Annual Report 2019

Pharmaceutical Society of South Africa

Lynnwood Conference Centre, Lynnwood, Pretoria

20 August 2019
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FOREWORD

This report prepared for the 74th Annual General Meeting (AGM) of the General Council of the Pharmaceutical Society of South Africa (PSSA) should be seen as a summary of the activities of the PSSA National, the sectoral bodies as well as the PSSA Branches and is therefore not a comprehensive report of all the activities of the PSSA.

As a society, an organisation formed for a particular purpose, we must be guided in our focus and activities by the Objects listed in the PSSA Constitution. The activities of the staffed offices for national, sectors and branches are directed by the various committees that comprises of volunteers offering their private time in the interest of our members. The profession appreciates all these serving members, who give them the comfort that “someone” is dealing with the challenges that present and who will act in their and the profession’s best interest.

This report once again reflects a positive trend in terms of membership growth and financial prudence and for this I must thank the team at the National Office and the support we receive from the branch and sectoral offices.

Going forward
The intention to formally introduce the National Health Insurance (NHI) Bill was announced in the Government Gazette on 26 July 2019. This Bill will now require our focused attention in preparing for the submissions that will have to be made to Parliament.

It is also with pleasure that we can announce that the Cape Midlands Branch of the PSSA will be the host for the 75th PSSA AGM and 2020 Conference, to be held in the beautiful city of Port Elizabeth. We will provide more information on the dates as soon as the contract with the venue has been signed and we invite all our members to attend. The theme for this Conference is Pharmacy for the future - a world of opportunities.

With a new Minister of Health new opportunities will also be pursued. Matters on this agenda include the finalisation of the Pharmacy Licence criteria, the issue of penalty co-payments in the designated service provider (DSP) arrangements by medical aid schemes, the fees payable to the South African Pharmacy Council (SAPC) and the cumbersome permit system Primary Care Drug Therapy (PCDT) pharmacists have to follow for authorisation before they can provide an essential primary health care service.

Ivan Kotzé  
Executive Director
MESSAGE FROM THE PRESIDENT

Friends and colleagues in pharmacy,

Firstly, please accept a heartfelt thanks for the outstanding and life-saving work you all do on a daily basis. A pharmacist is rarely praised, yet without you, the healthcare environment would certainly not be able to function.

Since we are not hosting a conference this year, permit me to share a few thoughts I believe will have a significant impact on our profession in the foreseeable future.

I am convinced that most, if not all who make South Africa their home, are deeply concerned about our future and the future of our nation. As our 25th year of a New South Africa slowly draws to a close, the dilemmas we are currently facing, are not alien, or new to us. They have been with us for a considerable period and have all grown to near unmanageable magnitudes. Poverty with violent crime is still on the rise and they make seriously dangerous bed fellows. I will leave it to you to add to this list.

Ever closer to home, a current and very real divide between ‘haves’ and ‘have-nots’ of sufficient healthcare has been thrust under the spotlight by the country’s new and inspired Health Minister. Both Dr Mkize and our President, Mr Rampahosa, have weighed in on the delivery of healthcare to all South Africans. The latter has done so from the beginning of his tenure as Head of State. In fact, the office of the Presidency has actively been driving National Health and Universal Access to Health since his Presidential term started. The latest serious move was made by Dr Mkhize on Thursday, 8 August 2019, with him taking the new NHI Bill to Parliament.

It is a fact that a lot of money and time will be spent before National Health becomes a viable reality. Unfortunately, neither the health sector, nor the country can afford both money and time. While the war is raging, all pharmacists have two choices. We have a choice to ignore what is happening around us and focus only on our patient, as we well should. Alternatively, we can choose to take part in the debate around National Health, its funding mechanism through NH and the pooling of all health resources, whilst looking after our patients.

Now, more than ever, pharmacists have a chance to make ourselves heard. We have a chance to position ourselves so we can present solutions. There will be enough naysayers together with uninformed politicians weighing in on this topic. The time has come for us to make a stand for ourselves and our patients. To inform the decision makers of our value and the unique solutions we bring to the many challenges of National Health.

For those that feel disheartened by this seemingly never-ending process, swallow down your protests and man up. The fight has intensified notably. We owe it to ourselves, our forebears and those who come after us, to preserve our profession and persuade whoever needs persuasion that South Africa has a national asset in its pharmacists, who are serious about their profession and serious about the positive role we want to play in the old and new health economy.

I invite each and every member who raises their hand, to become part of the PSSA’s and broader pharmacists’ interest groups, and join in the collaboration to position ourselves as pharmacists and pharmacy optimally in the changing health environment that is imminent.

God save and bless our precious country!

Stéphan Möller
President
THE YEAR IN REVIEW

WHAT DID WE DO?

Without continual growth and progress, such words as improvement, achievement and success have no meaning – Benjamin Franklin

1 NEW MEMBERS
Membership increased with 6.23% from 1 October 2017 to 31 September 2018. The total number of members on 31 September 2018 was 1 187. On 08 August 2019 we had 1 180 paid up members.

2 INDEMNITY INSURANCE
From 1 October 2017 to 30 September 2018, 971 new indemnity insurance policies were added. From 1 October 2018 to 08 August 2019 1 169 new indemnity insurance policies were added. A total of 7 156 members have indemnity insurance.

3 NEWSLETTERS
From 01 October 2017 to 30 September 2018 a total of 50 newsletters was sent to members. From 01 October 2018 to 08 August 2019 36 newsletter has been sent to members already.

4 EXCO COMMUNICATIONS
The Exco makes use of an email mailing list between Exco meetings. Between 01 October 2017 and 30 September 2018 there were 163 separate email conversations. From 01 October 2018 to August 2019 there has been 102 conversations so far.

5 FACEBOOK
From August 2018 to 30 September 2018 72 new members joined the Facebook group. There were 55 posts in this period which received 14 reactions and 173 comments. From 01 October 2018 to August 2019 the membership grew from 1 875 to 2 682 (707 new) and there were 356 posts which received 3 123 reactions and 763 comments.

6 SUBMISSIONS
One of the main functions of the PSSA is submissions. Between October 2017 and September 2018 the PSSA made 10 submissions. From October 2018 to August 2019 the PSSA has made 10 submissions.

7 QUERIES
The various offices of the PSSA deals with numerous queries on a daily basis via telephone and email. Going forward this will be quantified in order to ensure we meet the needs of our members.
ANNUAL REPORT

Section 22 of the PSSA Constitution requires that an AGM of the General Council of the PSSA must be held. This section also specifies the business of the AGM. This includes the report of the President, on behalf of the National Executive Committee (NEC), covering the activities of the Society and its branches during the past year, as well as the report of the Honorary Treasurer on the audited Annual Financial Statements.

This report highlights some of the important activities. Many of the PSSA activities are ongoing, and members are informed of progress on a regular basis. In addition to regular communication with the PSSA NEC, members can access information by reading the electronic newsletters that are frequently sent to all members, as well as the South African Pharmaceutical Journal (SAPJ), the PSSA website and Facebook pages.

Please note: In some instances, mentioned below, published legislation is recorded, although at the time of implementation the only activity required by the PSSA was to inform its members so that the legislation could be implemented in practice.

With mixed emotions we said farewell to our colleague and friend Lorraine Osman who retired from the PSSA National Office on 30 September 2018 after 23 years and 1 month of employment. Lorraine's passion and devotion to the profession during all the years of service to the PSSA will never be forgotten. PSSA wishes her a peaceful retirement, although all of us know that Lorraine will not disappear from the pharmacy scene.

In February 2019, the PSSA National Office welcomed back a familiar face when Anri Hornsveld joined the team. Anri previously worked for the Society from 2009 to 2016 where after she joined industry for three years to gain experience in a different sector of the profession. Anri’s existing and new knowledge and experience already have benefitted the Society during the past few months.
South Africa also welcomed a new Minister of Health at the end of May 2019. PSSA wrote a letter of congratulations to the Minister and offered our support to him on issues of mutual interest such as resolution of the current healthcare crisis through the Presidential Health Compact, realisation of Universal Health Coverage (UHC) to ensure access to healthcare for all, continued participation in beating non-communicable diseases, addressing pharmaceutical workforce challenges with regards to community service posts, persisting in the fight against substandard and falsified medicines and committing to advocate that essential medicines and services are available to all patients in all healthcare facilities in the country.

NATIONAL ACTIVITIES

1. LEGISLATIVE MATTERS

1.1. NHI BILL

PSSA submitted comments on the NHI Bill in September 2018. The PSSA was aware that many of the questions that its members have asked will be dealt with in the regulations that will be published at a later stage. The National Department of Health’s (NDoH) attention was drawn to the fact that private community pharmacies already provide primary health care (PHC) services to patient and could therefore easily be included in NHI.

1.2. NATIONAL HEALTH ACT, 61 OF 2003

OHSC draft enforcement policy

The abovementioned was published for comment by 29 June 2019. This is not applicable only to public health facilities and members. Moving towards NHI, all facilities (public and private) that want to offer services on behalf of the government will need accreditation with Office of Health Standards Compliance (OHSC).

PSSA fully supports the concept of ensuring quality health services for the people of South Africa and therefore we support the development of an enforcement policy which has the objective to ensure compliance with prescribed norms and standards. In our comment, the PSSA brought to the OHSC’s attention that pharmacies are already inspected by the SAPC every one to three years and that all the activities listed under item 2.3 of the policy are currently inspected and duplication of activities should be avoided.

1.3. MEDICINES AND RELATED SUBSTANCES ACT, 101 OF 1965

1.3.1. Dispensing fee

Following a number of meetings and submissions during 2018, the dispensing fee for pharmacist for 2019 was published on 23 January 2019. An analysis of this fee showed that the weighted average fee income was R 56.29 VAT exclusive compared to the 2018 fee of R 51.21.

1.3.1.1. Pricing committee interactions 2018

The Pharmacy Stakeholders Forum (PSF) wrote to the chairperson of the Pricing Committee (PC) on 14 August 2018, expressing concern regarding the fact that the PC has already determined the 2019 dispensing fee and has forwarded their proposal to the Minister for consideration, before any submissions on the proposed fee could be made. In their letter, the PSF objected to the process as they are concerned that an inflation adjustment of just the
dispensing fee since 2010 has not kept pace with escalating costs, especially salaries, and this must be considered when the dispensing fee is determined. This concern has been raised at every meeting PSF has had with the PC since May 2016.

The PSF submission focused on salaries and the following four main issues were addressed:

- Based only on annual inflation adjustments using CPI increases, the targeted dispensing fee should have increased from R38.00 in 2010 when the dispensing fee was introduced to R57.71 (at the time of the correspondence).
- MediKredit analysed the impact for the draft fee, utilising the basket of products actually dispensed for the period January 2018 to June 2018. Conclusions on the results of the analysis indicated that the expected fee income of the draft fee compared to the current fee when tested on the same basket at the same time was slightly higher than the 4.08% average of the CPI for 2018. The expected fee income, for all networks, is R4.12 below the target of R57.71. For independent pharmacies, the expected income is R48.36 which is R9.35 below the fee target. Even for corporate pharmacies, the expected income of R52.90 is R4.81 below target. However, for courier pharmacies, the expected income is R5.14 more than the fee target.
- The Zero based model consists of (1) salary for a pharmacist and a post-basic pharmacist’s assistant and (2) monthly costs to run the business of pharmacy. In 2010 the amount for monthly costs was set at R31 787. Adjusted for inflation up to the year 2018, the monthly pharmacy overhead costs should at least be R48 283 exclusive of the CTC salary provision for a pharmacist and a post basic pharmacist’s assistant.
- An attachment submitted to the Dispensing Fee Methodology Review Working Group on 5 July 2018 reflects that a salary range of R90 000 to R105 000 be used as a fair salary provision in the Zero based model for 2018. This is based on the salary level paid by the National Department of Health (NDoH). If the salary provision of R90 000 is used, added to the R48 283 monthly overhead cost explained above, then the estimated expenditure in a pharmacy for the Zero based model should be at a level of R138 283. The fee target in the Zero based model is determined by dividing the monthly expenditure, which is inclusive of a return on investment component, by 2300 items, the number of items to be dispensed in an efficient pharmacy, as determined by the PC. If R138 283 is divided by 2300 = R60.12, which should be the fee target.

The PSF also requested that the words “not exceed” be replaced with the word “be” in the draft regulation in order to reflect a dispensing fee rather than a maximum dispensing fee.
1.3.1.2. Dispensing fee 2020

On 12 July 2019 the draft dispensing fee for pharmacists was published. Comment must be submitted by early October 2019. The submission will once again be made by the PSF as was done for all the previous submissions.

<table>
<thead>
<tr>
<th>Current fee 2019</th>
<th>Draft 12 July 2019</th>
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<tbody>
<tr>
<td>Less than R109.56</td>
<td>Less than R113.71</td>
</tr>
<tr>
<td>R14.50 plus 46%</td>
<td>R15.19 plus 46%</td>
</tr>
<tr>
<td>R109.57 to R292.25</td>
<td>R113.71 to R303.30</td>
</tr>
<tr>
<td>R27.75 plus 33%</td>
<td>R29.07 plus 33%</td>
</tr>
<tr>
<td>R292.26 to R1022.94</td>
<td>R303.32 to R1061.61</td>
</tr>
<tr>
<td>R79.00 plus 15%</td>
<td>R82.77 plus 15%</td>
</tr>
<tr>
<td>More than R1022.94</td>
<td>More than R1061.62</td>
</tr>
<tr>
<td>R182.00 plus 5%</td>
<td>R190.68 plus 5%</td>
</tr>
</tbody>
</table>

The draft fee for 2020 is currently being analysed which will form the basis of the submission by the PSF. Initial analysis shows that this draft fee provides for an increase of only 2.08% compared to the annual inflation rate of 4.4% for South Africa as at May 2019.

Thanks to MediKredit and Mediscor

The PSF appreciates the assistance received from both Medikredit and Mediscor in the analyses they performed in the fee calculations. The analysis is done based on an actual baskets of products dispensed over a specified period, reflecting the most realistic analysis of the fees and proposed fees as the outcome of the analysis reflects a weighted average of actual products dispensed.

1.3.2. Annual Single Exit Price adjustment (SEP)

Government Gazette (No 42286) was published with the Annual Single Exit Price adjustment for comment on 8 March 2019. It should be noted that a new formulation structure was proposed. When the SEP is eventually agreed to per product by the PC it will have a small impact on the dispensing fee income.

1.3.3. Scheduling of substances for prescribing by authorised prescribers other than medical practitioners or dentists

The South African Health Products Regulatory Authority (SAHPRA) published for comment a guideline regarding the scheduling of substances for prescribing by authorised prescribers other than medical practitioners or dentists. The guideline stated specifically that it should be noted that there was no mention of pharmacists in sub-section 4(a)(v) or 5(f) and it was therefore not possible for a list of Scheduled substances, apart from Schedule 1 and 2, to be identified in the Schedules for prescribing by pharmacists. The only enabling provision which can be used to authorise PCDT pharmacists is therefore section 22A(15) regarding permits.
The PSSA is aware of the legal challenges that prevents SAHPRA from allowing PCDT pharmacists to be accommodated in the Annexures to the schedules, and will be seeking legal advice. The NDoH is overburdened with permit applications and the permit application process has a long time frame. If the legal challenges can be overcome and enabling provisions can be made for PCDT pharmacists in Annexures to the schedules, it would alleviate the burden on the Department and will allow patients quicker access to primary health care in their community. PSSA trusts that SAHPRA will be open to future discussions with the Society on this and other matters.

1.3.4. Changes in medicine schedules

The Minister of Health, on advice of SAHPRA, published a few amendments of the Schedules to the Medicines Act. The most significant changes were the removal of Cannabidiol (CBD) from schedule 7 completely and imposing no limitation to schedule 4, and the exemption of Cannabidiol containing products from the requirements of section 22A(2) of the Medicines Act. [Refer to section 2.7 of this report for more information on this matter]

Members were informed of changes immediately via the e-newsletter as these changes are always significant and effective immediately.

The National Office became aware of the discrepancy in the ipratropium bromide scheduling and a submission was made to SAHPRA on 07 June 2019 to alert them of this matter.

1.4. PHARMACY ACT, 53 OF 1974, AND SA PHARMACY COUNCIL MATTERS

1.4.1. Regulations relating to Continuing Professional Development (CPD)

After slightly more than eight years, the CPD regulations were published for a second time for comment on 13 July 2018. After incorporating comments, the regulations were published for implementation on 17 May 2019.

However, the regulations states that SAPC must commence with the process of implementation in the profession.

