

	Opening balance	Additions	Amortisation	Total
Asset under construction	-	207 448	-	207 448
Application Systems	1 117 647	-	(195 379)	922 268
	1 117 647	207 448	(195 379)	1 129 716

	2025 R	2024 R
3. Intangible assets (continued)		
Note on intangible assets		
Intangible assets relate to purchased applications software such as Canon Document Management System, Sage 300 ERP, Modern Asset Cloud and Caseware amongst others.		
4. Other financial assets		
Designated at fair value through other Comprehensive Income		
Sanlam Limited	927 297	777 584
Level 1 listed on the Johannesburg Stock Exchange-11 206 shares in Sanlam Limited quoted at R82.75.		
Old Mutual PLC	132 233	131 566
Level 1 listed on the Johannesburg Stock Exchange-11 112 shares in Old Mutual PLC quoted at R11.90.		
Old Mutual bonus shares Quilter	110 932	80 270
Level 1 Listed on the Johannesburg Stock Exchange-3 174 ordinary Quilter PLC shares quoted at R34.95.		
Nedbank bonus shares	129 140	114 386
Level 1 listed on the Johannesburg Stock Exchange-502 shares in Nedbank quoted at R257.25.		
	1 299 602	1 103 806

© Listed shares traded on a stock exchange

Financial assets at fair value through OCI consist of listed shares and are recognised at fair value, which is the quoted market value of the shares at 31 March 2025 on the JSE and is equal to the carrying amount.

Reconciliation of fair value adjustment-other financial assets		
Sanlam Limited	149 713	145 902
Old Mutual PLC	667	444
Old Mutual bonus shares Quilter	30 660	5 527
Nedbank bonus shares	14 754	21 552
	195 794	173 425

5. Inventories

Distinguishing devices	1 897 066	1 666 439
Provision for slow moving inventory	1 897 066 (48 299)	1 666 439 (48 299)
	1 848 767	1 618 140

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

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

During the current financial year, R2 756 548 (2024: R2 384 907) was incurred as an expense relating to the procurement of inventory items.

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

	2025 R	2024 R
6. Trade and other receivables		
Trade receivables	470 335	471 155
Other receivables	1 265 506	942 196
Impairment loss-PAYE asset	(428 991)	(428 991)
Prepayments	5 497 038	5 761 904
Deposits	7 924	7 924
VAT asset	1 022 531	2 679 000
Advances on credit cards	280 758	515 581
Escrow Payment	-	4 909 834
Less expected credit loss allowance	(57 905)	(57 905)
Trade receivables at amortised cost	8 057 196	14 800 698
Total trade and other receivables	8 057 196	14 800 698

The expected credit loss allowance has not moved and this amount relates to a legacy balance where the Council rendered a service to clients who paid with cheques that were dishonoured by the bank. The lifetime expected loss provision for trade receivables is as follows:

31 March 2025	Current	30 days past due	60 days past due	+90 days past due	Total
Expected loss rate	0 %	0 %	0 %	100 %	-
Gross carrying amount	262 240	51 700	98 490	57 905	470 335
Loss provision	-	-	-	(57 905)	(57 905)
31 March 2024	Current	30 days past due	60 days past due	+90 days past due	Total
Expected loss rate	0 %	0 %	0 %	100 %	-
Gross carrying amount	-	-	410 280	57 905	468 185
Loss provision	-	-	-	(57 905)	(57 905)

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

Trade receivables impaired

As of 31 March 2025, trade receivables of R57 905 (2024: R57 905) were impaired.

