

# Strategic Plan for the fiscal years **2020–2025**

(Five years beginning with 2023-2024)

**30 November 2022** 

# **ACCOUNTING AUTHORITY STATEMENT**

The purpose of the draft 5-year 2020-2025 Strategic Plan of the Health and Welfare Sector Education and Training Authority (HWSETA) is to provide a framework within which the HWSETA will execute its mandate and disburse its resources during the coming five-year term. The HWSETA Board approved the 5-year 2020-2025 of the Strategic Plan, which was then submitted to the Department of Higher Education and Training (DHET) to fulfill the requirements of the Public Finance Management Act (PFMA) of 1999 as amended, and the Service Level Agreement Regulations that were published in terms of the Skills Development Act of 1998 as amended. The 5-year 2020-2025 Strategic plan is in alignment with the National Skills Development Plan (2030) which contains priority 3 (Education, Skills and Health) of the Medium-Term Strategic Framework (2019-2024) and Chapter 9 of the National Development Plan.

For oversight purposes, the HWSETA prides itself with the services of a highly effective Audit and Risk Committee composed of an Independent Chairperson and two other independent members who ensure that the three-year audit coverage plan, which is risk-based, is developed and endorsed. This Committee directs and oversees the function of the HWSETA Internal Auditors and ensure that there is combined assurance by creating a synergy between their function, that of the Internal Auditors and the Auditor-General of South Africa. This supports the economic, efficient and effective use of the HWSETA resources.

Based on the research done to develop and adopt a Sector Skills Plan, the Strategic Plan for the five-year period will flow from that, an Annual Performance Plan is developed to unpack the priorities for the year in question. The Budget structure for the plans is also adjusted accordingly. The Annual Budget contains a summary of projected income and expenditure for the year ahead and the subsequent four financial years. A five-year budget has been approved by the Board of the HWSETA and will guide the HWSETA in the execution of its business for the period 01 April 2021 to 31 March 2025.

The drafting of the plans is preceded by Strategic Planning sessions and session on Risks identification. The Strategic Plan is developed in accordance with the requirements of the Revised Framework for Strategic Plans and Annual Performance Plans (2019). A number of key assumptions were made when formulating the Strategic Plan:

 That the National Human Resource Development Strategy will guide all skills development institutions and effectively coordinate Higher Education Institutions, TVET Colleges, and the SETAs' service delivery to the Nation;

- That the National Skills Development Plan (2030) is aligned to chapter 9 of the National Development Plan and Priority 3 of the Medium-Term Strategic Framework, and in turn the HWSETA Strategic Plan is aligned to the National Skills Development Plan;
- That HWSETA's Sector Skills Plan is based on sound research and is a credible reflection of the skills development needs of the Health and Social Development Sectors:
- That the Department of Higher Education and Training (DHET) is the oversight Department to which the HWSETA is accountable to and that the DHET will promote an enabling environment for the HWSETA to implement its mandate and achieve its deliverables and outcomes;
- The Grant Regulations will be well received by employers and will enable the HWSETA to accelerate delivery overall; and
- There would be a smooth transition to the implementation of the NSDP (2030) which will enable the implementation of the White Paper on Post School Education.

The HWSETA has developed a materiality and significance framework, which outlines materiality and significance as follows:

Materiality and significance (updated annually), is:

- o any amount which results from criminal conduct, or
- The value of R3.3 million and above which results from irregular, fruitless or wasteful expenditure caused by gross negligence.

The R3.3 million was calculated as being an average of annual income, including levies received and interest earned for the last two financial years at 0.5% to 1% of annual skills development levy income. HWSETA has taken the approach of setting a more conservative materiality level that will be used for all classes of the transaction instead of setting different materiality levels for each class of transactions.

All these plans are informed by national imperatives and plans such as the National Development Plan, the Strategic Plans of the Departments of Health and the Department of Social Development. The Delivery Agreement of the Minister of Higher Education and Training would also find reflection through the SLA.

The HWSETA has changed its management philosophy to focus on performance management and regular progress reviews when managing the various projects and grants.

This Management philosophy focuses on allowing Executive Managers to plan and review their annual outputs, duties, and project performance on a monthly basis with CEO and CFO reviews held regularly. These reviews are done formally with a specialized performance review IT system that shows deviations from plans and over and under-performance. Both the total HWSETA and the various sub-divisional scores are communicated to staff after each review session.

The DHET also has a monitoring role to fulfil on a quarterly basis. This serves as an early warning system whereby an assessment is performed by an outside party to ensure objectivity. This assessment and evaluation are informed by the key deliverables as contained in the SLA. Quarterly reports are submitted to the Department of Higher Education and Training and these will culminate to a final performance report to be included in HWSETA's Annual Report.

The HWSETA through the functionality of the Committees of the Board, on an ongoing basis, ensures that commensurate capacity in terms of skills and human resource is in place, as well as capability in terms of the policies, procedures, processes and other tools. These create an enabling environment to facilitate the delivery of the targets as per the approved Strategic Plan. The support systems to ensure the execution of HWSETA's deliverables are well established.

The HWSETA has 6 divisions that each have an Executive Manager, support staff, necessary workflow systems, job models, and guidelines and procedures to execute their divisional functions effectively. The HWSETA also, has 9 Provincial Offices which are headed by an Executive Manager, with each having a Provincial Manager, support staff, necessary workflow systems, job models, and guidelines and procedures to execute operations at Provincial level.

The Chief Executive Officer of the HWSETA, on a quarterly basis, submits Strategic plan progress reports and the Chief Financial Officer tables management accounts, and a Risk Management progress report. These are standing items on the agenda of the Board. The oversight role of the Authority is robust and effective.

On behalf of the Accounting Authority, the Chairperson of the HWSETA Board subsequently signs off and submits an Annual Report, including audited Annual Financial Statements, to the Minister of Higher Education and Training, the National Treasury and the AGSA. This is tabled in Parliament by 30 September of each year. This same report will be tabled at the Annual

General Meeting which will be held in November for stakeholders to consider and comment on.

Dr. N.V. Mnisi

Chairperson: Health and Welfare SETA Board

## **OFFICIAL SIGN - OFF**

It is hereby certified that this strategic plan:

- Was developed by the management of the Health and Welfare SETA under the guidance of the Board and the Department of Higher Education and Training
- Takes into account all the relevant policies, legislation and other mandates for which the HWSETA is responsible
- Accurately reflects the impact and outcomes that the HWSETA will endeavor to achieve over the period 2020-2025.



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Chief Executive Officer Health and Welfare SETA

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# **ABBREVIATIONS AND ACRONYMS**

| AHPCSA | Allied Health Professions Council of South<br>Africa       | NEI     | Nursing Education Institution   |
|--------|--|---------|---|
| AIDS   | Acquired Immune Deficiency Syndrome                        | NDP     | National Development Plan   |
| APP    | Annual Performance Plan                                    | NGO     | Non-Governmental Organisation   |
| AQP    | Assessment Quality Partner                                 | NGP     | New Growth Path   |
| ATR    | Annual Training Reports                                    | NHA     | National Health Act, 61 of 2003   |
| СВО    | Community-Based Organisation                               | NHI     | National Health Insurance   |
| CDP    | Community Development Practitioner                         | NPO     | Non-Profit Organisation   |
| CDW    | Community Development Worker                               | NQF     | National Qualifications Framework   |
| CESM   | Classification of Education Study Material                 | NSCA    | National Senior Certificate for Adults                                      |
| CHE    | Council on Higher Education                                | NSDS    | National Skills Development Strategy  |
| CHW    | Community Health Worker                                    | NSF     | National Skills Fund  |
| CPD    | Continuous Professional Development                        | NT      | National Treasury   |
| CYCW   | Child and Youth Care Worker                                | OFO     | Organising Framework for Occupations  |
| DBE    | Department of Basic Education                              | PBSW    | Professional Board for Social Work  |
| DBSA   | Development Bank of South Africa                           | PBCYC   | Professional Board Child and Youth Care                                     |
| DHET   | Department of Higher Education and Training                | PFMA    | Public Finance Management Act   |
| DoH    | Department of Health                                       | PHC     | Primary Healthcare  |
| DSD    | Department of Social Development                           | PIVOTAL | Professional, Vocational, Technical And                                     |
|        |  |         | Academic Learning   |
| ECD    | Early Childhood Development                                | PSETA   | Public Service Sector Education Training Authority                          |
| ERRP   | Economic Reconstruction Recovery Plan                      | QCTO    | Quality Council for Trades and Occupations                                  |
| FET    | Further Education and Training                             | QDP     | Quality Development Partner   |
| FETC   | Further Education and Training Certificate                 | RPL     | Recognition of Prior Learning   |
| GDP    | Gross Domestic Product                                     | SACSSP  | South African Council for Social Service<br>Professions                     |
| GET    | General Education and Training                             | SANC    | South African Nursing Council   |
| GETC   | General Education and Training Certificate                 | SAPC    | South African Pharmacy Council  |
| GP     | General Medical Practitioner                               | SASSA   | South African Social Security Agency  |
| HASA   | Hospital Association of South Africa                       | SAVC    | South African Veterinary Council  |
| HEI    | Higher Education Institution                               | SAW     | Social Auxiliary Worker   |
| HEMIS  | Higher Education Management Information System             | SDA     | Skills Development Act  |
| HET    | Higher Education and Training                              | SDF     | Skills Development Facilitator  |
| HIV    | Human Immunodeficiency Virus                               | SDL     | Skills Development Levy   |
| HPCSA  | Health Professions Council of South Africa                 | SIC     | Standard Industrial Classification  |
| HWSETA | Health and Welfare Sector Education and Training Authority | SSACI   | Swiss South African Cooperation Initiative                                  |
| MLW    | Mid-level Worker   | SSP     | Sector Skills Plan  |
| MRC    | South African Medical Research Council                     | ТВ      | Tuberculosis  |
| MTEF   | Medium Term Expenditure Framework                          | TVET    | Technical and Vocational Education and Training                             |
| MTSF   | Medium Term Strategic Framework                            | UMALUSI | Council for Quality Assurance in General and Further Education and Training |
| NC     | National Certificate                                       | WHO     | World Health Organisation   |
|        | National Certificate                                       | VVIIO   | World Health Organisation   |

# PART A THE MANDATE OF THE HEALTH AND WELFARE SETA

# 1. CONSTITUTIONAL MANDATE

The Constitutional mandate of the HWSETA as a sector education and training authority, originates from the Constitution of the Republic of South Africa, in section 29 (1b), and is stated as follows;

"Everyone has the right to further education, which the state, through reasonable measure, must make progressively available and accessible".

## 2. LEGISLATIVE AND POLICY MANDATES

The HWSETA is a statutory body, a juristic person, and a schedule 3 entity – as per the Public Finance Management Act (PFMA). As an entity of the DHET, it derives its mandate from the Constitution of the Republic of South Africa, specifically Section 29 read with Schedule 4, which lists education at all levels, including tertiary education as a functional area of concurrent national and provincial legislative competence.

# 2.1 <u>Legislative Mandate</u>

The HWSETA derives its mandate from:

- a) The Skills Development Act, 97 of 1998, as amended;
- b) The Skills Development Levies Act, 9 of 1999, as amended;
- c) The National Digital and Future Skills for South Africa Act, 350 of 2020
- d) The National Skills Development Plan, 2030
- e) The National Qualifications Framework Act, 67 of 2008, as amended;
- f) The Public Finance Management Act, 1 of 1999, as amended;
- g) National Treasury Regulations;
- h) SETA Grant regulations;
- i) All other (relevant/applicable) Human Resources and Industrial Relations Acts;
- j) All other Health and Welfare Acts and Regulations; and
- k) White Paper on Post-school Education.

The Skills Development Act, 97 of 1998 as amended, establishes Sector Education and Training Authorities under the Ministry of Higher Education and Training. Section 10 of this Act provides the mandate of SETAs. Section 10 (3), in particular, gives the mandate as follows;

"A SETA must perform its functions in accordance with this Act, the Skills Development Levies Act, and its Constitution". To date, there are 21 SETAs established through section 9(1) of the Skills Development Act. These SETAs represent national economic sectors and are configured in terms of section 9(2) of the Skills Development Act. The Health and Welfare SETA is one of the SETAs that was established by the Minister of Higher Education and Training to cover the health and welfare (social development) national economic sectors.

Section 10 (1) the Skills Development Act (97 of 1998) gives SETA a mandate to:

- a) Develop a Sector Skills Plan (SSP) within the framework of the National Skills Development Policy (NSDP);
- b) Implement the sector skills plan;
- c) Promote learning programmes;
- d) Register agreements for learning programmes;
- e) Perform any function delegated to it by the QCTO;
- f) Collect the skills development levies and disburse the levies;
- g) Liaise with the National Skills Authority.

Section 14 (1) (a) of the Skills Development Act (97 of 1998) mandates SETAs to receive 80% of the skills development levies, interest and penalties collected in respect of the SETA. The Skills Development Levies Act (9 of 1999), makes a provision for the imposition of the skills development levy for every employer to pay 1% of the total amount of remuneration paid or payable to its employees during any month, as per section 3 of the Skills Development Levies Act (9 of 1999). The Act prescribes that the skills development levy received by each SETA should fund the performance of functions and pay for its administration within a prescribed limit. The SETA Grant Regulations Regarding Monies Received by a SETA (section 3 (2) 2012) mandates SETAs to use all monies received in terms of the Skills Development Levies Act towards the:

- a) Administration of the activities of the SETA;
- b) Payment of mandatory grants to employers; and
- c) Implementation of the Sector Skills Plan (SSP) through the allocation of 80% of available discretionary grants to PIVOTAL programmes that address scarce and critical skills in its sectors.
- d) Implementation of the Annual Performance Plan (APP), which should set out:
  - i. a reasonable estimate of discretionary grants that will be available in the sector for training of scarce and critical skills through PIVOTAL programmes, that will receive grant allocations for training of learning and skills programmes identified as priorities set out in the SSP.

- ii. how- the discretionary funds will be allocated to achieve SSP and National Skills Development Policy (NSDP) outputs and outcomes in the sector.
- iii. how- the discretionary funds will be allocated to achieve impact in the sector and how it will be measured

Based on these regulations SETAs are expected to have spent or committed (through actual contractual obligations) at least 95% of discretionary funds available to it by the 31 March of each year. A maximum of 5% of uncommitted funds is allowed to be carried over to the next financial year.

The Constitution of the Health and Welfare SETA (2016) records the scope of coverage of the Health and Welfare Sector as determined by the Minister of Higher Education and Training in terms of section 9 (2) of the Skills Development Act (97 of 1998). The scope of coverage contained in the Constitution of the HWSETA (2016) enlists 53 categories of employers that fall within the Health and Welfare Sector. The Constitution of the HWSETA also enlists constituencies of the sector to include organised labour, organised employers, government departments, professional bodies, bargaining councils, and organisations of communities that have identifiable interest. The legal status of the Health and Welfare SETA is described by its Constitution as a statutory body and a juristic person.

The mandate of the HWSETA is contained in the Skills Development Act, No. 97 of 1998 as amended, and is articulated clearly in the White Paper for Post School Education and Training (2014). Table 1 below outlines this mandate in line with the various divisions of the HWSETA:

# TABLE 1: THE MANDATE OF THE HWSETA PER DIVISION

## General

- Address the needs of post-school sector
- 2. Focus on skills that will impact on growth and job creation in the health and welfare sector

## **FINANCE**

3. Administering the levy grant in line with laws and regulations

## RIME

# search

- 4. Be an authority on labour market intelligence in the Health and Welfare Sector
- 5. Conduct skills planning:
- 5.1 Identify and articulate skills needs of the sector
- 5.2 Develop sector skills plans, which are intended to outline current and future (short, medium, and long term) learning and qualifications needs of workers and employers
- 5.3 Ensure that government departments; agencies involved in assisting start-up businesses, cooperative development, community and rural development, and ABET are informed about:
  - key trends in the skills development sector,
  - the skills development needs that are emerging across established business,
  - o how these differ for large, medium, and small businesses,
  - o the kinds of opportunities that this may suggest for start-up businesses, cooperatives and for community and rural development

# &E

Through research-based evaluations:

- 6. Measure the efficiency and effectiveness of the HWSETA interventions
- 7. Examine the extent to which the HWSETA has affected the provision of skills to enable the economy to grow as well as to ensure that individuals can progress along valid learning pathways
- 8. Monitor and evaluate the impact of skills interventions in the health and welfare sector

## **CORPORATE SERVICES**

- 9. Provide adequate capacity in the HWSETA to conduct:
  - 9.1 skills planning and meet the critical purpose of identifying and articulating skills needs in the sector
  - 9.2 quality assurance of training taking place in the sector

# **Skills Development Programmes and Projects**

- 10. Develop interventions that are agreed upon with stakeholders and can improve the match between education and training supply and demand
- 11. Foster relations with government departments, agencies involved in assisting start-up businesses, cooperative development, community and rural development, AET etc
- 12. Address skills need of established employers, business, and government to meet the needs of existing workers and the unemployed and pre-employed individuals who will be entering business or government departments
- 13. Facilitate access to AET for workers in the health and welfare sector (even if this is to direct them to relevant institutions)

# **Education, Training, and Quality Assurance**

- 14. Improve quality of learning taking place in the health and welfare sector
- 15. Support the development of providers of education and training

## 2.2 Policy Mandates

Policy mandates are directed by the Service Delivery Agreements entered-into by ministers of:

- Department of Higher Education and Training;
- Department of Health; and
- Department of Social Development.

This Strategic plan is based on a number of key Government Priorities, which include the following:

- The State of the Nation Address (SONA) 2022
- The Sustainable Development Goals, 2030
- The National Development Plan, 2030
- The Revised Medium-Term Strategic Framework 20219-2024, Priority 3: Education, Skills, and Health
- The National Skills Development Plan (NSDP) 2030
- Economic Reconstruction Recovery Plan Skills Strategy, 2022 (refer to figure 1 below)
- The National Digital and Future Skills for South Africa Act 530 of 2020 (refer to figure 2 below)

# 2.2(a) The State of the Nation Address (SONA, 2022)

The State of the Nation Address pointed out the following priorities for the country:

- (a) Continued divide of society by race, geography, gender, education, unemployment. As an entity of the government mandated with the function of promoting skills development, the HWSETA sets numerical targets intended to ensure the equitable representation of suitably qualified people based on race, gender, geographic location, and youth, as follows:
- (i) The 22<sup>nd</sup> Commission for Employment Equity Annual Report 2021-2022 states that the economically active population for males is 55,3% and for females 44,7%. This includes both employed and unemployed citizens of the ages 15 to 64 years of age, who are considered to be of the economically active age group. However, the Stats SA Quarter 1 Labour Force Survey (2022) indicates an average of 65% of employed males across ten sectors reflected on the figure below, and 35% of employed females, with females being employed predominantly in private house-holds and community-social services industries. To bring equality between employed males and females, and to promote employment of females within occupations that offer more of professional services such as those of the health sector, the HWSETA sets numeric percentage targets for the unemployed at 75% for females and 35% for males.

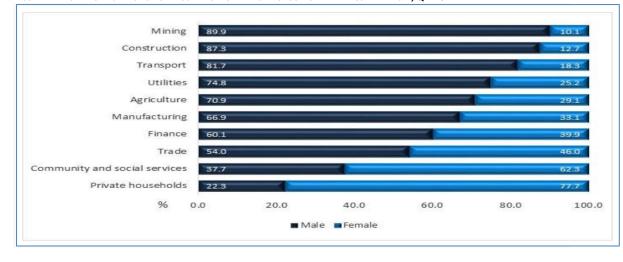
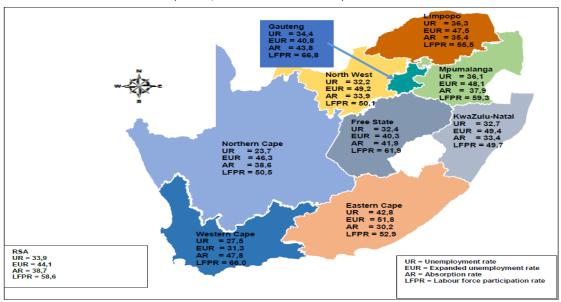


FIGURE 1: PERCENTAGE DISTRIBUTION OF THOSE WHO WORKED DURING LOCKDOWN BY INDUSTRY AND SEX, Q1: 2022

Source: Stats SA Quarter 1 Labour Force Survey for Jan-March 2022

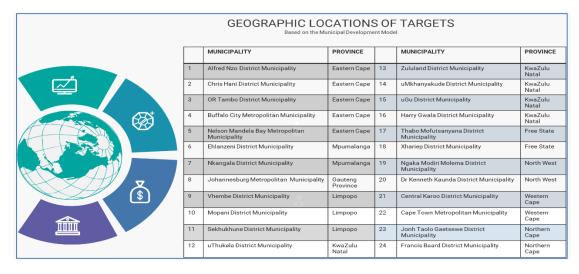
- (ii) The commission further reports that of the economically active population (which includes both employed and unemployed persons), 79,4% are Africans, 9,1% are Coloured, 2,7% are Indian, and 8,8% are White. For employed persons only, the commission measures the top management population to comprise 63% Whites, 17% African, 5.9% Coloured, 10,9% Indians, and 3% foreign nationals. To create a pipeline of Africans, Coloureds, and Indians eligible for top management positions, the numerical percentage targets for race will have to be aligned with EAP composition of each race. Therefore, the HWSETA sets targets for the employed at 80% for Africans, and 9% Coloured and 3% for Indians.
- (iii) Stats SA Quarter 1 Labour Force Survey for Jan-March 2022 reports the following findings for provincial spread of unemployment in the country:

FIGURE 2: PROVINCIAL UNEMPLOYMENT RATE (STATS SA, Q2 LABOUR FORCE SURVEY 2022)



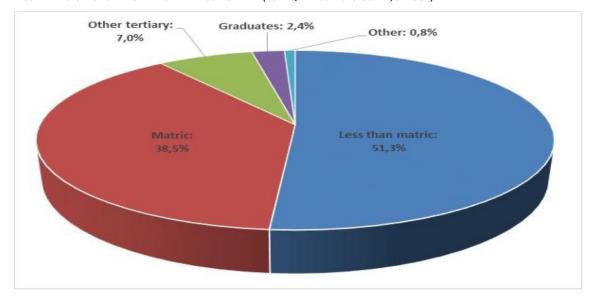
As such, the HWSETA will target 24 of the 52 metropolitan and district municipalities identified as part of the Development Model of the South African Government. The following are the municipalities where a minimum of 60% employed and unemployed persons will be targeted for skills development initiatives.

