



South African Nursing Council
Regulating nursing, advocating for the public

**PROFESSIONAL PRACTICE RELATED
MATTERS**

PRESENTER: DR NJ MUSWEDE

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Contact

E. customerservice@sanc.co.za
W: www.sanc.co.za

PROFESSIONAL PRACTICE RELATED MATTERS

1. Purpose
2. Complaints management
3. Preliminary Investigations
4. Impairment/Unfitness to Practice
5. Continuing Professional Development (CPD)
6. Nursing Practice Standards development
7. Inspectorate

2. Purpose

- Share, update the profession on the progress in implementing some of the Professional Practice strategic initiatives.



3. Complaints management

Section 4(1) (g) of the Act mandates Council to:

investigate complaints against persons registered in terms of this Act and where there is evidence of unprofessional conduct, take appropriate disciplinary action against such persons in accordance with the provisions of the Act .

Complaints management...continued

- The Preliminary Investigation section receive complaints from the public (individuals), health establishment, media through the dedicated SANC email address (professionalpractice@sanc.co.za)
- The office liaises with the health establishments /institutions where the alleged incident occurred, requesting information, records , patient's file and any evidence that will assist in preparing the case for investigation by the Preliminary investigations Committee(PIC) of Council.
- The investigation is based on the evidence submitted, and inspection in Loco may be conducted at discretion of PIC

Complaints management...continued



4. Preliminary Investigations

- Section 47(3) A Preliminary investigating committee (PIC) appointed by the Council —
- (a) investigate all matters of alleged unprofessional conduct;
- (b) based on evidence submitted, determine whether the case should be referred for a Professional Conduct Committee (PCC) for inquiry; and
- (c) in the case of a minor offence, recommend a prescribed fine instead of a full professional conduct inquiry.
- PIC is independent of PCC, PIC members are not PCC members, this is to ensure impartiality.

Preliminary Investigations.....cont.

Number of cases received for alleged unprofessional conduct

FYR 2022-23	Q1	Q2	Q3	Q4	TOTAL
Complaint received	16	15	13	13	57
Outside jurisdiction	17	31	15	13	76
TOTAL	33	46	28	26	133

Preliminary Investigations.....cont.

Depicts the persons who reported cases of alleged unprofessional conduct by Nurses

CASES REPORTED BY	Q1	Q2	Q3	Q4	TOTAL
Members of the public	15	10	12	15	52
Nursing Managers/Other	5	12	3	0	20
Internal (SANC)(Education/IC)	5	5	4	0	14
Media	0	0	1	1	2
TOTAL	25	27	20	16	88

Preliminary Investigations.....cont.

Depicts place of incidence of the alleged unprofessional conduct

REPORTED FROM	Q1	Q2	Q3	Q4	TOTAL
Private health institutions	8	12	8	6	34
Public health institutions	13	10	7	11	41
Internal	4	5	4	0	13
TOTALS	25	27	19	17	88

Preliminary Investigations....cont.

Number of cases of unprofessional conduct handled by the Preliminary Investigating Committee

CASES	Q1	Q2	Q3	Q4	TOTAL
Midwifery	5	7	3	6	21
General	12	14	12	9	47
Unethical conduct	4	1	0	2	7
Education and training	4	5	4	0	13
TOTAL CASES	25	27	19	17	88

Preliminary Investigations.....cont.

Depicts number of Nurses referred to the Professional Conduct Committee

CATEGORY	NUMBER OF NURSES
Professional Nurse	62
Midwives	41
Enrolled Nurses	23
Enrolled Auxiliary Nurses	13
TOTAL	139

