



PHARMACISTS COUNCIL OF ZIMBABWE ANNUAL REPORT 2018

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1. Vision

To be a world class professional, dynamic and learning organisation committed to inspiring professional excellence in pharmacy, optometry and audiology.

2. Mission

To promote public health and confidence through setting, regulating, and monitoring standards of training and practice for pharmacy, optics and hearing aid specialists in Zimbabwe

3. Core values

- Professionalism
- Accountability
- Efficiency

4. COUNCIL Mandate and corporate details

The Pharmacists Council of Zimbabwe was established after the dissolution of the Health Professions Council which had been created under the Medical, Dental and Allied Professions Act (Chapter 27:04) which was repealed after the promulgation of the Health Professions Act (Chapter 27:19). The Health Professions Act (Chapter 27:19) set up eight independent Councils and the Health Professions Authority in 2001.

The functions and powers of Council are stipulated under section 46 of the Health Professions Act [Chapter 27:19] as follows:

- to assist in the promotion of the health of the population of Zimbabwe
- to promote the practice of pharmacists, pharmacy technicians, optometrists, dispensing opticians, hearing aid specialists and audiologists
- to foster research into, and develop knowledge, of pharmacists, pharmacy technicians, optometrists, dispensing opticians, hearing aid specialists and audiologists
- to regulate, control and supervise all matters affecting the training of pharmacists, pharmacy technicians, optometrists, dispensing opticians, hearing aid specialists and audiologists in Zimbabwe
- to monitor, enforce and improve the standards of training including and qualifying examinations for pharmacists, pharmacy technicians, optometrists, dispensing opticians, hearing aid specialists and audiologists in Zimbabwe
- to advise the Minister on any matter affecting pharmacists, pharmacy technicians, optometrists, dispensing opticians, hearing aid specialists and audiologists
- to communicate to the Minister information on matters of public importance acquired by the Council in the performance of its functions
- to consider and determine applications for the registration of pharmacists, pharmacy technicians, optometrists, dispensing opticians, hearing aid specialists and audiologists subject to such conditions, whether as to qualifications or otherwise, as may be prescribed by the Council

- to establish and maintain one or more registers for the registration of pharmacists, pharmacy technicians, optometrists, dispensing opticians, hearing aid specialists and audiologists
- to issue practising certificates to registered persons and to cancel or suspend such certificates in terms of the Health Professions Act [Chapter 27:19]
- to define and enforce ethical practice and discipline among registered persons
- to encourage co-operation between the Council and other councils established under the Health Professions Act [Chapter 27:19] Act; and

4.1. REGISTERED OFFICE

2 Cork Road Belgravia
Harare
Zimbabwe

4.2. POSTAL ADDRESS

P O Box CY 2138
Causeway
Harare

4.3. AUDITORS

PKF Chartered Accountants [Zimbabwe]
67 Kwame Nkrumah Avenue
Harare

4.4. LAWYERS

Honey & Blackenberg
200 Herbert Chitepo Avenue
Harare

4.5. BANKERS

CBZ Bank Limited
Kwame Nkrumah
Harare

First Capital Bank Limited
Avondale
Harare

5. CHAIRMAN'S STATEMENT 2018

The year 2018 was characterised by a rapidly changing socio– economic environment which witnessed the liquidity crunch taking a toll on Council's operations. Council took cognisance of the new government dispensation which ushered in a new economic trajectory aimed at improving business environment and both the micro and macroeconomics. The changes in the transactional currency had negative effects on Council's operations. The financial reserves which Council had built over the years were drastically eroded in the middle of the year as a result of the changes in the monetary policy. Council, however continued to exercise strict budgetary controls to ensure business continuity throughout the year.