Reconciliation of provision for impairment of trade and other receivables

	2025 R	2024 R
Expected credit loss allowance at beginning of the year	57 905	285 896
Impairment loss reversed	-	(227 991)
Expected credit loss allowance at end of the year	57 905	57 905

Exposure to credit risk

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

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

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

	2025 R	2024 R
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6. Trade and other receivables (continued)

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

	2025	2025	2024	2024
	Estimated gross carrying amount at default	Loss allowance (Lifetime expected credit loss)	Estimated gross carrying amount at default	Loss allowance (Lifetime expected credit loss)
Expected credit loss rate:				
More than 120 days past due:(2025 100%) (2024 100%)	57 905	57 905	57 905	57 905

7. Cash and cash equivalents

Cash and cash equivalents consist of:

Cash on hand	6 044	6 982
Bank balances	4 581 423	3 230 709
Short-term deposits	872 578 719	813 170 730
	877 166 186	816 408 421

8. Financial instruments and risk management

Categories of financial instruments

Categories of financial assets-at amortised cost

2025

	Note(s)	Fair value through other comprehensive income - equity instruments	Amortised cost	Total	Fair value
Listed investment -at fair value through other comprehensive income (FVTOCI)	4	1 299 600	-	1 299 600	1 299 602
Trade and other receivables	6	-	470 335	470 335	-
Cash and cash equivalents	7	-	877 166 186	877 166 186	877 166 186
		1 299 600	877 636 521	878 936 121	878 465 788

2024

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

	2025 R	2024 R
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8. Financial instruments and risk management (continued)

Categories of financial liabilities-at amortised cost

2025

	Note(s)	Amortised cost	Total
Trade and other payables	11	2 481 278	2 481 278

2024

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

Financial risk management

Overview

The Council is exposed to the following risks from its use of financial instruments:

- Credit risk;
- Liquidity risk; and
- Market risk (currency risk, interest rate risk and price risk).

Credit risk

Credit risk is the risk of financial loss to the Council if a customer or counterparty to a financial instrument fails to meet its contractual obligations.

Liquidity risk

The Council is exposed to liquidity risk, which is the risk that the Council will encounter difficulties in meeting its obligations as they become due.

The Council manages its liquidity risk by effectively managing its working capital, capital expenditure and cash flows. The financing requirements are met through cash generated from operations.

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

Interest rate risk

Fluctuations in interest rates impact on the value of investments and financing activities, giving rise to interest rate risk.

The Council policy with regards to financial assets, is to invest cash at floating rates of interest and to maintain cash reserves in short-term investments in order to maintain liquidity, while also achieving a satisfactory return for the Council.

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

9. Reserves

Revaluation reserve

• Opening balance	76 661 985	73 633 749
• Revaluation surplus	-	3 028 236
	76 661 985	76 661 985

	2025 R	2024 R
9. Reserves (continued)		
Fair value adjustment		
• Opening balance	792 976	619 551
• Fair value adjustment through OCI	195 794	173 425
	988 770	792 976
Total Reserves	77 650 755	77 454 961

10. Retirement benefits

Defined benefit plan

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

The actuarial valuation of the post-employment medical aid liability performed as at 31 March 2025 reported a contractual liability amounting to R22 648 000 (2024:R19 691 000).

Present value of the defined benefit obligation-wholly unfunded	22 648 000	19 691 000
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Changes in the present value of the defined benefit obligation are as follows:

Present value of the defined benefit obligation-wholly unfunded	19 691 000	22 542 000
Estimated payments	(2 780 000)	(2 973 000)
Interest cost	1 995 000	2 058 000
Net actuarial loss / (gain) recognised	3 742 000	(1 936 000)
	22 648 000	19 691 000

Actual payments made on retirement benefits amount to R2 814 731 and not R2 780 000 as estimated in the actuarial valuation report and as such remeasurements on net defined benefit liability was readjusted by R34 731, from R3 742 000 to R3 776 731 (ref to Statement of Changes in Equity)

Amount recognised in profit or loss

Current service cost	1 995 000	2 058 000
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Amount recognised in other comprehensive income

Actuarial gains (losses)	3 742 000	(1 936 000)
	5 737 000	122 000

Key assumptions used

Assumptions used on last valuation date, 31 March 2025 were as follows:

Health care cost inflation rate	7,17 %	6,95 %
Discount rates used	10,99 %	10,88 %

Sensitivity analysis

The sensitivity analyses indicated in the below table have been determined based on the exposure to medical aid inflation rate for defined benefit obligation at the statement of financial position date. The analysis is prepared assuming the amount of liability outstanding at the statement of financial position date was outstanding for the whole period under review. A 1% increase or decrease is used, since this represents the normal change, if any, per interest rate review period by the Reserve Bank of South Africa. There were no changes in the methods and assumptions used during the period under review. A positive number below indicates an increase in profit. For a 1% increase there would be an equal and opposite impact on the profit or loss.

	2025 R	2024 R
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10. Retirement benefits (continued)

Sensitivity Analysis on Cost / (Saving) for the year ending 31 March 2025

Assumption	Change	Total	% Change
Health care inflation	(1)%	(1 308 000)	6 %
	1 %	1 444 000	8 %
Discount rate	(1)%	1 406 000	10 %
	1 %	(1 254 000)	12 %
Post-retirement mortality	1yr	1 054 000	- %
	(1yr)	(1 032 000)	- %

Valuation

The effective date of the valuation was 31 March 2025. The valuation was performed by Ms Pamela Wolmarans from Independent Actuaries and Consultants (Pty) Ltd, she is a member of the Actuarial Society of South Africa with more than 35 years of experience. Independent Actuaries and Consultants (Pty) Ltd is not connected to the Council.

11. Trade and other payables

Trade payables	2 481 278	3 148 691
PAYE Control account	1 611 677	1 509 942
Account receivable in credit	2 970	2 970
Leave accrual	4 272 954	3 961 626
Accruals	3 061 374	3 682 709
Sundry payables	505 220	450 367
Total trade and other payables	11 935 473	12 756 305

Note

Exposure to liquidity risk

Refer to note 8, Financial Instruments and Financial Risk Management, for details of liquidity risk exposure and management.

12. Deferred income

Income received in advance	23 034 734	22 901 880
Examination fees and accreditation fees	1 007 221	997 462
Restoration fees	249 650	654 514
Registration fees(restated)	8 356 231	8 198 495
Annual practising certificate	9 105 994	8 612 059
Other deferred income	1 207 491	1 255 920
Donor funds	172 208	1 099 173
	43 133 529	43 719 503

13. Employee benefit obligations

13th cheque payable to employees	995 219	923 524
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	2025 R	2024 R
14. Revenue		
Revenue		
Annual fees	139 820 504	132 769 638
Restoration fees	10 006 435	10 237 626
Examination fees	34 270	1 125 167
Registration fees(restated)	11 138 172	9 726 926
Accreditation fees	3 008 026	2 345 264
Verification fees	2 685 348	3 259 290
Annual fees-Nursing Education Institution	1 471 017	1 803 827
Sale of distinguishable devices	3 847 191	3 098 293
Other income-unidentified deposits realised	811 364	758 467
Enrollment and Application fees	83 404	74 137
	172 905 731	165 198 635
15. Other income		
Admission of guilt fee	16 196	23 840
Refunds admin fees	23 460	20 017
Sale of waste paper	1 595	1 269
Parking fees	19 155	20 140
Various sundry income	222 021	189 700
Donor fund income	926 965	887 692
Impairment loss reversal	-	227 990
	1 209 392	1 370 648
16. Net surplus from operations		
Net (deficit) from operations is stated after accounting for the following:		
Auditor's remuneration - external		
Audit fees	534 070	370 948
Auditor's remuneration - internal	1 574 485	850 920
Employee costs		
Salaries, wages, bonuses and other benefits	111 301 271	104 309 774
Provident costs- contribution plans	7 229 364	6 521 901
Other short-term costs	67 975	-
Total employee costs	118 598 610	110 831 675
Depreciation and amortisation		
Depreciation of property, plant and equipment	3 334 312	7 109 832
Depreciation of right-of-use assets	269 552	269 555
Amortisation of intangible assets	300 267	195 379
Total depreciation and amortisation	3 904 131	7 574 766