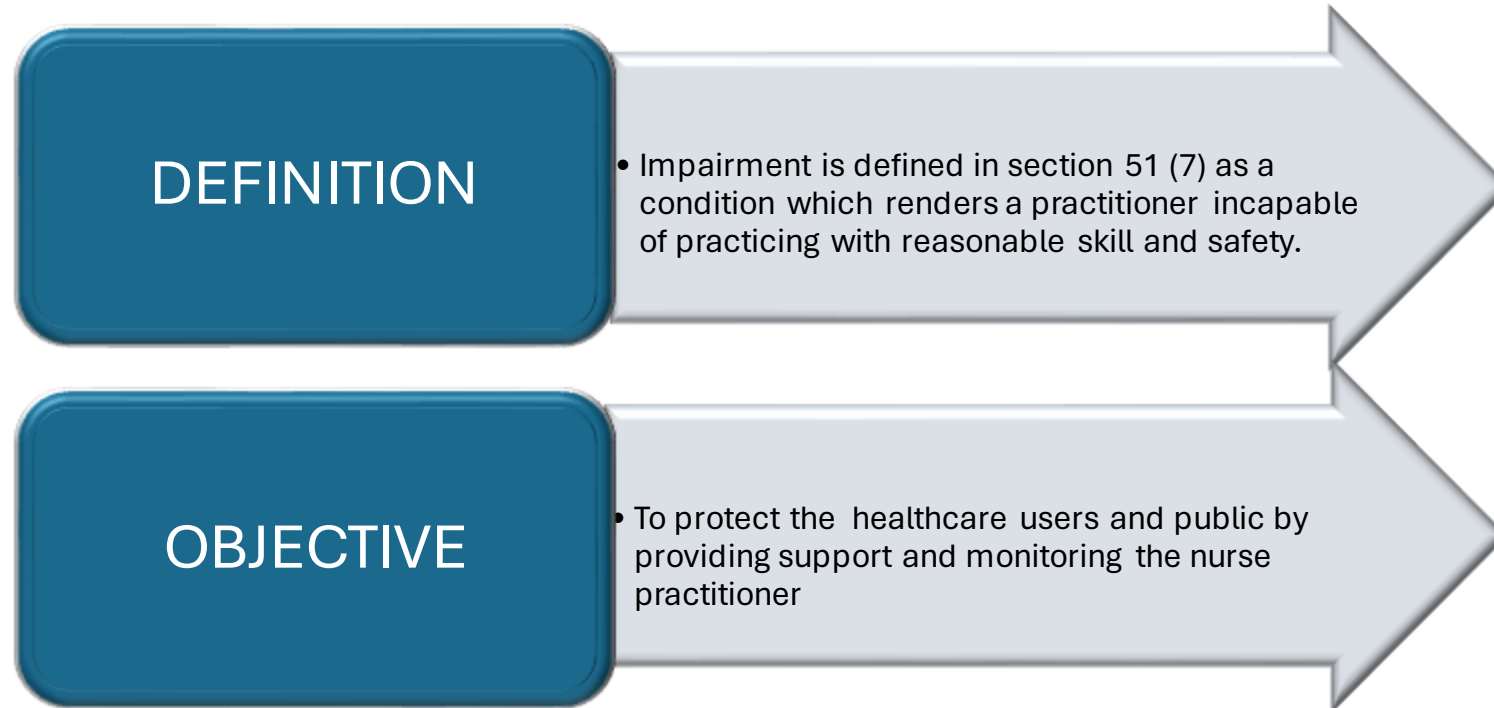
Preliminary Investigations.....cont.

Depicts reported cases of unprofessional conduct of Nurses per province

PROVINCE	NUMBER OF CASES
Gauteng	24
KwaZulu-Natal	30
North West	3
Eastern Cape	6
Western Cape	10
Northern Cape	4
Limpopo	4
Mpumalanga	3
Free State	4
Total	88

Impairment

Definition and Objective of Impairment



Impairment....cont.

Conditions categorized as follows:



Physical illness



Mental illness



Substance use disorder:

- * Prescription drugs and over the counter
- * Ward stock medications
- * Street /recreational drugs (cannabis, alcohol etc.)

Impairment....cont.

Signs of Impairment:

Noticeable decrease in attendance at work, increased absence or reporting late for work.

Decrease or inconsistency regarding work performance

Mood swings

Deterioration in personal appearance

May be sleepy or dozing off while on duty

Not interested in interaction with others, or being withdrawn

Memory lapse or euphoric recall of events

May have 'pin point' pupils, shaky hands or tremors

In case of alcohol-smell or mouthwas h/breath mints to mask the alcohol smell

Impairment....cont.

How the Council is alerted:



Impairment....cont.

Management on receipt of required information

First



Summary with supporting evidence of all interventions and reports are compiled and presented to the Committee

Second

Committee actions based on evidence:

- Dismiss the case, or
- Refer to Preliminary Investigation Committee if it believes there is an act of misconduct or unprofessional conduct, or
- Refer the respondent for independent assessment, or
- In case of chronic physical or mental illness, the Committee will recommend to the hospital to use the incapacity processes in terms of Labour Relations Act.
- If the committee decides to support and monitor the respondent, it will request:
 - More reports and drug test on quarterly or six-monthly basis and
 - If the reports and the respondent is compliant, the committee will discharge him/her.



Impairment....cont.

Outcome for persistent non-compliance

The name of the respondent will be removed from the Register in terms of the Act.