During the year, Council however, continued to execute its mandate in line with the provisions of the Health Professions Act [Chapter 27:19] and with all the necessary engagements with key stakeholders on policy formulations and amendments. The old outstanding issue of the interpretation of the definition of health institution as provided for in Section 2 of the Act in relation to the pharmaceutical wholesalers remained unresolved besides presentations made to the Health Professions Authority and the Honourable Minister. The Health Professions Authority and Council had different views with Council insisting the pharmaceutical wholesalers are not health institutions and not registrable under the Act. Council previously had sought the opinion of the Attorney General (AG), which opinion was the same as the Council's position. This was presented to the office of the Honourable Minister who is still to finalise on the matter.

Regarding the proposed amendments to the Health Professions Act [Chapter 27:19] the Council further interrogated the provisions of sections 124 (2) and 125(2) and resolved that management and control of pharmacy and optometry businesses, remain under the registered practitioners. It was Council's hope that the amendments and the alignment of the Act to the national constitution were to be finalized in 2018.

It was also pleasing to note that practitioners continued to take heed of the motivation by Council to spread health services to marginalised areas as part of improving on equity amongst the population. An increasing number of health institutions were opened in smaller towns and growth points during the year. Council has continued to engage the Ministry of Health and Child Care on the need for the establishment of optometry posts within the public sector. Representations were also made on the need for the establishment of training posts for the practitioners in training schools.

The continued support of students and vocational trainees by registered practitioners is commendable. During the year, Council noted the steady increase in the number of applicants for both pre-registration pharmacist supervisory status and accreditation for health institutions as training premises for pre- registration pharmacists.

Policies for optometry pre-registration training were developed as the country was aiming to begin training optometrists at University of Zimbabwe and Bindura University

of Science Education.

On behalf of Council and secretariat I would like to thank you to all the valued stakeholders for your unwavering support and applaud the registered practitioners for continuing to provide the much needed health services to the population.

6. REGISTRAR'S STATEMENT 2018

Welcome to the end of the year and it is time for Council to reflect on activities of 2018 and take stock therefrom. There were many challenges that were noted during the year which had affected both practitioners and Council's operations. Obviously, it was a challenging year, but the Council remained resolute in discharging its mandate towards achieving its goals more importantly on areas of Education and Training, Practice enforcement and Discipline. The aim was meant to achieving the Council's strategic goals as follows;

- Increase Council visibility and enhance stakeholder engagement
- Research and development
- Adherence to good corporate governance
- Ensure practitioner compliance through inspection and monitoring

The following were some of the highlights that Council has embarked on;

6.1 Corporate Communication

Stakeholder interaction to raise awareness on quality delivery of pharmaceutical and optometry services. Stakeholder engagement through the website, which the Council was in the process upgrading to ensure that it becomes interactive in the forthcoming year, 2019.

The Council database had been updated to give accurate data on the click of a button regarding practitioners' details.

6.2 Training/Education and Development

There has been a high uptake from the practitioners seeking accreditation of facilities for training of pre-registration pharmacists. Training institutions were inspected for compliance with training and a remarkable improvement on this area has been noted. There is still concern on the low uptake of newly qualified practitioners for placement in designated health institutions (community service) due to limited number of facilities accredited for purpose.

6.3 Disciplinary

The mandate of Council is to ensure maintenance and enhancement of honour and dignity by the professions for them to refrain from any unethical activities that put the integrity of the professionals into disrepute or the health of the public at risk.

In terms of the provisions of the Health Professions Act, [Chapter 27:19], the Council is empowered to inquire into any matter brought to its attention, any complaint,

charge or allegations of improper or disgraceful conduct against a registered person. However, not all practitioners are involved in issues of mal practices. Council commends and applaud practitioners who thrive to uphold professional dignity and integrity

However, it is not pleasing to report that there has been an increase in the number of the errant practitioners during the year, particularly on failure to provide continuous personal supervision of the premises by licenced/ registered pharmacists.

6.4 The Way Forward

6.4.1 Ease of Doing Business

The Council is working towards embracing the concept of ease of doing business to reduce the turnaround time on processing of applications and on reduction of costs of processing applications where possible.