"(1) The council may -

(a) from time to time, by board notice, specify which categories of persons registered in terms of section 14 of the Act, are required to record their continuing professional development activities as provided for in these Regulations.

(b) designate persons registered in such categories on the register, applicable to the category in which such persons are registered, as practising or non-practising."

It is anticipated that draft implementation guidelines for CPD in South Africa will shortly be published for comment.
1.4.2. Publication of SAPC fees for publication

The PSSA is of the opinion that the Pharmacy Act requires the SAPC to request the Minister to publish any proposed annual fees for a comment period of three months, which would give the profession the opportunity to comment on these fees before they are finalised and implemented. The Council appears to be of the opinion that it is entitled to determine and implement the annual fees by mere publication of a Board Notice.

Return correspondence from the Minister indicated that the matter was addressed with SAPC at that stage. The agreement late in 2018 between the PSSA and SAPC was to continue the status quo once more since there was no time left in 2018 to publish the fees for comment but that the process will be rectified during 2019 for 2020.

To date, no fees have been published for comment. The PSSA wrote to the SAPC during mid-July 2019 seeking clarification as time is of the essence before the 2020 fees can be finalised. PSSA requested an update on the situation. The SAPC responded stating that the draft regulation has been forwarded to the office of the Minister for publication. There is currently no indication of when it will be published.

1.4.3. Rules relating to Good Pharmacy Practice (GPP)

On 31 August 2018, the draft amendments and additional minimum standards to be added to the GPP rules of the SAPC regarding Minimum standards for unit dose dispensing (UDD) were published for comment. In our submission, the PSSA agreed that the preamble clearly states the reasoning and motivation that a Unit Dose Container (UDC) may be of value for some patients who are experiencing problems in managing their medicines and maintaining an independent lifestyle. PSSA endorses the comment that the use of original packs of medicines, supported by appropriate pharmaceutical care, should be used as the stability of medicines in these packs has been determined and that UDD should rather be the exception and for specific patients/conditions as mentioned.

Board Notice 75 of 2019, published on 10 May 2019 requested comment on three different standards. The PSSA did not agree with the suggested changes in the Minimum standards for pharmacy premises, facilities and equipment rule 1.2.4(a) to read: “The Responsible Pharmacist of a pharmacy must ensure that every key, key card or other device, or the combination of any device, which allows access to a pharmacy when it is locked, is kept only on his/her person, the person of another pharmacist and/or the person of the owner/delegated person.” The issue that arises with this suggested change was that the Responsible Pharmacist is held accountable for all stock as well as all actions that take place in the pharmacy. It is not clear how the Responsible Pharmacist will be held responsible if the pharmacy and stock can be accessed by the owner/delegated person who is not a pharmacist? This further includes a risk of breaching patient confidentiality as all patient records can be accessed by a non-registered person. The PSSA submitted comments on this Board Notice during July 2019.
1.4.4. Good Pharmacy Education Standards (GPES)
The SAPC published Board Notice 32 of 2019 for implementation on 15 March 2019. This board notice relates to GPES (Higher Education and Training) for the BPharm degree.

Board Notice 34 of 2019 was published by the SAPC for comment. The notice relates to GPES (Occupational Qualification Sub-Framework) in terms of Section 34 of the Pharmacy Act, 53 of 1974, read with the Regulations relating to pharmacy education and training (GNR 1156, published on 20 November 2000) for the revised midlevel worker qualifications. The PSSA submitted comments on this Board Notice during May 2019.

1.4.5. Pharmacists who completed internship but awaiting community service placement
Annually members of the PSSA raise concerns about the commencement of community service. Recent concerns include:

- South African citizens who were placed for community service and accepted the allocation, but, either when receiving the employment contract or on arrival, find that the post is only available later in the year e.g. 1 March. This leaves them without work for a month or two.
- South African citizens who were placed for community service and accepted the allocation, but, when engaging with the facility, find that the facility is no longer/not able to accommodate them. This leaves them with no placement and they then need to wait for the NDoH to allocate them again, a process which might take some time.
- Foreigners who did not receive placement due to lack of posts.

To our knowledge, the current procedure followed by the SAPC is, that once interns have successfully completed their internship, they are released from the internship register. In most cases, this is followed shortly after by the application for registration as a pharmacist for the purpose of conducting community service. However, for an intern who experiences any of the abovementioned three scenarios, the outcome is different. They are removed from the intern register and remain ‘without a scope of practice’ until they are placed and can apply for registration as a community service pharmacist. This procedure could take one or two months for the first two scenarios explained above, or it could be six months or more for interns in the third scenario.

Due to this administrative process and the unfortunate circumstances regarding commencement of community service, qualified professionals are deprived of the opportunity to earn an income and provide financially for themselves and their families. These early career pharmacists do not necessarily have the financial stability or savings after only one year of fulltime employment as a pharmacist intern to bridge this period between their last remuneration as interns and the first income as community service pharmacists. As with anyone else who enters the work field, they also have financial responsibilities such as SAPC registration and annual fees, compulsory professional indemnity insurance, accommodation, transport, daily living expenses and the possibility of repayment of a study loan.
It is unacceptable to leave these professionals without an income or to expect parents and families to support them financially due to legislation requirements, administration procedures and the lack of posts.

The PSSA wrote to the SAPC in January 2019, bringing this situation to their attention. SAPC are currently accommodating the above-mentioned interns as post-basic pharmacist's assistants, while a legislation change is drafted to accommodate them as pharmacists in future.

1.4.6. Community service for pharmacists (CSP)
The NDoH claims that all South African pharmacists who applied for Community Service in 2018 for the 2019 year had been placed even though the commencement date for some was later in the year. However, a number of foreign pharmacists even those with permanent residency, have not yet been placed.
The application process for 2020 Community Service is currently underway.

1.5. MEDICAL SCHEMES ACT, 131 OF 1998, AND COUNCIL FOR MEDICAL SCHEMES MATTERS
1.5.1. Medical Schemes Amendment Bill
The Medical Schemes Amendment Bill is being held back until the final report of the Private Health Market Inquiry (HMI) performed by the Department of Trade and Industry (DTI) has been released. The importance part of this bill for pharmacy is the proposal to do away with co-payments.

1.5.2. Services for which a pharmacist may levy a fee
Many pharmacists also provide screening tests for which they are entitled to charge a fee. These tests are also appropriate for monitoring patient adherence to therapy in a number of conditions, such as diabetes. The Rules relating to the services for which a pharmacist may levy a fee and guidelines for levying such a fee or fees were published in terms of the Pharmacy Act, 53 of 1975. The SAPC published Board Notice 35 of 2019 with the services for which a pharmacist may levy a fee as amended on 29 March 2019.

2. OTHER MATTERS
2.1. NHI PHARMACY STAKEHOLDERS CONSULTATIVE FORUM
The NHI Steering Committee consists of representation from each grouping in pharmacy. Each representative acts as the communication channel between the NHI Steering Committee and the stakeholders in his/her respective grouping. It is thus important to keep in mind that each member of the NHI Steering Committee must represent and articulate the views of his/her stakeholder community and provide feedback to his/her community as appropriate.

Since the first “Pharmacy in NHI” newsletter was released in April 2018, the NHI Steering Committee compiled a draft strategic document, investigated appointment of independent practitioners to develop a value proposal from this document and is currently working towards financing this initiative and obtaining further stakeholder input.
**Draft Strategic Document**

The intention is for pharmacy, as a united profession, to create a comprehensive document outlining the value and various roles that pharmacy should play within the wider development of the NHI and its services. The document should then form the template on which the various sectors of the profession can base their day-to-day activities. This will allow for standard setting and quality control to ensure that we have measurable outcomes from which we can build and improve services to achieve the vision of quality pharmaceutical care for all our citizens through UHC funded by NHI.

The primary objective of this document is to advocate for the inclusion of all pharmaceutical services within NHI. The secondary objectives in order to achieve the primary objective are:

- To utilise all available pharmaceutical healthcare professionals and resources;
- To achieve positive clinical outcome at the best possible price;
- To sustain and improve availability and accessibility of essential medicines and pharmaceutical care;
- To enhance efficiency and equity;
- To propose an implementable plan detailing models of delivery - people and processes;
- To link providers to information of their performance and the health needs of the population that they serve; and
- To develop approaches to preparing and supporting pharmacists, pharmacy support personnel and pharmacies in making organisational change, including methods that redefine and redistribute the use of resources, business process, budget allocations and operations that will significantly adapt pharmaceutical care for NHI.

**Contributions to the Draft Strategic Document**

Each grouping was tasked to compile input to an overall draft strategic document that will formally map the role of the pharmacist in UHC and NHI. Associations and societies were invited to contribute together with stakeholders for the different categories of pharmacy. The Steering Committee representative coordinated this activity to ensure that broad and multi-stakeholder input was included. Submissions from the following groupings of pharmacy were received:

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<tr>
<th>Pharmacy grouping</th>
<th>Representative</th>
<th>Collaborative bodies</th>
</tr>
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<td>Manufacturing</td>
<td>Vacant</td>
<td>South African Association of Pharmacists in Industry (SAAPI)#</td>
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<td></td>
<td></td>
<td>Pharmaceutical Task Group (PTG)*</td>
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<td>Black Pharmaceutical Industry Association (BPIA)</td>
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<td>Distribution and Wholesale</td>
<td>Trevor Phillips</td>
<td>Pharmaceutical Logistics Association of South Africa (PLASA)</td>
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<td></td>
<td>Ravina Govender (alternate)</td>
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<td>Community</td>
<td>Corporate: Jan Roos</td>
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<td>Tanya Ponter (alternate)</td>
<td>South African Association of Community Pharmacists (SAACP)*</td>
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<td>Courier: Louis Scheepers Ansie van der Merwe (alternate)</td>
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**Independent practitioner**

The Steering Committee realised that since this draft document is a compilation of different contributions and input, an independent practitioner is needed to take the sector specific input and compile a consolidated strategic document that both reads well and delivers the objectives. It is crucial to ensure that a golden thread runs through the different groupings. This specialist must identify and remedy shortcomings based on international practice models and an in-depth understanding of South African policy and needs, shape a submission that unites pharmacy across all disciplines and compile a compelling introduction and conclusion.

This process was put to tender and stakeholders were invited to nominate potential candidates to act as independent practitioner. Three nominations were received. All nominees presented to the NHI Forum during their 2nd meeting on 28 June 2018 and had to briefly introduce the person or organisation, their BEE status, previous experiences with similar projects or submissions, their view of the next step in collating the industry (professional) input, time-lines and cost. Members of the NHI Forum present at the meeting made a decision to request two candidates namely PricewaterhouseCoopers (PwC) and Pharasi Pharmacy Consultants to combine and integrate efforts in a single proposal. A final combined proposal was received by the collective mid-July 2019.

**Financial support**

In order to achieve the objective, financial support from stakeholders has been requested. Up to now, all representatives on the NHI Forum and Steering Committee were funded from their constituencies. The next phase of this ground-breaking project requires significant funding and the NHI Forum requested stakeholders to pledge financial support towards the development of the Pharmacy Value Proposition for NHI in South Africa. To complete this process effectively, the NHI Forum needs to raise R2,5 million to fund the consultative processes, final preparation and presentation of the Strategic Framework Document for pharmacy in NHI. As pointed out earlier, “we have one chance to shape our future in NHI” and we urge our colleagues to dig deep and pledge financial support for the fund.

To date, a total of R1 156 510 was pledged towards this project of which R961 500 was pledged by PSSA National Office, branches and sectors. A second call for financial support was circulated to members of the NHI Forum for the outstanding R1 418 293 excluding VAT and disbursements. The aim is to commence with this project before year end to avoid another annual price increase from the consultants.
Further input and comments from practising pharmacists

Once the independent practitioner(s) have concluded their work on the strategic document and value proposal, it will be circulated to all pharmacy professionals for input and comment. Circulation will be done mainly through associations and societies to their members who can in return forward their input to these organisations. Pharmacists will have a three month commenting period which will commence once the document is made available. Stakeholders will also work together to provide roadshows across the country to explain the document to pharmacists and evoke discussions and debates. Once comments are included in the strategic document and value proposal, the final version will be presented to the Minister of Health, the Director General of Health, the Portfolio Committee on Health and all relevant structures.

Additional Information

For any additional information contact the Secretariat or your sector representative.

2.2. PRESIDENTIAL HEALTH SUMMIT

On 24 August 2018 President Cyril Ramaphosa addressed a stakeholders meeting on NHI. He indicated that NHI has been elevated as a project to be managed from his office. The target is 2025 for the implementation of NHI for all. His request was that everyone who has an interest should submit their comment on the NHI Bill. To date more than 1000 submissions have been received.

The abovementioned event was followed by the Presidential Health Summit on 19 and 20 October 2018. The aim of this event was to discuss and find solutions to the current health care crisis in anticipation of the implementation of UHC and NHI. The attendees participated in nine commissions suggesting short, medium- and long-term solutions.

Since no professional associations for health workers were invited to the Summit, the South African Medical Association (SAMA) hosted an event for all health professional associations on 17 November 2018. This event followed the same principles and format as the summit requesting delegates to participate in different commissions and suggests solutions to resolve the health care crisis.

This set the scene for all stakeholders to submit input towards the Presidential Health Compact. PSSA, as part of the health professionals and allied health workers key sector, compiled input from members and submitted content to all nine commissions by 8 January 2019, as requested. The input from pharmacy was then consolidated with the input from other health professional associations to form a single submission from this key sector. The same was done by the other sectors. A comprehensive report was included in the March/April issue of the SAPJ.

After an extended process of finalising the document, the official signing of the Health Compact took place on 25 July 2019 at Dr George Mukhari Hospital in Pretoria. PSSA was invited to attend this signing ceremony.
2.3. HEALTH MARKET INQUIRY

The HMI began in January 2014, and was tasked with establishing whether there were barriers to competition in the private healthcare sector and impediments to patient access. The interim/preliminary HMI report was published towards the end of June 2018. The initial impression is that they found nothing negative about pharmacists. The final report should be released by 30 September 2019 at the latest. This report will most likely have an impact on the Medical Schemes Amendment Bill.

2.4. HUMAN RESOURCES FOR HEALTH STRATEGY

On 7 August 2018, the NDoH hosted a National Indaba on Human Resources for Health. The objective was to start discussions on the development of the National Strategic Plan for Human Resources in Health (HRH) 2019/2020 – 2024/25. This event included presentations on various factors which impact on the availability or effectivity of human resources in the healthcare sector (both public and private). Breakaway groups debated in one of eight commissions on what was missing from the current strategy, how success will look in 2030 and which barriers could prevent achieving that success, and lastly initiating any innovative, out of the box ideas for improvement.

The eight commissions are:
Commission 1: Labour workforce projections, skill mix and cost (including post analysis), migration
Commission 2: Education, training and development, continued learning, faculty / learning environment
Commission 3: Recruitment, deployment, distribution, retention (migration), re-engineering
Commission 4: Positive workplaces, practice environments and conditions of employment
Commission 5: Performance, utilisation, quality & accountability
Commission 6: HR governance, leadership and management, planning capacity
Commission 7: Monitoring & evaluation, use of data, information, decision-making, research, innovation
Commission 8: Financing, costing, budgeting

During July 2019, PSSA was made aware through one of our partners of a call for input to the 2019/2020 to 2024/2025 Human Resources for Health Strategy (HRHS) advertised on Twitter. We were disappointed to note the deadline was three days away, regardless of the fact that PSSA was one of the stakeholders attending the National Indaba in August 2018.

Our submission to the HRHS included the following issues under the requested headings:

- Health workforce needs and cost
  - Workforce ratios between pharmacists and the population globally and in South Africa [see 1]
  - Pharmaceutical Community Service [see 1.4.5]
  - Internships for pharmacists [see 2.12]
  - Post-pharmaceutical community service [see 2.10]
  - Midlevel health workers
Education and training

- Shortage of academic human resources [see 0]
- Occupations in high demand [see 2.15]
- Training of pharmacists
- Specialities

Leadership, management and governance

- Guidelines for management of the pharmacy/pharmaceutical services
- Good pharmacy education standards [see 1.4.4]
- Leadership development

Positive practice environment and conditions of service

- Fraud, waste and abuse [see 2.11]
- Pharmacist-initiated therapy
- Primary Care Drug Therapy
- Conditions of service

Information, monitoring and evaluation

- Continuing Professional Development [see 1.4.1]

2.5. HIV/TB THINK TANK

An HIV and TB Think Tank meeting was held in August 2018. The purpose of the meeting was to explore strategies to strengthen HIV and TB integration in prevention, care and service delivery, in both the public and private sectors, in order to optimise both TB and HIV outcomes.