Other

	2025 R	2024 R
16. Net surplus from operations (continued)		
Transport and freight	285 507	1 113 734
Legal fees	2 024 270	3 107 870
Utilities	3 930 310	4 101 389
Software expenses	5 549 060	5 007 314
Consulting fees	4 687 118	3 946 861
Records Improvement project	281 825	2 777 928
Loss on derecognition of prepaid asset	4 909 834	-
Loss on derecognition of Vat asset	1 982 621	-
17. Investment income		
Dividend income		
Equity instruments at fair value through other comprehensive income:		
Listed investments - Local	73 189	54 271
Total dividend income	73 189	54 271
Interest income		
Investments in financial assets:		
Bank and other cash	67 521 286	65 938 681
Interest income on Escrow Agreement	320 250	367 776
Total interest income	67 841 536	66 306 457
Total investment income	67 914 725	66 360 728
18. Interest paid		
Other	44	1 185
Retirement benefits	1 995 000	2 058 000
Lease liabilities	54 969	83 331
Total finance costs	2 050 013	2 142 516
19. Cash generated from operations		
Net surplus for the period	57 616 314	63 106 114
Adjustments for non-cash items:		
Depreciation, amortisation and impairments	3 904 131	7 574 767
Loss allowances recovered	-	(227 990)
Change in accounting estimate	537 334	-
Interest income on Escrow Agreement	(320 250)	(367 776)
Loss on derecognition of a prepaid asset	4 909 834	-
Loss on derecognition of Vat asset	1 982 621	-
Impairment loss-PAYE asset	-	428 990
Loss/(Profit) on disposal of property, plant and equipment	12 168	(1 042)
Interest on lease liability	54 969	83 331
Interest-other	44	1 185
Adjust for items which are presented separately:		
Interest income	(67 521 286)	(65 938 681)
Dividends received	(73 189)	(54 271)
Interest accrued on retirement benefit	1 995 000	2 058 000
Changes in working capital:		
(Increase) in inventories	(230 627)	(1 112 766)
Decrease/(increase) in trade and other receivables	171 297	(1 171 053)
(Decrease)/Increase trade and other payables and employee benefit obligation	(749 141)	1 319 681
(Decrease)/Increase in deferred income	(585 974)	3 182 027
	1 703 245	8 880 516

	2025 R	2024 R
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20. Contingent liabilities

MATTER 1

SpesNet (Pty) Ltd in a letter dated 28 December 2022 cancelled the contract with the South African Nursing Council for the development of a Membership Management System, after cancellation discussions took place between the parties to find an amicable way to end the relationship but common ground could not be found. Spesnet (Pty) Ltd has now proceeded to issue summons for the total contract amount of R36 332 769.97 and the South African Nursing Council has also filed a notice of intention to defend.

MATTER 2

Seven (7) employees who were dismissed in January 2013 and May 2013 respectively after complete internal disciplinary hearings being conducted because of improper conduct during a protected strike, during November 2011 the employees approached the CCMA in Pretoria seeking reinstatement for unfair dismissal. The matter was concluded before the CCMA in December 2015 and the Commissioner found in favour of South African Nursing Council that the dismissals were fair. The employees took the matter for review to the labour Court and unfortunately the Commissioner passed away shortly after making his ruling. The new attorney for the dismissed employees now held that the records for the CCMA hearing were incomplete and prejudicial to his client's case. The South African Nursing Council representatives did not represent the Council well before the Labour Court and the matter was reverted to the CCMA for a hearing de novo. New attorneys and Counsel were appointed to represent the Council. Matter set down for reinstatement in Labour Court on 07 February 2024. Matter was set down in the unopposed roll, removed. Applied for a new date, awaiting allocation. Legal costs could amount to R250 000.

