



ANNUAL GENERAL MEETING · 2026

President's Report



Sean Chetty

President · South African Society of Anaesthesiologists · 2024–2026

A President's Report should account for what a Society has done. At the end of a term of office, it should ask something more:

Is the Society stronger, safer and better prepared for the future than it was when this term began?



That is the measure by which I have reflected on this presidency.

Where We Began, and Where We Stand

2024

- ≈26% of income from non-member sources, against a 15% SARS ceiling
- Branch and SIG funds sitting outside the consolidated annual audit
- Roles and authority defined largely by convention
- A peer-review model carrying legal risk to SASA and to members
- A participant at the international table



2026

- A 90:10 member-to-non-member income ratio and renewed tax-exempt status
- An unqualified audit opinion, with Branch and SIG funds fully incorporated
- A Delegation of Authority Framework and Governance and Delivery Model
- A formal Mediation Policy, adopted by Council
- A host of the Common Issues Group and a seat on the WFSB Board

The Risk We Inherited

26%

of SASA's income, on average over five years, derived from non-member sources

15%

the maximum SARS permits if the Society is to retain its tax-exempt status

The response had to be structural, not cosmetic.

- Branch and SIG funds brought into the SASA unitary structure
- An Accounting Policy for the Recognition of Income adopted
- A deferred-income mechanism created to manage restricted funds and the 85:15 requirement

Branch and SIG finances had historically sat outside the consolidated annual audit.

The Reforms Worked

90:10

member-to-non-member ratio

The first year in which the Society actively managed and achieved the ratio required for its tax exemption.

Renewed

tax-exempt status

SASA subsequently received confirmation of its renewed tax-exempt status from SARS.

Unqualified

audit opinion

The strongest opinion available from an external auditor — in the first audit to fully incorporate Branch and SIG funds.

“These are not glamorous achievements. They are, however, the achievements that protect an organisation.”

Not a Ratio - a System

1

**Budgeting and spend planning for
Branches and SIGs**

2

Controlled release of deferred income

3

Formal grant mechanisms

4

Event financial controls

5

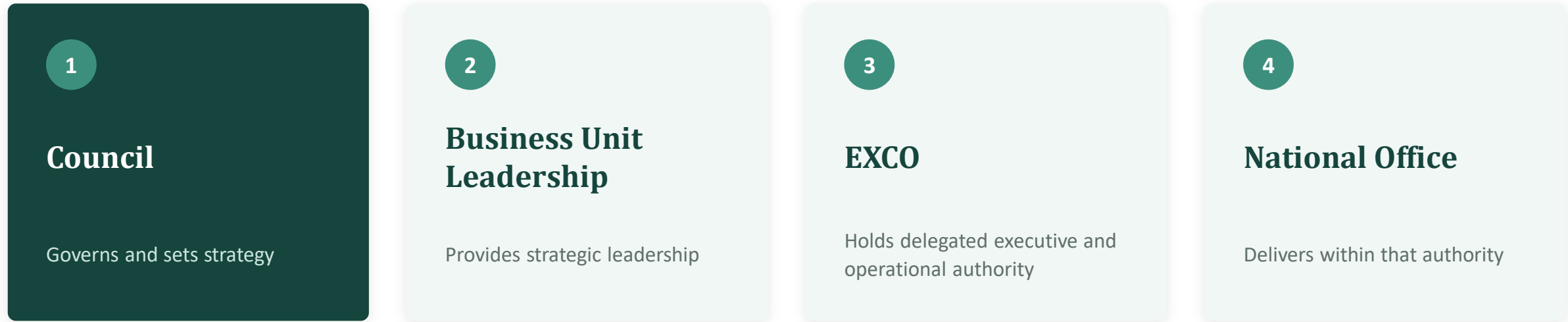
**Revised timelines allowing year-end
review and correction**

6

**Active monitoring of accumulated
Branch and SIG funds**

“Good governance is not the absence of risk. It is knowing where the risk resides, assigning responsibility for it, and building systems capable of responding to it.”

From Governance by Convention to Governance by Design



The Governance and Delivery Model

Strategic origination → feasibility assessment → Council approval → delivery → reporting and accountability. Extended into the Branch environment through formal delegations of duty for Secretaries, Treasurers and Branch Representatives, incorporated into the staged rollout by July 2026.

Reform Also Requires Listening

What we heard

- The practical implications of the new financial model
- The complexity of the new processes
- Insufficient communication, at times

How we responded

- Direct engagement between the CEO, Branches, SIGs and Business Units
- More structured communication channels
- Clearer responsibilities and lines of authority
- Regular engagement cycles, now part of how SASA operates



“A technically correct decision that is poorly understood will struggle to achieve its purpose.”

Protecting Our Members, Protecting the Profession

Mediation Policy

Adopted by Council in place of the peer-review model, whose legal risk to SASA and to members could no longer be justified.

Impaired practitioners

A completed framework covering the self-reporting practitioner, the concerned colleague, institutions and SASA itself.

Periprocedural deaths

Clearer guidance on the legal and procedural environment surrounding a death in the perioperative period.

Drug safety

Continued engagement with industry on look-alike, sound-alike medication and unsafe packaging.

Recordkeeping

334 survey responses identified access problems and clear demand for a more practical, digital SASA anaesthetic record.

Private practice

Intervention in Netcare credentialing; engagement with Discovery Health on coding; work with Life Healthcare on perioperative safety.

A member should know their Society will engage where their practice, safety or livelihood is at stake.