There were two strong themes at this meeting. The first was how to identify/find the “missing cases” (TB patients who are not yet diagnosed and/or on treatment), as was discussed at the recent TB conference in Durban. A strong emphasis was also on how to include/incorporate/use the private sector in this regard. As the only representative body on behalf of pharmacists at the meeting, the role the pharmacist can play in linking these two important issues was highlighted. Patients with symptoms will visit a community pharmacy to seek symptomatic relief for symptoms. The patient may suffer from all the typical TB symptoms but is unlikely to have the knowledge to “link all of these symptoms” to a specific disease - in this case TB. The community pharmacist has the ability to do that, especially if the patient is a regular patient to a community pharmacy, or seeks relief for the same symptom over a period of time (e.g. persistent cough). Community pharmacists can therefore assist the NDoH to “find the missing cases” when it comes to TB. This was widely welcomed by the audience.

The HIV Think Tank meetings are continuing as working groups. There is a prevention and a treatment working group and the PSSA attends these meetings on behalf of pharmacists.
2.6. HUMAN RESOURCE CRISIS IN ACADEMIA

The PSSA was very aware of the shortage of pharmacy academics at Nelson Mandela University (NMU) and knew that they were faced with the challenge of both providing existing undergraduate students with academic content and mentorship, and of ensuring that appropriately qualified and experienced personnel are sourced and retained to meet present and future needs of the Department. While the PSSA was not in the position to provide them with human resources or financial assistance, the PSSA wrote to the acting head of school that she and the Department of Pharmacy were in our thoughts.

In a letter to the SAPC in September 2018, PSSA expressed their support to the SAPC in whatever action it deems necessary to impress on the University management that urgent attention must be paid to the matter of adequate and appropriate staffing measures.

In February 2019, the PSSA together with the Academy of Pharmaceutical Sciences of SA (APSSA), a sector of the PSSA, wrote to the Minister of Health to bring this matter to his attention.

On 17 April 2019, the President of the Society and Chair of APSSA met with Dr Anban Pillay, DDG: NHI and Ms Janine Jugathpal to discuss this issue. PSSA decided to invite the Heads of School of the three closely located universities. Prof Patrick Demana, Dean: School of Pharmacy, Sefako Makgatho Health Sciences University, and Prof Gill Enslin, Head of Department: Pharmaceutical Sciences, Tshwane University of Technology – Arcadia campus joined the delegation. Prof Yahya Choonara, Chair and Head: Department of Pharmacy and Pharmacology, University of the Witwatersrand, was invited but could not attend due to an SAPC Exco meeting.

The issues raised in the PSSA’s letter were discussed and explained. It was great to have Proff Demana and Enslin there to share their experiences with the Department and echo what was stated in the initial letter to the Minister in February 2019. The fact that an entry level pharmacist in the public hospital (first year post community service) earns similar or more than a pharmacist in academia with a PhD and 10 years’ experience, came as a massive shock to the Department.

Dr Pillay suggested a way forward where APSSA must compile a table with each factor identified for each of the nine pharmacy schools and list the extent to which each factor affects the school. The requested submission was submitted to the NDoH during July 2019. The documents need to be reviewed together with Dr Pillay and Dr Jugathpal, where after it will be tabled at a JSEC meeting between the NDoH and Department of Higher Education and Training (DHET), to which the PSSA President will accompany the Department of Health.

2.7. CANNABIS

On Tuesday 18 September 2018 at 10h00 the Constitutional Court handed down judgment in the application for the confirmation of an order of constitutional invalidity made by the High Court of South Africa, Western Cape Division, Cape Town (High Court) which declared legislation criminalising the use, possession, purchase and cultivation of cannabis unconstitutional. The High Court suspended the order of invalidity for a period of 24 months from 31 March 2017 to give Parliament the opportunity to cure the constitutional defects in the statutory provisions concerned. It also granted interim relief by ordering that pending the amendment of the relevant legislation by Parliament, it would be deemed to be a defence to a charge under the sections referred to in the
order that the use, possession, purchase or cultivation of cannabis in a private dwelling was for the personal consumption of the adult accused. The judgement declared section 22A(9)(a)(i) of the Medicines Act was constitutionally invalid to the extent that it renders the use or possession of cannabis by an adult in a private dwelling for that adult’s personal consumption a criminal offence.

In February 2019, Mr Andy Gray addressed the PSSA NEC on the current status of cannabis in South Africa. The presentation was recorded and loaded to a PSSA YouTube channel for access by members.

The Minister of Health published in terms of section 36(1) of the Medicines Act an exemption from the requirement of section 22A(2) of the Act for Cannabidiol (CBD) containing products that is valid for 12 months from 15 May 2019. The exemption are for preparations that contain CBD that:
(a) contain a maximum daily dose of 20 mg Cannabidiol (CBD) with an accepted low risk claim or health claim which only refer to:
   I. General health enhancement without any reference to specific diseases;
   II. Health maintenance; or
   III. Relief of minor symptoms (not related to a disease or disorder); or
(b) Consist of processed products made from cannabis raw plant material and processed products, where only the naturally occurring quantity of cannabinoids found in the source material are contained in the product, and which contains not more than 0,001 % of tetrahydrocannabinol (THC) and not more than 0,0075 % total Cannabidiol (CBD).

In addition to the exemption an update to the schedules was published regarding CBD. In 2017 CBD when intended for therapeutic purposes was inserted in schedule 4 while it remained in schedule 7 for any other purpose. The update removed CBD from schedule 7 and any CBD preparations not covered by the exemption is schedule 4. There were no changes to tetrahydrocannabinol (THC or dronabinol) in the schedules and it is still schedule 6 when intended for therapeutic purposes and schedule 7 when not for therapeutic purposes.

2.8. CODEINE MISUSE AND ABUSE
The PSSA, together with many others, was shocked when the investigative journalism television series Carte Blanche aired an episode investigating the misuse and abuse of codeine-containing cough syrups resulting in addiction by mainly the youth.

The PSSA NEC meeting in February 2019 unanimously resolved that stronger and more concerted action is needed against individuals who repeatedly tarnish the name and role of the profession through wilfully engaging in the unethical and clearly illegal supply of such products for nonmedicinal purposes. In a letter to the SAPC, the Exco requested that the SAPC should rather pursue prosecution of these individuals by initiating criminal proceedings against them. It is the opinion of the PSSA that, unfortunately, an example will have to be set through prosecution in order to ensure adherence to the legal and responsible sale of these products by every pharmacist.
Return correspondence from the SAPC noted that the unscrupulous sale of large quantities of codeine-containing cough syrups, the lack of recording of the sale of medicines, as well as the sale or promotion of the sale of medicines in any manner that has as its aim or may be interpreted or regarded as having as its aim, the promotion of the misuse or abuse or the detrimental or injudicious or unsafe use of medicines, are transgressions that are viewed in a very serious light by the relevant committees, with a move to refer such matters to the Committee of Formal Inquiry (CFI). It is also noted that the findings of the CFI are forwarded to the NDoH, in order to affect the potential withdrawal of a pharmacy licence in terms of Section 22(10) of the Pharmacy Act.

It is further noted that the SAPC is and has been working closely with the Law Enforcement Unit of SAHPRA as well as the Narcotics Division of the Hawks of the South African Police Service (SAPS), and will continue to do in the best interests of the patients and the profession. In order to combat the distribution of large quantities of codeine-containing cough syrups as well as other medication, all parties need to work together to protect the public.

A presentation on codeine and the role of all pharmacists in managing the substance was made available by Adcock Ingram and uploaded to the PSSA YouTube channel.

2.9. SAPC ELECTIONS 2018-2023

On 20 October 2018, the existing Council’s five-year term in office came to an end. Elections were held to elect nine pharmacists from the profession to serve on the Council for the next five years. The results were published in a Board Notice on 21 December 2018.

During their February meeting, the NEC raised their concerns similar to those raised in the petition the SAPC office received on 16 October 2018 from four nominees objecting to certain processes followed during the election process. The committee noted that a report by an independent task team was compiled which dealt with every objection raised and then concluded that the non-collection of ballots for which a call for collection was placed, were the only objections that could have had a real influence on the outcome of the election and could have prejudiced candidates 10 to 16. This, however, did not influence the outcome of the first nine candidates elected and therefore did not impact on the fairness and ultimate results of the elections.

The PSSA NEC however is of the opinion that the Regulations Relating to the Election of Members of the South African Pharmacy Council published in June 1998 are outdated and need to be reviewed and updated to prevent a similar situation during future elections. Some suggestions that could be considered are:

- Place the onus and responsibility on every pharmacist registered to check their contact details on the SAPC website before the elections take place.
- Each pharmacist who supplied an appointed physical address, postal address, facsimile number or e-mail address for the purposes of communications shall be deemed to have appointed that same address for the purposes of communicating the information and ballot paper necessary for the election process.
- Place the onus on every pharmacist eligible to vote to ensure that their ballot is returned at the time and date to the address as was communicated to him/her by the returning officer.
Allow for the ballot to be delivered by hand to the address communicated and also specify the time during office hours when the ballot can be hand delivered.

Also allow for the ballot to be successfully transmitted by facsimile or e-mail or to be posted with the date of posting deemed to have been received by the returning officer.

The suggestions above are similar to those followed by companies with the elections of directors and are an accepted practice worldwide.

The PSSA formally requested the SAPC to review the regulations and publish these for comment well in advance of the next election cycle.

2.10. PRESIDENTIAL STIMULUS PACKAGE FOR HEALTH AND POST-COMMUNITY SERVICE BURSARY HOLDERS

Health professionals with provincial bursaries have to work an agreed number of years for the province according to the bursary contract signed. Although it was not an issue before, in recent years bursary holders have reported that they have to wait months before being employed by the province or, in some cases, being released from their bursary obligations. It was reported that sometimes the provincial Department of Health were not aware of the bursaries allocated to pharmacists by the provincial Human Resources department. It is speculated that this scenario in addition to the shortage of internship positions, results from the continued pressure on the NDoH and provinces to secure sufficient CSP posts. It is therefore essential that provinces need to keep track of bursary allocations to pharmacy students to assist with adequate planning and allocation of pharmacy internships and CSP posts in the province where the bursary was awarded.

On 9 December 2018, the then Minister of Health, Dr Aaron Motsoaledi issued a media release on a Stimulus Package for Health. This announcement, which aimed to fill more than 5 300 posts in the nine provincial departments as from January 2019, was as a result of the implementation of the recommendations of the Presidential Health Summit held in October 2018. For pharmacy, the following provinces were listed to benefit with increased posts:

- Eastern Cape: 50 pharmacist’s assistants
- Gauteng: 10 pharmacists, 10 pharmacist’s assistants
- KwaZulu-Natal: 50 pharmacist’s assistants
- Limpopo: 68 pharmacists
- Western Cape: 2 pharmacists, 16 pharmacist’s assistants
- North West: 3 pharmacists, 42 pharmacist’s assistants

However, in the Limpopo province concerns were raised about the abovementioned implementation. According to the local branch of the South African Association of Hospital and Institutional Pharmacists (SAAHIP), a sector of the PSSA, the provincial treasury announced that only post-community service medical officers would be appointed. All other health care professionals were released from their bursary obligations. For pharmacy the result was that 68 CSP’s employment and bursary obligations were ended. In a letter to the Minister of Health, SAAHIP requested the Minister’s intervention in ensuring the equal spread of allocated resources and the implementation of the Presidential stimulus package. To date this issue has not been resolved and this seriously impacts on the provision of pharmaceutical services and care across the Limpopo province.
Another letter was sent to the current Minister of Health, Dr Zwelini Mkhize dated 26 June 2019, to bring this issue to his attention. A letter of acknowledgement was received from the current Minister assuring us that the correspondence is receiving attention.

2.11.FRAUD, WASTE AND ABUSE SUMMIT
The Council for Medical Schemes (CMS) organised a Fraud, Waste and Abuse summit at the end of February 2019. Just before the summit, a draft Industry Charter was published for comment. The deadline for comments was really tight. The PSSA submitted comment that supported the submission made by the Independent Community Pharmacy Association (ICPA). The PSSA was invited to be part of a panel discussion at the summit and a few pertinent issues were raised regarding the manner in which the medical schemes conduct investigations into suspected healthcare fraud. These concerns were mirrored by the other professional bodies that attended the summit.

CMS has committed to an Industry Code of Good Practice to be developed for investigations into alleged healthcare fraud, waste or abuse. The Code has not yet been published for comment.

At the summit allegations of racial profiling of medical schemes towards healthcare professionals were raised. This has subsequently lead to an investigation by CMS into these allegations – Section 59 Investigation, this investigation is currently underway. In parallel the Human Rights Commission of South Africa has established its own inquiry into these allegations. This inquiry is ongoing at the time of going to print.

It is believed that the Code of Good Practice will only be published for comment once the Section 59 Investigation has been concluded.

2.12.GRADUATES WITHOUT INTERNSHIP
Despite the sufficient number of pharmacies with active premises approval and tutors approved for training of interns, for the past two years a number of pharmacy graduates (±250 by the end of 2017 and ±95 by the end of 2018) were unsuccessful in securing internship positions. In a recent recording of the preferred facility of internship, final-year pharmacy students indicated that more than 55% of participants prefer to perform their internship in the public health sector. This might be due to more favourable employment conditions such as remuneration and working hours. Although this is in line with the vision to attract more health care professionals to the public health sector with the ultimate aim to retain them, the number of pharmacies in the public health sector (public institutional pharmacies n=628) is much lower than in comparison with private health sector pharmacies (community pharmacies n=3381, private institutional pharmacies n=310, manufacturing pharmacies n=258).

A factor that further impacts on the availability of internship posts is community service [see 1.4.5]. Due to the pressure on the NDoH to secure sufficient posts for CSPs in both the public and private health care sectors, it is speculated that a number of internship posts were converted to CSP posts to meet the need of the NDoH. This is understandable as a pharmacist intern may provide or perform all the services or acts pertaining to the scope of practice of a pharmacist’s assistant registered in the category pharmacist’s assistant (post-basic) under the direct personal supervision
of a pharmacist in the pharmacy where a CSP may work without any supervision, acting independently. A CSP requires no supervision, training or additional resources.

Despite the abovementioned, the existing number of graduates who are unsuccessful in securing internship positions creates the false impression of an oversupply of graduates by universities and thus impacts negatively on the already unfavourable pharmacist-population ratios. The PSSA requested through their submission to the Human Resources for Health Strategy [see 2.4] that approved pharmacist intern posts in all sectors of pharmacy including the public health facilities, not be converted to CSP positions, as it will hinder the sustainable supply of pharmacists to the health care sector.

During the past year, in an attempt to prevent the above-mentioned situations repeating itself, the PSSA launched a number of activities:

- Webinar on Prepare to apply for internship [see 0]
- Sourcing information on funding available through the Health and Welfare Sector Educational and Training Authority (HW SETA) which employers can access when employing interns (see PSSA Newsletter #10);
- Sourcing information from the nine schools of pharmacy on the number of secured internship positions by final year students during July and October 2019, in an attempt to determine if the problem lies with specific institutions or is spread across all schools;
- Sourcing information from the nine heads of pharmaceutical services (HOPS) regarding the number of internship positions per province during the past five years as well as the planning for the next five years; and
- In the unfortunate event where there again are graduates without internship positions by January 2020, a more comprehensive data collection tool will be used to collect more detailed information from graduates for distribution to stakeholders.

2.13. SOUTH AFRICAN NATIONAL AIDS COUNCIL (SANAC)

2.13.1. Civil Society Forum Consultation

The South African National AIDS Council (SANAC) is a voluntary association of institutions established by the national cabinet of the South African Government to build consensus across government, civil society and all other stakeholders to drive an enhanced country response to HIV, TB and STIs. SANAC has 18 very diverse civil society sectors, which represent specific sections of society.

The Civil Society Forum (CSF) of SANAC in conjunction with UNAIDS and the Red Cross Society of South Africa organised a “Consultation”. This was in light of a United Nations High Level meeting on UHC in New York in September 2019. At this High Level meeting the Civil Society Engagement Mechanism (CSEM) for UHC 2030 will present the “asks” of the Global Civil Society.