Impairment....cont.

categories of Nurses who are under impairment review

CATEGORY	GENDER	Q1	Q2	Q3	Q4
Registered Nurse	F	6	12	12	12
	M	2	3	3	3
Enrolled Nurse	F	1	1	1	1
	M	1	1	1	1
Enrolled Nursing Auxiliary	F	0	0	0	0
	M	0	0	0	0
TOTAL		10	17	17	17

Impairment....cont.

cases of unprofessional conduct of Nurses per province

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6. Continuing Professional Development (CPD)

- Sections 39 (a) (b) (c) & 59 (1)(a) (b) (c) of the Act mandates the Council to determine:
 - a) *conditions relating to continuing professional development to be undergone by practitioners in order to retain such registration;*
 - (b) *the nature and extent of continuing professional development to be undergone by practitioners; and*
 - (c) *the criteria for recognition by the Council of continuing professional development activities and accredited institutions offering such activities.*

Continuing Professional Development (CPD).....cont.

Definition (from the Framework)

A purposeful statutory process whereby practitioners registered with SANC, through personal commitment, engage in a range of learning activities to maintain and improve their knowledge, skills, attitudes and professional integrity to keep up to date with new science, innovation and health care developments to enable them to practice to provide quality care to the South African community.

NB:The Framework and related documentation are easily accessible on www.sanc.co.za

Continuing Professional Development (CPD).....cont.

Purpose of CPD

To maintain
Professional
standards of
excellence

To ensure
up-to-date
and relevant
knowledge

To promote life-
long learning,
safe, ethical and
professional
growth

To strengthen
accountability of nurses
and midwives to
themselves, employer
health care users and
communities

To promote health,
protect the public
interests and deliver
quality nursing

Continuing Professional Development (CPD).....cont.

Continuing Professional Development grid

CONTINUING PROFESSIONAL DEVELOPMENT GRID						
NURSING CATEGORY	THEMES FOR DELIVERY AND REQUIRED CPD POINTS					
	Ethical and Legal domains	Area of Practice	Leadership & Management	Training	Research	Total CPD Points
	EL	AoP	LM	T	R	
Professional Nurse	4	6	3	1	1	15
Midwife	4	6	3	1	1	15
General Nurse	4	6	3	1	1	15
Enrolled Nurse	3	9	1	2	Nil	15
Auxilliary Nurse	3	10	1	1	Nil	15

CPD progress



The pilot was conducted in 9 provinces, one district within a province in the previous financial year and 4 remaining provinces will be piloted in the current financial year.



50% of practising Midwives in provinces were sampled for the pilot.



Partogram programme (from ESMOE) was used for the pilot, facilitated by the Advanced Midwife Specialists in provinces.



The pilot will assist SANC to test and refine its internal processes accordingly, in preparation for the SANC nationwide CPD roll out for nurses and midwives in South Africa.

CPD update.....cont.

The results of the pilot so far, points to real challenges with correct plotting and interpreting of the partogram in order to timeously manage and/or refer the woman to the next level of care.

Participants are grateful to participate in the project. They indicated that the training capacitated and improved their competency and confidence in managing pregnant women in the intrapartum period.

Preparations are underway to commence on phased in implementation of the CPD in 2024/2025FY. The profession and stakeholders will be duly informed of the approach.

Nursing Practice Standards development

- A diverse Technical Working Group (TWG) approach was approved by Council to ensure an inclusive process of standards development. The TWG consisted of representatives from Nursing Practice Directorates in Provincial Departments of Health, Private Hospitals Groups, and the Office of Health Standards Compliance (OHSC).
- Consultations on developed standards were conducted
- The standards, together with inspection tools/ measures were approved by Council in January 2022. Council also approved conduction of pilot inspections in sampled health establishments.
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- The standards were piloted from 2022/2023FY- 2023/2024 FY
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- The pilot enabled SANC, through the TWG, to review the standards/ and processes involved. The revised standards were approved by Council in January 2024.

Establishment of the Inspectorate

- Parallel to standards development, the SANC adopted a phased in approach in the establishment of the Inspectorate section, in order to implement Section 4 (2) (g) of the Act , amongst others:
- *carry out quality control inspections in accordance with the prescribed conditions;*
- This is the section responsible for conducting inspections , they are currently piloting the Nursing Practice Standards in purposefully sampled health establishments, from PHC/CHCs to Tertiary and Central hospitals, Private, Military health services, Correctional services, and Old age home.
- Process is underway to increase human resources to enable the section to function effectively and reach out to more health establishments.

THANK YOU

Ndo livhuwa