6.4.2 Decentralisation of Examination Centres for Professional Qualifying Examinations

As we embrace the concept of online registration, the Council moots the concept of writing the Professional Qualifying Examinations online or to decentralize examination to provinces to reduce costs and other associated expenses.

6.4.3 Placement at Designated Health Institutions

The Council has reviewed the system of accreditation of designated health institutions in order to accommodate many facilities meeting criteria to also train pharmacists on community service.

7. GOVERNANCE AND OPERATIONAL REPORT

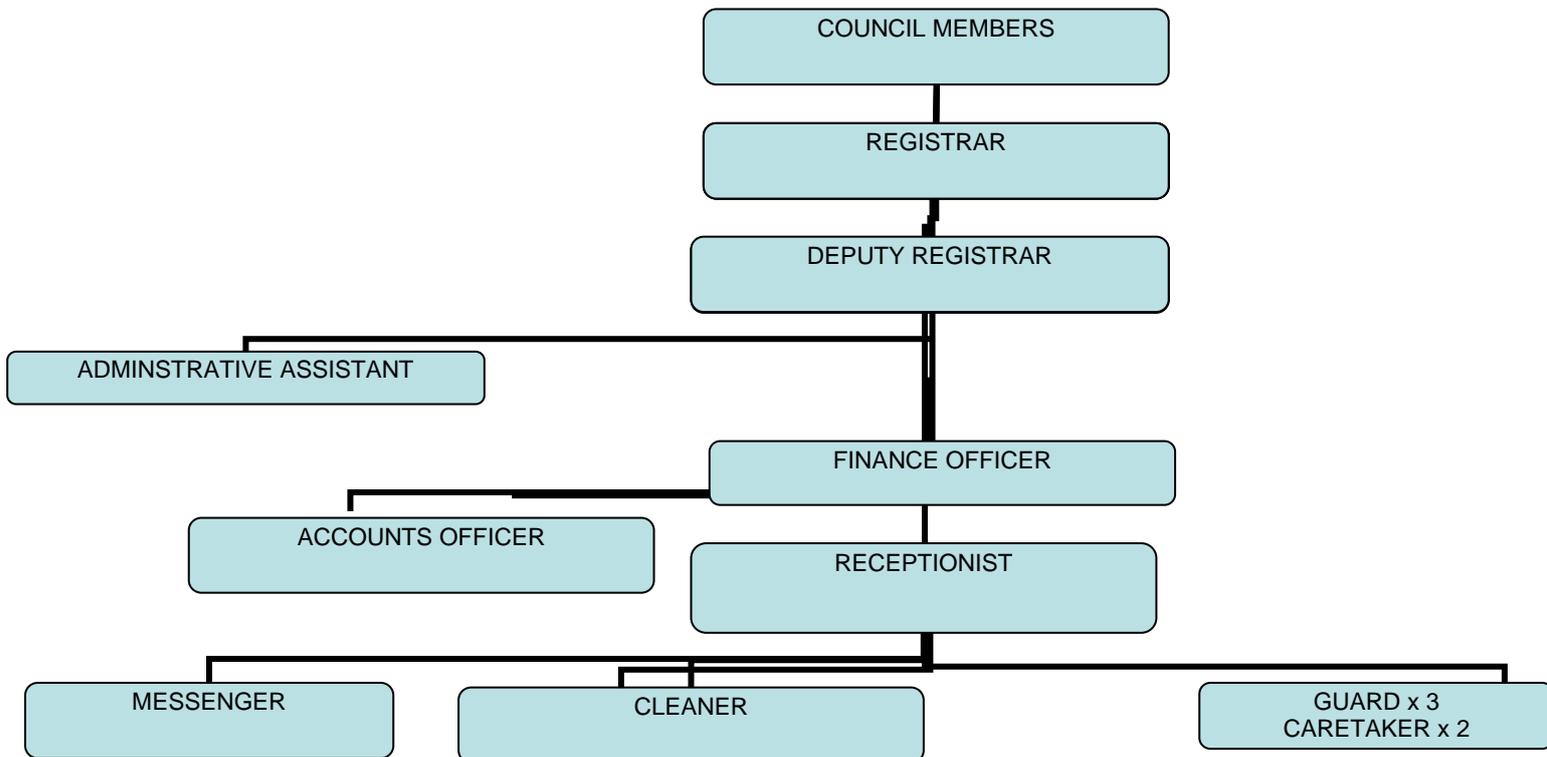
7.1. The Council Board

Council Members are constituted in terms of the provisions of section 47 of the Health Professions Act [Chapter 27:19]. The Council is accountable to the Minister of Health and Child Care and is responsible for crafting and directing policies of Council for implementation by secretariat. The current Board/Council took office on 1 July 2015 as shown on the table below;

Council Member	Appointment Section	Date appointed	Termination
Mr E R Chiro (Chairman)	Sec 47 (1)(a)(v)	01 July 2015	30 June 2020
Mr D Ndiweni (Vice Chairman)	Sec 47 (1)(a)(iii)	01 July 2015	30 June 2020
Ms G N Mahlangu	Sec 47(1)(a)(i)	01 July 2015	30 June 2020
Ms A O Chirewa	Sec 47(1)(a)(ii)	01 July 2015	30 June 2020
Mr I R Nkomo	Sec 47(1)(a)(iii)	01 July 2015	30 June 2020
Mr E Mujuru	Sec 47(1)(a)(iv)	01 July 2015	30 June 2020
Prof D Tagwireyi	Sec 47(1)(a)(vi)	01 July 2015	30 June 2020
Mr J P Mutizwa	Sec 47(1)(a)(vii)	01 July 2015	30 June 2020
Ms T Moyo	Sec 47(1)(a)(viii)	01 July 2015	30 June 2020
Mr G Mandizvidza	Sec 47(1)(b)	01 July 2015	30 June 2020
Mr J Kawara	Sec 47(1)(b)	01 July 2015	30 June 2020