The Consultation was organised in order to determine the “asks” that South Africa would like to pronounce in New York as well as the “asks” to the leaders of South Africa regarding UHC. This consultation took place 4 - 5 July 2019 at the Kopanong Hotel and Conference Venue in Kempton Park.
The consultation was attended by 120 representatives from various civil society stakeholders, but in addition the secretariat thought to invite 10 representatives from the health professionals sector for their input, since the engagements during the Presidential Health Summit Steering Committee was quite positive. Anri Hornsveld from the PSSA National Office attended on behalf of pharmacists.

The Consultation was addressed by SANAC trust CEO Dr Sandile Buthelezi, Dr Narwal from the WHO and Dr Mugabe from UNAIDS. They explained the Sustainable Development Goals (SDGs) as well as the approaches identified in the interest of meeting the SDG 3.8 targets namely: development of financing strategies; expanded health insurance access; defined essential health benefits packages; strategies to ensure quality of care and leaving no one behind.

It was noted that the highest burden of disease in South Africa is from NCDs, HIV/TB, Violence and Maternal/Child health. It was also mentioned that some of the lessons learned from the HIV/AIDS response can be used to achieve UHC. The concept of UHC is beyond just PHC and encompasses healthy lives and wellbeing for all at all ages. Investing in health equals equity and economic growth which leads to a prosperous South Africa.

One of the messages was that South Africa should move away from health systems towards systems for health.

The Consultation was also addressed by the Minister of Health, Dr Zweli Mkhize. He touched on the Presidential Health Compact but mainly talked about NHI – the South African strategy of achieving UHC.

The Minister noted that NHI will have the following benefits to individuals, communities and society:

- Access to quality health care services
- Benefiting from social solidarity
- Providing financial risk protection
- Services provided under NHI
- Improving quality of health care
- Reduction of the disease burden
- Benefits of NHI to individuals and communities
- Benefits to the individual, population, employers and the economy

He re-iterated that the focus will be on disease prevention, health promotion and the population living long, health and happy lives and not only on treatment. He concluded “by affirming that NHI should not be viewed merely as consumption expenditure but a social investment that is a basis for sustainable and inclusive growth for our economies through a healthy workforce and thus poverty reduction, job creation as employment creators are assured of a healthy workforce and an increase in the tax-base of the country and fiscal sustainability. Expenditure in health is part of investment in economic growth and development”.

Dr Olive Shishana, Social Policy Advisor to the President and chair of the Presidential Health Compact Steering Committee, addressed the meeting. She confirmed that the Presidential Health
Compact has been finalised and would be signed by the steering committee on 25 July 2019. She highlighted only the main aspects of the Compact in the interest of time. [see 2.2]

Dr Shishana emphasised that the implementation of this compact is expected to contribute significantly to improving the current broken public healthcare system so that many more South Africans are able to access quality healthcare. She concluded by stating that the participation of government and key stakeholders in the development and implementation of various components of the compact will deliver significant benefits to the health system, thereby making a significant contribution to the realisation of the Constitutional right to Health through enhancing South Africa’s economic and social potential and enabling people to live healthy and productive lives.

2.13.2. Health Professions Sector
The Health Professions Sector is represented by three members, who currently are a medical practitioner, a nurse and a pharmacist. Two other pharmacists were appointed to assist the Sector when necessary. When attending meetings, the Health Professions representative must view the discussion from the point of view of the patient, and should in fact be considered to be a patients’ rights advocate.

There will be a SANAC Health Professions Sector meeting held later in the year when new representatives will be elected.

2.14. PHARMACY MONTH
The PSSA has collaborated with the NDoH and the SAPC to develop material for Pharmacy Month which takes place annually during the month of September.

The theme for 2018 was “Use medicines wisely”, together with the tag line “Ask your pharmacist”. The key messages to be emphasised were know your medicine, store your medicines correctly, travel safely with your medicines and talk to your pharmacist.

Marketing material was developed through nine posters and two pamphlets containing content in English, Afrikaans, IsiXhosa, IsiZulu, Sepedi, Sesotho, Setswana, TshiVenda and Xitsonga. Below is the image of the English poster

![English Pharmacy Month Poster](image)
Pharmacy Month activities were showcased on the PSSA Facebook page by the Vhembe district of SAAHIP Limpopo, SAAHIP Mpumalanga branch and post-graduate students in Public Health from Sefako Makgatho Health Sciences University.

Towards the end of 2018, planning had already started for the 2019 Pharmacy Month. This year ICPA joined as a partner. The committee investigated a number of topics which was presented to the Heads of Pharmaceutical Services in December 2018 for a recommendation on the 2019 theme. This year the theme will be “Mental illness can be treated – Ask your pharmacist for advice”. The committee developed posters and pamphlets in all eleven official languages which can be downloaded from the PSSA website.

2.15. OCCUPATIONS IN HIGH DEMAND LIST
The Department of Higher Education and Training published the Occupations in High Demand (OIHD) list on 22 June 2018. This list has three “levels of demand” namely high, higher and highest. Hospital pharmacist, industrial pharmacist and retail [community] pharmacist are all listed in the “Higher” level, as they were listed in the previous publication. This time, university lecturer is also included on this level, for which we motivated some years ago.

This list is published every two years and the PSSA received a call for evidence towards the 2020 OIHD list. Since the patient-pharmacist ratio in practice settings, and the student-lecturer ratios in academic institutions are in both scenarios far more than the global average, the PSSA will submit substantial evidence to motivate for inclusion in both higher and highest levels respectively.

2.16. SAPHEX 2018
During the 2018 SAPHEX/The Pharmacy Show exhibition on 1 and 2 November, PSSA was offered an exhibition stand free of charge. This stand offered PSSA the opportunity to interact with both members and not-yet-members on matters such as membership, services, indemnity insurance, etc. PSSA’s presence at the event resulted in a few new membership applications.

3. MEMBER SERVICES OFFERED BY PSSA AND ITS PARTNERS
For the past two years, there has been a renewed focus on the membership benefits offered by the PSSA to its members. The PSSA strives to provide members with value-added benefits to meet a variety of needs the pharmacy professional may develop during their careers. In addition to the services mentioned in the previous annual report, the following additions is important to notice.

3.1. MEMBERSHIP BENEFITS COMPARISON
The January/February issue of the SAPJ featured a comprehensive report on membership benefits and to which categories of membership it is applicable. Two important changes were implemented from January 2019:
- PSSA newsletters were previously only sent out to pharmacists, interns and assistants. From 2019, certain newsletters were also sent out to pharmacy student members. The reason for this is to (1) expose students earlier to the reality of what is taking place in the practice of pharmacy and (2) to show membership value to students.
The SAPJ is sent in hardcopy format to all members except academic interns and students as they do not pay the full membership fee for their category. As from 2019, the link to the electronic version of the journal is sent to these members to ensure they receive the same up to date information.

Bursaries, depending on the availability and sponsor specifications, are reserved only for academic intern (post-graduate) and pharmacy student members (undergraduate).

The comparison further clearly indicates that only ordinary members are entitled to use the abbreviations MPS or FPS after their names, may vote on motions, may nominate and vote during committee elections, be nominated and/or appointed to committees or act as a counsellor on behalf of the branch or sector to the General Council.

3.2. PPS INSURANCE PRODUCTS

The PSSA and PPS continue to offer professional indemnity insurance to PSSA members. Thank you to PPS for the continued support offered to PSSA members. A marketing tool was developed in collaboration with PPS, Hollard and Itoo to highlight the benefit and additional support members have when signing up for this product.
3.3. WORLD PHARMACISTS DAY

Annually, World Pharmacists Day take place on 25 September and the theme for 2018 was “Pharmacists – your medicines expert”.

The PSSA mailed the postcard collected at several events during 2018 to each delegate during August 2018 which reached the delegate before 25 September to remind them of the things that make them a medicines expert.

At the 2018 PSSA Conference, delegates had the opportunity to take photos at a dedicated stand with a speech bubble indicating the theme and record short messages stating how they use their experience as medicines experts. These messages materials were combined in a marketing video that was shared on social media with colleagues, the public and international audiences. The final version of the video was uploaded to the PSSA YouTube channel.

3.4. PSSA PHARMACY LAW COMPENDIUM

This continues to be published by LexisNexis on behalf of the PSSA. Although the current edition which contains both English and Afrikaans will continue to be available, it was decided to produce an edition which features only English.

The PSSA is aware of other products claiming to be similar to our product. After an intense review and comparison between some of the products the conclusion reported to the PSSA NEC was that:

- The product of the PSSA is available in both hard copy and online and the number of subscriptions indicates to us that there is still a need to keep both options.
- Although it appears that some other products may have more Acts included in their advanced subscriptions, the PSSA is convinced that the concise excerpts of specific Acts included in Volume 2 are sufficient for the needs of a pharmacist in South Africa.
- A link to all SAHPRA documentation, application forms and circulars were created on the PSSA website (https://www.pssa.org.za/Member/Prof_Links) to assist members with easy access to these documents.
- The PSSA cautions membership not to only trust and rely on guidelines written by individuals as these cannot stand in a court of law.
- Renewal costs for the PSSA Pharmacy Law Compendium are substantially lower than the initial subscription fee for the product and also lower than the renewal fee for other similar products.
- PSSA members can get 10% discount when purchasing the PSSA Pharmacy Law Compendium. This is of specific importance to student members who purchase the product as part of their undergraduate studies in order to continue annual renewal of the product.
- The online version of the law compendium is updated as soon as legislative changes are gazetted, while the hard copy version is updated at certain intervals.

The PSSA therefore concluded the comparison that our current product, which is an asset to the Society and its members, is up to date, comprehensive and sufficient to the needs of our members.
3.5. WEBINARS AND YOUTUBE

A webinar on “Patient counselling and medicine information – does one size fit all?” was hosted in August 2018. The focus of this CPD session was to highlight the obligation pharmacists have to provide comprehensive patient counselling. This webinar further focussed on the impact different personality types have on how you communicate with the patient and how the information is received.

During June 2019, a webinar on “Prepare to apply for internship” was hosted exclusively for PSSA final year student members. The webinar was hosted in collaboration with three pharmacists from respectively private hospital, independent community pharmacy and recruitment. This webinar was the most attended of all hosted by the PSSA to date with 163 registrations. The aim of the webinar was to assist final year students with the necessary advice on how to approach applications for internship.

3.6. SURVEYS

The PSSA conducted a survey among PSP to understand their needs and/or level of satisfaction with PSSA membership. This survey was sent to all PSPs registered with SAPC who had email addresses recorded with Council. Currently only about 400 of 22 000 PSPs are members of the Society. The PSSA will use the data of this survey to encourage PSP membership to the PSSA but it will require that the Society first has to expand and restructure staff in the financial department.

A survey to all PSSA members who are tutors was conducted during July 2019. The primary purpose of this survey was to understand reasons why registered pharmacists accept or decline to act as tutors for pharmacist interns. This survey forms part of the larger internship project to determine why so many interns are left without internship positions, regardless of sufficient numbers of registered tutors and training facilities. The results of the survey were not yet available at the time of publication of this report.

3.7. POPI ACT

The PSSA approached PPS to draft a POPI Act information document in order to assist members on how to comply with the Act requirements. A copy of this document is available on the PSSA website (https://www.pssa.org.za/NewsEvents).

4. INTERNATIONAL ASSOCIATIONS

4.1. INTERNATIONAL PHARMACEUTICAL FEDERATION (FIP)

The PSSA has been a member organisation of the International Pharmaceutical Federation (FIP) for several years. FIP is the global body representing pharmacy and pharmaceutical sciences. Through their 139 national organisations, academic institutional members and individual members, they represent over four million pharmacists and pharmaceutical scientists around the world.

The PSSA is represented on different levels of the FIP structure. Ivan Kotzé represents PSSA on the FIP Council. Mariet Eksteen is serving a four-year term as executive committee member of the Academic Pharmacy Section. Tshif Rabali, current vice-president of SAACCP, is serving a one-year term on the executive committee of the Community Pharmacy Section.
At the FIP World Congress in Glasgow, Scotland, PSSA was invited to participate in a policy conference for FIP member organisations on “Improving access, coverage and trust in vaccination: Harnessing the role of pharmacists”. PSSA was reminded again of the role pharmacists can and should play in vaccinations, a role which pharmacists neglected for some time. The importance of ‘life-course’ vaccinations was again brought to our attention and that vaccination stretch further than just new-born and baby vaccinations. Vaccinations are also available for young children, adolescents, adults, pregnant women, travellers, healthcare workers and older adults.

During the annual FIP Congress an African Pharmaceutical Forum (APF) takes place. South Africa is not a member of this Forum but did support this forum with a donation of US$700 during 2018 and requested that these funds be utilised in a project that will be of benefit to pharmacists in the region.

No financial reporting was done by the President of the APF, other than an indication of which countries paid their APF membership fees. South Africa was thanked for the donation but no indication was given of how the donation will be utilised.

Every country present was given an opportunity to give a short oral report on activities currently conducted in that country. It is our opinion that the vastness of the African continent and the different languages spoken will remain a challenge for this Forum to develop and to become a Forum whereby its activities will benefit the pharmacist members of the PSSA.

PSSA further participated in a consultation meeting between FIP and Member Organisations on membership value and engagement. PSSA is of the opinion that FIP membership provides us access to resources we wouldn’t otherwise have access to e.g. global reports, trends and analysis. Just as PSSA is an advocacy agent on behalf of pharmacists and pharmacy support personnel in South Africa with stakeholders such as the NDoH, FIP is an advocacy agent on behalf of its members with stakeholders such as the World Health Organization (WHO). Involvement of an organisation like PSSA in FIP allows for the opportunity to benchmark efforts and outputs as professional individuals, practice and as a Society, and to focus our work to align with the global and local need.

During the past year, PSSA participated in several global surveys conducted by FIP. A Global Survey on Advanced Practice and Specialisation aims to collect updated information regarding the status of advanced practice and specialisation of the pharmacy workforce globally. The data will be used to identify gaps, shortages and cooperation opportunities, and will provide the evidence-based information needed to progress initiatives for increasing pharmacy education capacity and workforce development. The final report is not yet published.

PSSA was invited to participate in a survey aimed at Progress towards the FIP Pharmaceutical Workforce Development Goals, in partnership with the Commonwealth Pharmacists’ Association (CPA). The research objective is to assess the needs for pharmacy workforce development across the Commonwealth. These needs will be determined by reviewing the progress of Member Organisations in the context of FIP Pharmaceutical Workforce Development Goals. The aim of this project is to determine what future work is required to support the Commonwealth member states in
advancing their national pharmacy workforce, and to identify commonalities and understand variations in needs across the Commonwealth. The final report has not yet been published.

For the global survey on the role of pharmacists in non-communicable diseases (NCDs), the PSSA was invited to submit a case study on South Africa. This report was published on 7 April 2019 which was World Health Day. Out of 102 countries and territories, responses were received from 70. The report consists of prevention, screening and early detection activities or services offered by pharmacists around the world. PSSA is currently in the process of compiling a marketing poster which pharmacists can use to indicate which services a pharmacy offers to patients in beating NCDs in the community.

It is important that the PSSA should use the FIP documents in order to develop plans and activities to assist our members and enhance professional practice. In September 2018 FIP published a report on workforce intelligence which indicated that South Africa, although one of the highest in Africa, has a substantially lower pharmacist to patient ratio when compared to the global average. This information was used in a recent submission on the Human Resources for Health Strategy document. [see 2.4]

PSSA submitted a bid to host the FIP World Congress of Pharmacy and Pharmaceutical Sciences in South Africa in 2022. The outcome of the bid is not yet known but PSSA stays optimistic that this international congress will be offered to pharmacists and PSP on African soil.

4.2. COMMONWEALTH PHARMACISTS ASSOCIATION (CPA)

The focus of the CPA this year has been anti-microbial stewardship. Ivan Kotzé attended the CPA workshop that was held during the FIP Congress in Glasgow in 2018. There has not been a CPA Council meeting for this year.

5. COMMUNICATION WITH MEMBERS AND PUBLICATIONS

5.1. E-NEWSLETTERS TO MEMBERS

This continues to be our primary means of communication with members. It is an easy and convenient way to inform members of important information and events as and when they happen. During 2018, a total of 47 newsletters were sent out. For 2019, 27 newsletters were sent to PSSA members by the end of July.

5.2. FACEBOOK

Facebook has been used extensively to communicate important information to pharmacists, and to share with them relevant articles appearing in electronic media. There are several facebook pages relating to the PSSA, such as Pharmaceutical Society of South Africa, PSSA YPG, SAAHIP, SAAPI, and several branch pages. It is important to keep in mind that Facebook communication will never replace the member benefit communication such as e-newsletters and journals. Facebook communication are also used to ‘market’ the Society to not-yet-members.
5.3. JOURNALS
The South African Pharmaceutical Journal (SAPJ) and the South African Pharmacist’s Assistant (SAPA) are published by Medpharm Publications on behalf of the PSSA. The SAPJ is published six times a year, and SAPA is published four times a year.