FIGURE 3: GEOGRAPHIC LOCATIONS BY METROPOLITAN AND DISTRICT MUNICIPALITY DEVELOPMENT MODEL



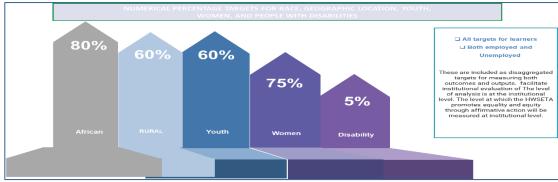
(iv) Stats SA Quarter 2 Labour Force Survey for April-June 2022 reports that 35,7% of youth (15-34 years) were Not in Employment, Education, or Training by June 2022. Also, this report shows that a high number of unemployment are people with less than matric (51,3%), followed by those with matric (38,5%), and 9,4% of those with post-education and training qualifications. To accelerate skills development for the youth, HWSETA sets a numerical percentage target of 60% of Youth in its skills development programmes.

FIGURE 4: PROPORTION OF THE UNEMPLOYED BY EDUCATION LEVEL (2022 Q2 LABOUR FORCE SURVEY, STATS SA)



(v) The 22<sup>nd</sup> Commission for Employment Equity Annual Report 2021-2022 states that disability representation remains a worrying factor as it has not shifted over the past two years, remaining at 1.4% across all occupational level, with the Health and Social Development sector remaining at 0,6% (Sector Skills Plan Update 2022-2023). The HWSETA places a numerical target of 5% for people with disabilities across its programmes.

FIGURE 5: NUMERICAL PERCENTAGE TARGETS OF THE HWSETA FOR RACE, GEOGRAPHIC LOCATION, YOUTH, WOMEN, AND PEOPLE WITH DISABILITIES

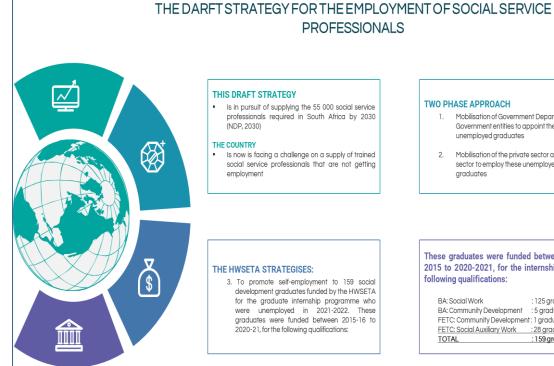


(vi) "The President pointed out that 'government does not create jobs, but business creates jobs. Around 80% of all the people employed in South Africa are employed in the private sector," (President of RSA, 10 February 2022). For the health sector, employment by private sector is at 66% and for the social development sector employment by the private sector is at 25%. The President, in his address goes further to state that the key task of government is to create the conditions that will enable the private sector, both big and small, to emerge, to grow, to access new markets, to create new products, and to hire more employees. To heed the call of the

President, the HWSETA has put in place a strategy for stimulating self-employment of Social Service Providers. This is summarised in the figure below

FIGURE 6: BACKGROUND TO THE STRATEGY OF THE HWSETA TO STIMULATING SELF-EMPLOYMENT OF SOCIAL SERVICE PROFESSIONALS THROUGH SOCIAL **ENTREPRENUERSHIP** 

**PROFESSIONALS** 



# THIS DRAFT STRATEGY

Is in pursuit of supplying the 55 000 social service professionals required in South Africa by 2030 (NDP, 2030)

## THE COUNTRY

Is now is facing a challenge on a supply of trained social service professionals that are not getting employment

# TWO PHASE APPROACH

- 1. Mobilisation of Government Departments and Government entities to appoint the 9000 unemployed graduates
- 2. Mobilisation of the private sector and NPO sector to employ these unemployed araduates

# THE HWSETA STRATEGISES:

3. To promote self-employment to 159 social development graduates funded by the HWSETA for the graduate internship programme who were unemployed in 2021-2022. These graduates were funded between 2015-16 to 2020-21, for the following qualifications:

These graduates were funded between 2014-2015 to 2020-2021, for the internships in the following qualifications:

: 125 graduates BA: Social Work BA: Community Development : 5 graduates FETC: Community Development: 1 graduates FETC: Social Auxiliary Work : 28 graduates TOTAL :159 graduates

FIGURE 7: STEP ONE — FORMATION OF PARTNERSHIPS

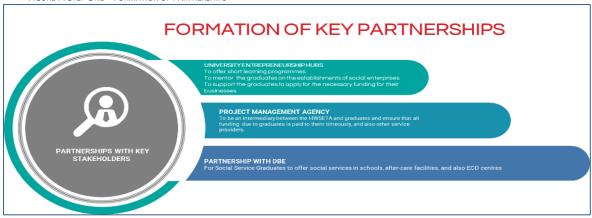
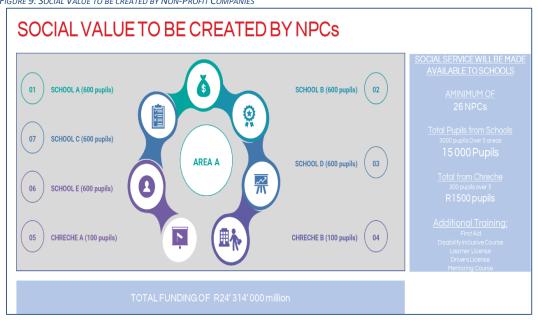


FIGURE 8: MODEL OF SUPPORT TO BE GIVEN TO SOCIAL SERVICE GRADUATES MODEL OF SUPPORT TO BE GIVEN TO GRADUATES Support Social Entrepreneurial Capacity Building Programme Fund skills programmes, mentorship and coaching offered to graduates for capacitation. Fund Service Rendering for 18 months Fund a monthly stipend of R3500 pm(NQF4 graduates), and R6000pm (NQF 7&8 graduates) Fund R2500pm for office rental Fund a service charge R350ps (40 minutes) Support the Formulation of an • NPC and NPO Pay all fees for the registration of the NPC and NPO Fund Project Management of: Payment of stipends, rentals, service fees. Support the Recruitment of Graduates Identify graduates that are currently unemployed from the 159 that was tracked in 2021

FIGURE 9: SOCIAL VALUE TO BE CREATED BY NON-PROFIT COMPANIES



# 2.2(b) Sustainable Development Goals

The overall aim of the Sustainable Development Goals (SDG) is a universal agenda for a comprehensive, far-reaching and people-centred goals set to realize the human rights of all, and to achieve gender equality and the empowerment of all women and girls. The SDG and targets came into effect on 1 January 2016. It consists of 17 goals and 169 targets. Goals aligned to the mandate of the HWSETA include:

- Goal 3: Ensure healthy lives and promote well-being for all at all ages,
- **Goal 4:** Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all, and
- **Goal 8:** Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all.

The HWSETA will therefore contribute towards the achievement of the following targets:

Table 2: IMPLICATIONS OF SDG FOR STRATEGIC PLANNING OVER THE FIVE-YEAR PLANNING PERIOD

| Table 2: IMPLICATIONS OF SDG FOR STRATEGIC PLANNING OVER THE FIVE-YEAR PLANNING PERIOD |   |  |  |
|--|---|--|--|
| Sustainable Development Goal   | Implications for Strategic Planning                   |  |  |
| Cool 4. Francis in alusius and assistable avality advan                                | tion and promote lifelance learning appartunities     |  |  |
| Goal 4: Ensure inclusive and equitable quality educa                                   |   |  |  |
| for a  |   |  |  |
| By 2030, ensure that all girls and boys have access to                                 | The HWSETA will contribute towards the                |  |  |
| quality early childhood development, care and  | achievement of this target by funding the training of |  |  |
| preprimary education so that they are ready for  | Early Childhood Practitioners so that the quality of  |  |  |
| primary education  | early childhood development services could be         |  |  |
|  | strengthened.   |  |  |
| By 2030, ensure equal access for all women and men                                     | The HWSETA will contribute towards the                |  |  |
| to affordable and quality technical, vocational and                                    | achievement of this target by offering bursaries to   |  |  |
| tertiary education, including university   | unemployed women and men to enroll for technical      |  |  |
|  | and vocational training. The HWSETA will also         |  |  |
|  | offer bursaries to employed and unemployed            |  |  |
|  | women and men to enroll for university                |  |  |
|  | programmes.   |  |  |
| By 2030, substantially increase the number of youth                                    | The HWSETA will contribute towards the                |  |  |
| and adults who have relevant skills, including technical                               | achievement of this target by funding employed        |  |  |
| and vocational skills, for employment, decent jobs and                                 | and unemployed youth and adults through               |  |  |
| entrepreneurship   | learnerships, apprenticeships, and bursaries for      |  |  |
|  | undergraduate and post-graduate education.            |  |  |
| By 2030, ensure that all youth and a substantial                                       | The HWSETA will contribute towards the                |  |  |
| proportion of adults, both men and women, achieve                                      | achievement of this target by funding youth and       |  |  |
| literacy and numeracy  | adult, both men and women, to be trained on           |  |  |
|  | literacy and numeracy through Adult Education and     |  |  |
|  | Training (AET) programmes.                            |  |  |
| Goal 3: Ensure healthy lives and promote well-being for all at all ages                |   |  |  |

| Sustainable Development Goal   | Implications for Strategic Planning  |
|--|--|
| Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol   | The HWSETA will contribute towards the achievement of this target by funding health workers and social service workers on substance abuse, including narcotic drug abuse and harmful use of alcohol            |
| Support the research and development of vaccines and medicines for the communicable and noncommunicable diseases that primarily affect developing countries,   | The HWSETA will contribute towards the achievement of this target by supporting research on the development of vaccines and medicines for communicable and non-communicable diseases that affect South Africa. |
| Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States | The HWSETA will contribute towards the achievement of this target by supporting training of the health workforce.  |
| Goal 8: Promote sustained, inclusive and sustain employment and de   |  |
| By 2030, substantially reduce the proportion of youth not in employment, education or training   | The HWSETA will contribute towards the achievement of this target by targeting youth not in employment when funding unemployed persons through its skills development programmes.                              |
| Protect labour rights and promote safe and secure working environments for all workers, including migrant workers, in particular women migrants, and those in precarious employment  | The HWSETA will contribute towards the achievement of this target by supporting training of members of Trade Unions and OHS committee members of organisations in the health and welfare sector.               |

# 2.2(c) The National Development Plan

The overall aim of the National Development Plan (NDP) in relation to health and social development is to enable all South Africans to maintain a decent living standard, have universal access to healthcare and enjoy adequate social protection (NPC 2012d:68-69). Table 5 summarises the strategic actions needed to achieve these aims and the resulting implications for skills planning in the health and social development sector.

Table 3: IMPLICATIONS OF NDP FOR STRATEGIC PLANNING OVER THE FIVE-YEAR PLANNING PERIOD

| NDP   | Implications for Strategic Planning  |  |  |
|---|--|--|--|
| Health: Access to quality health care for all, reduce disease burden and raise life expectancy  |  |  |  |
| Strengthen the health system: Build service capacity & expertise Set norms & standards for care | Supply adequate skills mix across the entire health system to provide effective, efficient, affordable & quality care; Train more professional & specialist nurses & strengthen nurse training platforms; and Improve health system management, safety in healthcare & clinical governance |  |  |
| Re-engineer primary healthcare  | Deploy ward-based outreach teams & expand school health services;<br>Contract in sessional doctors & deploy clinical specialist teams trained<br>in family health; and train nurses in primary health care   |  |  |

| NDP  | Implications for Strategic Planning   |
|--|---|
| Expand community-based care & environmental health                         | Train community health workers to focus on maternal, child & women's health & basic household & community hygiene & expand environmental health services  |
| Increase access to antiretroviral treatment & reduce TB infection rates    | Train more health professionals & health workers to monitor treatment, & employ more pharmacists & pharmacy technicians to distribute & administer medication   |
| Provide National Health Insurance to give universal healthcare coverage    | Improve financial management & procurement of health services, medicine & goods; Improve health facilities & expand training of health professionals; and set staffing norms & improve human resources capacity, training & HR management   |
| Social Development: Provide int  | egrated social protection & enable citizens to live with dignity  |
| Expand basic social welfare services for vulnerable groups                 | Provide protection & care services for children, families, the elderly & disabled; train more social service workers on all occupational levels, and build management & governance capacity of NGOs to sustain service provision  |
| Enable children to access social care, education safety & nutrition        | Expand provision of early childhood development programmes & train ECD practitioners; address the social impact of HIV/AIDS & other challenges on children; strengthen child protection services, supervision & mentorship for youth & orphans; and train caregivers & social work specialists (e.g. probation officers & registered counsellors) |
| Support communities with sustainable livelihoods & household food security | Train community development practitioners & enhance skills set of the current workforce; and build the capacity of community-based organizations to provide effective community development   |
| Reduce social crime & support victims                                      | Increase social care & support to families & victims, and train social workers to manage substance abuse & crime prevention programmes  |
| PSET related outcomes  |   |
| Support the upskilling of academic staff to obtain PhD                     | Support health and social development sector academic staff to obtain PhDs.   |

# 2.2 (D) THE REVISED MEDIUM-TERM STRATEGIC PLAN (2019-2024)

The mandate of the HWSETA is linked to Priority 3: Education, Skills, and Health (refer to table 2 and 3below).

TABLE 4: GOVERNMENT PRIORITIES FROM THE MEDIUM-TERM STRATEGIC FRAMEWORK 2019-2024

| 2024 Impact                        |                        | Outcome Statement                     | Outcome Indicator  | Interventions  |
|------------------------------------|------------------------|---------------------------------------|--|--|
| Improved participation development | economic<br>and social | Expanded access to PSET opportunities | Annual registrations for<br>SETA supported Work-<br>based learning (WBL)<br>programmes  Annual registrations for<br>SETA supported Work-<br>based learning (WBL)<br>programmes | Promote the take up of artisanal trades as career choices among youth  SETAs identify increasing number of work-place based opportunities and make information of work-based learning known to the public  SETAs identify increasing number of workplace-based opportunities and make information of work-based learning known to the public |
|                                    |                        |                                       | Improved quality of PSET provisioning  | Strengthen skills planning   |



FIGURE 10: THE RESULTS BASED APPROACH TO GOVERNMENT PLANNING



The National Skills Development Plan (2030) with its eight outcomes are translated into eight strategic outcomes and four impact statements of the strategic plan of the HWSETA, as illustrated in the next figure below:

FIGURE 11: ALIGNMENT OF NSDP OUTCOMES TO HWSETA OUTCOMES



FIGURE 12: LINKING OUTCOME STATEMENT TO IMPACT STATEMENTS FOR THE HWSETA STRATEGY

## **IMPACT STATEMENT 1**

The HWSETA contributes to the development of a post-school system which increases the production of occupations in high demand by 2030

## **HWSETA Outcome 1**

The HWSETA provides an efficient and effective skills planning, programme implementation and evaluation system which identifies occupations in high demand during the strategic period

## **HWSETA Outcome 2**

The HWSETA promotes linkages between education and the workplace to increase work-place based learning opportunities in the health and welfare sector in the strategic period.

## **HWSETA Outcome 3**

The HWSETA supports the growth of the public and private college system so that colleges may qualify as centers of specialization that offer quality vocational and occupational education for the sector in the strategic period.

## **HWSETA Outcome 4**

The HWSETA makes career development services related to the health and welfare sector accessible to rural and targeted youth in the strategic period.

## **IMPACT STATEMENT 2**

The HWSETA develops a skilled, employable and highly productive workforce which results in reduced hard to fill vacancies in the health and welfare sector by 2030

#### **HWSETA Outcome 5**

The HWSETA contributes to the improvement of level of skills to 50% of the health and welfare sector workforce through various learning programmes that address critical skills in the strategic period.

## **HWSETA Outcome 6**

The HWSETA contributes to increased access by the unemployed into occupationally directed programmes in the health and welfare sector during the strategic period.

#### **IMPACT STATEMENT 3**

The HWSETA contributes to increased capacity of large, medium, and small firms, as well as small and emerging businesses and cooperatives of the health and welfare sector to become more sustainable and expand in size by 2030

## **HWSETA Outcome 7**

The HWSETA provides increased support towards skills development activities for entrepreneurial, cooperative, as well as the establishment of new enterprises in the strategic period.

## **IMPACT STATEMENT 4**

The HWSETA contributes to increased capacity of the State, NGO and NPO sector, Trade Unions to meet social and rural development needs of the South African Citizens by 2030

## HWSETA Outcome 8

The HWSETA provides increased support to Trade unions, NGOs, and NPOs in order to strengthen governance and service delivery and thus advance social, rural, and community development in the strategic period.

It should be noted that the HWSETA has both legislated and good governance reporting requirements:

TABLE 6: LEGISLATED AND GOOD GOVERNANCE REPORTING REQUIREMENTS

| No. | Report or document   | Reporting Authority   | Date  |
|-----|--|---|---|
| 1   | National Treasury documents, returns etc.                    | National Treasury (NT); Auditor-<br>General South Africa (AGSA) | When required                                     |
| 2   | Public Entity Quarterly<br>Reporting                         | National Treasury   | Quarterly   |
| 3   | Annual Financial Statements                                  | AGSA, Executive Authority (DHET), NT                            | Within 2 months after year-end                    |
| 4   | Annual report  | DHET, NT and AGSA   | Within 2 months after year-end                    |
| 5   | Financial misconduct procedures report                       | DHET, NT, AGSA  | Annually  |
| 6   | The budget of estimated revenue and expenditure for the year | DHET  | 6 months prior to the start of the financial year |
| 7   | Report on actual revenue and expenditure for the quarter     | DHET  | Within 30 days of the end of the quarter          |
| 8   | Report on compliance with the PFMA                           | DHET  | Quarterly   |
| 9   | SETMIS-SETA Quarterly<br>Management Report                   | DHET  | Quarterly   |
| 10  | Strategic plan   | DHET  | 6 months prior to the start of the financial year |

Over and above, the reporting listed above, the HWSETA Board and Sub-Committees of the HWSETA Board receive the following reports:

- Quarterly reporting on financial and performance results
- Research, Monitoring and Evaluation Reports
- Internal Audit Reports
- External Audit management report and external audit report
- Formulated policies and amendments
- Risk Management Reporting
- Authority matters

It should also be noted that the Board Chairperson and CEO from time to time, on request, make presentations to the Parliament of the Republic of South Africa:

- Annual reporting on performance and financial results of the HWSETA
- Ad hoc reporting when required
- Responses to parliamentary questions

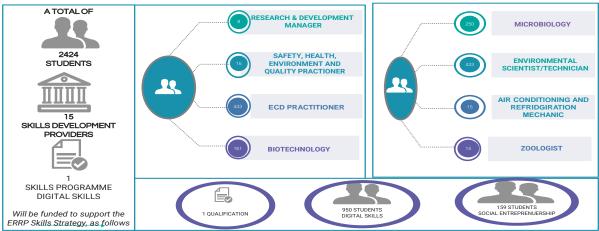
Finally, HWSETA's commitment to keeping stakeholders informed of HWSETA's activities results in:

- Annual report at the Annual General Meeting each year
- CEO interaction sessions
- Board stakeholder sessions
- Website notices and publications
- Provincial Skills Development Forums.

# 2.2(f) ERRP SKILLS STRATEGY

The ERRP Skills Strategy contains 102 occupations required by the ERRP which are considered to have skills shortages. From this list, the HWSETA has 8 occupations falling within its ambit and these include the following:

FIGURE 13: CONTRIBUTION OF THE HWSETA TO THE ERRP SKILLS STRATEGY



The figure above also shows the contribution that will be made by the HWSETA towards achieving the ERRP Skills Strategy annually.