Mr C N Mtuwa	Sec 47(1)(c)	01 July 2015	30 June 2020
Vacant	Sec 47(1)(d)		

7.2. Secretariat

The Council secretariat is headed by the Registrar who is responsible for the day to day running of the Council with delegated authority from the Board/Council. The organogram is as follows:



7.3. Council Committees

The Council Committees have been established to assist the Board/Council in the discharge of its mandate. Each committee has Council members and some are competent practitioners with specific skills and experience co-opted. Council Committees have specific terms of references which guide their operations and they are accountable to the Council. All Council Committees are chaired by Council Members.

The following are the statutory Committee their composition, terms of references

7.3.1. Executive Committee (Statutory Committee)

The Executive Committee which has seven [7] members, all Council Members, established in terms of the provisions of section 67 (1) (a) and 68 of the Health Professions Act [Chapter 27:19]. The Committee sits four times a year and below is the Schedule of meeting attendance by membership,

a tick indicates that the member was present,
 "A" indicates apology and "
 'R' indicates that the member had resigned;

Committee Member	Meetings Attendance			
	January	April	July	October
Mr E R Chiro (Chairman)	✓	✓	✓	✓
Mr D Ndiweni (Vice Chairman)	✓	A	A	R
Mr C N Mtuwa	✓	✓	✓	✓
Ms G N Mahlangu	✓	A	✓	A
Prof D Tagwireyi	✓	✓	A	✓
Mr J Kawara	✓	✓	✓	A
Mr J P Mutizwa	✓	✓	A	✓
Mr E Mujuru	✓	✓	A	✓

Considers and deals with matters which require urgent attention. The Committee meets in between Council meetings. The Committee meets four times a year as prescribed in the provisions of 67 (a) of the Health Professions Act (Chapter 27:19).