5.4. MEDIA RELATIONS
The PSSA continues to have a good relationship with external media. The National Office is frequently contacted for comment. If the National Office cannot assist the journalist, the journalist is referred to a credible source.

5.5. PSSA WEBSITE
One of the National Office’s upcoming projects is the revitalisation of the website. In particular, the website is currently not used by all sectors and branches. It is hoped that this will be remedied in the coming year.

6. FOUNDATION FOR PHARMACEUTICAL EDUCATION

Undergraduate Allocations - 2019

In 2019, a total of R157 000 was available for allocation from 6 sponsors and 9 undergraduate students received bursaries.

A total of 49 applications were received, of which 36 were female and 13 males; 7 NMU, 3 NWU, 16 Rhodes, 1 SMU, 2 TUT, 2 UKZN, 4 UL, 6 UWC and 8 Wits - 31 2nd year, 14 3rd year and 4 4th year.

| FPE Undergraduate Bursaries 2019 |
|---------------------|-----------------|---------------|
| **Sponsors**        | **Name**        | **University / Study year** |
| Cape Midlands - ERS Windsor | Ms Nicola Violante | NMU / 2 |
| CWP Branch          | Ms Eljean Mathee | UWC / 3 |
| KZN Coastal - LF Wood | Ms Sithembiso Mwelase | NMU / 3 |
| KZN Coastal - LF Wood | Ms Vriksha Singh | Rhodes / 2 |
| KZN Coastal - Ambler Brothers | Ms Tyler Frank | UKZN / 3 |
| KZN Coastal - Ambler Brothers | Mr Halalisani Shabangu | UKZN / 2 |
| PSSA Southern Gauteng | Ms Ntombizodwa Luwaca | Wits / 2 |
| PSSA Southern Gauteng | Ms Ramatsobane Mphahlele | Wits / 3 |
| PSSA                | Ms Hester van der Walt | NWU / 3 |
DEMOGRAPHICS OF BURSARY ALLOCATIONS

75% of the successful applicants are Black as per the BBBEE definition.

Race and gender distributions

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<th>Male</th>
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Year of study

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<td>-</td>
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<tr>
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The Universities of study

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</thead>
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<td>-</td>
</tr>
<tr>
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<tr>
<td>NWU</td>
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<td>11.11</td>
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<td>Rhodes University</td>
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The FPE would like to thank all of the sponsors for their continued commitment and support for their generous sponsorship.

7. YOUNG PHARMACISTS’ GROUP OF THE PSSA

Committee meetings

Face to face meetings are challenging, to date two face-to-face meetings were held, November 2018 and February 2019. Arranging meetings after the NEC meetings was found to be the most successful as most of the committee members can attend.

Two Skype meetings were held that presented its own challenges but were productive. Because of time constraints, an Email thread which served as a “virtual meeting” where members could comment and raise opinions as soon as they had sufficient time was introduced. WhatsApp also proved as an effective communication tool.
Activities
YPG was represented at various internship and community service orientation events hosted either by SAPC or the local branch with huge success.
Comment on FIP mobile health document was submitted, but no feedback has been received from FIP.
YPG CWP to host FUN-RUN with SAAHIP CWP in order to raise funds for Operation Smile.
YPG CWP to host SAACP Intern research project competition.

YPG representation
- Nicole Hoffman (CWP) at the Western Cape Department of Health Intern orientation session
- Bronwyn Macauley (CWP) at the Western Cape Community Service Orientation session
- Bronwyn Macauley (CWP) represents the YPG during various sessions at UWC and highlights the value of the PSSA and the various services that it offers
- Shawn Zeelie and Tendai Mutabeni, steering committee members, represented YPG during the SAAHIP conference
- Matlapeng Shabalala, steering committee ad-hoc member, represented YPG at the Limpopo Branch SAAHIP conference as well as the intern orientation and pre-reg exam workshop at the Pretoria branch

SAAHIP Conference
Nicole Hoffman presented on her experience in winning the Professional Innovation Project and how the YPG helped her project move forward. It encouraged young pharmacists to apply for the project and participate in YPG.
Shawn Zeelie re-designed YPG Bingo and had riddles instead of questions. It was well received with good feedback. It was a difficult task however very enjoyable and it was effective and interactive.

Public relations
One of our goals was to improve the quantity and quality of the newsletters and to use mail chimp as a way to reach that goal, unfortunately that goal was not realized.

We are constantly posting updates to events as well as what is currently happening in other sectors of the PSSA. In this past year, we have been utilising the social media platform more than newsletters for engaging with our members as the majority of interaction is received via social media.
With the newer generation of pharmacist, we need to investigate the relevance of newsletters and if we shouldn't focus more on our social media footprint, Facebook, Instagram, Twitter, YouTube etc.

The following will have to be considered by the next steering committee:
1. Improve methods of circulating newsletters and articles for SAPJ and e-footprint
2. Improve visibility of YPG
   a. At PSSA sector level
   b. At PSSA branch level
   c. On all platforms of social media
3. Look at expanding the social media coverage
   a. Increase frequency of posting on Facebook Page
   b. Start YPG twitter page
   c. Start YPG Instagram page
   d. Start a YPG blog and vlog
      i. Where we will be encouraging YPG members to actively participate in all pharmacy discussion forums
4. Participate as YPG during PSSA hosted webinars

Projects coordinator
The Professional Innovation Project has really started to gain traction and is our biggest marketing tool at this stage. There are similar projects in motion and this will lead to further involvement of young PSSA members.

The Professional Innovation Project for 2019 was advertised early in November, and the due date was moved to 31 March 2019. We received 6 applications, more than ever before. We did however struggle with commitment from assessors and needed to find last minute replacements.

The winner of the 2019 project will be announced during the PSSA AGM in August. Feedback was given to the runner up of the 2018 project, which encouraged them to apply the following year. This is an important function that the project coordinator should do as this helps the applicants to understand what they need to work on and improve.

Liaison Officer
We have for the first time an up to date contact list of the various branch YPG representatives and the next steering committee will be able to effectively send communications to the branches and their YPG representatives, this will increase the visibility of the YPG at branch level.

Contact was made with the student representative from the South African Pharmaceutical Students Federation (SAPSF) with the hope of establishing an ongoing relationship, the plan is to expose the students to YPG as early as possible in their student years so as to avoid students leaving the PSSA.

Mentorship Programme
There have been a few setbacks with the mentorship programme. While the document relating to what needs to happen and how we need to do it is almost complete, we are facing difficulties in realizing our goals.

One of the constraints is finding members who are willing to attend the sessions. The appropriate time as well as venues seems to play a major role and is a big concern for us.

We also need people dedicated to the programme to ensure that we reach our goal. We cannot expect the YPG steering committee or any other committee member commit all their time to the project.
It is in my opinion that for this programme to be successful we need a dedicated team that has the sole responsibility of managing the mentorship programme, and it needs to be either done by the national office or a third party.

Gawie Malan
YPG Chairman

The outgoing YPG Steering Committee fltr. Gawie Malan, Tendai Bbosa and Shawn Zeelie
SECTOR REPORTS

Academy of Pharmaceutical Sciences

This report serves to update the Society on the activities of the Academy of Pharmaceutical Sciences for the 2018/2019 term.

COMMITTEE

A new committee was elected at the AGM held on 08 October 2018 at Spier Wine Estate in Stellenbosch. The following committee members were elected at the AGM:

Ilze Vermaak (TUT)
Deanne Johnston (WITS)
Marique Aucamp (UWC)
Jane McCartney (UWC)
Lorraine Thom (SMU)

Gareth Kilian remained on the committee as immediate past chair. At the first meeting of the new committee held in November, the committee elected the office-bearers as well as co-opted (as per our constitution) additional members to ensure a wider representation of committee members as only five members were elected of the seven required. The following is therefore the full executive committee for the 2018–2020 term:

Gareth Kilian (Chair)
Ilze Vermaak (Vice-Chair)
Deanne Johnston (Honorary Treasurer)
Marique Aucamp (Honorary Secretary)
Sandile Khamanga
Lesetja Legoabe
Jane McCartney
Madan Poka
Lorraine Thom
Nitsa Manolis (ex officio)

As indicated above, Ms Nitsa Manolis remains on the committee, assisting with our administration and representing the National Office on behalf of the Executive Director. I would like to personally thank Nitsa for all the assistance that she provides the Academy, without which, our society would cease to exist.

MARKETING, WEBSITE AND SOCIAL MEDIA PRESENCE

The academy website (that can be found at: http://pssa-academy.org.za), has been operating well since its launch in late 2018. Along with our Twitter, Facebook and LinkedIn accounts, we are aiming at increasing our digital footprint and finding new ways to better communicate with our members. We continue to also use the eNewsletter platform to send out messages to our members as well. We have also upgraded the website to include conference registration (to be discussed below).
ANNUAL CONFERENCE
The annual conference of the APSSA in 2018 was a joint conference, co-hosted by the Physiology Society of South Africa (the other PSSA), the South African Association for Laboratory Animal Science (SAALAS), the South African Society for Basic and Clinical Pharmacology (SASBCP), the Southern African Neurosciences Society and the Toxicology Society of South Africa (ToxSA) and was convened by the University of Stellenbosch. This did make it more complex in terms of ensuring the identity of the Academy within the larger conference, particularly as the organizing university did not have a pharmacy school. I would like to thank Dr Marique Aucamp from UWC, who represented the interests of the Academy on the organizing committee due to her proximity to the organizing institution. The conference took place from 7 – 10 October 2018 at Spier Wine Estate in Stellenbosch.

The 2019 conference was due to be hosted by UKZN, however, they were not able to commit to convening the conference due to staffing capacity and problems securing funding. The Executive Committee took a decision to host the conference and the 2019 conference will be from 9 – 11 October 2019 at Kleinkaap Boutique Hotel in Centurion. We felt it important to have a conference this year as it would be our 40th AGM (that will take place on 9 October 2019). The theme for this year’s conference is “Bridge the Gap – Towards convergence between the classroom, the laboratory and practice”. The committee would like to invite any PSSA members who may have an interest in research, to consider attending as registration fees are very reasonable. Additional details can be found on our website.

Awards
As is tradition, several awards were made at the conference in 2018 and were presented at the gala dinner held on 9 October 2018. The awards were made as follows:

Young Scientist Award (Sponsored by Aspen Pharmacare)
Winner: Locarno Fourie (UWC)
Runner-Up: Nadine de Melim (NWU)

Teacher of the Year Award (Sponsored by Johnson and Johnson)
Dr Kim Ward (UWC)

Publication Awards (Sponsored by Boeringer Ingelheim)
Pharmaceutical Chemistry: Jacques Joubert (UWC)
Pharmaceutics: Rahul Kalhapure (UKZN)
Pharmacy Practice: Chipiwe Marimer (RU)
Pharmacology: Ilze Vermaak (TUT)

The committee would like to thank all the sponsors as well as the participants.
HUMAN RESOURCE RESTRAINTS AT UNIVERSITIES
During a PSSA NEC meeting, one member raised the issue of shortage of lecturers at pharmacy schools. This matter was discussed at various levels and a meeting arranged with the NDoH to address the issue as it was felt that it may impact the quality of education for pharmacists and thus the quality of pharmaceutical care in South Africa. Following this meeting, a survey was conducted to establish the actual extent of the problem in order to lobby the NDoH to assist us in resolving the issue. Some schools were found to be stable, however, two schools were found to be particularly at risk. Some of the possible reasons for this crisis were outlined as: inadequate remuneration, unfavourable working conditions as well as slow and cumbersome HR processes. Of interest is that the two schools identified as highest risk, offered the lowest remuneration packages for academic pharmacists in the country. As an indication, the mid-point cost-to-company package for a lecturer with a master’s degree and 2 – 5 years teaching experience is lower than a government employed Grade 1 pharmacist appointed on the lowest notch with a B.Pharm and no experience. It is critical that, as a Society, the PSSA as well as other stakeholders actively address this disparity. I also appreciate the assistance that the National Office has provided in this regard, and I hope that we can resolve some of the issues that are creating a barrier to entry into an academic pharmacist career as well as finding ways to retain staff within this vital sector.

CONCLUSION
Academic and research pharmacy is a vital sector within our profession and the Academy represents their interests within the greater profession. It is important to note that while our sector is smaller than the others, the contribution that academic pharmacists make to the sustainability of the professions is vital. The committee has therefore embarked on three strategic goals to increase the impact that the Academy has on its members and on the PSSA. These include: Strengthening the membership network / re-connecting with the membership, supporting work-based learning and re-establishing the Academy as a stakeholder of value in the profession. I trust that the executive committee and I will be able to achieve these objectives and would like to thank the current committee for their support and hard work over the last 10 months.

Dr Gareth Kilian
Chairman

South African Association of Community Pharmacists

INTRODUCTION
It is an honour and privilege to table this brief report on behalf of the NEC of SAACP. The report will highlight some of the activities of SAACP during the period June 2018 to August 2019 (app 14 months).

OFFICE BEARERS
The Office Bearers of SAACP are as follows (as from June 2019):
- President: Mr T Rabali
- Vice-President: Mr J Ravele
- Immediate Past President: Mrs C Venter
- Honorary Treasurer: Mrs N Simmonds
- Honorary Secretary: Vacant
69th ANNUAL GENERAL MEETING

The 69th AGM of SAACP was held on 9 June 2019. Only one resolution was adopted at the AGM, namely

Resolution 1/2019: Reconfirming the payment of sectoral levy at R650.00 (no increase on previous year)

AN OVERVIEW OF SAACP NEC ACTIVITIES

Five NEC meetings, including the 69th AGM, were held during the period under review, as well as three presidential committee meetings.

The meetings concerned were well-attended and took place in good spirit. Many issues impacting on community pharmacy practice were discussed. The following is merely a summary of some of these matters:

Marketing of SAACP

Marketing is done on a daily basis with responding to and assisting with multiple enquiries from members (also non-members) on matters relating to, amongst others:

- PCDT (mostly assistance required regarding applications submitted, obtaining PCNs, and services which may be provided, etc.);
- Licensing of pharmacies;
- Approval of pharmacies and tutors for training;
- SAPC inspections and how to address shortcomings;
- Legal matters / interpretations relating to both the Pharmacy Act and Medicines Act; and
- Articles in the SAPJ on community pharmacy practice issues

Primary Care Drug Therapy (PCDT)

The issuing of section 22A(15) permits to pharmacists who have completed a PCDT qualification is still a very cumbersome and slow process. In an effort to assist in this process a survey was conducted (with the assistance of Dr Mariet Eksteen of the PSSA National Office) to determine shortcomings and identify possible solutions.

A report of the outcome(s) of the survey is available on request.

International Conferences / Meetings / Liaison / Visits

Representation on the EXCO of the Community Pharmacy Section of FIP

The SAACP President (Mr T Rabali) was elected to the EXCO of the CPS of FIP at the FIP Congress in Glasgow in 2018. This election provides an opportunity to not only market (get recognition for) SAACP as an Association but also to contribute to community pharmacy affairs internationally.

Pharmintercom, September 2018

Pharmintercom consists of the Presidents / Chairmen of Board of Directors and Executive Directors / Chief Executive Officers of the Community Pharmacy Associations of the seven English speaking countries namely Australia, Canada, Ireland, New Zealand, South Africa and The United Kingdom. The Pharmintercom meeting, 2018 was hosted by the Canadian Pharmacists Association and held in Banff, Alberta, Canada from 26 - 30 August 2018. The meeting was attended by the Executive Director and the President on behalf of SAACP.

A report (“lessons learnt”) on the visit is available on request.
The value of sharing information and projects is of immense value to everybody attending. There were several new members’ present and also younger members with good vision and who are also influential in pharmacy politics in their respective countries.

**International Pharmaceutical Federation (FIP)**
The 78th International Congress of FIP was held in Glasgow, Scotland from 2 - 6 September 2018. The event was attended by the Executive Director and the President on behalf of SAACP, with approximately another 20 delegates from South Africa, representing various pharmacy related organizations in South Africa.

A report ("lessons learnt") on the visit is available on request.

**Attendance of APP Conference, Australia**
The SAACP President (Mr T Rabali) was invited to attend the World Pharmacy Council (WPC) Board meeting and APP Conference held at the Gold Coast in Australia from 7 - 10 March 2019. The need for exposure to pharmacy internationally could not be over-emphasised and the experience gained could be put to good use in our planning regarding the role / relevance of SAACP in South Africa. He also had the privilege of being part of an international discussion group / workshop on “new horizons in pain management” offered as part of the Conference.