MATTER 3

Mr Ndlovu issued summons against the Council, Cadura Security Services (the former SANC security company) and the Minister of Police for alleged injuries suffered during the illegal entry to the SANC building in 2017. He is seeking damages to the value of R400 000.

21. Commitments

Authorised expenditure

Already contracted for but not provided for

• Intangible asset (SAGE)	4 507 702	6 881 320
• Operating services	30 652 728	29 951 869
• Open purchase orders	9 615 972	2 145 354
• Property, plant and equipment	-	4 562 050
• Inventory	13 548 526	17 241 340
Total	58 324 928	60 781 933

Contracted expenditure relates to contracts entered into with service providers for a period ranging from 3 to 5 years to provide goods and services which include maintenance and support contracts for equipment, internal audit services amongst others.

Expenditure not yet contracted for but approved for future expenditure:

Property, plant and equipment	2 535 000	8 136 500
Intangible assets (other)	300 000	-
Intangible asset (Membership Management System)	25 387 674	-
The nursing practice/task analysis for the purpose of licensure examination	21 000 000	-

Expenditure not yet contracted relates to capital expenditure approved by Council

22. Current tax

The Council is exempt from taxation in terms of Section 10(1) (cA)(i) of the Income Tax Act.

	2025 R	2024 R
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23. Related parties

Key management remuneration

2025

	Annual salary	Cellphone allowance	Contribution to medical aid and pension funds	Acting allowances	Total
Registrar & Chief Executive Officer	2 280 157	31 200	180 887	-	2 492 244
Deputy Registrar	1 912 805	26 400	161 070	-	2 100 275
Chief Financial Officer(started 01 June 2024)	1 827 760	22 000	157 432	-	2 007 192
Corporate Services Executive(terminated on 27 August 2024)	808 094	11 000	72 353	-	891 447
Senior Manager: Legal Affairs	1 402 841	21 600	109 163	-	1 533 604
Senior Manager: Human Resources (employment was terminated on 08 November 2024)	986 830	13 173	106 399	-	1 106 402
Senior Manager: Human Resources(started acting on 24 June 2024 until 14 February 2025)	-	-	-	316 346	316 346
Senior Manager: Human Resources (started 17 February 2025)	-	-	-	59 900	59 900
Senior Manager: Professional Practice	1 367 411	21 600	117 803	-	1 506 814
Senior Manager: Communication and Marketing (started acting as Corporate Services Executive on 24 June 2024)	1 417 747	21 600	112 471	432 455	1 984 273
Senior Manager: Learner Affairs(started on 10 March 2025)	93 569	700	10 887	-	105 156
(acted from 27 May 2024 to 31 August 2024 and 05 December 2024 to 28 February 2025)	-	-	-	281 570	281 570
Company Secretary(acted until 31 May 2024)	-	-	-	82 362	82 362
Company Secretary(started 01 June 2024)	1 261 145	18 000	106 265	-	1 385 410
Senior Manager: Internal audit(resigned on 30 June 2024)	365 313	5 400	28 981	-	399 694
Senior Manager: Information & Technology	1 345 147	21 600	125 362	-	1 492 109
Senior Manager: Provider Affairs(started 01 July 2024)	1 032 268	16 200	81 891	-	1 130 359
Senior Manager: Provider Affairs (Ating position ended on 30 June 2025)	-	-	-	123 543	123 543
Senior Manager: Finance	-	-	-	492 874	492 874
	16 101 087	230 473	1 370 964	1 789 050	19 491 574