The Executive Committee is also vested with the following functions among others;

- Investigation of complaints brought to its attention
- Refer matters to the Disciplinary Committee for inquiry
- Makes the final decision on disciplinary for practitioners brought before the Committee

7.3.2. Practice Control Committee (Statutory Committee)

Has ten [10] members, eight [8] Council Members and two [2]co-opted members, established in terms of the provisions of section 67 (1) (b) and 69. The Committee had eleven [11] scheduled meetings in 2018 and membership and attendance to meetings as following;

Committee Member	Meetings Attendance										
	J	F	M	A	M	J	J	A	S	O	N
Mr E R Chiro	✓	A	✓	✓	✓	✓	✓	✓	✓	✓	A
Mr D Ndiweni	✓	✓	✓	✓	A	A	A	✓	R	R	R
Mr C N Mtuwa	✓	✓	✓	A	✓	✓	✓	✓	✓	✓	✓
Ms T Moyo	✓	✓	A	✓	✓	✓	✓	✓	✓	✓	✓
Mr G Mandizvidza	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Prof D Tagwireyi	✓	✓	✓	✓	✓	✓	✓	✓	✓	A	✓
Ms A O Chirewa	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	A
Mr J P Mutizwa	✓	✓	A	✓	✓	✓	✓	✓	✓	A	✓
Mr R Rukwata	✓	✓	✓	✓	✓	A	✓	A	A	A	✓
Mr A A McShaw	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

In line with the provisions of section 69 (8), the Practice Control Committee was engaged in the following activities during the period under review:

- a) Approval of compliance of organizations operating of health institutions in line with the provisions of Sections 124(2) and 125(2) of the Health Professions Act [Chapter 27:19]
 - b) Approval of the registration of practitioners onto various registers in line with the provisions of Section 86
 - c) Engagement of various stakeholders on issues relating to the registration of practitioners
 - d) Causing investigations into various allegations of misconduct leveled against practitioners
 - e) Accreditation of designated health institutions with the aim of accommodating newly qualified practitioners
- Considered issues to do with advertising of new premises

7.3.3. Education and Liaison Committee (Statutory)

The Committee has eleven [11] members, six [6] Council Members and five [5] co-opted members, established in terms of the provisions of section 67 (1) (d) and 71 Four scheduled meetings in 2018, membership and attendance are as follows;

Committee Member	Meetings Attendance			
Prof D Tagwireyi	✓	✓	✓	A
Mr I R Nkomo	✓	✓	✓	✓
Mr G Mandizvidza	✓	✓	✓	A
Mr L Machibiza	A	✓	✓	✓
Ms A O Chirewa	✓	✓	✓	A
Mr J Kawara	A	✓	✓	✓
Mr R Maveneka	A	✓	✓	✓
Mr E Mujuru	✓	✓	A	A
Mr P Matowa	✓	✓	✓	✓
Mr R Makasi	A	A	✓	✓
Mr A A McShaw	A	✓	✓	✓

In line with the provisions of section 71 of the Health Professions Act [Chapter 27:19], the Education and Liaison Committee embarked on the following activities during the period under review;

- a) introduced qualifying examinations for pharmacists, pharmacy technicians, dispensing opticians and optometrists
- b) engaged the University of Zimbabwe School of Pharmacy, Harare Polytechnic and the Ministry of Health and Child Care's Pharmacy Technicians Training School with the aim of improving standards of training

- c) approved the registration of the Harare Institute of Technology's Bachelor of Pharmacy (Honours) degree programme
- d) strengthened the participation of registered practitioners in continuous professional development
- e) participated in the dialogue for the establishment of a school of optometry in Zimbabwe
- f) monitored and developed tools for use in pre- registration training

7.3.4. Business and Finance Committee (NON-STATUTORY COMMITTEE)

The Business and Finance Committee has seven [7] members, all Council Members, was established in terms of the provisions of section 67 (1) (e) of the Health Professions Act [Chapter 27:19]. held four scheduled meetings in 2018 and membership and attendance to meetings was as follows;

Committee Member	Meeting Attendance			
Mr E Mujuru	✓	✓	✓	✓
Mr D Ndiweni	✓	✓	✓	R
Mr C N Mtuwa	✓	A	✓	✓
Mr I R Nkomo	✓	✓	✓	✓
Ms T Moyo	✓	✓	✓	✓
Mr G Mandizvidza	✓	✓	✓	✓
Ms A O Chirewa	✓	✓	✓	✓