Table 7: Interventions of the errp Skills Strategy, ERRP Occupations, and programmes of the hwseta

| ERRP<br>INTERVENTION |  | ERRP<br>OCCUPATIONS   | INTERVENTION 1             | INTERVENTION 2           |
|----------------------|--|---|----------------------------|--------------------------|
| 1                    | Expand the provisioning of skills programmes                                       | Digital skills  | Skills Programmes          | Lecture Development      |
| 2                    | Enabling the provision og targeted skills<br>programmes                            | Safety, Health, Environment and Quality (SHE&Q<br>Practitioner) | Accreditation of SDPs      |                          |
|                      |  | Microbiologist  | University Internships     | Learnerships             |
|                      |  | Air-conditioning and Refrigeration Mechanic                     | Artisans                   |                          |
| 3                    | Expand the provisioning of workplace-<br>based learning opportunities              | Early Childhood Development Practitioner                        | Learnerships               |                          |
|                      |  | Zoologist   | Under-graduate Bursaries   |                          |
|                      |  | Environmental Scientist (Environmental<br>Technician)           | Learnerships               |                          |
|                      |  | Research and Development Manager                                | Post-graduate Bursaries    | Under-graduate Bursaries |
| 4                    | Increase enrolments in qualification based programmes                              | Biotechnologist   | Post-graduate Bursaries    | Under-graduate Bursaries |
|                      |  | Microbiologist  | Qualifications Development | Under-graduate Bursaries |
| 5                    | Review and revise education and training qualifications, programmes and curricular | Digital Skills  | Qualifications Development |                          |
| 7                    | Strengthen entrepreneurship development programmes                                 | Social Entrepreneurship   | SME Development            |                          |
| 10                   | Strengthen the post-school education training system                               | Microbiologist  | TVET WIL                   |                          |

# 2.2 (g) SUPPORT FOR THE SECTOR

The HWSETA will provide specific support to the health sector, social development sector, and the National Digital and Future Skills Strategy. The support is illustrated in the three following figures, as follows:

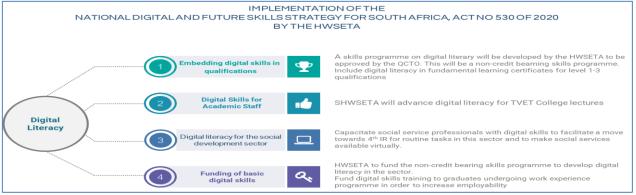
FIGURE 14: : SUPPORT FOR THE HEALTH SECTOR



FIGURE 15: SUPPORT FOR THE SOCIAL DEVELOPMENT SECTOR



FIGURE 16: SUPPORT FOR THE NATIONAL DIGITAL AND FUTURE SKILLS STRATEGY



# 3. UPDATE TO INSTITUTIONAL POLICIES AND STRATEGIES OVER THE FIVE-YEAR PLANNING PERIOD

Guided by its institutional policies, the HWSETA endeavors to implement the following strategies over the five-year period:

TABLE 8: INSTITUTIONAL POLICIES AND STRATEGIES OVER THE FIVE-YEAR PLANNING PERIOD

| BLE 8: INSTITUTIONAL POLICIES AND STRATEGIES OVER THE FIVE-YEAR PLANNING PERIOD |  |                |  |
|---|--|----------------|--|
| Policy of the HWSETA  | Strategy over the five years   |                |  |
| Research Policy   | <ul> <li>Develop Sector Skills Plan to identify occupations in demand and skill<br/>needs</li> </ul>   |                |  |
|   | <ul> <li>Conduct research to produce research outputs stipulated in the NSDP (2030</li> <li>Support research agendas of professional councils, the Workers College National Health Laboratory Services, SANGO Net, and the South Africa Federation for Mental Health</li> </ul>  | э,             |  |
|   | ☐ Publish research papers produced by candidates of post-graduat beneficiaries that are aligned to the research agenda of the HWSETA   | te             |  |
|   | <ul> <li>Support authorship of books and funding of research fellows.</li> <li>Support health and welfare sector lecturers and students from higher education institutions to conduct research in curriculum development.</li> </ul>   | er             |  |
|   | ☐ Conduct Surveys that focus on current and future digital skills  |                |  |
| Quality Assurance<br>Policies of the  | <ul> <li>To accredit skills development providers to offer occupational qualifications</li> <li>Register Assessors and Moderators</li> </ul>   | S              |  |
| HWSETA  | <ul> <li>□ Endorse learner achievements and issue qualification certificates</li> <li>□ Administer EISA examinations on behalf of the HWSETA</li> </ul>  |                |  |
|   | ☐ Develop occupational qualifications for the sector   |                |  |
|   | Translate all HWSETA learning materials to Brail.  | _              |  |
|   | <ul> <li>Promote the offering of training by skills development providers to be throug<br/>e-learning</li> </ul>   |                |  |
|   | ☐ Foster partnerships between TVET Colleges and Private Colleges to offer health and welfare sector education programmes   | er             |  |
|   | ☐ Include sectorally appropriate digital skills development, within trainin programmes and internships   | g              |  |
|   | <ul> <li>Occupational qualifications developed by the HWSETA should secure th<br/>by-in of other PSET subsystems for recognition and seamless articulation.</li> </ul>   |                |  |
| Discretionary Grant Policy  | ☐ Target Youth not in Employment, Education or Training (NEET) for jocreation  |                |  |
|   | <ul> <li>□ Support for small businesses that are owned by persons with disabilities</li> <li>□ Fund learning programmes as defined by the Skills Development Act</li> <li>□ Fund Continuous Professional Development (CDP) activities</li> </ul>   |                |  |
|   | ☐ Fund Honours Degrees to create a pipeline for persons eligible to enroll for Master so as to achieve the NDP objective to produce more PhDs an expand the proportion of university teachers with PhDs from 46% in 2018 to 50% by 2024 and also to facilitate professional registration for occupation that require a Masters degree to practice (such as psychology) | id<br>io<br>is |  |
|   | Develop lecturers of TVET, other Colleges in the sector, and universitie<br>through post-graduate bursaries.   |                |  |
|   | □ Support to post-school education institutions of learning with teaching aid to strengthen learner support.   |                |  |
|   | ☐ Teaching aids such as uniforms for Radiography students, for example, where require R4000 to purchase the uniform, which protects them from radiation  |                |  |
|   | Other teaching aids include computer centers, cadavers, simulation aids etc.  Support for NGOs and NPOs by the HWSETA will involve funding of skill development initiatives to strengthen governance and fundraising skills  | c.<br>Is       |  |

| Policy of the<br>HWSETA  |          | Strategy over the five years  |
|--------------------------|----------|---|
|                          | <u> </u> | Also, these organizations will be capacitated to become workplaces where host-employers can place learners for work-integrated learning and internship programmes.  Fund veterinary and para-veterinary students ensuring that there is enough veterinary professionals to maintain health in animals and secure food   |
|                          |          | safety.  Fund a skills programme on ethical leadership  Fund basic, intermediate, and advanced digital skills sets to assist job  |
|                          |          | seekers and to upskill workers.  Advance digital literacy for academic staff and equip them with digital fluency and digital mastery.   |
| M&E Policy and Framework |          | Monitor and evaluate the performance of the HWSETA in carrying its mandate  |
|                          |          | To measure the impact of funding strategies of the HWSETA Conduct Monitoring and Evaluation of funding programmes of the HWSETA. In particular:   |
|                          |          | <ul> <li>The work integrated learning programme for universities of technology,<br/>and the internship programme implemented by the National Department<br/>of Health</li> </ul>  |
|                          |          | Conduct track and trace studies annually for students funded by the HWSETA who complete learnerships, internships, apprenticeships, and university programmes funded through bursaries.   |
| B                        |          |   |
| Partnership Policy       | □<br>□   | Partner with key stakeholders such as:  Partner with the South African Federation for Mental Health to support  |
|                          |          | capacitation of mental health workers to provide services remotely.  Partner with the National Health laboratories to support skills training to capacitate workers to implement e-health and m-health strategies, and also fund bursaries for international tuition required to capacitate staff to implement digitization required in the Pathology sector.   |
|                          |          | Partner with the Department of Health to capacitate healthcare workers to use digital health systems. This will facilitate healthcare workers to meet NHI standards and thus get the accreditation for health facilities. Also, support for NHI will focus on Primary Health Care.  |
|                          |          | Partner with the Department of Social Development to train social workers in supervision and management; fund post-graduate bursaries for social workers to study recognized and emerging specialisations; capacitate social service workers to have technical skills to provide mental health and substance abuse services, fund learnerships for community development, and support the recognition of prior learning of the social service workforce.  |
|                          |          | Partner with the Department of Health to capacitate the health workforce with skills in Supply chain and Ethics, Emergency preparedness, Health and Safety Practitioners in work-places, Leadership, management, governance competencies and capacity, Strategic health workforce planning, HR development and management. Fund training of specialisations in clinical specialisations, epidemiology, biostatistics, ICU Nursing, Forensic Nursing, Occupational Health and Safety, mental health, Laboratory health technicians, Digital laboratory technicians. Fund training of workers to obtain formal qualifications in public health, health promotion, and disease prevention for community health workers. Fund the training of Environmental Practitioners |
|                          |          | Partner with Provincial Departments of Health to support the skills   |
|                          |          | development of Municipal Health Service Workers.  Partner with the Worker's College to address the following skills development need; Basic, Intermediate, and advanced shop steward skills, OHS in the workplace, OHS and environmental legislation, Knowledge of political  |

| Policy of the<br>HWSETA | Strategy over the five years   |
|-------------------------|--|
|                         | economy, Informed activism to advance the interests of the working class, Participatory action research, and Labour Relations.  Partners with the SACSSP to upskill social service workers in crisis intervention and trauma counselling for vulnerable people including survivors of the pandemic and their next of kin, community interventions and coping mechanisms, mental health interventions, community organizing and mobilization, conducting awareness programmes, psychosocial support,                                      |
|                         | holistic intervention. Fund learnerships in Child and Youth Care Work.  Partner with SANGO Net to upskill NGO/NPO workers in analytical thinking, active learning and learning strategies, creativity, originality and initiative, technology design and programming, critical thinking and analysis, complex problem-solving, leadership and social influence, emotional intelligence, reasoning, problem-solving, systems analysis and evaluation.   |
|                         | <ul> <li>□ Partner with the SAVC to train Veterinarians, Veterinary Nurses, Veterinary technologists, Laboratory Animal Technologist, Veterinary Physiotherapist; and also provide Day 1 skills</li> </ul>   |
|                         | □ Partner with the Department of Basic Education and Training for social services to be rendered by Non-Profit Companies to be established through the Social Enterprises programme of the HWSETA  |
|                         | <ul> <li>Partner with Entrepreneurship hubs for the capacitation of Social Service</li> <li>Professional who will be establishing Social Enterprises</li> </ul>  |
|                         | □ Partner with the private sector CSR programmes for supporting Social<br>Enterprises to be established under the Social Enterprises programme of the<br>HWSETA  |
|                         | Partner with universities and universities of technology to support undergraduate and post-graduate programmes aligned to Bio-innovation Health, and Bio-innovation knowledge valorization, these are tabulated in 9 and 10 below.   |
|                         | <ul> <li>Partner with the Gauteng Department of Health to support them address the following needs:</li> </ul>   |
|                         | <ul> <li>The current HRD practitioners in GDoH require training and accreditation as Education, Training and Development Practitioners (ETDP) so that they can become trainers for the HPO certificate.</li> <li>The Gauteng Department of Health (GDOH) appointed over 4014 Expanded Public Works Programme (EPWP) participants and placed them at various Gauteng Health institutions in the five districts, to assist as Cleaners, Admin Clerks, Data Capturers, Groundkeepers, Courtesy Officers and Pharmacy Assistants.</li> </ul> |
|                         | <ul> <li>The GDoH plans to have a comprehensive developmental skills interventions aimed at improving competencies of the EPWP contractors that are placed within the Department.</li> <li>The Skills Development Interventions such as skills programmes, accredited short courses will require the support from HWSETA.</li> </ul>   |
|                         | <ul> <li>There has been greater responsibility placed on ensuring full<br/>compliance with the Occupational Health and Safety requirements in all<br/>facilities.</li> </ul>   |
|                         | <ul> <li>Forty-eight employees have been trained on three ISO standards by the South African Bureau of Standards.</li> <li>The GDOH plans to expand the training to another 48 employees who</li> </ul>  |
|                         | <ul> <li>will become the ISO standards custodians</li> <li>Other interventions include the accreditation of the existing training centers on Emergency Medical Services – Basic Life Support with accreditation bodies such as the Resuscitation Council.</li> </ul>   |

| cy of the<br>VSETA | Strategy over the five years   |  |
|--------------------|--|--|
|                    | Partner with Higher Health support initiatives in the health and social<br>development sector that are aimed at capacitating the workforce to lead<br>campaigns on toxic masculinity |  |
|                    | □ Planned partnerships identified for the year starting 2022-2023 of the 2020-2025 strategic plan are illustrated in fugure 9 and 10 as follows:                                     |  |

TABLE 9: UNDERGRADUATE UNIVERSITY PROGRAMMES FUNDED BY THE HWSETA WHICH ARE ALIGNED TO BIO-INNOVATION HEALTH AND BIO-INNOVATION INDIGENOUS KNOWELDEGE VALORIZATION

| Undergraduate University Programmes funded by the HWSETA which are aligned to the Bio-innovation Health skills                            |  |  |
|---|--|--|
| Field   | Qualifications aligned to Bio-innovation Health Skills |  |
| Chemistry   | NDip Analytical Chemistry                              |  |
|   | BSc Chemical Sciences                                  |  |
| Radiography   | Bachelor of Diagnostic Radiography                     |  |
|   | Bachelor of Nuclear Medicine Technology                |  |
|   | Bachelor of Diagnostic Ultrasound                      |  |
|   | Bachelor of Radiation Therapy                          |  |
| Medical Sciences  | BHS Medical Laboratory Sciences                        |  |
|   | NDip Biomedical Technology                             |  |
|   | Bachelor of Health Sciences                            |  |
|   | Bsc Life Sciences                                      |  |
|   | Bachelor of Physiology                                 |  |
|   | BSc Biochemistry and Microbiology                      |  |
|   | BSc Genetics and Microbiology                          |  |
|   | BSc Medical Bioscience                                 |  |
| Undergraduate University Programmes funded by the HWSETA which are aligned to the Bio-innovation Indigenous Knowledge valorization skills |  |  |
| Pharmacology  | Bachelor of Pharmacy                                   |  |
| Phytochemistry  | BSM Complementary Medicine: Phytotherapy               |  |

TABLE 11: POSTGRADUATE UNIVERSITY PROGRAMMES FUNDED BY THE HWSETA WHICH ARE ALIGNED TO BIO-INNOVATION HEALTH AND BIO-INNOVATION INDIGENOUS KNOWELDEGE VALORIZATION

| Postgraduate University Programmes funded by the HWSETA which are aligned to Bio-innovation Health skills                                 |  |  |  |  |  |
|---|--|--|--|--|--|
| Field   | Qualifications   | Area of specialisation   |  |  |  |
| Radiography   | Masters & PhD in Radiography   | Radiobiology,<br>Radiochemistry,<br>Radio pharmacy                                       |  |  |  |
| Medical Sciences  | Masters & PhD in Medical Sciences  | Immunology, Microbiology, Molecular biology, vaccinology, Flow chemistry, Bioinformatics |  |  |  |
| Undergraduate University Programmes funded by the HWSETA which are aligned to the Bio-innovation Indigenous Knowledge valorization skills |  |  |  |  |  |
| Public Health   | Masters & PhD in Public Health   | Epidemiology,<br>African Traditional medicines   |  |  |  |
| Pharmacology  | Masters in Pharmacology & Therapeutics  Masters in Pharmaceutical affairs  | Pharmacology   |  |  |  |
|   | SETA has been on the qualification and not necessarily of targeted the areas of specialisation identified by the Dec |  |  |  |  |

# 3. UPDATE TO RELEVANT COURT RULINGS

TABLE 12: RELEVANT COURT RULINGS

| TABLE 12: MELEVAINT COOM MOLINGS                             | TABLE 12: RELEVANT COURT RULINGS  |  |  |  |  |
|--|---|--|--|--|--|
| Name of court case   | Lerong Consulting cc/ Health & Welfare Sector Education & Training Authority (Case no: 2009/27795) (High court, Johannesburg)   |  |  |  |  |
| Impact on HWSETA operations and service delivery obligations | The matter was set down for trial on 21 April 2019 however the Plaintiff unduly removed the matter from the court roll due to unpreparedness, thus causing more delays in concluding the matter. The matter is still pending with the court and applicant.  There is no impact on operations and service delivery as it is purely a compensation matter.  |  |  |  |  |
|  |   |  |  |  |  |
| Name of court case   | Busa Case: Applied to the Court for the setting aside of regulation 4(4) as promulgated in Government Notice 23 of 2016, published in Government Gazett 39592 in terms of the Skills Development Act 97 of 1998   |  |  |  |  |
| Impact on HWSETA operations and service delivery             | Section 4(4), states that, "20% of the total levies paid by employers in terms of section 3(1) as read with section 6 of the Skills Development Levies Act during each financial year will be paid to the employer who submits a WSP".  |  |  |  |  |
| obligations  | The judgement of the Labour Appeal Court, on 20 August 2019, set aside the Labour Court judgement, and was replaced by the following:   |  |  |  |  |
|  | <ol> <li>Regulation 4(4) as promulgated in Government Notice 23 of 2016, published in Government Gazette 39592 in terms of the Skills Development Act 97 of 1998 is set aside</li> <li>Implication is that the percentage of mandatory grants to be paid to employers is not determined. However, SETAs have continued to pay 20% in mandatory grants in line with the Grant Regulations. SETAs have reported this as a contingent liability pending the determination of the mandatory grant percentage based on the outcome of the negotiations between the Minister and BUSA.</li> </ol> |  |  |  |  |

# PART B STRATEGIC FOCUS OF THE HEALTH AND WELFARE SETA

# 1. HWSETA VISION

The creation of a skilled workforce for the health and social development needs of all South Africans.

# 2. HWSETA MISSION STATEMENT

The HWSETA endeavours to create an integrated approach to the development and provision of appropriately skilled health and social development workers, to render quality services comparable to world-class standards.

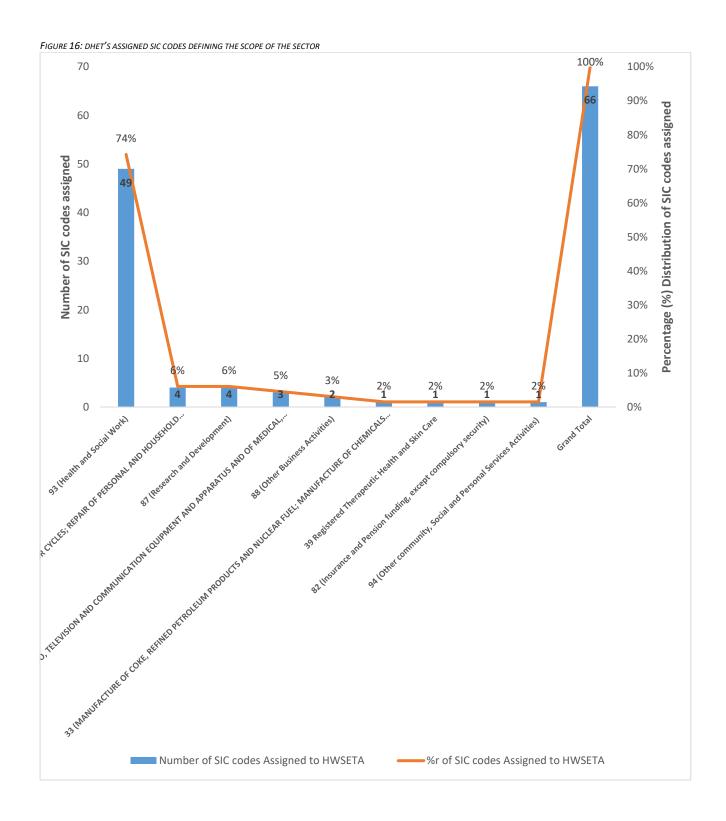
# 3. VALUES OF THE HWSETA

FIGURE 8: VALUES OF THE HWSETA

| The HWSETA holds dear the following core values: |  |  |
|--|--|--|
| Service Excellence                               |  |  |
| Transformation                                   |  |  |
| Transparency                                     |  |  |
| Integrity  |  |  |
| Respect  |  |  |
| Fairness   |  |  |
| Accountability                                   |  |  |

# 4. SITUATIONAL ANALYSIS

According to the re-establishment of SETA landscape [2020 – 2023] (2019), HWSETA accounts for 66 SIC codes in health and social development sector (see Figure below).



