

FOR ATTENTION

: THE NEWS EDITOR

SUBJECT

: TRAINING OF NURSES

DATE

: 04 AUGUST 2022

The South African Nursing Council (SANC) has taken note of comments made in the media, specifically in the *Business Day (03 August 2022)*, regarding the training of Nurses in South Africa and reference made to student numbers for the private sector/hospitals.

The South African Nursing Council is a statutory body entrusted to set and maintain standards of Nursing Education and Practice in the Republic of South Africa, to protect the public. It is an autonomous, financially independent, statutory body operating under the Nursing Act, 2005 (Act No. 33 of 2005). Furthermore, the SANC may accredit Nursing Education Institutions (NEIs) and nursing education programmes. This is subject to compliance with set criteria, requirements and conditions. The SANC is statutorily obligated to ensure quality Nursing Education and Training is provided by such accredited NEIs.

Apparent statements made at the HASA Conference this past week that "the SA Nursing Council is blocking the training of new Nurses by preventing private hospitals from taking on more students" are factually incorrect, untrue and irresponsible.

Says Ms Sizeni Mchunu, Registrar and CEO of the SANC: "The decision on the number of students allowed at any NEI and clinical facility is made after consideration of various factors, ensuring that quality Nursing Education and Training will be provided by such accredited NEIs."

The SANC needs to clarify that the approval regarding the number of students per intake is determined by several **related** factors which include the following, among others:

 Physical resources - the number and capacity of the classrooms including classroom equipment, the capacity and equipment of the clinical laboratory that will be used by the students as well as the size of the library and relevant study material.

Clinical Facilities

- The number and size of health establishments that are used for clinical placement of students and number of students to be placed as stipulated by the respective Provincial Departments of Health, depending on the type of the Nursing programme to be offered;
- The number of other Nursing Education Institutions placing students in the same clinical facilities;
- The number and types of primary healthcare centres and statistics to achieve the Exit Level outcomes of the respective programmes;
- Clinical Facilitator: Student ratio, in line with SANC guideline requirements for the respective programmes; and
- Bed occupancy.

The SANC cannot act irresponsibly by having more students than patients in clinical facilities, thus compromising the quality of clinical learning as well as the safety of patients.

Human Resources

- Lecturer: student ratio, in line with the respective programmes' guidelines (lecturers should have appropriate qualifications and cannot teach the same level of programme outcomes that they have achieved);
- Lecturers should be licensed to practice as nurses (Annual Practising Certificate); and
- Years of teaching and clinical experience for the lecturers and clinical facilitators.

The SANC further notes HASA's apparent statement that "the SANC's restriction on the number of training places offered by private hospitals is undermining a HASA proposal tabled at the Presidential Jobs Summit in 2018 and that the private sector needs 50,000 Nurses to help tackle SA's critical shortage of healthcare professionals".

The statement in its generality is considered as gravely opportunistic and condescending, considering that **each** application for programme accreditation is evaluated on its own merit and strength.

The SANC is duty bound to ensure that quality Nursing Education and Training is provided in protection of the public and cannot compromise this obligation for any other interest outside production of safe and competent practitioners for patient safety.

The apparent statement made by Netcare Nursing Education Executive Toy Vermaak i.e. "Several years ago had their annual intake slashed by the SANC, with no rationale given for the change" is irresponsible and deliberately misleading. Ms Vermaak intentionally leaves out critical information, that she is well aware of, relating to the changes in Nursing Education and Training as informed by overall changes in the Higher Education landscape, a competency of the Department of Higher Education. Ms Vermaak is also aware of the rationale and reasons for such determinations.

ENDS

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