The role of the Committee is to have an oversight over Council's material and financial resources and advise Council of such action to take in as far as these resources are concerned. During the period under review, the Committee;

- a) Crafted appropriate policies and procedures of handling material and financial resources
- b) Prepared the Council budget and set up the various fees payable by practitioners
- c) Crafted appropriate human resources policies and procedures
- d) Scanned the environment before Council made any investment decision
- e) Oversaw the preparation of Council's financial statements for auditing

7.3.5. Audit and Risk Management Committee(non-Statutory)

The Audit and Risk Management Committee has four [4] members, two [2] Council Members and two [2] co-opted members, established in terms of the provisions of section 67 (1) (e) of the Health Professions Act [Chapter 27:19]and met four times in 2018. Membership and attendance to meetings was as following

Committee Member	Meetings Attendance		
	February	May	October
Mr J Kawara	A	✓	✓
Ms G N Mahlangu	✓	✓	✓
Mr Mututa	✓	✓	✓
Ms Musiyiwa	✓	✓	✓

During the period under review, the Committee;

- a) Oversaw the auditing of the 2018 financial statements
- b) Reviewed corporate governance policies
- c) Assessed and advised Council on its adherence to various statutes
- d) Reviewed the Risk Register and proposed mitigation against risk as was presented by management

7.3.6. Preliminary Inquiries Committee (Non-Statutory)

The Preliminary Inquiries Committee has six [6] members, two [2] Council Members and four [4] co-opted members, established in terms of the provisions of section 67 (1) (e) of the Health Professions Act [Chapter 27:19]. The Committee had four scheduled meetings in 2018 and membership and attendance to meetings was as follows;

Committee Member	Meeting Attendance			
Mr C N Mtuwa	✓	✓	✓	✓
Mr J P Mutizwa	✓	✓	A	✓
Mrs J M Chaibva	✓	A	✓	✓
Mr J B Nderere	A	✓	✓	✓
Mr P Musiza	A	✓	A	✓
Mr P Mwendera	✓	✓	✓	✓

During the period under review, the Committee received and investigated practitioner misconduct cases and recommended to the Executive Committee whether or not practitioners could be subjects of disciplinary inquiries

7.3.7. Health Committee (Statutory Committee)

The Health Committee has four [4] members, two [2] Council Members and two [2] co-opted members established in terms of the provisions of sections 67 (1) (a) and 130 (1) of the Health Professions Act [Chapter 27:19]. The Committee met as and when there was need to attend to practitioners' health issues. The membership and attendance to meetings was as following;

Committee Member	Meeting Attendance	
	May	October
Ms G N Mahlangu	✓	✓
Mr J P Mutizwa	✓	✓
Prof C C Maponga	✓	✓
Dr W Mangezi	✓	✓

During the period under review, the Committee met twice to deliberate on issues involving the health of two practitioners. The Committee advised the Executive Committee on the appropriate action to take with regards to the concerned practitioners with the view of protecting them and the public.

7.3.8. Disciplinary Committee (Statutory Committee)

The Disciplinary Committee which had three [3] members, constituted to inquire into allegations on the conduct of a registered practitioner established in terms of the provisions of section 67 (1) (c) and 70 of the Health Professions Act [Chapter 27:19]. The Committee had inquiries which were Chaired by the Council Chairman/ Council Member and with two members on the same register with the practitioner subject to inquiry

During the period under review the Committee presided over;

- One [1] case involving a practitioner operating an unregistered health institution contrary to the provisions of Section 99 (1) of the Act
- Fifteen [15] cases involving practitioners poorly supervising health institutions
- Seven [7] cases involving practitioners selling unregistered medicines
- One [1] case involving a practitioner practicing without a valid practicing certificate
- Two [2] cases involving practitioners selling expired medicines
- Two [2] cases involving practitioners advertising professional services contrary to provisions of their professional conduct regulations