This section will in broad terms present information accounting for the health and social development sector as per assigned SIC codes above. The dominance of health and social work SIC codes are reflective of department of health and social development as key role players with respect to policy formulation, legislation, standard-setting, and oversight coordination of services rendered in the sector. These roles significantly shape both the external and internal environment within which HWSETA operates. In addition to these government departments, statutory and voluntary professional bodies, NGOs, CBO's and NPO's, labour and trade unions, research- and training institutions, post-school institutions (CETs, TVETs, nursing colleges, and universities), other government departments (i.e., Department of education and agriculture), and South African Revenue Service (SARS) play key roles that have a bearing on both the external and internal environment within which HWSETA operates. Roles played by each of the stakeholders indicated above are tabulated below in table below.

TABLE 13: The role of the Stakeholders of the Health and Welfare SETA

| Role Player  | Key roles and responsibilities   |
|--|--|
| National Departments of Health and Social Development  | Policy, legislation, standard-setting, oversight, and coordination of services rendered by provinces.                                    |
| Provincial Departments of Health and Social Development  | Delivering and monitoring of health and social development services.   |
| Municipal Health Services  | Environmental health management, Primary Health Care.  |
| Government Agencies  | Administration of social protection grants   |
| NGOs, CBOs, and NPOs   | Delivering health and social services.   |
| The Hospital Association of South Africa (HASA)  | Represents the interests of 64 000 people employed by the majority of private hospital groups and independently owned private hospitals. |
| Statutory professional bodies  | Regulation of the respective professions.  |
| Voluntary professional bodies  | Representing the interests of specific professions, their members and specialized fields of practice.                                    |
| Labour and trade unions  | Shaping of labour market policies, labour relations practices, and human resources management in the sector.                             |
| Research institutions Medical Research Council Human Sciences Research Council National Health Laboratory Service Onderstepoort Veterinary Institute | Conducting sector-relevant and related research.   |

These SIC codes associated with their respective key role players constitute economic activities that range from all healthcare facilities and services, pharmaceutical services and the distribution of medicine, medical research, non-governmental organizations, to veterinary services. The social development component of the sector consists of the government, NGOs and private social work practices (see Figure below).

FIGURE 17: THE STAKEHOLDERS OF THE HEALTH AND WELFARE SETA South African Health and Social Development System Health Social development Human health Non-Government governmental sector National health system: Department of Health Public health sector Private health sector Provincial Non-profit departments organisations State health Private Professional health hospitals practices Private social institutions departments Government work practices Medical Academic Nonhealth governmental insurance organisations industry complexes Corporate Tertiary hospitals Regional hospitals Municipal District health health Statutory professional Organised labour bodies

# 4.1 Profile of the Sector

## **4.1.1 Total Employment**

Estimates of total employment in the health and social development sector can be seen in the table below. Employment in the public service component of the sector increased from 325 763 in 2013 to 345 825 in 2022. The average annual growth of employment in the public sector was only 0.6% over the 2013 to 2022 period. There was a slight drop (3%) in employment from 2021 to 2022 in the public sector. The private sector component of the sector, on the other hand, showed an average annual growth of 5.7% over the 2013 to 2021 period from 262 503 to 432 880 respectively. There was a slight increase (0.2%) in employment from 2021 to 2022 in the private sector. The average annual growth for the total sector (public and private) was 3.2% over the same period. The growth in employment in the sector is expected due to the COVID-19 demands for human resources to provide health and social welfare services to the population.

2 018 Year Public 325 763 310 256 312 884 330 015 332 654 333 060 334 762 352 760 357 988 345 825 Private 262 503 276 513 319 002 274 140 266 466 343 246 368 527 374 069 431 834 432 880 588 266 586 769 631 886 604 155 599 120 676 306 703 289 726 829 789 822 778 705 Total

FIGURE 18: HEALTH AND SOCIAL DEVELOPMENT SECTOR: TOTAL EMPLOYMENT

Source: Calculated from HWSETA and PSETA WSPs 2013 -2022, Medpages data 2013 -2022.

#### 4.1.2 <u>Trends in employment data: Gender</u>

Table 14 shows the gender distribution in the sector from 2014 to 2022. Male's share in employment in the sector varied between 26% and 30% while females formed between 70% and 74% of the workforce over the years.

TABLE 14: HEALTH AND SOCIAL DEVELOPMENT SECTOR: GENDER DISTRIBUTION 2014-2022

|                       | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 |
|-----------------------|------|------|------|------|------|------|------|------|------|
| <b>Public Service</b> | %    | %    | %    | %    | %    | %    | %    | %    | %    |
| Male                  | 27   | 27   | 28   | 32   | 28   | 27   | 27   | 26   | 28   |
| Female                | 73   | 73   | 72   | 68   | 72   | 73   | 73   | 74   | 72   |
| Total                 | 100  | 100  | 100  | 100  | 100  | 100  | 100  | 100  | 100  |
| Private sector        | %    | %    | %    | %    | %    | %    | %    | %    | %    |
| Male                  | 30   | 25   | 25   | 28   | 25   | 27   | 28   | 29   | 29   |
| Female                | 70   | 75   | 75   | 72   | 75   | 73   | 72   | 71   | 71   |
| Total                 | 100  | 100  | 100  | 100  | 100  | 100  | 100  | 100  | 100  |
| Total sector          | %    | %    | %    | %    | %    | %    | %    | %    | %    |
| Male                  | 28   | 26   | 27   | 30   | 27   | 27   | 28   | 28   | 29   |
| Female                | 72   | 74   | 73   | 70   | 73   | 73   | 72   | 72   | 71   |
| Total                 | 100  | 100  | 100  | 100  | 100  | 100  | 100  | 100  | 100  |

Sources: Calculated from HWSETA and PSETA WSPs 2014-2022, MedPages data 2014-2022.

#### 4.1.3 Trends in employment data: Age

Table 15 shows the total age distribution in the Public Service, private health, and the total sector from 2014 to 2022. The overall age profile remained relatively stable in the Public service over the period with people under 35 forming between 25-32% of the workforce and

people older than 55 constituting 10-14% of the workers over the period. The percentage of employees younger than 35 years in the private sector is markedly higher – around 37-41% over the period.

TABLE 05: HEALTH AND SOCIAL DEVELOPMENT SECTOR: AGE DISTRIBUTION 2014-2022

|                 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 |
|-----------------|------|------|------|------|------|------|------|------|------|
| Public Service  | %    | %    | %    | %    | %    | %    | %    | %    | %    |
| Younger than 35 | 30   | 31   | 32   | 29   | 27   | 25   | 26   | 26   | 26   |
| 35 to 55        | 59   | 57   | 58   | 61   | 63   | 62   | 63   | 63   | 63   |
| Older than 55   | 11   | 12   | 10   | 10   | 10   | 14   | 11   | 11   | 11   |
| Total           | 100  | 100  | 100  | 100  | 100  | 100  | 100  | 100  | 100  |
| Private sector  | %    | %    | %    | %    | %    | %    | %    | %    | %    |
| Younger than 35 | 37   | 41   | 40   | 37   | 39   | 38   | 38   | 35   | 40   |
| 35 to 55        | 54   | 50   | 49   | 49   | 51   | 51   | 50   | 50   | 49   |
| Older than 55   | 9    | 9    | 11   | 14   | 11   | 12   | 12   | 15   | 11   |
| Total           | 100  | 100  | 100  | 100  | 100  | 100  | 100  | 100  | 100  |
| Total sector    | %    | %    | %    | %    | %    | %    | %    | %    | %    |
| Younger than 35 | 33   | 36   | 35   | 32   | 34   | 31   | 32   | 31   | 30   |
| 35 to 55        | 57   | 54   | 54   | 57   | 56   | 56   | 56   | 56   | 57   |
| Older than 55   | 10   | 10   | 11   | 11   | 11   | 13   | 12   | 13   | 13   |
| Total           | 100  | 100  | 100  | 100  | 100  | 100  | 100  | 100  | 100  |

Sources: Calculated from HWSETA and PSETA WSPs 2014-2022, MedPages data 2014-2022.

#### 4.1.4 <u>Trends in employment data: Disability</u>

In 2022, 0.7% of the workers in the sector were people with disabilities. Of the 1 651 workers with disabilities in the Public Service, 102 (7%) were employed as managers, 380 (27%) as professionals, 206 (15%) as technicians and associate professionals, and 600 (42%) as clerical support workers. Of the 3 442 workers with disabilities in the private sector 464 (13%) were employed as managers, 865 (25%) as professionals, 560 (16%) as technicians and associate professionals, 940 (27%) as clerical support workers and 432 (13%) as service and sales workers.

#### 5. EXTERNAL ENVIRONMENT

PESTEL Analysis was used as the main planning tool to identify key factors influencing the strategy of the Health and Welfare SETA. Through PESTEL Analysis the political, economic, socio cultural, technological, environmental and legal factors influencing the strategy of the Health and Welfare SETA were explored. The main source used for identifying these factors is the Sector Skills Plan Update for 2022-2023. This section therefore locates the HWSETA's role within the skills development milieu in the sector citing key drivers of demand and supply of labour and interventions by the HWSETA to stimulate either side.

#### 5.1 Political factors

The national state of disaster gazetted on 17 March 2020 as a response to COVID-19 pandemic was lifted as from 5 April 2022 given the low level of infections posing a low risk. This means the demand for health and social services will be reduced from the levels experienced during different COVID-19 waves of high infections. This will have specific positive impact on the skills development training capacity which was severely constrained and affected HWSETA's achievement of targets i.e. work-based learning programmes. Further implication of lifting the 2-year restriction on movement implies resumption of economic activities in the entire economy with more prospects of growth than under lockdown restrictions.

The risk of re-occurrence of the civil unrest or similar phenomenon in South Africa has been highlighted by the expert panel report to be between medium to high since little has changed to the conditions that led to the riots and looting. This phenomenon affected the South African economy and many establishments within health and social development sector such as pharmacies.

Lastly, matters relating to immigration policy have influence in the supply of key healthcare occupations through the determination of scarce skills by Department of Home Affairs has significant. (Reference). Occupations that are in short supply within the country and not included in the scarce skills list from the Department of home affairs will remain hard-to-fill vacancies in the sector affecting healthcare service offered. Protests by civil society or community-based organizations (i.e. Operation Dudula) associated with immigration policy issues have resulted to denied access to health services in hospitals.

#### **5.2 Economic Factors**

The South African Economic Reconstruction and Recovery Plan (ERRP) problematizes economic stagnation for the past decade with two consecutive quarters of a recession pre-COVID-19 pandemic accompanied by a series of downgrades including SOEs. Thus, COVID-19 pandemic deepened or exacerbated an existing economic crisis. However, Statistics South Africa (2022) reports that South African GDP has returned to pre-pandemic levels after two years (see Figure below). Similarly, HWSETA Levy contributions have returned to pre-pandemic levels especially after the 4-month SDL holiday for companies had come to an end and the national state of disaster lifted as from 5 April 2022. This signals a positive change in the

economic environment and shows how political factors influence economic factors in the external environment. It further shows how the external environment directly affects the operational environment of the HWSETA such as levy contributions which increase the capacity of the organization's interventions.

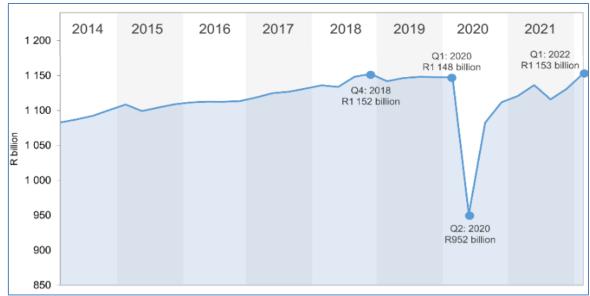
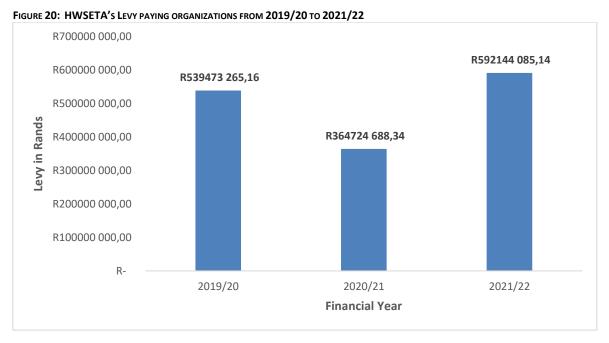


FIGURE 19: Q1 2022 SOUTH AFRICAN ECONOMY

Source: Statistics South Africa (2022).



Source: HWSETA finance division as per SARs dataset (2020, 2021, and 2022)

The economic growth emanating from economic activities enables re-investment into the sector. Public sector health and social development budgets respectively account for 28.9% (R623.4)

billion) of government expenditure which has increased by 7% from 2021/22 to 2022/23 (National Treasury 2022a). An amount of R44.0 billion is allocated in 2022/23 to extend the special COVID-19 social relief of distress grant for 12 months (until March 2023) and another R21.1 billion is allocated to provincial health departments to support their continued response to the COVID-19 pandemic, the appointment of medical interns and community service doctors, and to bridge any shortfalls in essential goods and services (National Treasury 2022a). Importantly, an additional allocation of just over R3.0 billion is available over the MTEF period through the human resources and training grant, setting its total allocations to R7.8 billion. This allocation seeks to improve the quality of nursing education by supporting all nine provincial health departments to develop training plans for nurses and midwife specialists by March 2023; the sufficient supply of nurses remains a national concern (National Treasury 2022b). This shows how positive economic factors in the external environment enables the re-investment to social ills and human resource training capacity back to health and social development sector.

This commitment is crucial given the

direct relationship between spending (in the public and private sectors) and the demand for workers. Public sector budgets are major determinants of both the number of positions created and salary levels and, consequently, the ability of institutions to attract and retain staff. The private health and social development services are part of the sector called personal services which was one of the five sectors that grew (2.7%) "stemming from the national vaccination programme" and rise in non-Covid-19 related patient admissions in the fourth quarter (Statistics 2022). In contrast, government sector decreased by 0.4%.

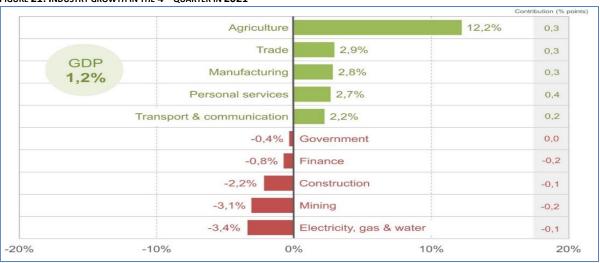


Figure 21: Industry growth in the  $\mathbf{4}^{\text{th}}$  quarter in 2021

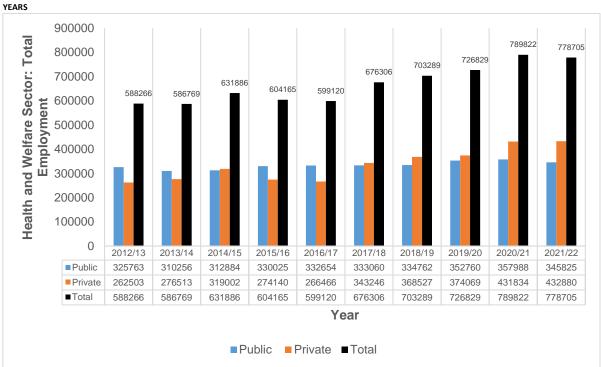
Source: Stats SA 2022

#### 5.3 Socio cultural Factors

Challenging socio-economic realities drive the need for public health services and social development interventions in South Africa. More than half of South Africans were poor in 2015, with the poverty headcount increasing to 55.5% (Stats SA 2017). The high burden of disease in South Africa further hampers economic growth and development. For example, South Africa has one of the highest tuberculosis (TB) incidences in the world, with more than 360 000 new cases diagnosed in 2019 (WHO 2020). In addition to these challenges, The Foundation for Human Rights reported a 54% increase in Gender-based Violence (GBV) cases during lockdown across all provinces in South Africa (Mail&Guardian 2020). Skilled professionals are needed to provide these specialized services.

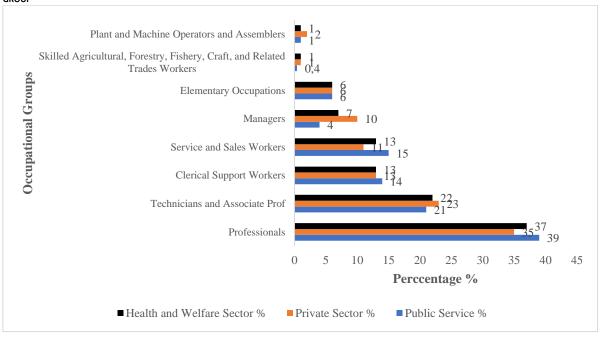
There are 778 705 people who are formally employed in the health and social development sector (see Figure below) in 2021/22 financial year (1 April 2021 to 31 March 2022). Of these, approximately 432 880 (55%) are employed in private sector organisations (referred to later as the "private sector") and levy-paying public sector organisations, while 345 825 (45%) work in the public service departments. The average annual growth for the health and social development sector was 3,2% between 2012/13 and 2021/22 financial year. There was a slight drop of 1,4% annual average growth of the workforce in the health and social development sector from 2020/21 to 2021/22. However, this drop was 3.4% in the public sector compared to an increase of 0,2% in the private sector (see Figure below). The increase in private sector is aligned to the economic growth reported in personal services (private health-related) that had 2.7% contribution towards GDP in the fourth quarter of 2022.

FIGURE 22: AN ESTIMATE OF TOTAL EMPLOYMENT IN THE HEALTH AND SOCIAL DEVELOPMENT SECTOR BETWEEN 2012/13 AND 2021/22 FINANCIAL



The Figure below further illustrate that Professionals, and technicians and associate professionals comprise 59% of total employment in the health and social sector. The implication is that the health and social development sector, in the main, has more demand for high skilled-level occupations i.e., healthcare professionals and managers who are at NQF level 7 and above.

FIGURE 23: AN ESTIMATE OF TOTAL EMPLOYMENT IN THE HEALTH AND SOCIAL DEVELOPMENT SECTOR IN 2021/22 FINANCIAL YEAR BY OCCUPATIONAL GROUP



Of the total employment estimate in 2021/22, more than two-thirds (70%) of the health and social development sector employees are African. Similarly, 70% are female. In terms of Age category, 57% are between 35 to 55 years, 31% under 35 years, and 12% older than 55 years. Thus, highly skilled adults in healthcare professionals (specialists) and managers are highly sought after in health and social development sector especially private sector.

In contrast, the youth (15 to 35 years) in South Africa continue to be disadvantaged in the labour market with an unemployment rate higher (63,9% and 42,1% for those aged 15-24 and 25-34 years respectively) than the national average [34,5%] (Statistics South Africa 2022). In the main, unemployment of the youth is characterized by low level of skills given that 51,3% of 8 million unemployed persons in the 2nd Quarter of 2022 had education levels below matric, followed by those with matric at 38,5%. Thus, the skills required for the unemployed youth continues to widen given that the economy is fast shifting away from labour-intensive towards knowledge-intensive economy. This is evidenced by the Hard-to-fill-vacancies (HTFV) predominantly in the professional occupational category which mainly accounts for total employment. The implication is that demand exists but short supply of human resources at the skills levels desirable to the market. Figure below shows that the professional occupations dominated (44%) the distribution of occupation categories in the HTFVs and accounted for most (64%) of the vacancies in 2021/22 reported as HTFV.

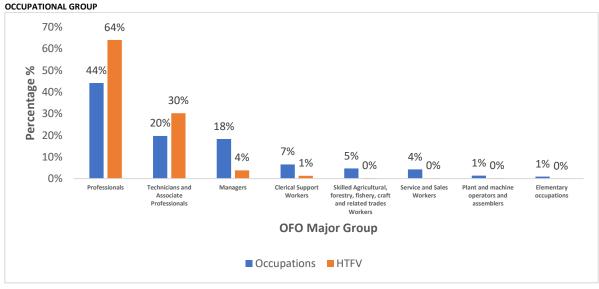


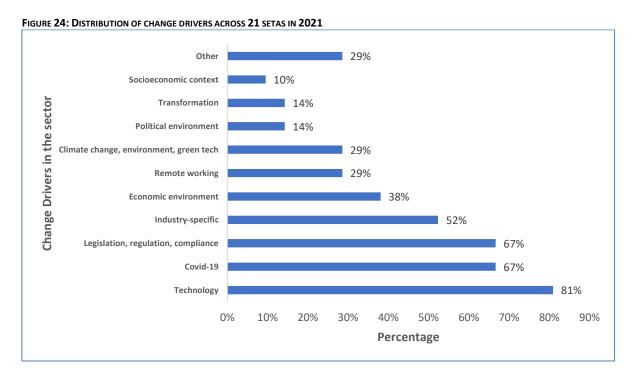
FIGURE 24: DISTRIBUTION OF HARD-TO-FILL VACANCIES IN THE HEALTH AND SOCIAL DEVELOPMENT SECTOR IN 2021/22 FINANCIAL YEAR BY OCCUPATIONAL GROUP

The study conducted in 2022 assessing the current and historical trends of the internal and external migration of healthcare professions shows increasing levels of emigration from 2016 to

2019 before declining in 2020. The latter is explained by the COVID-19 lockdown regulations. The biggest proportion of those emigrating, according to the study survey sample, is specialist medical practitioners and general medical practitioners. These healthcare professionals, in the main, emigrate to UK, Australia, and New Zeal. Importantly, the two occupational categories form part of the HTFV as published by HWSETA over the years. This confirms emigration as one explanatory factor of occupational shortages in the health sector.