	2025 R	2024 R
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23. Related parties (continued)

2024

	Annual salary	Cellphone Allowance	Contribution to medical and pension funds	Acting allowances	Merit Bonus	Total
Registrar & Chief Executive Officer	2 171 578	31 200	172 273	-	-	2 375 051
Deputy Registrar	1 821 308	26 400	153 811	-	-	2 001 519
Chief Financial Officer (resigned on 30 September 2023)	931 843	13 200	85 163	-	-	1 030 206
Corporate Services Executive	1 935 202	26 400	177 871	-	-	2 139 473
Senior Manager: Legal Affairs	1 310 525	21 600	103 965	-	-	1 436 090
Senior Manager: Human Resources	1 553 937	21 600	153 324	-	17 072	1 745 933
Senior Manager: Professional Practice	1 301 885	21 600	112 605	-	-	1 436 090
Senior Manager: Communication and Marketing	1 350 235	21 600	107 115	-	-	1 478 950
Senior Manager: Learner Affairs	1 288 909	21 600	111 576	-	-	1 422 085
Company Secretary (resigned on 31 May 2023)	407 760	3 600	17 625	-	-	428 985
Company Secretary (started on 01 January 2024)	-	-	-	99 818	-	99 818
Company Secretary (started 01 June 2023 to 31 December 2023)	-	-	-	259 001	-	259 001
Senior Manager: Internal audit	1 433 968	21 600	113 757	-	-	1 569 325
Senior Manager: Information & Communication Technology	1 280 269	21 600	120 216	-	-	1 422 085
Senior Manager: Provider Affairs	-	-	-	478 543	-	478 543
Senior Manager: Finance	-	-	-	416 769	-	416 769
	16 787 419	252 000	1 429 301	1 254 131	17 072	19 739 923

Non-executive Councillors fees (16th and 17th Council members)

Councillors' fees including preparation fees (16th Council term ended on 22 August 2023)

Councillors' fees including preparation fees (16th Council term ended on 22 August 2023)

Makhene A	77 349
Nkonzo-Mtembu LL	75 223
Zuma SM (Vice-Chairperson)	99 784
De Swardt HC	52 079
Dr MC Molepo (Chairperson)	82 043
Gihwala DI	71 444
Ntshabele JT	58 572
Magoro TM	52 077
Geyer NM	91 755
Orton PM	78 645
Duma SE	65 304
Rabotapi LL	68 483

	2025 R	2024 R
23. Related parties (continued)		
Matsomela MJ		43 459
Ramaila ZM		56 802
Newton F		69 082
Tshimomola R		69 864
Ally H		72 744
Kaye-Petersen E		116 317
Ngidi D		61 053
Dr SZ Mthembu		11 337
Ms TA Kaseke		18 895
		1 392 311
Dr MC Molepo (Chairperson)	248 019	161 564
Prof DR Phetlhu (Vice-Chairperson)	106 753	73 691
Prof PJ Jordan	151 508	64 478
Ms TA Kaseke	184 577	90 339
Dr E Kaye-Petersen	257 915	112 186
Ms FL Kgatla	38 734	13 227
Ms PZ Khumalo-Ntamane	58 575	7 558
Ms LCBN Lioma	95 180	51 017
Ms JA Maimin	99 197	41 569
Ms MM Makgotlho	79 359	13 227
Ms RE Malatji	51 017	11 337
Dr M Matandela	51 017	9 448
Mr B Mgwanya	59 519	20 785
Mr SV Mkhathswa	59 519	11 337
Mr TR Moeketsi	59 519	17 006
Dr SZ Mthembu	52 906	15 116
Ms ST Mthembu	125 650	81 719
Ms MM Mutepe	76 524	11 337
Mr LL Rabotapi	130 135	92 345
Ms MC Ramokotjo	68 966	15 116
Mr R Rensburg	128 485	69 438
Mr S Shandu	95 901	20 785
Mr M Tshofela	134 927	78 884
Ms NG Zulu-Siwela	32 122	11 337
Prof SM Zuma	245 625	97 306
	2 691 649	1 192 152

24. Going concern

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

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

25. Events after the reporting period

The Councilors are not aware of any material event which occurred after reporting date and up to the date of this report.