Investing in the Team Our Members Depend On

54

paid nurse members by July 2026

Every

Branch now represented on the Nurse Committee

60

nurses sponsored to Congress 2025 by the Western Cape Branch

Towards a genuine value proposition

- Nurse education aligned to SANC CPD requirements
- Dedicated training opportunities and regular webinars
- The Sponsor a Nurse campaign, backed by practices, hospital groups and Branches
- Sponsored access to regional and national refresher meetings

“Safe anaesthesia is never delivered by the anaesthesiologist alone. Developing the people who assist our physician members is not peripheral to the mission of SASA - it is part of patient safety.”

Supporting the Next Generation

What the national listening exercise described

- Severe staffing pressure and cancelled lists
- Constrained academic time
- Inadequate consultant-to-registrar ratios
- Threats to the specialist training pipeline

What SASA did about it

- Formal contributions to the national review of Human Resources for Health policies - RWOPS, commuted overtime, rural allowance and community service
- Groundwork for SASA to become a credible national reference point for anaesthesia workforce data
- The Registrar Anaesthetic Exchange, built on case-based learning, prepared for its 2026 pilot



“SASA cannot solve public-sector austerity alone, but it cannot be silent about it either.”

Building Our Academic Voice

R110,615

awarded from the Jan Pretorius Research Fund in 2025/26 - to eight SASA member recipients across two funding rounds

25 July 2026

the inaugural SASA Research Workshop, held in Gauteng - with further workshops planned and a mentorship phase envisaged

SAJAA

Opportunity, and responsibility

- Transition from Medpharm to AOSIS completed
- No article processing charges at this stage - the publication record comes first
- Editorial governance strengthened, with PubMed indexing as the deliberate goal

A strong national society needs a strong scholarly platform through which African anaesthesia can speak to the world.

More Than an Annual Meeting

116

registered speakers

41

accepted abstracts

35

CPD points, including 15 in Ethics

A special SAJAA edition

funded by the Eastern Cape Branch for publication of the congress abstracts - and a corporate social initiative built into Congress 2026.

Thank you

Sadé Hendricks and the entire LOC, our scientific leadership, the Eastern Cape Branch, the National Office, the PCO, our speakers, sponsors, SIGs and volunteers.

Environmental Responsibility Moving into Practice

1

Nitrous oxide

Following SASA's Position Statement, the Sustainability Committee engaged public and private hospital groups on replacing inefficient reticulated systems with point-of-care cylinder models.

2

Practice Guidelines

For the first time, a dedicated sustainability section is being incorporated into the SASA Practice Guidelines.

3

The CMSA syllabi

Environmental sustainability content has been incorporated into the new CMSA anaesthesia syllabi - reaching every future specialist.

“That is the kind of change that becomes durable: not simply campaigns, but changes in standards, curricula and routine practice.”

Caring for the People Who Care for Others

Six weeks to Global Wellness Day 2026

A mental wellbeing campaign built on four ideas

Gratitude

Connection

Movement

Creativity

Beyond the campaign

- A SASA-specific pathway to support clinicians after unexpected adverse outcomes - the “second victim” phenomenon
- Rethinking whether a once-a-year prize is the best mechanism for promoting wellness, or whether continuous engagement reaches more colleagues

“Wellbeing must ultimately become part of the culture of our profession rather than an intervention we invoke only when someone is already in difficulty.”

A Seat at the Global Table

● Sept 2025

South Africa hosts the Common Issues Group for the first time - as an equal partner alongside the American, British and Irish, Australian, Canadian and New Zealand societies.

● 2026

More than 65 SASA members attend the World Congress of Anaesthesiologists in Marrakech.

● 2026–2028

Elected to the WFSA Board of Directors as Director of Programmes - a direct South African voice in the leadership of the global federation.

● Africa

Dr Fatimah Lambat serves as Treasurer of the WFSA Africa Regional Section and on the LOC for the All Africa Anaesthesia Congress, Tanzania 2027.

We are no longer simply participating in international anaesthesiology. South African anaesthesiologists are helping to shape it.

The Work Is Not Finished

- Our public-sector workforce remains under severe pressure
- We need better national workforce data
- SIGs and Branches differ considerably in activity and capacity
- Volunteer fatigue is a recurring theme across committees
- Membership must become more compelling to medical officers and younger colleagues
- Nurse membership must grow far beyond its present numbers
- SAJAA's PubMed ambition will require sustained work and investment
- Financial and tax compliance will require continuing discipline

I do not believe the responsibility of leadership is to finish every piece of work personally.



It is to leave behind an organisation capable of completing the work.

An outgoing President should resist the temptation to present every unfinished task as an achievement.

What We Leave Behind

1

A structure capable of protecting the Society's tax-exempt status

2

A clear distinction between governance, strategy and operations

3

Accountability that is written down rather than assumed

4

Policies that better protect our members

5

A deliberate investment in the wider anaesthesia team

6

A Society that sits with confidence among the leading anaesthesia societies in the world

None of this is the achievement of a President alone.

WITH GRATITUDE

Thank You

Lezelle Britz

Chief Executive Officer - whose energy, institutional knowledge and determination made the governance and financial transformation of this Society possible. I have valued our partnership enormously.

Our members

for entrusting me with the privilege of serving — including those who challenged our decisions. Good organisations need members who care enough to ask difficult questions.

To those who served

- Our EXCO and every member of Council
- Business Unit convenors and committee chairs
- SIG and Branch leadership
- The National Office team

“Professional societies survive because busy people decide that something larger than their own practice is worth giving their time to.”

***We are custodians, not owners,
of the institutions we lead.***

Our responsibility is to leave them stronger for those who come after us.



I hand SASA over with confidence.

It has been one of the great honours of my professional life to serve as President of the South African Society of Anaesthesiologists.

Thank you for that privilege.

Sean Chetty · President, 2024–2026