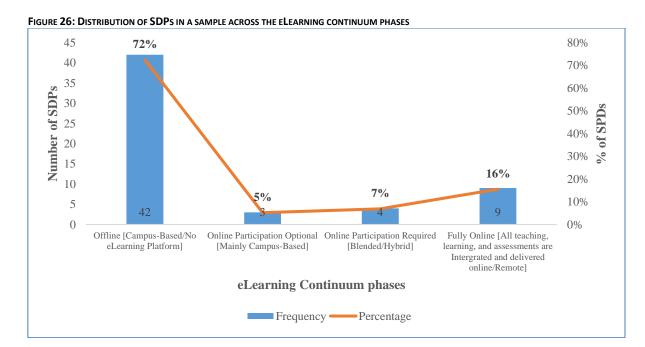
#### 5.4 <u>Technological Factors</u>

New technologies have a profound effect on the sector. In some instances, it allows for the automation of processes, which leads to either an occupation redesign, occupation redundancy, or an occupation replacement. Simultaneously, technological developments also have a constant effect on treatment methodologies and interventions. DHET's employer interviews conducted across 21 SETAs in 2021 shows that technology (81%), COVID-19 (67%), and legal factors (67%) were key change drivers in the external environment.



Source: DHET Employer interviews consolidated 2021

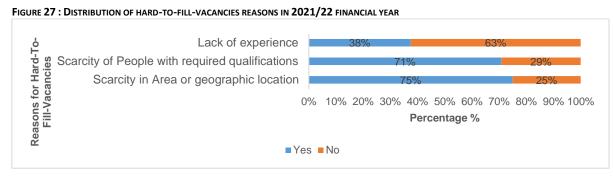
HWSETA research study assessed the exposure and adoption of the Fourth Industrial (4IR) in the health sector with specific focus on general Medical practitioners, nursing professionals, medical and pharmaceutical technicians, and clinical engineers. Findings indicate that Job losses in the health sector are unlikely to occur as a direct result of 4IR technology advancement. Instead, skill development initiatives will be required to better complement new technologies in the sector. However, COVID-19 accelerated the adoption of 4IR technologies even though challenges such as financial constraints, legislative environment barriers, and lack of appropriate skills of the workforce persists. Using the COVID-19 pandemic as an opportunity to assess the preparedness of HWSETA's Skill Development Providers (SDP) to utilize eLearning in their training, the study found that majority (72% of the sample) of SDPs are not prepared to implement eLearning due to the lack of an eLearning platform (see Figure below). This shows the extent to which external factor (COVID-19) exposed the unpreparedness of SDP's eLearning training capacity and reinforced the rural-urban divide. The training capacity of HWSETA was constrained since implementation of 2020/21 because most SDPs could not leverage on the eLearning as an alternative.



Source: HWSETA eLearning study 2021

#### 5.5 Physical environmental Factors

The spatial differences and biases (rural vs urban) worsen the mismatch between demand and supply in the health and social development sector due to in-migration (see Figure below). It is further reinforced by the reliance on technology limiting access to opportunities to those from rural areas with less resources.



Source: HWSETA SSP Update 2023/24

#### 5.6 Legal and regulatory Factors

The changes to the scopes of practice emanates from shifting service demands and technological progress which necessitate changes to the scopes of practice of some professions and occupations in the sector. For example, qualifications in community health, community development, and child and youth care have been registered in the last couple of years. In pursuit of professionalism and practice standards across the professions, the healthcare and social service practitioners are required to engage in mandatory accredited continuing professional development (CDP) to retain their registration status. All private and public health facilities are subjected to inspection, quality assurance, and accreditation processes controlled by the Office of Health Standards Compliance (OHSC) created in 2013 (National Treasury 2015a; OHSC 2015).

The Department of Social Development's sector human resources plan (2021) recommends prioritization of the social service professionals education and training based on a service delivery model that links it to the workforce planning. It further emphasizes on the resourcing for social services as per the workforce planning based on the determination of the demand and supply of social service professionals.

The policy agenda for health involves the White Paper on National Health Insurance for South Africa (2015), which introduces universal healthcare policy agenda. This health care reform is now affecting the landscape of occupations in the health sector. Focus is on transitioning from curative health care to preventive health care, which translates to a shift from hospital care to primary health care. This has led to changes in the health education landscape where standards for occupations are moving towards intermediate to high skills level (that is NQF level 5-10). This now has resulted in disparities between Public Health and Private Health, as Public Health is moving towards primary health care while Private Health is predominantly characterized by

hospital care. For example, lower levels of Nursing are being phased out to focus on more professional education of Nursing instead of paraprofessional which are required for hospital health care.

The review of the human resources for health focused on specific issues to address blockages within the education and training and skills development pipeline. The human resources for health crisis remains and is characterised by staff shortages and inequity in the distribution of skilled health professionals between the public and private sectors as well as between urban and rural areas. This inequity exacerbates shortages in the public health sector that takes care of most of the South African population, with an extraordinarily complex disease burden (DoH 2020, SA Lancet National Commission 2019).

#### 5.7 The Health and Welfare sector landscape

The HWSETA appreciates that the skills challenges faced by its sector are vast and exist at every occupational level. The HWSETA also has a limited budget and shares the responsibility for skills development with many other role players and stakeholders. Against this background the HWSETA identified the following overarching skills development priority areas:

- a. Sustainable skills pipeline into the health and social development sector.
- b. The professionalisation of the current workforce and new entrants to the sector.
- c. Vital skills and skills set required to enable the state to meet its service delivery obligations as a developmental state; and
- d. Skills needs and gaps in the time of the COVID-19 pandemic.

These skills development priorities are viewed from a strategic perspective. Firstly, a sustainable skills pipeline enables entry into employment in the health and social development sector at different entry points. Secondly, by prioritising the professionalisation of the workforce, the HWSETA can contribute to skills interventions required to improve service quality and efficiency, and address changes to service provision. Thirdly, the HWSETA can support the large-scale skills development interventions needed for the state to enhance the lives, health, well-being, and livelihoods of its citizens.

SETAs are obliged to develop a Sector Priority Occupations list as part of their sector skills planning processes. These lists are meant to align training programmes offered in and for the sector to the scarce skills or skills shortages experienced in the sector. The SPO list is then used to guide funding decisions in the SETA, and the following is the Sectoral Priority Occupations and Intervention List for 2023-2024.

FIGURE 28: SECTORAL PRIORITY OCCUPATIONS AND INTERVENTION LIST 2023-2024

|              |         |                    | SECTOR   | RAL PRIORITY OCCU   | PATIONS AND INTERVENTION  | N LIST 2023/2 | 024         |                 |                                     |
|--------------|---------|--------------------|--|---|---|---------------|-------------|-----------------|-------------------------------------|
| SETA<br>NAME | PERIOD  | OCCUPATION<br>CODE | OCCUPATION   | SPECIALISATION/<br>ALTERNATIVE TITLE  | INTERVENTION PLANNED BY THE<br>SETA                                     | NQF LEVEL     | NQF ALIGNED | QUANTITY NEEDED | QUANTITY TO BE<br>SUPPORTED BY SETA |
| HWSETA       | 2023/24 | 2021-222108        | REGISTERED NURSE<br>(MEDICAL)                        | Prison nurse/ Hospital nurse/<br>Nursing prison officer/<br>General nurse   | Learnership: Advanced Diploma in<br>Medical and Surgical Nursing        | 6             | Y           | 1584,00         | 784                                 |
| HWSETA       | 2023/24 | 2021-222105        | REGISTERED NURSE<br>(CRITICAL CARE AND<br>EMERGENCY) | REGISTERED NURSE<br>(CRITICAL CARE AND<br>EMERGENCY)  | Learnership: Higher Certificate in<br>Critical Care and Emergency Nurse | 5             | Y           | 358,00          | 177                                 |
| HWSETA       | 2023/24 | 2021-226203        | Retail Pharmacist                                    | Pharmacist assistant/<br>Community pharmacist/  | Learnership: FETC Pharmacist<br>Assistance                              | 4             | Y           | 175,00          | 87                                  |
| HWSEIA       | 2023/24 | 2021-226203        | Retail Pharmacist                                    | Dispensing Chemist/   | Learnership: NC Pharmacist<br>Assistance                                | 3             | Y           | 175,00          | 0                                   |
| HWSETA       | 2023/24 | 2021-222111        | REGISTERED NURSE<br>(OPERATING THEATRE)              | REGISTERED NURSE<br>(OPERATING THEATRE)   | Bursary: Bachelor of Nursing Science                                    | 7             | Y           | 149,00          | 74                                  |
| HWSETA       | 2023/24 | 2021-321101        | Medical Diagnostic<br>Radiographer                   | Medical/Diagnostic<br>Radiation<br>Technologist/Radiographe   | Bursary: Diploma in Diagnostic<br>Radiography                           | 5             | Y           | 87,00           | 43                                  |
| HWSETA       | 2022/23 | 2019-332208        | PHARMACY SALES<br>ASSISTANT                          | Pharmacy Cosmetics<br>Salesperson/Pharmacy<br>Salesperson/Retail<br>Dispensary / Pharmacy<br>Assistant  | Learnership: FETC Pharmacist<br>Assistance                              | 4             | Y           | 29,00           | 14                                  |
| HWSETA       | 2022/23 | 2019-213110        | MEDICAL SCIENTIST                                    | Biomedical Technologist/Public Health Scientist/Immunologist GMedical Research)/Medical Technologist/Transfusion Scientist/Clinical Biochemist/Laematologist (Medical Research)/Histologist/Medical Research)/Histologist/Medical I Scientific Officer/ | Bursary: Bachelor of Biomedical<br>Sciences                             | 7             | Y           | 24,00           | 12                                  |
| HWSETA       | 2023/24 | 2021-263508        | CHILD AND YOUTH CARE<br>WORKER                       | Child and Youth Counsellor  | FETC: Child and Youth Care Work   | 4             | Y           | 55,00           | 27                                  |
| HWSETA       | 2023/24 | 2021-234201        | EARLY CHILDHOOD<br>DEVELOPMENT<br>PRACTITIONER       | Early intervention teacher/<br>Nursery teacher/ Pre-school<br>coordinator/ Early childcare<br>teacher   | Occupational Certificate: Early<br>Childhood Development practitioner   | 4             | Y           | 26,00           | 13                                  |
| HWSETA       | 2023/24 | 2021-225101        | VETERINARIAN   | VETERINARIAN  | Bursary: Bachelor of Veterinary<br>Sciences                             | 8             | Y           | 28,00           | 14                                  |

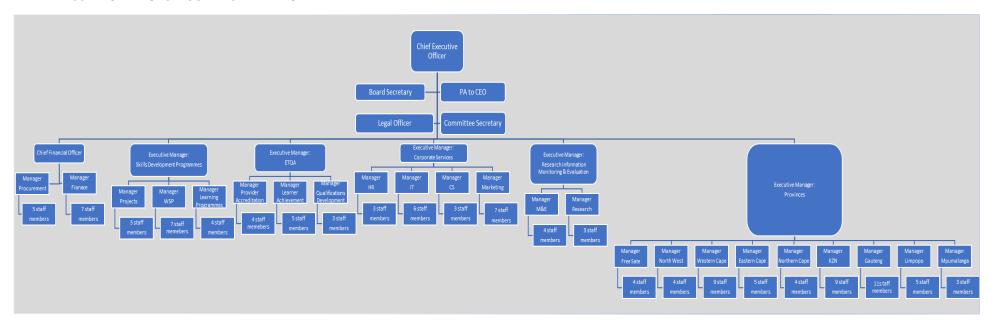
The HWSETA's skills development programmes and projects contained in the Sectoral Priority Occupations and Interventions List will be implemented across its operational sub-programmes and within the limitation of financial resources generated through the skills development levy.

#### **6. INTERNAL ENVIRONMENT**

The HWSETA Board is actively and effectively involved in the process of strategy and policy development. The HWSETA vision percolates through the organization from the strategic level to the operational level. The HWSETA has management systems and policies in place and staff is aware of them. The hierarchies of authority and responsibility have been defined at every level. The HWSETA has a fully-fledged financial and accounting system. Budgeting is project-specific and fund utilization is prepared and monitored regularly through periodic reports. The HWSETA has put in place risk management systems to ensure delivery on its mandate. The HWSETA is complemented by qualified human resources capable of carrying out the implementation of the Strategic Plan and Annual Performance Plans which are in consonance with the mission and objectives of the HWSETA.

The HWSETA has 152 positions of which 96% (key positions) are filled thus far. There is at least one provincial office located in the nine provinces of South Africa. For easy access by communities, this is being augmented by offices at the Technical and Vocational Education and Training (TVET) Colleges. The Delivery Model clearly makes a distinction between functions decentralized and those centralized. A Service Delivery Charter has been adopted to ensure uniformity and standardization in the service rendered. This is aimed at inculcating a new culture of accountability and performance management. The organogram depicting the management of the HWSETA is on the next page.

FIGURE 13: THE ORGANOGRAM OF THE HWSETA



To be efficient and achieve optimal performance, the HWSETA, in terms of programmes, is structured in the following manner:

#### **Programme 1: Administration**

- a) Office of the CEO comprising of Board office and Legal services;
- b) Corporate Services- includes Marketing, Human Resource and Information Technology; and
- c) Finance comprising of Supply Chain Management, Grants and general finance.

#### **Programme 2: Skills planning and impact assessment**

- a) Research, Information, Monitoring and Evaluation, incorporating:
  - Research
  - Monitoring and Evaluation

#### **Programme 3: Skills Development Programmes and Projects**

a) Skills Development Programmes and Projects is responsible for:

#### **Sub-programme 3.1: Learning Programmes**

i. Supports learning programmes through learnerships, skills programmes, bursaries, internships, work integrated learning, Lecturer Development and AET.

#### **Sub-programme 3.2: Workplace Skills Plans and Projects**

- ii. Funds projects, including Government Projects, Employer initiated Projects, Professional Body Projects.
- iii. Evaluates and approve Workplace Skills Plan.
- iv. Forming partnerships for work-based training
- v. Supports small businesses, NGOs, Trade Unions, Cooperatives

#### **Programme 4: Quality assurance and qualification development**

- a) Education and Training Quality Assurance incorporating:
  - Provider Accreditation,
  - Learner Achievement
  - Qualification Development

The Provincial offices are rendering basic cross-cutting functions, which encapsulate all functions mentioned above.

#### **6.1 Human Resource Plan of the HWSETA**

The HWSETA has a well-established Human Resources Plan, which reflects:

- a) HR planning and a number of posts in the staff establishment.
- b) Recruitment strategy and employment equity plan. The recruitment strategy is to fill all key positions within the organization and to procure temporary staff members to address short-term projects or workload fluctuations. Positions will also be filled when required after a staff member has resigned from the HWSETA.
- c) Currently 61% of staff at the HWSETA are women, and 4% are people living with disabilities. Just about a quarter of employees are youth.

#### 6.2 ICT

The automation of business processes of the HWSETA is an innovation in service delivery that is coming into fruition, as automation of the modules for core business functions; SDP and ETQA were complete and operational by 31 March 2021. The development of the Finance module was 95% complete and non-core/support functions were at 54% completion. The automation is gradually providing convenience for HWSETA stakeholders as they do not have to visit HWSETA offices for submission of application forms and other documentation. The automation of business processes is expected to improve service delivery in many ways.

#### 6.3 Finances

- The estimated revenue from Skills Development Levies is conservative taking into account on average a 5.8% increase from year to year. Actual revenue in the past has at least kept abreast with CPI, and the HWSETA's levy base remains stable. Actual penalties received do vary from year to year and cannot be estimated reliably, but will not be significantly different from the estimated penalties to be received above.
- On 1 April 2013, a Cabinet Memorandum, Cabinet Memorandum No 53 of 2012, came into effect where all Departments of Health and Social Development must contribute 30% of their training budget to the HWSETA. The contribution is utilized as follows:

| 10% | Administration of the HWSETA |
|-----|------------------------------|
| 20% | Discretionary grant funding  |

- The contribution by Government Departments is reflected in the budget as a conservative figure due to the poor collection of this stream of levies over the last three years. These levies that add to revenue distorts the % of revenue allocated for administration and discretionary grant expenditure. Therefore, the %'s allocated for the administration of 10.5% and discretionary of 49.5%, is distorted.
- Discretionary grant funding of R468 million, R489 million and R510 million over the MTEF period covers the targets set out in the strategic plan.
- The funding model per project has been revised and projected over the MTEF period. The targets set are determined based on a number of factors including the SSP research, strategic planning, the prior year actual achievements and Government priorities. The administration budget set aside caters for sufficient capacity within the HWSETA to meet all target set in the MTEF period. Any approved project administration costs for Programmes 2, 3 and 4 are up to 7.5% as determined by the Grant Regulations.
- In the past year, 2019-2020, the HWSETA committed 177% of its discretionary grant reserve respectively for funding, with exceptional performance against predetermined targets.

#### 6.4 Challenges to the achievement of HWSETA Mandate

Some of the challenges the HWSETA faces in order to achieve its mandate are the following:

- a) Lack of timeous compliance with the criteria of discretionary grant funding by Employers resulting in material de-commitments each year. Various strategies are being put in place to address decommitments which include engagements to understand challenges that stakeholders face and finding ways to circumvent these from affecting the implementation of training. These are on a case-to-case basis.
- b) The slow rate of prosecution of Skills Development Providers who defrauded learners due to the lack of a legislative tool for this purpose.

The likely impact of Covid-19 on the HWSETA's delivery of its mandate include the following:

a) Resourcing of the 2022-2023 annual plan has been limited within a budgt of R530million. In prior years the HWSETA was able to plan above the expected discretionary budget as it had reserves to tap into. In 2020-2021 these reserves were depleted, thus budgeting above expected revenue is not an option for 2022-2023. This has affected target setting for the 2022-2023 so much that targets have been reduced from baseline by up to 60%.

- b) The late start of the academic year for 2021 and the eminent risk of a fourth and fifth wave of Covid-19 pose challenge to entries into funding programmes for the 2022 academic year and timeous reporting of all completions.
- The risk of retrenchments in the NGO Sector due to reduced Department funds to this sector and reduced international donor funds due to Covid-19;
- d) The risk of Small and Emerging Business that face financial difficulty due to the current economic environment caused by the Covid-19 National Disaster lockdown regulations, may result in a sharp decline of SMEs meeting the threshold for paying the skills levy.
- e) The risk of Medium and Large Business that face financial difficulty due to the current economic environment caused by the Covid-19 National Disaster lockdown regulations, may result in a decline either in the number of businesses that meet the threshold to pay the skills levy or to reduced skills levy contributions.

#### 6.5 Performance of the HWSETA in achieving 2021-2022 APP targets

Covid-19 had devastating effects on the economy of South Africa so much so that the financial year for 2021-2022 commenced with the country geared towards implementing the Economic Reconstruction and Recovery Plan. The objectives of this plan were to:

- Create jobs, primarily through aggressive infrastructure investment and mass employment programmes
- Reindustrialise the economy, focusing on growing small businesses
- Accelerate economic reforms to unlock investment and growth;
- · Fight crime and corruption; and
- Improve the capability of the state

The role of the post-school education sector cut across the above objectives as it was tasked with ensuring that the country has a sufficient number of skilled labour with requisite skills. The Department of Higher Education and Training therefore developed a skills strategy which specified the role each of its entities would have to play to ensure the sufficient number of skilled labour with requisite skills. The year was therefore dedicated at crafting the skills strategy and formulating implementation strategies. The HWSETA ensured that its strategy and annual performance plan for 2022-2023 were aligned to the skills strategy as this will be the first year of implementation.

In 2021-2022 the health and social development sector continued its fight against Covid-19 as the pandemic was still a reality of the day. The HWSETA supported a number of Covid-19 projects and also focused on skills development projects that would yield job opportunities in support of the ERRP. As thus, the HWSETA has been able to reach a performance level of **90,9%** of its annual targets of the 2021-2022 APP.

The HWSETA targeted to fund a total of **23 987** students in its APP of 2021-2022 through the following programmes:

- Workplace- based learning programs, that include learnerships, apprenticeships,
   TVET College Placement, University Student Placement, internships for graduates,
   and skills programmes;
- Bursary programmes, that include under-graduate, post-graduate, and vocational student bursary programmes;
- Occupationally based programmes, that include Adult Education and Training (AET),
   Lecturer Development, Recognition of prior learning, Trade Union Members, and
   NGO sector workforce and the workforce from small businesses.

This targeted number of students was exceeded as a total of **25 850 (108%)** students was funded, of which:

- o **8 126 (31%)** were workers and **17 724 (69%)** were unemployed persons.
- 12 964 (50%) were females and 4 253 (16%) were males
- o 15 373 (50%) were African
- o **152 (0,6%)** were persons with disabilities
- o 13 359 (52%) were youth
- 6 613 (26) were from rural areas

These students were funded and trained through a total of **580** partnerships with **348** employers; **14** Government Departments, **40** post-school education institutions; and **178** levy-exempt organisations.