**Hosting of Pharmintercom, 2019**
SAACP (South Africa) will have the honour to host the Pharmintercom meeting 2019, from 18 - 22 August 2019, at the Shepherd’s Tree Game Lodge, North West. Arrangements for the meeting are going well and most of the overseas delegates have already registered.

**Visit to Board of Healthcare Funders (BHF) re PCDT “locum permits”**
The Executive Director and President met with BHF representatives to discuss “locum permits” and the issuing of PCNs to PCDT pharmacists with a locum permit (i.e. not linked to a specific pharmacy).

**Visit to POLMED**
The Executive Director and President met with representatives of POLMED to convey and discuss concerns of pharmacists with service delivery due to the contractual agreement between Polmed and Scriptpharm.

**4th National Symposium for Community Pharmacists**
The annual SAACP Symposium is one of the most important mechanisms which SAACP has to convey and share information on various matters (nationally and internationally) with members. It was thus very unfortunate that the 4th National Symposium had to be canceled due to a lack of funding. Hopefully Branches of both PSSA and SAACP will make a more concerted effort in future to ensure the continuation of this important event annually.

**STAFF AND FINANCIAL MATTERS**
The funding of the NEC to be able to meet expectations of members has been a very contentious issue for many years and is getting worse.
SUMMARY
The economic viability of community pharmacy is under severe threat. The contribution of SAACP as the body representing the community pharmacy sector of the PSSA could and should be expanded to support community pharmacists in pursuing their full scope of practice. This will only be possible if innovative ways and means are explored to supplement the current income of SAACP National.

JS du Toit
Executive Director

South African Association of Hospital and Institutional Pharmacists
Here is the annual report sharing SAAHIP’s activities and achievements for 2018-2019.

MEMBERSHIP
Our membership has been on a steady incline for the past few years, but it does not mean that we did not experience a few resignations. We are still trying find ways to determine the reasons for the resignations and ways to prevent them. We have recently added the Association of Compounding Pharmacists of South Africa to our fold. We will get a status report on the registration of all their members with the PSSA at our next AGM.

SAAHIP’S ACTIVITIES
CSP survey
We undertook a survey to understand current CSP experiences and challenges in the process of applying for a CSP position in South Africa during the 2017 application cycle. The survey ran for the month of May 2018. The results indicated positive trends such as availability and accessibility of information and that the respondents were satisfied with the online process. The report is concluded and available on the website. An article on it also featured in the SAPJ. The report was also shared with the office of the Chief Director: Human Resources as we had hoped that the outcome of the survey will enable us to engage further with the NDoH and to suggest improvements to the process. However, by the time of print, no feedback had been received from his office.

The Limpopo branch had a progressive meeting with the Limpopo executive management of the Department of Health to discuss the situation around the failure to absorb post community service pharmacists [see 2.10]. Subsequently a letter endorsed by the PSSA office was sent to the Minister of Health requesting an intervention so that resources are shared and spent equitably amongst all health categories, in our case, that pharmacists are also prioritised. The non-absorption of post community service pharmacists will result in the freezing of available vacant posts thus creating a ripple effect for future appointments.

Pharmacy Month and World Pharmacists’ Day
Once again, branches did phenomenally well on their activities to celebrate Pharmacy Month and World Pharmacists’ Day on 25 September 2018. The activities ranged from fun runs and walks, career exhibitions, radio interviews provision of health talks and outreach services. We are grateful to all our members for their dedication and selfless service to the profession and the Association.

SAAHIP was invited by the NDoH to participate and contribute to the Pharmacy Month 2019 working group. The experience was quite wholesome and indicated that our efforts are being recognised which is a progressive feather on our cap.
Governance issues

- SAAHIP regulations: As NEC decided whether to use the PSSA’s regulations and amend them to suit the Association. Motions to that effect were presented to the General Council at our AGM and were adopted. The project is ongoing.
- The Director’s contract was renewed for another year in July 2018 but was unfortunately terminated in March 2019 as she had to pursue her studies overseas. The Association is grateful of her contribution and wished her the best in her future endeavours.
- Communication to members, especially paid members, is difficult due to the limiting fact that all communications is via the National Office. Some innovative ways that branches communicate with members (and by default non-members as there is no way of separating between the two) include the website, newsletters and social media.
- SAAHIP NEC hosted a workshop on the application and implications of the Protection of Personal Information (POPI) Act which was presented by the Executives of the Information Regulator – an independent body associated to the Department of Justice, who gave a presentation on the Protection of Personal Information Act (POPI).

Activities in progress

- Focus areas around legislation and policies, membership and marketing, communication, relationships with employers and policymakers, NHI, planning for pharmacy 2030, compliance with health standards are ongoing activities coordinated by all the branch chairpersons and are ongoing.
- Branch activities
  All our branches were very busy with their CPD activities for the 2018/2019 fiscal year. We also saw some of the branches forming liaisons with pharmacy schools in activities such as rational medicine use workshops for pharmacists, ongoing curriculum development and research projects, NHI workshop for students and CPDs for pharmacist’s assistants.

Conferences

- FIP Conference
  Attendance of the FIP Congress in September 2018. With highlights ranging from the debate on CPD – whether it should be an outcome based system or should we look at recertification processes, expanding the role of pharmacists in PHC through collaborative non-dispensing services and the launch of the 2018 FIPEd Global capacity trends in pharmacy workforce report – the largest retrospective (2006–2016) study of pharmaceutical workforce capacity [see 1]. The report is very relevant to SAAHIP as one of our focus areas is planning for pharmacy 2030 which entails looking into all aspects of the role of pharmaceutical service in attaining the objectives of the National Drug Policy (NDP) 2030 including staffing matters. Therefore, we hope it will provide ideas into how we can optimise existing workforce and how to capitalise in the future workforce.
- Limpopo branch hosted their first annual branch conference themed “Reengineering pharmaceutical services towards NHI”. A very comprehensive and impressive conference with a workshop which was to find our own solutions: reengineering the service models as a major highlight. Well organised and a pool of speakers of great calibre from government, private sector, school of pharmacy, YPG and various facilities. We cannot wait to see what the branch will present for their 2nd annual conference.
SAAHIP’s 33rd Annual conference and 62nd AGM took place from 7–9 March 2019. The theme was “50 shades brighter” which means that the future is made brighter by all the opportunities open to the pharmacy fraternity. Guests included Schools of Pharmacy, PSSA sectors SAPC and NDoH representatives and YPG (hosts of the clinical skills competition of which SAAHIP sponsors the prize) amongst others. There was a panel discussion based on the “Ideal Hospital” concept which was presented by the NDoH. The audience participated and contributed ideas focusing on the best practices and innovative ways of working with the intention to strengthen/ build the practice and delivery of services.

STAKEHOLDER ENGAGEMENTS

- **Head of Pharmaceutical Services meeting**
  The meeting was meant to engage and appeal to the HOPS to participate in the discussion around NHI. The HOPS who attended the meeting came from both the private and public sector hospitals. Our guest speakers included the Deputy Minister of Health, PSSA President, SAAPI and SAACP representatives and NDoH representatives. The response from the HOPS was very positive as they were awed by all the extensive work done by the various PSSA sectors in preparation of the NHI draft document submission. We plan to make this an annual event so to maintain this relationship and to work jointly with the HOPS in an action-oriented effort to grow the profession.

- **Partnership with the NDoH**
  NDoH invited SAAHIP in order to discuss partnership and future engagements on hospital pharmacy matters. The discussions ranged from the relationship with PSSA, participation of pharmacy students and young pharmacists in pharmacy matters, workforce issues in terms of amendments to legislation community service pharmacists. However, the departure of the Chief Director: HR prompted that we establish new partnerships.

- **Partnership with the SAPC**
  SAAHIP participated in the work–based learning workshop, which was to present the challenges experienced and the possible solutions by hospital pharmacists.

HANDOVER OF SMILES

SAAHIP has for many years been supporting Operation Smile South Africa. Every year at our conference, we collect smiles i.e. monetary contributions to afford a surgery for a child with a cleft condition. On 21 February 2019 the SAAHIP WC branch, on behalf of all SAAHIP branches, handed over eight smiles to the organisation. Eight children will now have a reason to smile. As SAAHIP, we appreciate our members for this generous gift.

ACKNOWLEDGEMENTS

My sincere appreciation for the support of all at SAAHIP NEC in their respective portfolios and the PSSA National Office. The business of SAAHIP could only be conducted successfully with their full involvement and the immense contribution of all members at branch level.

Refiloe Mogale
President
South African Association of Pharmacists in Industry

EXECUTIVE SUMMARY
SAAPI welcomes the opportunity to present an account of its activities for its tenure of office for 2018/2019.

The past term has been an extremely eventful period characterised by key industry changes that SAAPI was honoured to support. We were able to achieve key milestones owing to the commitment and calibre of the members of the Executive Committee. Following the advent of SAHPRA, we provided a platform for the leadership of the new authority to convey its plans and engage with industry by way of an address at our annual conference. Through our Executive Director, SAAPI was positioned as a reliable partner in sending critical communication to the industry during the times of crisis such as when there was industrial action amongst others.

SAAPI lived up to its name again in the intervening period by hosting a highly successful conference that brought prolific local and international speakers to indulge our membership and delegates on a wide range of important industry trends that are topical. Against this background we continued our collaboration with the International Society for Pharmaceutical Engineering (ISPE). The conference was well supported by exhibitors and sponsors.

SAAPI continued with its rebranding activities and launched a revamped website that makes for a seamless experience for looking for information and engaging with SAAPI by way of electronic registrations. We also continued with our flagship program of CPD which has continued to generate income for the association whilst advancing the knowledge base of our membership with renowned speakers that includes a WHO expert.

Lastly, SAAPI demonstrated thought leadership by way of commenting on a number of industry guidelines that were released for comment by SAHPRA. We were also proud to make contribution to scholarship by producing a well-researched article that was published in a peer-reviewed international journal.

GOVERNANCE AND EXECUTIVE COMMITTEE
AGM 2019
SAAPI’s 24th Annual General Meeting was held on 16 May 2019, during the annual conference.

Executive Committee
The newly appointed Executive Committee, as 16 May 2019 for the 2019/2020 term is presented below.
The Exco held their first meeting post the AGM and welcomed the new members and presented an introduction to SAAPI and its activities.

Office Bearers of SAAPI for the 2019/2020 term:
President Dr Mothobi Godfrey Keele
Vice President Gina Partridge
Treasurer Lynette Terblanche
Executive Director Tammy Maitland-Stuart
Members of SAAPI for the 2019/2020 term:
Carin Archibald
Leanne Blumenthal
Tammy Chetty
Christine Letsoalo
James Meakings
Prof Douglas Oliver
Thavashini Pather
Nokwethemba Vilakazi
Kasongo Wa Kasongo

International Interaction

➢ **International Society of Pharmaceutical Engineering** - SAAPI’s constructive interaction with ISPE prompted the submission of a manuscript by Godfrey Keele and Douglas Oliver a paper on the Workforce in the South African industry as part of an international series.

➢ **FIP** - The President of SAAPI will represent SAAPI in Abu Dhabi, in September 2019 at the 79th FIP World Congress of Pharmacy and Pharmaceutical Sciences.

Legislation

There have been a number of guidelines requiring comment from SAAPI during this period SAAPI’s Technical Committee have worked on collating comments on several guidelines published by SAHPRA. Comments were submitted for the following:

➢ **Section 21 Guideline** - deadline for comments was 31 May 2019.

➢ **SAHPRA eSubmission Guideline 2019_05_03vF**

➢ **New Registration Validation Template (eSubmission) 2019_05_03vF** - deadline for comments was 01 June 2019

➢ **SAHPRA eCTD Guideline 2019_05_03vF**

➢ **New Registration Validation Template (eCTD) 2019_05_03vF** - Deadline for comments was 01 June 2019.

➢ **SAHPRA Variations Addendum for Orthodox Medicines 2019_05_03vF** - deadline for comments 10 June 2019.

➢ **Health Supplements Guideline** - deadline for comments was 15 June 2019.

➢ **Proprietary Names Guideline_v6_May2019_published for commentv6** - Deadline for comments was 30 June 2019.

SAAPI CONFERENCE

**SAAPI Conference 2018**
SAAPI Conference 2018 was held on the 4 - 5 October 2019 at the Bytes Conference Centre in Midrand.

**SAAPI Conference 2019**
SAAPI Conference 2019 was held on the 16 - 17 May 2019 at the CSIR Convention Centre in Pretoria and presented an array of topics highlighting and updating on the regulatory developments of SAHPRA and Industry.
CONTINUING PROFESSIONAL DEVELOPMENT

SAAPI hosted the following exciting CPD workshops and training sessions during the current reporting period:

2018

- “Biopharmaceuticals and Biosimilars”, was held on 27 June 2018. The workshop was presented by Prof. Henry Leng, and 37 delegates attended.
- “Product Quality Review (Annual Product Review)” on 25 July 2018, presented by Dr. Andre van Zyl, and 60 delegates attended the workshop.
- “Being/Becoming the Responsible Pharmacist/Head of Compliance”, on 1 August 2018, was presented by Henriette Vienings. There were 30 delegates in attendance.
- “A Hands-on-Training Workshop on PI/PIL/Label Compilations & Updates to SAHPRA Guidelines, New Regulations and Updates to Scheduling”, was held on 23 August 2018 and was presented by Leneri du Toit and Esthi Beukes, and 34 delegates attended the workshop.
- “Complementary Medicines: Health Supplements” on 6 September 2018, was presented by Joy-Berry Baker. There were 20 delegates in attendance.
- “Marketing Code Training Workshop” was held on 11 September 2018, at the Woodmead Country Club, presented by the Marketing Code Authority (MCA).
- “Compilation of Module 1, 2 & 3 of CTD, P&A Amendments”, on 18 October 2018, was presented by Leneri du Toit and Esthi Beukes of Pharma Training. There were 21 delegates in attendance.
- “Does your IT Speak Medical Compliance?” was held on 25 October 2018 and was presented by Henriette Vienings, and 26 delegates attended this workshop.
- “Marketing Code Training Workshop”, on 2 November 2018, was presented by the MCA, and 40 delegates attended.
- A workshop on “Clinical Trials” was held on 22 November 2018, presented by Carli Sager of Sager Research Consulting. This was a small intimate workshop attended by 13 delegates.
- “Cold Chain Management: Fundamentals” was held on 28 November 2018 and was presented by Sarantis Kosmas of Strategnos. There were 37 delegates in attendance.
- “Considerations for Data Integrity” on 11 December 2018, was presented by Dr. André van Zyl, and 80 delegates attended.

2019

- “Marketing Code Training Workshop”, was held on 12 February 2019, at the Glenhove Events Hub. The workshop was presented by the MCA, and 56 delegates attended.
- “Roles and Responsibilities of the Responsible Pharmacist” on 28 February 2019, presented by Leneri du Toit and Esthi Beukes of Pharma Training, and 18 delegates attended.
- “Quality Risk Management” on 13 March 2019, was presented by Dr. Andre van Zyl, and 64 delegates attended.
- A “Label Development” workshop was held on 28 March 2019 and was presented by Henriette Vienings of MRA Consulting, and 13 delegates attended.
- “CTD Module 3” was held on 30 May 2019 was presented by Leneri du Toit and Esthi Beukes of Pharma Training, and 12 delegates attended.
- “Marketing Code Training Workshop” on 19 June 2019, was presented by the MCA, and 37 delegates attended.
- “Cold Chain and Temperature Management - Validation and Qualification in GDP/ GWP Environment” was held on 3 July 2019. This workshop was presented by Sarantis Kosmas from Strategnos and 30 delegates attended.
Other Events:

- **SAPHEX 1 - 2 November 2018** - SAAPI took a stand at the 2018 SAPHEX Exhibition. This was a valuable networking opportunity.
- **CEO Breakfast 14 March 2019** - SAAPI hosted a successful morning for CEOs. The importance of compliance, the value of appropriately trained and knowledgeable staff, and the benefits of belonging to a professional association were highlighted.
- **Mandela Day 18 July 2019** - SAAPI and the SG Branch of the PSSA joined the Trinity Pharmacy Soup Kitchen to feed the homeless on Mandela Day.

**PARTICIPATION AT PSSA**

SAAPI Councillors participated during the PSSA AGM at Birchwood Hotel and OR Tambo Conference Centre in June 2018 and the PSSA Conference.