26. Prior period error

26.1. Revenue

An error was identified on the registration fees extracted from the Nurse Register Management System(i-Series system), the system was recognising half of the total fees received for registration fees as revenue. The errors have been corrected retrospectively by restating comparative figures in the current year's financial statements

Balance previously reported at 31 March 2024	162 893 783
Registration fees recognised	2 304 852
Restated balance at 31 March 2024	165 198 635

26.2. Deferred income

An error was identified on the registration fees extracted from the Nurse Register Management System(i-Series system), the system was recognising half of the total fees received for registration fees as revenue. The errors have been corrected retrospectively by restating comparative figures in the current year's financial statements

Balance previously reported at 31 March 2023	44 565 945
Adjustments to registration fees	(4 028 469)
Balance at 31 March 2023 restated	40 537 476
Balance previously reported at 31 March 2024	50 052 824
Adjustments to registration fees in 2023 financial year	(4 028 469)
Adjustments to registration fees in 2024 financial year	(2 304 852)
Balance at 31 March 2024 restated	43 719 503

26.3. Retained income

An error was identified on the registration fees extracted from the Nurse Register Management System(i-Series system), the system was recognising half of the total fees received for registration fees as revenue. The errors have been corrected retrospectively by restating comparative figures in the current year's financial statements

Balance previously reported at 31 March 2023	668 201 640
Registration fees	4 028 469
Balance at 31 March 2023 restated	672 230 109
Balance previously reported at 31 March 2024	731 120 108
Registration fees for 2023 financial year	4 028 469
Registration fees for 2024 financial year	2 304 852
Balance at 31 March 2024 restated	737 453 429

27. Contingent assets

An amount of R4 909 834 was paid in the Escrow account (disclosed as a prepayment) and was for the development of the Membership Management System (MMS) by SpesNet Pty Ltd. During 2022/2023 financial year that contract was cancelled and therefore the Council no longer expects to receive the service for which the prepayment had been made. Due to the change in nature of the transaction, the Council was expecting to receive the payment made back from the Attorneys which held this amount in an Escrow account as per the contract terms with SpesNet (Pty) Ltd. During the 2024/25 financial year the previously contracted service provider has now proceeded to issue summons for the total contract value and the South African Nursing Council has also filed a notice of intention to defend. The effect of these summons therefor necessitated the prepayment to be derecognised and a contingent asset to be disclosed, as the nature thereof changed.

By definition contingent assets are possible assets whose existence will be confirmed by the occurrence or no-occurrence of uncertain future events that are not wholly within the control of the entity. However, when the inflow of benefits is virtually certain an asset is recognised in the statement of financial position, because is no longer considered to be contingent.

The Council has assessed this asset and found it to meet the definition of a contingent asset and its existence depends on the outcome of the legal battle.

27. Contingent assets (continued)

Guaranteed interest income as per the contract on funds invested by the Escrow Agent for the current year amount to R320 250 and has accrued to the Council.

28. Right-of-use assets

The Council have two lease contracts with two service providers leasing eleven printing machines. The average lease term is three years.

The Council does not have the option to purchase the printing machines on completion of the lease term.

Details pertaining to leasing arrangements, where the Council is lessee are presented below:

	2025			2024		
	Cost or revaluation	Accumulated depreciation	Carrying value	Cost or revaluation	Accumulated depreciation	Carrying value
Office equipment	808 666	(563 525)	245 141	808 666	(293 972)	514 694

Depreciation recognised on right-of-use assets

Depreciation recognised on each class of right-of-use assets, is presented below. It includes depreciation which has been expensed in the total depreciation charge in profit or loss (note 16), as well as depreciation which has been capitalised to the cost of other assets.

Office equipment	269 552	269 555
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29. Lease liabilities

Non-current liabilities	-	(621 166)
Current liabilities	(336 756)	-
	(336 756)	(621 166)

Repayments of R284 410 (2024: R292 524) was made during the current year.

Office equipment	336 756	621 166
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Details pertaining to leasing arrangements, where the Council is a lessee are presented in note 28 above.