#### Furthermore;

- the HWSETA funded a total of 30 Mid-level skills and Departmental projects; 25
   Cooperatives; and 161 Small Businesses for skills development.
- Completions from prior year entries, which were reported by employers during the year under review were a total of **15 334**, of which:

- 8 982 (59%) were workers and 6 352 (41%) were unemployed persons.
- o 10 836 (71%) were females and 3 723 (24%) were males
- o 13 187 (86%) were African
- 219 (1,4%) were persons with disabilities
- 10 300 (67%) were youth
- o **6 082 (40%)** were from rural areas
- The employment rate derived from a track a trace study of learners that completed learning programmes in 2020 and 2021 is 46.5%.

#### **Strategy to Overcome Areas of Under-achievement**

**Programme 2:** Universities will be requested by the end of the year to identifying funded students who will be continuing with their studies in the next academic year so that they can be re-entered into the post-graduate bursary programme in January or February.

Programme 3: Full qualifications will be offered in parts to workers so as to make it possible for employers to release their workers for training as employers could not afford to release workers for prolonged periods of time in order to attend training. Also, all completions will be collected and reported timeously. Pipeline approach will be used for bursary students to ensure that students are funded for the duration of the entire qualification as these span for multiple years.

**Programme 4:** Learners will be entered earlier on in the financial year into the RPL programme to allow for the assessments to be conducted and completed before the end of the financial year. This will make it possible to have assessment that are completed and thus reported against the indicator that measures completions for the RPL programme.

#### 3.3.1 Progress Towards the Achievement of Impacts and Outcomes

This is a review of the progress made by the HWSETA towards achieving the strategic outcomes and targets which are contained in the Strategic Plan 2020-2025. This plan maps out 6 impact statements which are broken down to 9 outcome statements and these are measured through 34 outcome indicators and targets. Progress towards the achievement of the 5-year targets is measured through evaluation studies. During the financial years 2020-

2022, 22 of the 34 (65%) outcomes indicators were measured through evaluation studies, as follows:

|                   |            | 2020-2021 | 2021-2022  | 2022-2023  | 2023-2024  | 2024-2025  |
|-------------------|------------|-----------|------------|------------|------------|------------|
| Outcomes annually | measured   | 10        | 10         | 10         | 10         | 10         |
| Outcomes meas     | sured once | 3         | 9          | 12         | 12         | 12         |
| Total Outcomes    | Measured   | 13        | 19         | 22         | 22         | 22         |
| BUDGET SPEN       | IT         | R722,198  | R2,163,600 | R2,750,000 | R2,750,000 | R2,750,000 |

Internally the HWSETA has capacity to conduct 9 evaluation studies per annum. Any work beyond this requires the support of research partners. When such support is utilised, HWSETA officials plan all studies, oversee all evaluation processes and ensure quality.

The progress made towards the achievement of outcome targets is detailed as follows:

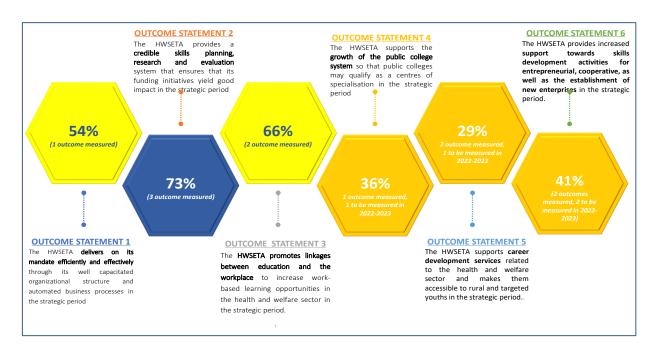
| OUTCOME | OUTCOME<br>STATEMENT  | INDICATOR  | INDICATORS TO BE<br>MEASURED   | Baselin<br>e | 2024-<br>2025<br>Target | Actual<br>Achievement by<br>30 September<br>2022 | Data Sources   | Comment on Achievement Improvements required for the remainder of the planning period   |
|---------|---|--|--|--------------|-------------------------|--|--|---|
| 1       | The HWSETA<br>delivers on its<br>mandate efficiently<br>and effectively<br>through its well<br>capacitated<br>organizational<br>structure and<br>automated business<br>processes in the<br>strategic period | 1  | The extent to which <b>external stakeholders</b> of the HWSETA are <b>satisfied</b> with <b>efficiency and effectiveness</b> service delivery          | 60%          | 80%                     | 43%<br>54%                                       | Stakeholder<br>satisfaction<br>survey  | results yielded an efficiency level of 43,25% and effectiveness level of  |
| 2       | The HWSETA provides a credible skills planning, research and evaluation system that ensures that its funding initiatives yield good impact in   | 2  | The relevance of the Sector Skills Plan of the HWSETA to the DHET SSP framework  | 85%          | 85%                     | 89%<br>105%                                      | DHET SSP<br>assessment<br>report   | the research outputs stipulated in the NSDP (2030). In 2020-2021 the  |
|         | yield good impact in the strategic period.  | 3  | The extent to which internal stakeholders of the HWSETA implement Monitoring and Evaluation recommendations  | 75%          | 80%                     | 85%<br>106%                                      | Evaluation<br>Findings<br>register<br>Follow-up<br>report                                  | implemented in 2020-2021. Those that had not been implemented by financial year end will be implemented in 2021-2022. The next follow-up study will be conducted in 2022-2023. Frequency of follow-up on the implementation will be improved from once  |
|         |   | The extent is and evaluation the strate; HWSETA so 2025 by the |  | 90%          | 90%                     | 65%<br>72%                                       | Strategic Plan<br>2020-2025:<br>mid-term<br>progress report<br>end-term<br>progress report | The HWSETA evaluated 20 of the 33 strategic outcomes. Each of the evaluation reports produced have been confirmed by implementing managers.  The remaining 13 outcome indicators will be measured in 2022-2023 to 2024-2025.  |
| 3       | The HWSETA promotes linkages between education and the workplace to increase workplace based learning opportunities in the health and welfare sector in the strategic period.                               | 5  | The extent to which employers participate in HWSETA skills development initiatives in comparison to those that submit the WSP in the strategic period. | 30%          | 60%                     | 40%<br>66%                                       | Desktop review<br>report   | 40% of employers partnered with the HWSETA to implement learnerships, apprenticeships, and TVT/University WIL. These employers constituted 687 of the 1708 organisations that submitted their WSPs and were approved. Another desk-top review will be conducted in 2022-2024  Employers will be encouraged to increase their participation in skills development activities. Provincial Offices of the HWSETA will organize workshops targeting employers that do not participate on skills development programme and inform them about the benefits and incentives available for participating in workplace-based programmes of the HWSETA |

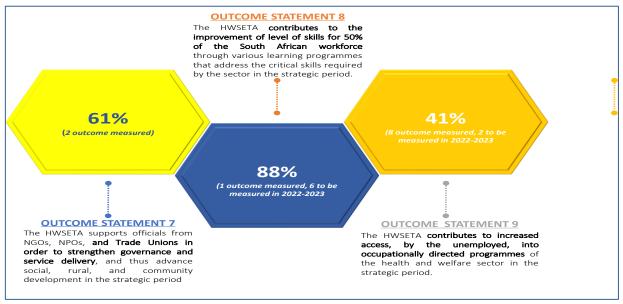
| OUTCOME | OUTCOME<br>STATEMENT   | INDICATOR | INDICATORS TO BE<br>MEASURED   | Baselin<br>e             | 2024-<br>2025<br>Target | Actual<br>Achievement by<br>30 September<br>2022 | Data Sources                | Comment on Achievement Improvements required for the remainder of the planning period   |
|---------|--|-----------|--|--------------------------|-------------------------|--|-----------------------------|---|
|         |  | 6         | The extent to which Universities, TVET Colleges, and Professional Councils participate in HWSETA skills development initiatives in comparison to the total number of those that offer education and training in the sector | 70%                      | 80%                     | 53%<br>66%                                       | Desktop review<br>report    | 53% of Universities, TVET Colleges and Other Colleges partnered with the HWSETA to implement vocational, under-grad degrees, post-grad diplomas, and post-grad degreed bursaries. These PSET institutions constituted 40 of the 76 institutions that offer training programmes funded by the HWSETA during the strategic period. Another desk-top review will be conducted in 2022-2023. Additional universities and TVET Colleges will be lobbied to partner with the HWSETA to implement its skills development initiatives |
| 4       | 4 The HWSETA supports the growth of the public and private college system so that                                    | 7         | Occupational qualifications<br>developed by the HWSETA are<br>confirmed by the sector to be<br>relevant to occupations on high<br>demand   | 0%                       | 100%                    | Undetermined                                     | Survey report               | Two qualifications were developed in 2021-2022. Track and trace study of learners trained through these qualifications will be used to confirm the relevance of these qualifications to occupations as a proxy indicator.  Employers will also be interviewed about the relevance of these qualifications in 2023-2024.   |
|         | colleges may qualify<br>as centres of<br>specialisation in the<br>strategic period.                                  | 8         | Increased number of lecturers whose performance in teaching improves due to skills development initiatives funded by the HWSETA in the strategic period.   | 35                       | 53                      | 19<br>36%  | Survey Report               | A survey measuring increased skills of lecturers that were funded during the strategic period was conducted in 2021-2022 and 19 lectures were identified to have improved performance due to the skills development initiatives of the HWSETA. A survey of additional cohorts will be conducted in 2023-2024.   |
| 5       | The HWSETA<br>supports career<br>development<br>services related to<br>the health and                                | 9         | Number of learners from rural school exposed to career awareness services in the strategic period.   | Undeter<br>mined         | 14400                   | 2740<br>19%                                      | Career Portal<br>Database   | Only 19% of the 5-year target was achieved in 2021-2022 due to learners that register on the career portal who do not indicate where they are coming from.  This will be strengthened going forward. A follow-up desktop analysis will be conducted in 2023-2024.   |
|         | welfare sector and<br>makes them<br>accessible to rural<br>and targeted youth<br>in the strategic                    | 10        | Percentage of learners exposed<br>to career awareness services<br>who enter-into HWSETA funded<br>learning programmes in the<br>strategic period   | 5%                       | 10%                     | 40%  | _                           | 10% of the 5-year target was achieved as the career portal was launched in 2021-2022.  Additional bursaries will be offered in 2022-2023, and rapid assessment to evaluate the immediate outcomes of the career awareness programme will be conducted in 2023-2024.   |
|         | period.  | 11        | Number of career guidance<br>practitioners funded by the<br>HWSETA who offer their services<br>to rural areas in the strategic<br>period   | Undeter<br>mined         | 36                      | Undetermined                                     | Survey report               | A survey will be conducted in 2022-2023 on career guidance practitioners funded by the HWSETA for training whether they do offer training in schools that are in the rural areas. A survey of additional cohorts will be conducted in 2024-2025.  |
| 6       | The HWSETA provides increased support towards skills development   | 12        | Number of <b>cooperatives</b><br><b>whose sustainability</b> is<br>strengthened through skills<br>development initiatives<br>funded by the HWSETA.   | 0                        | 36                      | 36%  |                             | Outcomes evaluation study was conducted in 2022-2023 and it confirmed that cooperatives supported by the HWSETA do achieve the desired and outcomes.  |
|         | activities for<br>entrepreneurial,<br>cooperative, as<br>well as the<br>establishment<br>of new                      | 13        | Increased number of small<br>and emerging businesses<br>exposing their employees to<br>skills development training in<br>the strategic period  | 0                        | 348                     | 46%  | Desktop review report       |   |
|         | enterprises in<br>the strategic<br>period.   | 14        | Number of enterprises<br>established with the support<br>of the HWSETA in the<br>strategic period.   | 0                        | 200                     | Undetermined                                     | Survey report               | This outcome is new as it supports the new strategy of the HWSETA to capacitate unemployed social service graduate to open up social enterprises.   |
|         |  | 15        | Increase in the percentage of health and welfare sector large, medium, and small firms that actually send employees for training as per WSPs to the health and social development sector in the strategic period           | Und<br>eter<br>min<br>ed | 60%                     | Undetermined                                     | Database<br>analysis report | Database analysis will be conducted to compare the number of levy paying and non-levy paying employers that actually implement their WSPs submitted to the HWSETA. Also, a database analysis will be conducted on non-levy paying. This will show the level of participation of employers on skills development.  |
| 7       | The HWSETA<br>supports officials<br>from NGOs, NPOs,<br>and Trade Unions in<br>order to strengthen<br>governance and |           | Increased number of levy exempt organisations exposing their employees to skills development training that is relevant to their work in the strategic period   | 300                      | 400                     | 179<br>45%                                       |                             | Database analysis will be conducted in 2022-2023 to compare the number of levy exempt organisations that submit WSPs and those that participate in skills development initiatives of the HWSETA.  |

| OUTCOME | OUTCOME<br>STATEMENT   | INDICATOR  | INDICATORS TO<br>MEASU   |                                   | 2024-<br>2025<br>Target | Actual<br>Achievement by<br>30 September<br>2022 | Data Sources           | Comment on Achievement Improvements required for the remainder of the planning period  |
|---------|--|--|--|-----------------------------------|-------------------------|--|------------------------|--|
|         | service delivery, and<br>thus advance social,<br>rural, and community<br>development in the<br>strategic period        |  | Increased number of tr<br>union officials expose<br>skills developm<br>programmes that<br>relevant to their skills ne<br>in the strategic pe   | d to<br>ent<br>are<br>eds         | 253                     | 192<br>76%                                       | Survey report          | A survey will be conducted in 2022-2023 to find out the relevance of skills development training union officials are exposed to and also assess whether the skills needs of these officials are met.   |
| 8       | The HWSETA contributes to the improvement of level of skills to 50% of the health and welfare sector                   | 18   | Number of workers<br>progress to higher position<br>employment after succe<br>completing learnerships fur<br>by the HWS                        | ssful<br>aded                     | 1485                    | Undetermined                                     | Tracer study<br>report | Tracer studies for workers will be conducted on all workers whose training was funded by the HWSETA in 2022-2023   |
|         | workforce through various learning programmes that address critical skills in the strategic period.                    | 19   | Number of workers who pro-<br>to higher positic<br>employment after succe<br>completing apprenticeships fu-<br>by the HW                       | ns of<br>essful<br>nded           | 75                      | Undetermined                                     | Tracer study<br>report |  |
|         | Strategic period.  | 20   | Number of workers who pro-<br>to higher positic<br>employment after succe<br>completing under-graduat<br>post-graduate degrees fund<br>the HWS | ns of<br>essful<br>e and<br>ed by | 159                     | Undetermined                                     | Tracer study report    |  |
|         |  | 21   | Number of workers who pro-<br>to higher positic<br>employment after succe<br>completing post-graduate de<br>funded by the HW:                  | ns of<br>essful<br>grees          | 36                      | Undetermined                                     | Tracer study report    |  |
|         |  | 22   | Number of workers wit<br>performance improves<br>successful completing s<br>programmes, funded by<br>HWSI                                      | after<br>kills<br>the             | 6198                    | Undetermined                                     | Tracer study report    |  |
|         |  | 23   | full qualifications<br>successfully completing<br>programmes funded b  | after<br>AET                      | 660                     | Undetermined                                     | Tracer Study report    |  |
|         |  | 24   | Number of workers who o<br>full qualifications<br>successfully completing<br>programmes funded in<br>HW  | after<br>RPL<br>by the            | 342                     | 302<br>88%                                       | Tracer Study report    | 20% of the outcome target has been met. A Track and Trace study for workers that had undergone the Recognition of Prior Learning Assessment during the strategic period was conducted in 2021-2022 to identifying learners that actually obtained full qualifications through RPL.  The next cohort will be evaluated in 2023-2024   |
|         | The HWSETA contributes to increased access by the unemployed into occupationally directed programmes in the health and |  | Unemployed persons who find employment after successfully completing internships for graduates funded by                                       |                                   | 610                     | 226<br>37%                                       | Tracer study<br>report | Progress made in 2021-2022 towards meeting the 5year target reached 25% of the target. 226/950 (25%) unemployed persons funded for internships found jobs six months after completing their internship programmes. Another track and trace study will be conducted in 2022-2023 and learners that completed in quarter 4 2021-2022 and quarters 1 to 3 of 2022-2023 will be followed.  |
|         | welfare sector during the strategic period   |  | the HWSETA in the  | VET 0<br>lege<br>ates             | 305]                    | Undetermined                                     | Tracer study<br>report | A track and trace study will be conducted in 2023-2024 as the first cohort of graduates was funded in 2021-2022.   |
| 9       |  | 26 Unemployed persons whemployment after succes completing voca programmes, funded HWSETA in the strategic p |  | fully<br>ional<br>y the           | 835                     | Undetermined                                     | Tracer study<br>report | Track and trace study for the unemployed did not include students funded through vocational bursaries mainly because the support that was given was not for the entire programme. In 2022-2023 the HWSETA will track learners that actually complete their vocational qualifications and then identify those that find jobs at least six months after completing their qualifications. |
|         |  | 27   | Unemployed persons who relevance to skills program funded by the HWSETA strategic p  | mes,<br>n the                     | 4316                    | Undetermined                                     | Tracer study report    | A track and trace study will be conducted in 2022-2023.  |
|         |  | 28   | Unemployed persons who employment after success  |                                   | 1400                    | 483<br>35%                                       | Tracer study report    | Progress made in 2021-2022 towards meeting the 5year target reached 34.5% of the target. 483/1400 (34.5%) unemployed persons funded for  |

| OUTCOME | OUTCOME<br>STATEMENT | INDICATOR | INDICATORS TO BE<br>MEASURED   | Baselin<br>e     | 2024-<br>2025<br>Target | Actual<br>Achievement by<br>30 September<br>2022 | Data Sources                       | Comment on Achievement Improvements required for the remainder of the planning period  |
|---------|----------------------|-----------|--|------------------|-------------------------|--|------------------------------------|--|
|         |                      |           | completing learnerships funded<br>by the HWSETA in the strategic<br>period.  |                  |                         |  |                                    | learnerships found jobs six months after completing their qualifications.  Another track and trace study will be conducted in 2022-2023 and learners that completed in quarter 4 2021-2022 and quarters 1 to 3 of 2022-2023 will be followed.  |
|         |                      | 29        | Unemployed persons who find<br>employment after successfully<br>completing apprenticeships<br>funded by the HWSETA in the<br>strategic period  | 150              | 150                     | 57%  | Tracer study<br>report             | Progress made in 2021-2022 towards meeting the 5year target reached 57% of the target. 85/150 (57%) unemployed persons funded for apprenticeships found jobs six months after completing their qualifications. Another track and trace study will be conducted in 2022-2023 and learners that completed in quarter 4 2021-2022 and quarters 1 to 3 of 2022-2023 will be followed.  |
|         |                      | 30        | Unemployed persons who find<br>employment after successfully<br>completing university degrees<br>funded by HWSETA under-<br>graduate programme in the<br>strategic period  | 262              | 262                     | 135  | Tracer study<br>report             | Progress made in 2021-2022 towards meeting the 5year target reached 51.5% of the target. 354/262 (51.5%) unemployed persons funded through bursaries for university undergraduate programmes found jobs six months after completing their qualifications. Another track and trace study will be conducted in 2022-2023 and learners that completed in quarter 4 2021-2022 and quarters 1 to 3 of 2022-2023 will be followed. |
|         |                      | 31        | Unemployed persons who find<br>employment after successfully<br>completing university degrees<br>funded by HWSETA post-graduate<br>programme in the strategic period   | undete<br>rmined | 120                     | 29%  | Tracer study                       | Progress made in 2021-2022 towards meeting the 5year target reached 39% of the target. 35/90 students that completed post-graduate degrees were tracked and confirmed through self-disclosure.\ Multiple data collection sources will be used to secure a higher response rate as this usually affects the results of the tracer study   |
|         |                      | 32        | The percentage of the unemployed who find employment after completing learning programmes funded by the HWSETA in the strategic period.  | 60%              | 60%                     | 46.5%<br>77,5%                                   | Synthesis of tracer studies report | A tracer study was conducted on unemployed learners that completed learning programs funded by the HWSETA through learnerships, bursaries, artisans and internships. The overall employment rate yielded by tracer study conducted in 2020-2021 was 60%, and the one yielded by the 2021-2022 study was 33%. This therefore results in an average employment rate of 46.5% over the two years of the strategic period.       |
|         |                      | 33        | Number of unemployed persons<br>who obtain their TVET College<br>qualification after successfully<br>completing TVET College Work<br>Integrated (WIL) Learning<br>programmes funded by the<br>HWSETA in the strategic period | 685              | 685                     | 142<br>21%                                       | Tracer study<br>report             | Multiple data collection sources will be used to secure a higher response rate as this usually affects the results of the tracer study   |
|         |                      |           | Number of unemployed persons<br>who obtain their university<br>qualifications after successfully<br>university Work Integrated (WIL)<br>Learning programmes funded by<br>the HWSETA in the strategic period                  | 1211             | 1211                    | 204<br>17%                                       | Tracer study<br>report             | Multiple data collection sources will be used to secure a higher response rate as this usually affects the results of the tracer study   |

In summary, the achievement of these targets against the outcome statements is provided below in percentage average achievement as follows:





The twelve outcome indicators whose performance had not yet been measured by 30 September 2022 will have been measured by June 2023 and a mid-term report showing the performance of the HWSETA for all 34 outcome indicators will be compiled and submitted to the Board in August 2023.