Recognition - SAAPI appreciates the continuous support received from the Southern Gauteng Branch and Dr Judy Coates.

**ACKNOWLEDGEMENTS**

The outstanding contributions of the SAAPI Executive Committee, the Executive Director, Tammy, and Alison at the office as well as the continuous support of SAAPI members to advance SAAPI are sincerely appreciated.

Dr. Mothobi Godfrey Keele
President
BRANCH REPORTS

Cape Midlands
Cheryl Stanton, daughter of Past President Clive Stanton, is our current Chairman.

Branch Committee
We hold monthly committee meetings at our office with representatives of all sectors attending. It is interesting how the number of representatives of the various sectors change. Whereas the community pharmacy sector was the dominant sector for years, at present we have on our committee strong representation from industry. It has been pointed out that engineers play an important role in manufacturing.

The major topic for discussion recently has been PSSA Conference 2020. It is hoped that this will be held in Port Elizabeth where attendees would appreciate a change of venue and local pharmacists would have the opportunity to attend.

CPD
We continue to hold monthly CPD evenings and attempt to present a variety of topics to appeal to all sectors. It is surprising that there is not greater support from pharmacists. Interns are frequent attendees as CPD submissions are part of their requirement for the intern year. The ongoing support from pharmaceutical firms is appreciated.

Academy
Transformation at the NMU is being promoted, which has made the staffing situation difficult with a number of posts in the Pharmacy Department not filled. This is stressful for the lecturers there at present who have to cope with large classes.

Communication
Our office sends out e-mail circulars regularly with information for pharmacists. Effort and money was spent on Pharmacy Month in 2018 on Facebook advertising and organising competitions. The participation in the competitions was disappointing.

YPG
It seems as if YPG needs some guidance as to the way forward. The mentorship program is not in place yet. Dr Gaida had submitted a proposal with the subject “Prescription Errors in the Clinics” She said she and a pharmacist at the clinic would work on this if they were provided with funding. It is questioned how this promotes the YPG. It is regretted that Monique Klitsie, a YPG member on our committee who worked at the University has left with her pharmacist fiancé to spend some time in Ireland.

Mellis Moorcroft
Branch Director
Cape Western Province
In this report we highlight some of the activities of the Branch.

Education and Research
CPD lectures were held regularly. Topics included:

26 June 2018  “ALLERGIES IN THE 21st CENTURY” presented by Dr Thulja Trikamjee
31 July 2018   “Glaucoma” - presented by Lucinda Conradie
8 August 2018  The Director co-presented the webinar “Patient Counselling and medicines information”
28 August 2018 SAIDS Anti-Doping Talk - “A healthy approach to Use of Medicine by Athletes” by Ms. Wafeekah Begg (SAIDS Legal Manager) and Dr Amanda Claassen-Smithers (SAIDS Education & Research Manager)
01 November 2018 “Ethical dilemmas......when is it OK to say NO’ by Prof N Butler and G Black
19 February 2019 “Ethical dilemmas......when is it OK to say NO’ held in George by G Black
27 March 2019  “Preventing malaria: the role of pharmacists” by Professor Karen Barnes
24 April 2019  “Food-Drug Interactions: The When, and the Why” by Lucinda Conradie
27 June 2019  “Medicinal cannabis - what are the implications for pharmacy?” by Andy Gray

Participating members were issued with certificates of attendance.

Involvement with UWC Pharmacy School included: student loans (CPPSA Student Loan Fund), two FPE bursaries, prizes for deserving students and a Pharmacist’s Oath Taking Ceremony for graduates (April) and sponsorship of membership to FIP. Profs Malan, Butler and Drs Jane McCartney, Renier Coetzee and Marique Aucamp serves on the Branch Committee. Dr Renier Coetzee is also on the SAAHIP committee. Student leaders from UWCAPS have regularly attended branch committee meetings. The Director addressed second year students during the “White Coat” Ceremony (13 February).

Communication and Liaison
Communication with members was maintained through the Tincture Press, the PSSA website, e-mailing and SMS’s. All members receive an electronic version of Tincture Press, including a number of members living overseas. Other liaison activities included:

➢ Prof Nadine Butler serves as Chairman on the Board of Directors of MedicAlert and Dr Natie Finkelstein represents the PSSA on the Board which uses our boardroom for their quarterly meetings.
➢ The Director attends all PSSA national Exco meetings and serves on the Constitution sub-committee.
➢ The Director represents the PSSA National Office at various meetings/events in Cape Town when called upon to do so. Mr Black attended the launch of the Presidential Health Summit Report in Parliament on 12 February.
➢ The Director attended the Academy AGM (2018) held during their conference at Spier.
➢ The Director attended the FIP Congress in Glasgow from 1 to 6 September in his private capacity. He managed to make some valuable contacts.
Membership and marketing
Membership is encouraged on occasions such as CPD workshops, the SAAHIP/PGWC Intern Awards, and workshops for Interns on community service. Non-members seeking advice and services from the Director, are also asked to join as members. Interns were asked to pay just R100 towards their membership for the year with the balance being sponsored by the Branch. Our membership continues to grow and now exceeds 1390 members.

Training workshops for Interns and Community Service Pharmacists:
The Western Cape DOH conducted their training workshops for their interns and community service pharmacists at Pharmacy House. On both occasions a spokesperson from SAAHIP was afforded the opportunity to address the attendees on the benefits of joining the Society.

YPG
Mr Gawie Malan represents the YPG on the NEC. A number of young pharmacists serve as elected members on the PSSA, SAACP and SAAHIP Branch committees. The Branch hosted a successful information evening on Community Service for interns. Bronwyn Macauley addressed the interns on the benefits of PSSA membership. The YPG group, with the SAACP (CWP) Branch Committee, has launched a Community Pharmacist Intern Award.

Membership support
Services provided by the office include:
- Labour Relations consultancy - provided nationally. Members are advised and referred to our labour lawyer, Gerald Jacobs, for free telephonic advice
- Legal assistance on practice or ethical issues. Practice information, promotional material, guidelines and patient information leaflets
- Liaison with SAPC and DoH
- Intervention in patient/pharmacist disputes
- Notification of stolen/fraudulent prescriptions
- Reference books and professional indemnity insurance

Constitution
The Director serves as the designated officer for the National Constitution Sub-Committee. Work done in this regard over the past year includes:
- Proposed amendments and corrections to the PSSA Constitution
- Advice on proposed changes to the SAACP, SAAHIP and Southern Gauteng Branch Constitutions

Professional Practice
An important aspect of the work of the Director, Mr Black, is to assist members with professional practice matters. This service is available to all members throughout the country and includes:
- Practice information, guidelines and patient information leaflets
- PSSA Website – several of the articles published from “My Little Black Book of Pharmacy Practice” by the Director are available in the Practice Info section on the PSSA website, www.pssa.org.za, these are regularly revised and updated
Queries and Requests – The Director personally deals with numerous requests from members for assistance or information on professional practice matters. Telephonic queries are followed by written confirmation which includes reference sources and relevant guidelines.

Branch AGM
A successful PSSA & SAACP combined AGM was held on 7 February 2019. Mrs Jackie Maimin was elected as the Chairman for the PSSA branch. Mr Gawie Malan was elected as Vice-Chairman to both the PSSA & SAACP Committees.

Community Pharmacist Sector
Mr Jameel Kariem was elected as the Chairman for SAACP (CWP) Branch. Inspired by the YPG, the Sector has launched a Community Pharmacist Intern Award. Interns in community pharmacy practice have been invited to submit their CPD Research Project work for adjudication. The Award will be made to the intern judged to have presented the best project.

SAAHIP Western Cape
A successful AGM was held on 13 October 2018 at Pharmacy House at which Ms Aleta Wege was re-elected as the Chairperson. The guest speaker was Shakira Choonara, an award-winning health researcher. The SAAHIP President, Ms R Mogale was the guest of honour.
Other activities included:
- SAAHIP/PGWC Intern Awards – the winner, Kyla Izally from Bishop Lavis Community Health Centre was sponsored to attend and present at SAAHIP Conference 2019.
- A number of Branch members presented at the Conference.
- Social responsibility – Bhavna Harribhai is the driver of the branch’s social responsibility program which is to support Leliebloem Child and Young Care Centre.

SAAPI Western Cape
Aadila Patel represents SAAPI on the branch committee and keeps members well informed of all matters affecting the industry.

Academy of Pharmaceutical Sciences
The Academy is represented on the branch committee by Drs Jane McCartney and Marique Aucamp

In conclusion
In the CWP Branch all sectors of the Society are active, well represented on the branch committee and work positively to achieve the objects of the Society. We wish all delegates a productive and successful AGM.

Jackie Maimin
Chairman
Free State Committee Meeting
We held several committee meetings throughout the past term, mostly all Exco members were present and the sectors that were discussed included Academia, YPG, SAAHIP and SAACP.

Education and Research
The PSSA Free State branch hosted various CPD evenings, as well as a workshop where the following topics were discussed: Management of hypertension, Managing residual risk; Practical management of diabetes and Major depression and the Link with cardiovascular disease. Some of the CPD evenings were open for all pharmacist and assistants to attend, not solely for the members of the Society, they were addressed on behalf of the Society and the benefits to be a member of the Society were explained to them.

Communication, liaison and marketing
The Free State Department of Health Forum Meeting was attended where the benefits of being a member of the PSSA were addressed. They were also invited to contact us concerning challenges that arose or with suggestions as to how the Society can improve service delivery.

We created an email address: pharmaceuticalsocietyfreestate@gmail.com
We use this email address to send emails to all the pharmacists and the assistants in the Free State region, whether they are members of the society or not, and wished them a prosperous and fulfilling 2019. We explain the benefits of joining the PSSA. We requested that they contact us regarding any questions, challenges or suggestions as to how we can improve service delivery to all pharmacists and assistants in the Free State. During the CPD evenings or workshops we had a lucky draw where three lucky members won a prize.

Young Pharmacists Group
A letter was sent to all the CSPs as well as Interns in the Free State. We wished them a prosperous and fulfilling 2019. We explained the benefits of joining the PSSA and asked them to contact us if they need any support. We have a Gmail account that we use to communicate with the new interns and community service pharmacists in the Free State. They were also addressed during their orientation and informed of the benefits of being a member of the Society.

Sectors
The different sectors are represented on the branch committee.
We are looking forward to the term and are currently in the planning process for Pharmacy Month, as well as how to promote the PSSA in this regard. We have CPD evenings scheduled for September, October, November and our year end function in December.

Mrs M. Mocke-Richter
Chairman
KwaZulu-Natal Coastal

The branch committee decided to sell the premises in Umbilo Road and the new owners took occupation in July 2018. It has taken more than a year to find new premises in Westville which will be renovated and occupied before the end of 2019, once the transfer of ownership is registered.

Committee Meetings

The branch committee and finance sub-committee have been meeting monthly in the auditor’s boardroom and rooms at the Durban Country Club until the new premises are ready for occupation. The KZNPA has kindly sponsored the costs of the venue hire. The annual difficulties in finding posts for internships has intensified, and so too the debates on the causes of, and solutions to the problem. Possible reasons for the lack of posts may be the costs of employing an intern, the comparatively short period (1 year) of employment, the current viability of community pharmacies and the effortless availability of lower paid mid-level workers. Although the situation has not been created by the Society, we are obliged to attempt to prevent the losses and inevitable disappointment of the pharmacy students who are enrolling and currently studying for a degree in pharmacy.

It appears that the pharmacy schools are producing more pharmacists than required and there must be a reduction in the enrolment of pharmacy students.

The registration of mid-level workers has not been terminated as intended and is resulting in fewer internship posts.

The community service year compounds the problem where for various reasons; there are no posts available to carry out this duty resulting in loss of earnings. Suggestions made: To scrap this duty or to waive this duty for those pharmacists who cannot be placed.

The 72nd branch AGM was held on 31 July 2019 at the Durban Country Club.

The branch committee is in favour of the 75th AGM of the Society to be held in Port Elizabeth and contact has been made with the other coastal branches in this regard.

Education and Research

The local branch of SAAHIP is arranging a meeting with the interns and have received funding from the Pharmacy Educational and Charitable Fund for this event.

Herman Bloemhof has been approached to assist community pharmacists to claim financial assistance from the HWSETA for pharmacists to take on interns.

Communication, liaison and marketing

The branch newsletter and Mortar e-Memo has been used to encourage community pharmacists to employ interns.

The PSSA national newsletter supplies members with current pertinent issues which are useful to members.

Kamohelo Malaku, a master’s degree student at UKZN is carrying out a survey for his study on “Knowledge, Attitude, and Perceptions of Pharmacists registered with the SAPC towards CPD”.

Young Pharmacists Group
Mr Matlapeng Shabalala was put in contact with Miss Sarah Gounden who is the branch YPG representative. The pharmacy students at UKZN have not yet contacted the branch for assistance with funding of their annual Pharmacy Ball.

Membership Support
Members are in regular contact with the branch office on various issues covering matters which are considered to be benefits offered by the Society. The most discussed item was the confusion about Cannabis and ‘Cannabis Oil’. There were two separate ‘cannabis exhibitions’ in Durban which has caused great confusion and misconceptions.

The issues with the SAPC are ongoing and it is anticipated that the regulations regarding CPD will be yet another bone of contention.

Sectors
The branch Constitution makes provision for representation of the four sectors on the branch committee, two of the sectors; Academy and Industry have sporadic input to the committee. The new committee will be in place after the AGM on 31 July 2019.

Special Events
The Brian Seymour award function took place on 10 November 2018 and the recipient was Miss Sarah Kola, nominated by WITS. We have already received nominations from two pharmacy schools for the 2019 Brian Seymour award.

General
The branch sponsors two undergraduate bursaries, the LF Wood Bursary and the Ambler Brothers Bursary in the amount of R20 000.00 each. The FPE allocates these bursaries to deserving undergrad students. A successful project was carried out in 2018 to help community pharmacists with the destruction of expired Schedule 6 medicines. The project was funded by the KZNPA.

The Finance Committee has joined the Nedbank class action against Steinhoff in an attempt at recovering some of the lost funds.

D Moodley
Chairman
Northern Cape

To reflect on the year that has been, this year had its ups and downs but overall, the year was a success.

We started our succession planning. Our SAAHIP sector was given the opportunity to plan SAAHIP conference in 2019, this was the last year of planning conference as it has been handed over to Mpumalanga for the 2020 conference. The 2018 conference was successful. Well done to the organising team for planning a successful conference. The conference was enjoyed by all present.

We had two workshops with our interns together with SAPC. We had a slot to explain what the PSSA is and the progress with NHI. All our interns are ready for their preregistration exam in July 2019. We had sessions with all our interns assisting them in preparation for the exam, working with them through past exam papers as well as the new layout.

We also are planning to have our next CPD discussion in September 2019. We are planning to incorporate more of the learners and support personnel as well. We will be discussing all the latest guidelines as well as have a session on NHI and the way forward, what can we do to better prepare ourselves for the project.

We plan to have a membership drive during this year. We wish to reach all of our members to see how we can address their needs as well as see what their expectations of the Society is and what we can do to help them. We wish to expand our branch and make it stronger and have representation from community pharmacy as well as hospital pharmacy. Unfortunately, we don’t have members from industry or academia. We as a branch believe in giving back to our members, so we try to listen to them and see what they want from us as a branch and what we can do for them. We communicate with our members on a weekly basis:

- We send out board notices for comment
- Updates on treatment guidelines
- Discussions on current events, etc

In closure, we plan to have a very successful 2019 and we will only go from strength to strength. We wish all of our fellow branches all of the best!!

Shawn Zeelie
Chairman
North West

Committee Meetings
The branch AGM was held on Tuesday, 16 July 2019. It took place with a CPD event to improve the attendance of the branch members.
No formal branch meetings were held but telephonic meetings took place.

Education and Research
- A CPD was held on 20 November 2018 in Brits well attended by all health care professionals - Dr J Coetzee presented.
- CPD was held on 13 February 2019 in Potchefstroom about Pharmacogenomics presented by Debra Langley was also well attended by a variety of health professionals, not just pharmacists.
- A CPD regarding Antibiotic Stewardship was held on 21 February 2019 in Klerksdorp, the presenter was our branch Vice-chair Nico Scheepers. This event was mostly attended by medical doctors.
- CPD was held on 23 May 2019 at Brits MediClinic about Pharmacogenomics presented by Debra Langley, was also well attended by a variety of health professionals, not just pharmacists.
- A CPD regarding Antibiotic Stewardship was held on 16 July 2019 in Potchefstroom, the presenter was our branch Vice-chair Nico Scheepers. This event was mostly attended by pharmacists and academic interns.
- The NW members were invited (via email) to take part in one webinar and one webcast opportunity for self-development:
  - Patient counselling and medicine information – does one size fit all? On 15 August 2018; and
  - Lilly hosted an Erectile Dysfunction (webcast) on 9, 10 and 11 October 2018.
- The NW branch was one of the sponsors for the 15th Annual Symposium on Diseases relevant to South Africa which was held on 16 & 17 August 2018 and is an accredited CPD event.