		2025	2024
	Note(s)	R	R
Revenue			
Sale of distinguishable devices		3 847 191	3 098 293
Annual fees-registered and enrolled Nurses		139 820 504	132 769 638
Restoration fees		10 006 435	10 237 626
Examination fees		34 270	1 125 167
Annual fees-Nursing Education Institutions		1 471 017	1 803 827
Enrollment and Application fees		83 404	74 137
Verification fees		2 685 348	3 259 290
Accreditation fees		3 008 026	2 345 264
Registration fees		11 138 172	9 726 926
Other income-unidentified deposits realised		811 364	758 467
	14	172 905 731	165 198 635
Other income			
Admission of guilt fine		16 196	23 840
Insurance claims and other minor income		222 021	189 700
Donor fund income		926 965	887 692
Sale of waste paper		1 595	1 269
Parking fees		19 155	20 140
Impairment loss reversal		-	227 990
Refunds admin fees		23 460	20 017
	15	1 209 392	1 370 648
Expenses (Refer to page 152)		(182 363 521)	(167 681 381)
Operating (deficit) surplus	16	(8 248 398)	(1 112 098)
Investment income	17	67 914 725	66 360 728
Interest paid	18	(2 050 013)	(2 142 516)
Surplus for the year		57 616 314	63 106 114

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

		2025	2024
	Note(s)	R	Restated * R
Operating expenses			
Staff bursaries		(1 225 255)	(7 302)
Advertising		(729 000)	(623 923)
Amortisation and impairment losses		(300 267)	(624 370)
Auditor's remuneration - external audit	16	(534 070)	(370 948)
Auditor's remuneration - internal audit	16	(1 574 485)	(850 920)
Bank charges		(748 532)	(455 626)
Cleaning		(854 583)	(815 175)
Consulting fees		(5 048 491)	(3 869 767)
Computer expenses		(3 483 181)	(2 993 972)
Meeting expenses Members' allowances and reimbursive expenses		(2 982 024)	(2 814 223)
Vat asset derecognised		(1 982 621)	-
Provident fund administrative costs		(7 229 364)	(6 538 818)
Depreciation		(3 603 864)	(7 379 387)
Transport and freight		(285 507)	(1 113 734)
Employee costs		(111 310 599)	(104 309 774)
Catering and refreshments		(1 835 465)	(1 187 316)
Profit /(Loss) on disposal of property, plant and equipment		(12 168)	1 042
Loss on derecognition of a prepaid asset		(4 909 834)	-
Hire of equipment and venue		(260 687)	(91 355)
Recruitment costs and employee assistance		(960 582)	(661 417)
Insurance		(248 900)	(222 521)
Software expenses		(5 549 060)	(5 030 160)
General expenses		(797 142)	(367 809)
Gifts and promotional items		(458 095)	(390 038)
Motor vehicle expenses		(53 348)	(38 188)
Utility charges		(3 930 310)	(4 101 389)
Meeting expenses accommodation		(2 245 325)	(1 481 779)
Meeting expenses translation and transcribing services		(931 585)	(862 492)
Legal expenses		(2 024 270)	(3 121 779)
Postage		(46 953)	(704 074)
Printing and stationery		(1 178 479)	(979 616)
Functions, seminars and workshops		(1 666 653)	(2 468 017)
Repairs and maintenance		(2 010 503)	(968 748)
Publications		(119 418)	(21 211)
CPD development expenses		(852 130)	(888 605)
Security		(1 561 754)	(1 265 578)
Meeting expenses transport allowances		(532 008)	(528 064)
Subscriptions		(95 353)	(58 424)
Meeting expenses examiners and invigilators		(45 292)	(247 303)
Telephone and fax		(899 225)	(943 876)
Training		(252 992)	(286 447)
Purchase of materials		(2 754 523)	(2 384 907)
Travel - local		(3 957 799)	(2 835 443)
Records improvement project		(281 825)	(2 777 928)
		(182 363 521)	(167 681 381)

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Regulating nursing, advocating for the public