The two diagrams above show a high-level performance review of the achievement of the strategic outcomes as at 30 September 2022. The review is based on measuring outputs from 2020-21 and 2021-22 through evaluation studies. As such, the expected level of performance is 40% at the level of indictor targets.

To calculate the aggregated achievement for each of the outcome statements, indicator targets falling under the same outcome statement were averaged. As thus, outcome statements 1, 2, 3, 6, 7, 8 and 9 have an aggregated average performance that is above 40%. While outcome statement 4 and 5 have an aggregated performance falling below 40%.

#### Reasons for this low achievement

Performance for outcome 4 is affected by TVET College lecturer development, where 37% of the lecturers did not respond to the survey questionnaire. A follow-up on the non-responses will be made to improve the response rate and then perhaps improve the performance of this outcome statement in preparation for the mid-term review report that will be issued in August 2023.

Performance for outcome statement 5 is affected by the low number of learners that register their addresses on the career portal rendering it difficult to account for the geographic location of all learners that visit the portal. The field for address has been marked as mandatory on registration to the portal

#### 6.6 Description of the strategic planning process

In August and September, the Board, the CEO and the Executive Managers convened two Strategic Planning workshops with stakeholders from the Health and Social Development sectors. These workshops were focused on engaging stakeholders that are key to the implementation of the ERRP skills strategy, the Revised 2019-2024 MTSF, and the Human Resource Strategies for Health and Social Development. Findings from these workshops are included in this strategic plan and there are partnerships going forward that will be forged to ensure that these Government Priorities are implemented.

A Risk Assessment Workshop was also convened by the Board and Executive Management. At this workshop an analysis of the "control measures culture" that exists at the HWSETA was undertaken, the top 10 strategic HWSETA risks were identified and a risk register was compiled. The results of the Risk Assessment Workshop are incorporated into HWSETA's Strategic Business Plan, whereby action plans to mitigate the impact of these risks are formulated, costed, and included in the Annual Business Plan. There is an ongoing monitoring process by both the Audit and Risk Committee and the Board. On an ongoing basis, the CEO and the Executives meet and identify other risks which might emerge during implementation, and the Risk Register is amended to factor those. Further advocacy is provided by the presence of Internal Auditors in these meetings.

#### 6.6.1 The HWSETA Planning process can be described as follows:

- a) The management team of the HWSETA undertakes a scanning exercise. This is usually done through the research that underpins the 5-year sector skills plan. The sector skills plan notes significant developments in the Health and Social Development Sectors and from this, the scarce and critical skills list is derived. The SSP contributes towards situational analysis and description of the external environment of the HWSETA for the strategic plan
- b) The second step is to take note of significant national government imperatives announced over the past year. For example, the ERRP skills strategy, the revised MTSF 2019-2024, the human resource strategies of the Departments of Health and Social Development, and the National Digital and Future Skills for South Africa Act.
- c) A Management Planning workshop is held in which the Management team unpacks the documents listed above. A draft HWSETA Strategic Plan is developed.
- d) This draft plan is then presented to the Board at a workshop where Board members give additional inputs and where their sectoral experience and local knowledge influences the draft plan.
- e) The HWSETA management team develops a final Strategic Plan and Budget and this is presented to the Board for final approval.
- f) The annual performance plan then becomes the basis of the management plan in which delivery is structured over the 4 quarters.
- g) The 4-quarter plan forms the basis of the CEO review sessions each quarter and the performance report to the quarterly Board meetings. If and when required, corrective action plans will be put in place to deal with items not progressed satisfactorily.

# PART C MEASURING THE PERFORMANCE OF THE HEALTH AND WELFARE SETA

#### 1. Institutional Performance Information

Over the next five years, the HWSETA places renewed emphasis on its role in the education and training levy-grant system and its role in influencing and implementing skills development programmes and projects in the health and welfare sector. The mandate of the HWSETA extends to an integrative role in skills planning, development of learning programmes and implementing these in the sector. The achievement and assessment of the outcome indicators will be in 2025 having considered the length of programmes in the sector. This section provides impact statements, outcome statements and outcome indicators, which are tabulated in sections 1.2 and 1.3

# 1.2 Impact Statements

The impact statements of the strategic plan of the HWSETA have been derived from the outcomes of the National Skills Development Plan. The NSDP outcomes are the campus for developing 4 impact statements, 8 outcome statements and 21 outcome indicators. The impact statements include the following:

Table 19: Impact statements of the strategic plan 2020-2025 of the HWSETA, year starting 2022-2023

| Impact Statement 1 | The HWSETA contributes to the development of a post-school system which increases the production of occupations in high demand by 2030  |
|--------------------|---|
| Impact Statement 2 | The HWSETA develops a skilled, employable and highly productive workforce which results in reduced hard to fill vacancies in the health and welfare sector by 2030  |
| Impact Statement 3 | The HWSETA contributes to increased capacity of large, medium, and small firms, as well as small and emerging businesses and cooperatives of the health and welfare sector to become more sustainable and expand in size by 2030. |
| Impact Statement 4 | The HWSETA contributes to increased capacity of the State, NGO and NPO sector, Trade Unions to meet social and rural development needs of the South African Citizens by 2030.   |

## 1.3 Measuring Outcomes

#### **IMPACT STATEMENT 1:** The HWSETA contributes to the development of a post-school system which increases the production of occupations in high demand INDICATOR INDICATORS TO BE MEASURED **OUTCOME OUTCOME STATEMENT** Baseline 5 Year NO NO Target The relevance of the **Sector Skills Plan** of the 85% 1 The HWSETA provides an 1.1 85% efficient and effective skills HWSETA to the DHET SSP framework programme 1.2 planning, The extent to which internal stakeholders of the 75% 80% implementation and **HWSETA** implement Monitoring and Evaluation evaluation system which recommendations identifies occupations in 1.3 The extent to which external stakeholders of the 60% 80% high demand during the HWSETA are satisfied with efficiency and strategic period. effectiveness service delivery 2 2.1 The extent to which employers participate in 30% 60% The HWSETA promotes HWSETA skills development initiatives in linkages between comparison to those that submit the WSP in the education and the strategic period. workplace to increase work-place based learning 2.2 The extent to which Universities, TVET Colleges, 70% 80% and Professional Councils participate in HWSETA opportunities in the health skills development initiatives in comparison to the and welfare sector in the total number of those that offer education and strategic period. training in the sector 2.3 1259 The extent to which unemployed persons obtain 850 their university qualifications after successfully university Work Integrated (WIL) Learning programmes funded by the HWSETA The extent to which unemployed persons obtain 800 2.4 1673 their TVET College qualifications after successfully completing TVET College Work Integrated (WIL) Learning programmes funded by the HWSETA 3 The HWSETA supports the 3.1 Number of **Skills Development Providers** who offer 40 151 growth of the public and training on occupational qualifications and have at private college system so least 60% of those learners certificated that colleges may qualify as 3.2 Occupational qualifications developed by the 0% 100% centres of specialisation in HWSETA are confirmed by the sector to be the strategic period. relevant to occupations on high demand 270 The HWSETA makes career 4.1 The extent to which learners exposed to career 45 development services awareness services enter-into HWSETA funded related to the health and learning programmes welfare sector accessible to rural and targeted youth in the strategic period.

#### **IMPACT STATEMENT 2:**

The HWSETA develops a skilled, employable and highly productive workforce which results in reduced hard to fill vacancies in the health and welfare sector by 2030

| vacancies in the health and welfare sector by 2030 |  |                 |   |   |            |                  |  |  |  |  |  |
|--|--|-----------------|---|---|------------|------------------|--|--|--|--|--|
| Outcome<br>No                                      | OUTCOME<br>STATEMENT                             | Indicator<br>No | INDICATORS TO BE MEASURED   |   | Baseline   | 5 Year<br>Target |  |  |  |  |  |
| 5  | The HWSETA contributes to                        | 5.1             | Workers who progress to higher positions of   | Learnerships                              | 1485       | 1995             |  |  |  |  |  |
|  | the  |                 | employment after successful   | Apprenticeships                           | 20         | 50               |  |  |  |  |  |
|  | improvement of level of skills to                |                 | completing learnerships, apprenticeships, under-  | Undergrad Bursaries                       | 159        | 212              |  |  |  |  |  |
|  | 50% of the health and welfare sector             |                 | graduate and post-graduate degrees funded by the HWSETA   | Postgraduate Bursaries                    | 36         | 59               |  |  |  |  |  |
|  | workforce  | 5.2             | Workers whose performance improves after successful   | Skills Programmes                         | 6198       | 8816             |  |  |  |  |  |
|  | through various learning                         |                 | completing skills programmes,   | Lecturer Development                      | 35         | 53               |  |  |  |  |  |
|  | programmes<br>that address<br>critical skills in |                 | lecturer development and career guidance programmes funded by the HWSETA.                                     | Career Guidance<br>Practitioners          | 0          | 30               |  |  |  |  |  |
|  | the strategic period.                            | 5.3             | Workers who obtain full qualifications after  | AET                                       | 360        | 415              |  |  |  |  |  |
|  |  |                 | successfully completing AET and RPL programmes funded by the HWSETA   | RPL                                       | 342        | 608              |  |  |  |  |  |
|  |  | 5.4             | The percentage of academic staf social development university pot target will be 75% of academic stand black. | rogrammes by 2030. The                    | Determined | 75%              |  |  |  |  |  |
| 6  | The HWSETA contributes to                        | 6.1             | Unemployed persons who find employment after successfully   | Internships for<br>University Graduates   | 791        | 1316             |  |  |  |  |  |
|  | increased<br>access by the<br>unemployed         |                 | <b>completing</b> internships, vocational programmes, skills programmes, learnerships,                        | Internships for TVET<br>College Graduates | 0          | 39               |  |  |  |  |  |
|  | into<br>occupationally<br>directed               |                 | apprenticeships, under-<br>graduate and post-graduate<br>degrees funded by the                                | Vocational<br>Programmes                  | 572        | 835              |  |  |  |  |  |
|  | programmes in the health and                     |                 | HWSETA.   | Skills Programmes                         | 1500       | 4316             |  |  |  |  |  |
|  | welfare sector                                   |                 |   | Learnerships                              | 437        | 2735             |  |  |  |  |  |
|  | during the strategic period                      |                 |   | Apprenticeships                           | 48         | 174              |  |  |  |  |  |
|  |  |                 |   | Undergrad Bursaries                       | 104        | 799              |  |  |  |  |  |
|  |  |                 |   | Postgrad Bursaries                        | 30         | 45               |  |  |  |  |  |
|  |  | 6.2             | Unemployed persons who <b>obtai</b> successfully completing AET pro HWSETA.                                   | 405                                       | 556        |                  |  |  |  |  |  |

#### **IMPACT STATEMENT 3:**

The HWSETA contributes to increased capacity of large, medium, and small firms, as well as small and emerging businesses and cooperatives of the health and welfare sector to become more sustainable and expand in size by 2030.

| Outcome<br>No | OUTCOME<br>STATEMENT   | Indicator<br>No | INDICATORS TO BE MEASURED  | Baseline | 5 Year<br>Target |
|---------------|--|-----------------|--|----------|------------------|
| 7             | The HWSETA provides increased support towards skills development activities for entrepreneurial, cooperative, as well as the establishment of new enterprises in the strategic period. | 7.1             | Number of cooperatives whose sustainability is strengthened through skills development initiatives funded by the HWSETA.                       | 0        | 10               |
|               |  | 7.2             | Number of <b>small and emerging business</b> whose sustainability is strengthened through skills development initiatives funded by the HWSETA. | 0        | 70               |
|               | strategic period.  |                 | Number of enterprises established with the support of the HWSETA in the strategic period.  | 0        | 200              |
|               |  | 7.4             | Percentage of <b>large, medium, and small firms</b> submitting WSPs against those that pay the skills levy in the health and welfare sector    | 30%      | 60%              |

#### **IMPACT STATEMENT 4:**

The HWSETA contributes to increased capacity of the State, NGO and NPO sector, Trade Unions to meet social and rural development needs of the South African Citizens by 2030

|               | rural development needs of the South African Citizens by 2030   |                 |  |          |                  |
|---------------|---|-----------------|--|----------|------------------|
| Outcome<br>No | OUTCOME STATEMENT   | Indicator<br>No | INDICATORS TO BE MEASURED  | Baseline | 5 Year<br>Target |
| 8             | The HWSETA provides increased support to the Sate, Trade unions, NGOs, and NPOs in order to strengthen governance and service delivery and thus advance | 8.1             | Number of projects whose sustainability is strengthened through skills development initiatives funded by the HWSETA                  | 4        | 8                |
|               | social, rural, and community development in the strategic period.   | 8.2             | The number of <b>Trade Union officials</b> who gained relevant skills through skills development programmes funded by the HWSETA     | 100      | 240              |
|               |   | 8.3             | The number of <b>NGOs and NPOs</b> whose governance has been strengthened through skills development programmes funded by the HWSETA | 5        | 50               |

# 2. Explanation of Planned Performance over the five-Year Planning Period

### A. Contribution of Outcomes to the NDP five-year implementation Plan

| NDP OUTCOMES  | HWSETA OUTCOMES   | MTSF/ERRP  |
|---|---|--|
| Identify and increase<br>the production of<br>occupations in high<br>demand | The HWSETA provides an efficient and effective skills planning, programme implementation and evaluation system which identifies occupations in high demand during the strategic period.                                 |  |
| Linking education and the workplace   | and the workplace to increase work-based learning opportunities in the health and welfare sector in the   | SETAs should include sectorally appropriate digital skills development, within training programmes and internships .  PARTNERSHIPS WITH BUSINESS SCHOOLS  To support innovation to capacitate Social Service Practitioners with business innovation thinking skills to enable them to create sustainable social enterprises                                  |
| Improving the level of<br>skills in the South<br>African workforce          | The HWSETA contributes to the improvement of level of skills to 50% of the South African workforce through various learning programmes that address the critical skills required by the sector in the strategic period. | Improve access to early childhood development (ECD)  EARLY CHILDHOOD DEVELOPMENT Skilling, re-skilling, upskilling ECD practitioners  Indigenisation of pharmaceutical production including through state owned company.  MEDICAL EQUIPMENT Training technicians in:  Medical Equipment Inspector  Medical Equipment Repairer,  Medical Equipment Maintainer |
| Increase access to occupationally directed programmes                       | the unemployed, into occupationally directed  | Improve access to early childhood development (ECD)  EARLY CHILDHOOD DEVELOPMENT  Skilling, re-skilling, upskilling ECD practitioners  Indigenisation of pharmaceutical production including through state owned company.  |

| NDP OUTCOMES  | HWSETA OUTCOMES   | MTSF/ERRP   |
|---|---|---|
|   |   | <ul> <li>Training of small-scale farmers and livestock handlers in Primary Animal Health Care (PAHC).</li> <li>Enter into partnerships to support animal health related research projects of the DALRRD</li> <li>MEDICAL EQUIPMENT</li> <li>Training technicians in:         <ul> <li>Medical Equipment Inspector</li> <li>Medical Equipment Repairer,</li> <li>Medical Equipment Maintainer</li> </ul> </li> </ul>   |
| Support the growth of<br>the public college<br>system                       | The HWSETA provides supports the growth of the public and private system so that public colleges may qualify as centres of specialisations in the strategic period.   | <ul> <li>SETAs should advance digital literacy for academic staff.</li> <li>Equip staff with digital fluency to digital mastery</li> </ul>  |
| Skills development support for entrepreneurship and cooperative development | The HWSETA provides increased support towards skills development activities for entrepreneurial, cooperative, as well as the establishment of new enterprises in the strategic period.                                | Promotion of Social Entrepreneurship     Promotion of digital skills  |
| Encourage and support worker-initiated training                             | The HWSETA provides increased support to the State, Trade Union, NGOs, NPOs in order to strengthen governance and service delivery, and thus advance social, rural, and community development in the strategic period | PARTNERSHIP WITH NATIONAL AND PROVINCIAL DEPT. OF SOC. DEV Support the Human Resource Development Plan for Social Development.  PARTNERSHIP WITH NATIONAL AND PROVINCIAL DEPT. OF HEALTH  Support the National Health Improvement Plan of the NHI. Support the 2030 Human Resource for Health Strategy  CONTINUED PARTNERSHIP WITH DALRRD  Training of small-scale farmers and livestock handlers in Primary Animal Health Care (PAHC). Enter into partnerships to support animal health related research projects of the |
| Support career development services   | The HWSETA makes career development services related to the health and welfare sector accessible to rural and targets youths in the strategic period  | DALRRD.  SETAs should advance digital literacy for academic staff.  Equip staff with digital fluency to digital mastery   |

#### B. Rational for the choice of the outcome indicators relevant to outcomes

Outcome indicators were chosen on the basis of the results chain of the HWSETA, which is as follows:

| DE               | DESCRIPTION OF RESULTS CHAIN FOR THE STRATEGY OF THE HWSETA  |   |   |  |  |
|------------------|--|---|---|--|--|
| RESULTS<br>CHAIN | DESCRIPTION OF ELEMENTS OF<br>A RESULTS CHAIN  | FINANCIAL SUPPORT GIVEN TO EMPLOYED PERSONS   | FINANCIAL SUPPORT GIVEN TO UNEMPLOYED PERSONS   |  |  |
| Input            | All the resources that contribute to the production and delivery of outputs. Inputs are "what we use to do the work". They include finances, personnel, equipment and buildings.   | Discretionary Grant, personnel, technology and infrastructure   | Discretionary Grant,<br>personnel, technology<br>and infrastructure   |  |  |
| Activities       | The processes or actions that use a range of inputs to produce the desired outputs and ultimately outcomes. In essence, activities describe "what we do"   | Funding for the training of employed persons from enrolment to completion   | Funding for the training of unemployed persons from enrolment to completion   |  |  |
| Output           | The final products, or goods and services produced for delivery. Outputs may be defined as "what we produce or deliver".   | Qualification obtained by employed persons through HWSTA funding increase their capacity and makes them able to create own opportunities  | Qualification obtained by<br>unemployed persons<br>through HWSTA funding<br>makes them employable<br>or able to create own<br>opportunities |  |  |
| Outcome          | The medium-term results for specific beneficiaries that are the consequence of achieving specific outputs. Outcomes should relate clearly to an institution's strategic goals and objectives set out in its plans. Outcomes are "what we wish to achieve". | Results of obtaining qualification which may be finding a job or furthering studies for the unemployed or furthering one's studies, or increased level of skills for the employed | Results of obtaining qualification which may be increased level of skills for the employed  |  |  |

#### C. Explanation of enablers to achieve the five-year targets

These outcomes will be achieved through a well capacitated organizational structure that has fully functioning divisions that are well coordinated. The contribution of each of the divisions will be as follows:

#### Programme 1: Administration

This programme is responsible for the overall strategic management and support to the HWSETA operations divisions. The goal of this programme is to ensure that the HWSETA is well-positioned and capacitated to deliver on its targets. This programme cuts across a number of divisions and functional areas including Finance, which incorporates procurement

and grants management, Corporate Services, which incorporates Human Resource Management, Information Technology and Marketing.

#### Programme 2: Skills planning and impact assessment

The HWSETA has configured this programme to include two sub-divisions, namely Research and Information and Monitoring and Evaluation. Each sub-division is headed by its own manager. The HWSETA utilizes this programme to implement skills planning related projects that include development and update of the sector skills plan, research leading to a better understanding of the dynamics surrounding sectoral labour market, production of new knowledge in the sector and development of new researchers in the sector. This programme also implements the vital and timeous evaluation and impact assessments of projects and programmes implemented by the HWSETA. These are vital for lessons learned and ensuring that projects contribute positively to the sector and desired impacts are achieved.

#### Programme 3: Skills Development Programmes and Projects

The purpose of this programme is to provide skills for learners in the workplace is scarce and critical areas within the health and welfare sectors. To this end, this programme is responsible for the implementation of learning programmes, approval of grants and implementation of projects. It also provides policy and advice to employers wishing to access grants from the HWSETA.

#### Programme 4: Quality assurance and qualification development

This programme consists of three subdivisions, namely Qualification Development, Skills Development Provider accreditation and Learner achievement. The purpose of the programme is to develop fit for purpose qualifications and ensure quality training is offered in the health and welfare sector. This programme, therefore, is responsible for the coordination, development and registration of new qualifications, accreditation and quality assurance of training providers and quality assurance of learner achievement, which culminates in certification. Developments and circulars by the Quality Council for Trade and Occupations (QCTO) on the continued delegation of the functions incorporated in this programme make this programme unclear going forward and these developments will be monitored closely.