Communication, liaison and marketing
All important information is sent via email to the branch members (in accordance with the POPI act).

Young Pharmacists Group
The branch chairperson, Helanie Lemmer addressed the 4th year pharmacy students on 13 August 2018 during the NWU’s first Industry Day about the PSSA and all the advantages of being a member (especially since they will soon become interns and community service pharmacists).

Our branch committee consists of several young pharmacists. They were selected to the positions of fellow secretary and the representatives for SAAHIP, YPG, SAACP and the Academy.

Membership Support
During communications with the members (via email and during events) the members are always reminded of the benefits of being a member of the PSSA.

The branch strives to improve the participation and involvement of all our current members:
- The branch sponsored two of our members to attend the national PSSA conference which was held on 22 - 24 June 2018, at the Birchwood Hotel and OR Tambo Conference Centre, Boksburg.
- Five SAAHIP affiliated members (private and public) attended the SAAHIP conference (7-9 March 2019) the branch sponsored 50% of their registration and accommodation fee.
Sectors and Special events
Our SAAHIP branch members (both private and public sector) showed a lot of passion and enthusiasm during the 2018 pharmacy month by organising and performing a variety of activities. The NW branch sponsored 50 T-shirts which was worn by both private and public hospital staff during pharmacy month. The T-Shirts had the slogan “Eat. Sleep. Pharmacy. Rxrepeat.” printed on them with the SAAHIP logo.

AGM Branch Elections
During our AGM the following person were elected:
- Chairperson: Helanie Lemmer
- Vice chair: Nico Scheepers
- Treasurer: Richard Lemmer
- Past Treasurer: Robbie Cooper
- Secretary: Christell Scheepers & Marlize Thiart (Eloff)
- SAAHIP representative: Armand Algra (with Yvette Joubert as Past-representative)
- SAACP representative: Johanné Lingenfelder
- YPG representative: Jaco Engelbrecht
- Academy representative: Michelle Prinsloo

Dr Helanie Lemmer
Chairperson

Pretoria
Committee Meetings
The branch committee is quite active and meet regularly, the dates of the committee meetings planned for the rest of this year are as follows:
- 15 August – Committee Meeting
- 12 September – Committee Meeting
- 10 October – Committee Meeting

The branch has a number of portfolios including:
- Young Pharmacists Group
- Pharmacist’s Assistants
- Membership and marketing
- Communication
- CPD
- Senate
- Pharmacy Month
- Social responsibility
- Awards
- Constitution
- Interns
Education and Research
The branch arranges a CPD almost every month excluding January and December as well as workshops. The CPDs are well attended and members are asked in the beginning of the year to identify topics of interest to them.

CPD’s and Workshops for 2019

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<th>Date</th>
<th>Sponsor</th>
<th>Topic</th>
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<td>Astral</td>
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<td>SAACP</td>
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<td>27 March</td>
<td>TBA</td>
<td>Pharmacy Compounding - Past, Present &amp; Future</td>
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<td>10 April</td>
<td>Cipla</td>
<td>Drug Diversion</td>
<td>SAACP</td>
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<td>19 June</td>
<td>Virbac</td>
<td>Pharmacists and Veterinarian Patients</td>
<td>SAAPI</td>
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<td>Kenza Health</td>
<td>Metabolic Endotoxemia and Chronic Diseases</td>
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Communication, liaison and marketing
All communication with members is done via mailchimp.

Our main communication to members planned for this year:
- Invitations to CPDs
- Social responsibility events with Alma School
- Any communication from the National Office flags to share
- YPG workshops
- Branch nominations for committee

The branch finished development of a new website, which went live on 22 February 2019
www.pssapta.com

We are also active on social media, with Facebook, LinkedIn and Instagram.

Young Pharmacists Group
We will be assisting with the workshops for interns’ exams and competency standards again this year. Our first workshop was held on 22 June 2019, it covered calculations and theory of the intern exam, it was well attended by 56 interns. Marketing of the membership is also done at these events.

Membership Support
Members are mostly in contact with the branch for queries of book orders and legal questions which are always dealt with by the branch manager with the support of the National Office staff, Jan Du Toit and Gary Black.
Sectors
The branch is privileged to have representatives from all four sectors plus additional interest groups as members of the branch committee. Our Sectors include:

- SAACP
- Academy
- SAAHIP
- SAPSF
- SASOCP

Special Events
We held a breakfast talk on the 1st of June 2019 (beginning of youth month) with the Director General of the NDOH Ms. Precious Matsoso and the SAPC Registrar Mr Amos Masango, to highlight opportunities for young pharmacist in South Africa, as well as progression of the profession. We were also honoured to have Mr. Stavros Nicolaou talk further of opportunities for young pharmacists. The talk was very well received and attended, we also live streamed the event on Facebook, as well as loading it onto our website for all to watch. This was a closed event, in that it was only open to branch members, more specifically young members and not non-members or the general public.

Johannes T. Ravele
Chairman

Southern Gauteng
PSSA SG Branch Committee
The reporting period (June 2018 - July 2019) spans the change in the branch committee for the Southern Gauteng Branch, with the new committee being elected at the branch AGM 5 February 2019.

- Elected Committee: Mrs Val Beaumont; Mr Charlie Cawood; Mr Frans Landman; Mr James Meakings; Mr November Nkambule and Mrs Lynette Terblanche.
- Honorary Officers of the branch Committee: Chairperson – Mrs Lynette Terblanche; Vice-Chairperson – Mr Frans Landman and Honorary Treasurer – Mr James Meakings.
- Sector Representatives: SAAHIP: Mrs Tabassum Shaik and Mrs Thanushya Pillaye;
- Academy: Mrs Stephanie de Rapper and Prof Yahya Choonara;
- SAAPI: Mrs Tammy Maitland-Stuart and Mrs Gina Partridge; and
- SAACP: Mrs Winny Ndlovu and Mr Tshif Rabali.

The Branch Committee is honoured to have three Honorary Life Members that still regularly attend the monthly meetings, and more: Mr David Sieff; Mr Ray Pogir and Mr Gary Köhn.

Monthly Branch Committee Meetings were held through the reporting period, along sittings of the various branch committee sub-committees (CPD, Golden Mortar, Museum, Mentorship & YPG, Trinity).

Discussions of interest at a national level include the annual nomination (5-9 November 2018) and elections (17-21 November 2018) of the branch committee, the branch AGM (5 February 2019), Fellows nominations, a review of the Constitution of the Southern Gauteng Branch, PSSA National Constitution wrt branch representatives, YPG mentorship programme, HIV Think Tank, NHI pledge considerations and legislation commentary. All relevant matters were escalated to the National Office through the year, as and when they arose. The Southern Gauteng Branch Sector representatives share monthly reports detailing highlights from their respective Sectors.
Education and Outreach

A key area of focus includes the hosting of Continuing Professional Development events at the Glenhove Events Hub on a monthly basis. Fourteen CPDs were offered through the reporting period. For further details on topics, speakers and sponsors please contact the branch to request an unabbreviated version of this report. The CPD schedule for the remainder of 2019 is in place, ensuring a value offering to members on a monthly basis. The 2020 calendar has been prepared and save-the-dates sent to branch committee members. Engagements with potential sponsors and speakers is underway.

In order to ascertain what members want, a Survey on CPD was created and circulated, initially to the branch committee, and thereafter to the members of the branch. At the close of the survey a total of 120 responses had been received. The outcomes specifically guided the planning for 2019. The details of the outcomes of the survey were shared at NEC in November 2018. Key outcomes included to maintain a Tuesday and consider morning sessions. Though on implementation morning sessions are not well attended. A special thanks to Mariet Eksteen, from the National Office, for the survey support. The Branch remains eager to engage with the National Office and other regions to see how best we can optimize on the planning around CPDs where common topics can be repeated in the different regions.

Continuing to focus in on the value we deliver to members, the branch hosted its second Annual Mini Symposium (22 September 2018) where members were invited on an exciting journey into the Future. Topics included ‘Apps’olutely – what’s in store” “Back to the future – current topics & future trends” & “Artificial Intelligence in Medicine”. The symposium was attended by 70 delegates. Preparations are underway for Mini Symposium 2019 planned for 31 August 2019.

The branch’s social responsibility project in association with WITS for the running and maintenance of Trinity Pharmacy continues. Trinity Health Services, re-established in 2016, continues to provide medical and pharmaceutical services to homeless community in the Braamfontein area. The clinic is open on alternate Monday evenings. The project has been well supported by pharmacy students, with approximately five students volunteering each night the clinic is open. The pharmacy students also participate in patient consultations where they advise on the pharmacological treatment in accordance with the clinic formulary. The formulary consists of approximately 50 items which are purchased from a wholesaler. Patients needing further assistance are referred to Hillbrow Community Health Centre (CHC). Opportunity exists for representatives of both the branch and NEC to get involved as the clinic is looking for pharmacists to help supervise students from 6:00 – 9:00pm. There is a roster and supervising pharmacists are asked to assist one Monday night every 8 weeks. Over the reporting period Trinity welcomed the receipt of a donation of much needed labels for the dispensary, shelving and warm bodies to volunteer in the evening. The branch, in partnership with SAACP SG and SAAPI, is currently running a blanket drive for Trinity. Blankets collected to date were delivered to Trinity on the 18 July 2019, along with the hosting of a soup kitchen. A special thank you to Table of Honour (GEH Caterer) for the donation of the soup for the Mandela Day Festivities.

Further Local Community Outreach over the reporting period includes the Lacey’s balloon donation, participation in SAAHIP SG hosted ParkRuns (creating visibility of the pharmacist) and branded balloon displays through Pharmacy Month 2018 in PSSA SG member pharmacies.
Communication, Liaison and Marketing

With value in mind we continue to offer our branch newsletter – The Golden Mortar. This branch newsletter is e-mailed to members of the branch and other interested parties. The newsletter is also made available on the PSSA National website where anyone interested in reading either current or past editions can access them quite easily by going onto the PSSA site. Over the reporting period nine Golden Mortar newsletters were produced (2018 Ed5-8 and 2019 Ed1-5). The Editorial Board released a Readership Survey to ascertain what members/readers are looking for. The results are currently being reviewed. The PSSA Book Department and access to Professional Indemnity Insurance are promoted in each edition of Golden Mortar. A special thank you to the National Office for their support in revamping the advertisements used in the Golden Mortar. Continued Communication with members takes place through bulk emailing and bulk sms’s. Communication includes important notifications from national, branch specific awareness messages (fraudulent scripts, CPDs), as well as teasers building up to the release of the Golden Mortar.

Marketing efforts to build the PSSA membership are ongoing. Non-members attending CPDs are personally contacted by the Executive Director after the CPD to share the value of becoming a member. The branch also undertook to reach out to all non-payment members since September 2016, sharing a value offering email of all the benefits of being a member of the PSSA, as well as membership under the Southern Gauteng Branch. Additional ongoing marketing includes the promotion of the Glenhove Events Hub (GEH) as the home of the Southern Gauteng Branch of the PSSA and the National Pharmacy Museum.

Young Pharmacists Group

The YPG Mentoring Programme has progressed from an initiative at branch level to National level. A full proposal was presented to the NEC in November 2018 and thereafter progress through the remainder of the reporting period. The most current progressed version will be submitted to the National Office ahead of the AGM.

Student Liaison continues to be a priority for the Southern Gauteng Branch and therefore the continued engagement with WITS school of pharmacy, where students are invited to participate in the branch committee, sharing their perspectives, objectives and challenges. In September the branch committee was visited by the recipient of the Denis Khoza Community Award (Samkele Mkumbuzi). With the election of the new WPSC complete, their new Treasurer (Siviwe Ngalo) joined the branch committee in July and will continue to do so on a monthly basis.

The end of September saw the request for support with the Wits Student Ball. The branch committed to providing sponsorship and Frans Landman and Hilton Stevens were invited as a representative from the branch to share a word with the students on the evening.

The branch continues to support the Annual Prize Giving of the Medical Faculty of the University of the Witwatersrand to award well deserved prizes (sponsorships) to pharmacy students who excelled in their studies.

The branch continues to be committee to FPE and has recently submitted refined sponsor requirements to the National Office.
Beyond participation in the branch committee meeting students were actively engaged and invited to participate in the branch's September Mini Symposium. The opportunity was unfortunately only taken up by 8 students. Increased student participation has been observed at the CPDs and will continue to be encourage.

**Social Engagements**

The branch hosted a Recognition and Farewell Evening in September 2018 in honour of Mr Doug Gordon (who retired in July 2018) and Mr David Boyce (who was awarded the William Patterson Award). The evening was an incredibly special celebration.

The Chairman’s Dinner which was held in conjunction with the SAACP Sector Committee during November 2018 at the Glenhove Events Hub. It was a most successful event.

**Support to the National Office**

The secretarial services facilitating the functioning of the established Fellows Committee under the very capable chairmanship of Ms Val Beaumont continues to be provided by the Southern Gauteng Branch office. Through the reporting period two Fellows were awarded.

From the above report is it clear it has been a successful and positive reporting year for the Southern Gauteng Branch of the PSSA.

Dr Judy Coates  
Executive Director
**South African National Pharmacy Museum**

Promotion of the South African National Pharmacy Museum continues to be an area of focus for the Branch. Over the reporting period a dedicated [website](#) was launched, along with associated marketing material.

The National Pharmacy Museum continues to attract the attention of a variety of tour groups, varying in numbers from two to 102. The biggest groups hosted over the reporting period include Wits 1<sup>st</sup> year pharmacy students (100 students, in two groups in July 2018) and the Botswana Institute for Health Sciences 3<sup>rd</sup> year students (26 students in February 2019). Of particular interest was the visit by Prof William Beinart, Emeritus Professor, African Studies Centre, University of Oxford, where he shared a report on the value of this heritage we are holding. A full report on his visit and findings is available on request. For further details on additional interest groups please contact the Branch to request an unabbreviated version of this report. During this period there were 57 entries in the visitors’ book, all capturing the awe encountered when touring this heritage. One such sentiment was captured on [The Heritage Portal](#) by James Bull.

In addition to Mr Ray Pogir – the Museum Curator’s passion for hosting Museum tours, he is active in the Society too. Mr Pogir shared a presentation entitled “From Observation to Innovation” for the Branch Mini Symposium in September 2018, as well as presenting a series of presentations on “The History of Pharmacy” and “Medicines from the Bible” to audiences across Johannesburg throughout the reporting period. Audiences include Limud Jewish Study Weekend (August 2018, Attendance 55); Jewish Women’s Benevolent Society (August 2018, Attendance 45); Decorative Arts Society (February 2019, 2 sessions: Afternoon: Attendance 110 and Evening 70); and Johannesburg North, University of the 3<sup>rd</sup> Age Organisation (July 2019, attendance not confirmed, estimated at 120). Interest in Ray’s presentation reached the ear of the SABC, who then came to PSSA SG to capture a recording that was flighted time on SABC2 / DST-192 in September 2018. PSSA SG remains proud of Ray’s contributions.

Current efforts within the South Africa National Pharmacy Museum include raising investment capital to ensure the heritage of Pharmacy is preserved appropriately. Investment is need for the redesign of the museum artefact displays, revamping the library, research projects and succession planning. A further effort to preserve the history of pharmacy and the value within the museum includes the development of video clips capturing the history behind a collection of the artefacts (27) within the museum. This project has been undertaken in partnership with WITS, and will add value to capturing the heritage but also serve as an excellent education tool for the school of pharmacy.
**OBITUARIES 2018/2019**

Notification received during the period 16/06/18 - 31/07/2019

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<td>Cape Western Province</td>
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## REFERENCE LIST OF ACRONYMS

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<td>Annual General Meeting</td>
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<td>AMS</td>
<td>Antimicrobial Stewardship</td>
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<td>APSSA</td>
<td>Academy of Pharmaceutical Sciences of South Africa</td>
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<td>BBBEE</td>
<td>Broad-Based Black Economic Empowerment</td>
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<td>Board Notice</td>
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<td>BMI</td>
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<td>Health Market Inquiry</td>
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