7.4. Registers

As at 31 December 2018, the following was the number of practitioners registered in the Council's registers;

<u>Register</u>	<u>Number of Active Practitioners</u>
Pharmacists [Intern, main and Provisional Registers]	1,419
Pharmacy Technicians	520
Optometrists	70
Dispensing Opticians	10
Hearing Aid Specialists	5
Orthoptists	-
Total on Registers	2,024

8. Summary of 2018 Financial Statements as Audited by PKF Chartered Accountants (Zimbabwe)

Independent Auditor's Report

To the members of Pharmacists Council of Zimbabwe

Adverse opinion

We have audited the financial statements of Pharmacists Council of Zimbabwe which comprise the statement of financial position as at 31 December 2018, and the statement of surplus or deficit and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, because of the significance of the matter described in the basis for adverse opinion section of our report, the financial statements do not present fairly the financial position of Pharmacists Council of Zimbabwe as at 31 December 2018, and its financial performance and cash flows for the year then ended in accordance with International Financial Reporting Standards.

Basis for adverse opinion

During the year the Pharmacists Council of Zimbabwe transacted using a combination of United States dollars, bond notes and coins and Real Time Gross Settlement (RTGS) system.

As explained in the basis for preparation and in note 20 to the financial statements, the financial statements were presented in United States Dollars to comply with the SI 33/19 (law). Given that the new currency "RTGS dollars" came into being after year-end, the United States Dollar would not have been an appropriate functional currency on the basis of the exchange rate prescribed in the Statutory Instrument of 1:1. The Pharmacists Council of Zimbabwe has maintained the functional currency and has presented the financial statements in United States dollars in compliance with the law. This constitutes a departure from the requirements of IAS 21 'The Effects of Changes in Foreign Exchange Rates', and therefore the financial statements have not been prepared in conformity with International Financial Reporting Standards.

We conducted our audit in accordance with International Standards on Auditing. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the financial statements section of our report. We are independent of the Council in accordance with the International Ethics Standards Board for Accountants Code of Ethics for Professional Accountants (IESBA Code) and other independence requirements applicable to performing audits of financial statements in Zimbabwe. We have fulfilled our other ethical responsibilities in accordance with the IESBA Code and in accordance with other ethical requirements applicable to performing

audits in Zimbabwe. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our adverse opinion.

PKF Chartered Accountants (Zimbabwe) Registered Public Auditors (Zimbabwe) HARARE
Mr Muzondo, Engagement Partner Registered Public Auditor (Zimbabwe) PAAB Practicing
number of Engagement Partner:0469 Date: 20 November 2019

Pharmacists Council of Zimbabwe Financial Statements for the year ended 31 December 2018

Statement of Financial Position as at 31 December 2018

Figures in US Dollar	2018	2017
Assets		
Non-Current Assets		
Property, plant and equipment	945,287	645,623
Investment property	160,000	160,000
Long term investment	163,271	175,771
	1,268,558	981,394
Current Assets		
Inventories	3,915	18,708
Trade and other receivables	53,142	33,482
Cash and cash equivalents	71,348	261,615
	128,405	313,805
Total Assets	1,396,962	1,295,199
Equity and Liabilities		
Equity		
Reserves	4,736	4,736
Retained surplus	1,181,879	1,096,274
	1,186,615	1,101,010
Liabilities		
Current Liabilities		
Trade and other payables	210,347	194,189
Total Equity and Liabilities	1,396,962	1,295,199

The financial statements were approved by the Council on 29 August 2019

9. 2018 Challenges

During the period under review, Council also had its share of challenges summarized as follows;

- a. Non gazettement of regulations thereby affecting Council in discharging its statutory mandate.
- b. Lack of a student register to enable Council to monitor students in training and instill professional ethics.
- c. Poor performance of the economy, thereby affecting Councils' general operations
- d. Misdemeanors by the professionals mainly due to economic challenges