#### D. DISTRICT DEVELOPMENT MODEL

The District Development Model aims to improve the coherence and impact of government service delivery with focus on 44 Districts and 8 Metros around the country as development spaces that can be used as centres of service delivery and economic development, including job creation. The District Development Model (DDM) is an operational model for improving Cooperative Governance aimed at building a capable, ethical Developmental State. It embodies an approach by which the three spheres of government and state entities work in unison in an impact-oriented way, and where there is higher performance and accountability for coherent service delivery and development outcomes.

The HWSETA will focus on the following districts and forge links and partnerships to drive skills development initiatives. Within these District Municipalities there are local municipalities and town that will be targeted.

District Development Model: Rural

| Alfred Nzo DM (DC44)          | Zululand DM (DC26)            |
|-------------------------------|-------------------------------|
| Central Karoo DM (DC5)        | eHlanzeni DM (DC32)           |
| John Taolo Gaetsewe DM (DC45) | Chris Hani DM (DC13)          |
| Mopani DM (DC33)              | Thabo Mafutsanyane DM (DC19)  |
| Sekhukhune DM (DC47)          | OR Tambo DM (DC15)            |
| uThukela DM (DC23)            | Ugu DM (DC21)                 |
| Harry Gwala DM (DC43)         | uMkhanyakude DM (DC27)        |
| Vhembe DM (DC34)              | Nkangala DM (DC31)            |
| Xhariep DM (DC16)             | Ngaka Modiri Molema DM (DC38) |
|                               |                               |

District Development Model: Urban and Peri-urban

|                          | = 10 11 10 1 = 0 1 0 10   11 11 11 11 11 11 11 11 11 11 11 11 1 |  |  |
|--------------------------|---|--|--|
| Johannesburg Metro (JHB) | Nelson Mandela Bay Metro (NMA)                                  |  |  |
| Frances Baard DM (DC9)   | Dr KK Kaunda DM (DC40)  |  |  |
| Cape Town Metro (CPT)    |   |  |  |
| Buffalo City Metro (BUF) |   |  |  |

#### E. Explanation of outcomes contributing to the achievement of the impact

The outcomes were designed to lead the following impact:

| Impact | The results of achieving specific outcomes, | For the unemployed, hard to fill | The empl    | oyed   | are     | more     |
|--------|---|----------------------------------|-------------|--------|---------|----------|
|        | such as improved productivity that will     | vacancies are filled             | productive  | and    | they    | get      |
|        | contribute to economic growth.              |                                  | promotions  | Tra    | aining  | the      |
|        | Ğ   |                                  | employed re | educes | critica | l skills |

# 3. Key Risks

| Outcome  | Key risk  | Risk Mitigation  |
|--|---|--|
| Research, monitoring, evaluation, and impact system of the HWSETA provide a credible skills planning and evaluation system that ensures that its funding initiatives yield good impact in the strategic period | Not having enough research capacity internally to research on the 17 research outputs stated in the NSDS and also creating baselines for all outcome indicators whose baselines have not been established | Outsource some of the research<br>and impact assessment projects.<br>Manage the SLAs of those projects<br>and ensure quality in the work done                                  |
| The HWSETA delivers its mandate efficiently and effectively through its well capacitated organizational  | Although the organizational structure may be well capacitated, the budget may not be sufficient as  | Target in cognisance of the effects of Covid-19 on the HWSETA and the sector at large.   |
| structure and business processes<br>that are automated and integrated<br>in the strategic period   | a result of the effects of Covid-19.  | Find innovative ways of saving costs such as funding online training instead of face contact which requires costs for venue, travelling accommodation and meals.               |
|  | ERP may not yield efficiencies immediately as such systems take time to be optimally in use   | IT staff to manage the migration from manual system to automated has been added.   |
| The HWSETA promotes linkages between education and the workplace to increase work-based learning opportunities in the health and welfare sector in the strategic period  | Employers not fully exposing learners to workplace practical training   | Conduct M&E visits and interview learner as they are directly affected   |
| The HWSETA provides quality assurance services for the health and welfare sector that ensures quality in occupational education and training in the strategic period   | Skills Development Providers straggling to offer training during National Disaster lockdown regulations as they may not have infrastructure for e-learning  | Change management to be applied where e-learning is phased in gradually, where a hybrid of training is offered at first, and then swiftly moving to fully embracing e-learning |
| The HWSETA supports the growth of the public college system so that public colleges may qualify as a centres of specialisation in the strategic period   | Health sector colleges not having sufficient educators due to changes in professional landscape   | Offer post-graduate bursaries to colleges with revised landscapes such as the Nursing Profession.  |

| Outcome  | Key risk   | Risk Mitigation  |
|--|--|--|
| The HWSETA supports career development services related to the health and welfare sector and makes them accessible to rural and targeted youths in the strategic period  | Not having access to school pupils in order to conduct career exhibitions due to Covid-19 National Disaster regulations of social distancing.  | Partner with Basic Education Career Development Section (Khetha) in order to collaboratively offer career development  Train Life Orientation Teachers as Career Development Practitioners on health and welfare sector careers and funding programmes of the HWSETA. These Teachers will make career awareness to their students thus conducting career development on behalf of the HWSETA |
| The HWSETA contributes to the improvement of level of skills for 50% of the South African workforce through various learning programmes that address the critical skills required by the sector in the strategic period. | Since the baseline is not yet established it may happen that 50% of the workforce is not feasible  | Baseline will be collected and when next cycle of planning comes the 5year target will be revised  |
| The HWSETA contributes to increased access, by the unemployed, into occupationally directed programmes of the health and welfare sector in the strategic period  | Employment rate of students who complete qualifications may not reached desired target due to economic climate   | Expose students to training on self-<br>employment so that students on<br>rely on jobs, they can create their<br>own jobs  |
| The HWSETA supports officials from NGOs, NPOs, and Trade Unions in order to strengthen governance and service delivery, and thus advance social, rural, and community development in the strategic period                | NGOs/NPOs may experience<br>financial constraints due to lack of<br>funding resulting from diversion of<br>funds to fight the spread and the<br>effects of Covid-19  | NGOs need to align themselves with the Countries agenda to fight Covid-19 and its effects thereby making themselves relevant to addressing the needs of the society during Covid-19  |
| The HWSETA supports skills development for entrepreneurial and cooperative activities, as well as the establishment of new enterprises and cooperatives in the strategic period  | Retrenchments of staff and closure of small businesses due to Covid-19 National Disaster lockdown restrictions may reduce the number of businesses meeting the threshold to pay skills levy and thus affect the budget of the HWSETA | The HWSETA needs to monitor economic trends and its income so as to pro-actively revise its annual plans.  |

# PART D: TECHNICAL INDICATOR DESCRIPTOR

| Outcome Indicator 1.1              |  |
|------------------------------------|--|
| Indicator Title                    | The relevance of the Sector Skills Plan of the HWSETA to the DHET SSP framework  |
| Definition                         | The indicator measures the number of NSDP research outputs researched in each SSP update and other research reports and also whether the DHET SSP Framework was followed when compiling the SSP Update   |
| Source of Data                     | Research outputs contained in the NSDP 2030 which are now contained in the research policy of the HWSETA for easy identification SSP feedback reports from the DHET  |
| Method of<br>Calculating/Measuring | The number of research outputs covered in the SSP and research reports will be calculated against the total research outputs contained in the NSDP 2030 and the research policy of the HWSETA. Also, feedback reports from the DHET will be utilized to measure the alignment of the SSP to the SSP framework. |
| Means of Verification              | Research outputs contained in the NSDP 2030 which are now contained in the research policy of the HWSETA for easy identification SSP feedback reports from the DHET  |
| Assumptions                        | The research agenda will cover the research outputs stipulated in the NSDP (2019)  |
| Disaggregation of Beneficiaries    | Targets for Women: N/A Targets for Youth: N/A Targets for people with Disabilities: N/A  |
| Reporting Cycle                    | Annually (short-term)  |
| Desired Performance                | To cover one NSDP outcome in each research report and these should be included in the SSP Updates  |
| Indicator Responsibility           | Research Manager<br>Researcher   |

| Outcome Indicator 1.2           |   |  |
|---------------------------------|---|--|
| Indicator Title                 | The extent to which internal stakeholders of the HWSETA implement Monitoring and Evaluation recommendations   |  |
| Definition                      | The indicator measures the number of findings and recommendations that are implemented by managers responsible for programmes under review                |  |
| Source of Data                  | Implementing Managers   |  |
| Method of Calculating/Measuring | The number of the follow-up evaluation studies that confirm the implementation of recommendations will be recorded as achievements against this indicator |  |
| Means of Verification           | Follow-up reports of evaluation studies   |  |
| Assumptions                     | For all recommendations to be implemented by responsible managers within one year of confirmation of M&E report   |  |
| Disaggregation of Beneficiaries | Targets for Women: N/A Targets for Youth: N/A Targets for people with Disabilities: N/A   |  |
| Reporting Cycle                 | Annually (Short-Term)   |  |
| Desired Performance             | M&E Officer or Impact Assessment Practitioner will make follow-ups on the implementation of the recommendations   |  |
| Indicator Responsibility        | Manager responsible for programme under review Impact Assessment Practitioner M&E Officer   |  |

| Outcome Indicator 1.3              | Outcome Indicator 1.3   |  |  |
|------------------------------------|---|--|--|
| Indicator Title                    | The extent to which <b>external stakeholders</b> of the HWSETA are <b>satisfied</b> with <b>efficiency and effectiveness</b> service delivery   |  |  |
| Definition                         | This indicator measures the level of stakeholder satisfaction with the efficiency and effectiveness of the HWSETA to delivering its mandate.  |  |  |
| Source of Data                     | Stakeholders of the HWSETA Questionnaires completed by stakeholders and audios from interviews  |  |  |
| Method of<br>Calculating/Measuring | The number of stakeholders that participate in the study who confirm that the HWSETA delivers its mandate efficiently and effectively from the total participants will form the percentage of stakeholders that confirm the efficiency and effectiveness of the HWSETA to deliver its mandate |  |  |
| Means of Verification              | Report on stakeholder satisfaction  |  |  |
| Assumptions                        | Stakeholders will participate in the surveys and provide a fair distribution of participation in the study. This will facilitate the generalization of findings to all stakeholders   |  |  |

| Disaggregation of Beneficiaries | Targets for Women: N/A  |
|---------------------------------|---|
|                                 | Targets for Youth: N/A  |
|                                 | Targets for people with Disabilities: N/A   |
| Reporting Cycle                 | Bi-Annually (Medium-Term)   |
| Desired Performance             | At least 80% of the stakeholders that fairly represent all stakeholders on the health and welfare sector will be satisfied with the level of efficiency and effectiveness with which the HWSETA delivers its mandate. |
| Indicator Responsibility        | Stakeholder Management Officer All Managers   |

| Outcome Indicator 2.1              | Outcome Indicator 2.1   |  |
|------------------------------------|---|--|
| Indicator Title                    | The extent to which <b>employers participate in HWSETA skills development initiatives</b> in comparison to those that submit the WSP in the strategic period.   |  |
| Definition                         | This indicator measures the number of employers who enter into partnerships with the HWSETA to place learners funded by the HWSETA in workplace positions for learnerships, work integrated learning and internship positions against a total number of employers whose WSPs are approved by the HWSETA |  |
| Source of Data                     | Employers participating in learnerships, work integrated learning and internship  |  |
| Method of Calculating/Measuring    | The percentage is calculated with the total number of employers whose WSP/ATRs are approved as the denominator and total number of employers who sign MoAs to place students in learnership, work-integrated learning, and internship positions   |  |
| Means of Verification              | WSP approval schedule MoAs for learnerships, internships, TVET WIL, University WIL, and artisans  |  |
| Assumptions                        | Employers who enter into these partnerships will not decommit   |  |
| Disaggregation of<br>Beneficiaries | Targets for Women: N/A Targets for Youth: N/A Targets for people with Disabilities: N/A   |  |
| Reporting Cycle                    | Annually (Sort-term)  |  |
| Desired Performance                | All employers who sign Moas with the HWSETA for placing learners in workplace position will place them for the duration of the learning programme and expose learners to relevance work exposure  |  |
| Indicator Responsibility           | Managers responsible for learnerships, internships, TVET WILL and University WILL   |  |

| Outcome Indicator 2.2              |   |
|------------------------------------|---|
| Indicator Title                    | The extent to which Universities, TVET Colleges, and Professional Councils participate in HWSETA skills development initiatives in comparison to the total number of those that offer education and training in the sector  |
| Definition                         | This indicator measures the number of post-school education institutions, professional and employer bodies, and communities of practice who enter into partnerships with the HWSETA to train learners funded by the HWSETA against a total number of institutions in the sector |
| Source of Data                     | List of all institutions MoUs and MoAs for TVET Bursaries, University WIL, and Post-grad bursaries  |
| Method of<br>Calculating/Measuring | Number of post-school education institutions who signed MoAs with HWSETA divided by the total number of employers whose WSPs are approved each year   |
| Means of verification              | List of all institutions  MoUs and MoAs for TVET Bursaries, University WIL, and Post-grad bursaries   |
| Assumptions                        | Institutions who enter into these partnerships will not decommit  |
| Disaggregation of<br>Beneficiaries | Targets for Women: N/A Targets for Youth: N/A Targets for people with Disabilities: N/A   |
| Reporting Cycle                    | Annually (Short-Term)   |
| Desired Performance                | All post-school education institutions institutions who sign Moas with the HWSETA for training learners will do so for the duration of the learning programme and expose learners to relevance education  |
| Indicator Responsibility           | Managers responsible for TVET Bursaries, University WIL and Post-grad bursaries   |

| Outcome Indicator 2.3              |   |
|------------------------------------|---|
| Indicator Title                    | The extent to which unemployed persons obtain their university qualifications after successfully university Work Integrated (WIL) Learning programmes funded by the HWSETA                        |
| Definition                         | This indicator measures university students who complete training after successfully completing university Work Integrated (WIL) Learning programmes funded by the HWSETA in the strategic period |
| Source of Data                     | University students Employers   |
| Method of<br>Calculating/Measuring | Follow-up after one year of successful completion of university Work Integrated (WIL) Learning programmes   |
| Means of Verification              | Database of unemployed persons that completed WIL<br>Evaluation report  |
| Assumptions                        | Unemployed persons who successfully complete university Work Integrated (WIL) Learning programmes will obtain their qualifications  |
| Disaggregation of<br>Beneficiaries | The evaluation will measure whether the following targets are reached in terms of progression: Targets for Women: 50% Targets for Youth: 40% Targets for people with Disabilities: 5%             |
| Reporting Cycle                    | Annually but assessing cohort that has a year after successfully completing training (Short-Term)   |
| Desired Performance                | There is measurable improvement of skills   |
| Indicator Responsibility           | Projects Manager  |

| Outcome Indicator 2.4              |   |
|------------------------------------|---|
| Indicator Title                    | The extent to which unemployed persons obtain their TVET College qualifications after successfully completing TVET College Work Integrated (WIL) Learning programmes funded by the HWSETA             |
| Definition                         | This indicator measures TVET college students who complete training after successfully completing TVET College Work Integrated (WIL) Learning programmes funded by the HWSETA in the strategic period |
| Source of Data                     | TVET College students Employers   |
| Method of<br>Calculating/Measuring | Follow-up after one year of successful completion of TVET College Work Integrated (WIL) Learning programmes   |
| Means of Verification              | Database of unemployed persons that completed WIL<br>Evaluation report  |
| Assumptions                        | Unemployed persons who successfully complete TVET College Work Integrated (WIL) Learning programmes will obtain their qualifications  |
| Disaggregation of<br>Beneficiaries | The evaluation will measure whether the following targets are reached in terms of progression: Targets for Women: 50% Targets for Youth: 40% Targets for people with Disabilities: 5%                 |
| Reporting Cycle                    | Annually but assessing cohort that has a year after successfully completing training (Short-Term)   |
| Desired Performance                | There is measurable improvement of skills   |
| Indicator Responsibility           | Projects Manager  |

| Outcome Indicator 3.1           |  |
|---------------------------------|--|
| Indicator Target                | Number of <b>Skills Development Providers</b> who offer training on occupational qualifications and have at least 60% of those <b>learners certificated</b>  |
| Definition                      | This indicator measures exposure of pupils to career guidance services, especially those from rural areas.   |
| Source of Data                  | The Marketing division will provide attendance registers, report on the event, list of learners  |
| Method of Calculating/Measuring | Schools who attend HWSETA awareness campaigns will be located in a geo-map. Based on the location, the school will be classified as being in a rural or urban settlement                             |
| Means of Verification           | Attendance register Report from implementing manager Evaluation reporting containing location of school coverage of career awareness campaign. The school will act as a proxy for location of pupils |
| Assumptions                     | Pupils reside within the vicinity of the location of the school. Therefore, if the school is situated in a rural area, it will be assumed that the pupils from that school are from the rural areas  |
| Disaggregation of Beneficiaries | Targets for Women: N/A Targets for Youth: N/A Targets for people with Disabilities: N/A  |
| Reporting Cycle                 | Annually (Short-Term)  |
| Desired Performance             | The Marketing division will make career guidance services available to pupils from rural schools   |

| Indicator Responsibility | Marketing Manager Provincial Managers |
|--------------------------|---------------------------------------|
|                          |                                       |

| Outcome Indicator 3.2              | Outcome Indicator 3.2  |  |
|------------------------------------|--|--|
| Indicator Title                    | Occupational qualifications developed by the HWSETA are confirmed by the sector to be relevant to occupations on high demand   |  |
| Definition                         | This indicator confirms the qualifications developed by the HWSETA whether they will lead to occupations on high demand in the sector. Confirmation is done through follow-up of students that complete training to check whether they get employment or not |  |
| Source of Data                     | Learners that received training against the occupational qualifications developed by the HWSETA Skills Development Providers Employers that offer jobs to these learners   |  |
| Method of<br>Calculating/Measuring | Mapping of pathways taken by learners trained on these occupations after successful completion of training. Identify if they find jobs and how long it takes them to find jobs; or further their training vertically or horizontally.                        |  |
| Means of verification              | Evaluation report on pathways taken by learners trained on occupational qualifications after successful completion of training   |  |
| Assumptions                        | Occupations developed by the HWSETA will lead to employment as the sector is the one that lobbies for their development  |  |
| Disaggregation of<br>Beneficiaries | Targets for Women: N/A Targets for Youth: N/A Targets for people with Disabilities: N/A  |  |
| Reporting Cycle                    | Annually (Short-Term)  |  |
| Desired Performance                | Occupational qualifications developed by the HWSETA are derived from the list of occupations in high demand  |  |
| Indicator Responsibility           | Qualifications Development Manager   |  |

| Outcome Indicator 4.1           |   |
|---------------------------------|---|
| Indicator Title                 | The extent to which learners exposed to career awareness services enter-into HWSETA funded learning programmes  |
| Definition                      | This indicator measures pathways taken by students after exposure to career development campaigns of the HWSETA.  Those students who further their studies are followed separately from those who find jobs |
| Source of Data                  | Database of students who attended a career development initiative of the HWSETA. Interview data collected from students   |
| Method of Calculating/Measuring | Number of students who further their studies against the total students who attended career development events of the HWSETA  |
| Means of Verification           | Database of students who attended a career development initiative of the HWSETA.  Interview data collected from students  |
| Assumptions                     | There will be learner database with contact numbers of all students   |
| Disaggregation of Beneficiaries | Targets for Women: N/A  |
|                                 | Targets for Youth: N/A  |
|                                 | Targets for people with Disabilities: N/A   |
| Reporting Cycle                 | Bi-Annually (Medium-Term)   |
| Desired Performance             | The pathway of students exposed to career development events yields towards furthering of studies or finding a job  |
| Indicator Responsibility        | Marketing Manager   |
| •                               | Projects Manager  |

| Outcome Indicator 5.1 |  |
|-----------------------|--|
| Indicator Title       | Workers who <b>progress to higher positions</b> of employment after successful completing learnerships, apprenticeships, under-graduate and post-graduate degrees funded by the HWSETA |
| Definition            | This indicator measures pathways taken by workers after successfully completing learnerships funded by the HWSETA.   |
| Source of Data        | Workers trained Employers  |
| Method of             | Maps pathways after one year of successful completion of learnership   |
| Calculating/Measuring |  |
| Means of Verification | Database of workers that completed training  |
|                       | Evaluation report  |
| Assumptions           | There will be improved level of skills after successful completion of training   |
| Disaggregation of     | The evaluation will measure whether the following targets are reached in terms of progression:   |
| Beneficiaries         | Targets for Women: 50%   |

|                          | Targets for Youth: 40% Targets for people with Disabilities: 5%                                   |
|--------------------------|---|
| Reporting Cycle          | Annually but assessing cohort that has a year after successfully completing training (Short-Term) |
| Desired Performance      | There is measurable improvement of skills   |
| Indicator Responsibility | Learning Programme Manager  |

| Outcome Indicator 5.2              |  |
|------------------------------------|--|
| Indicator Title                    | Workers whose <b>performance improves after successful completing</b> skills programmes, lecturer development and career guidance programmes funded by the HWSETA. |
| Definition                         | This indicator measures lecturer funded by the HWSETA who as a result are successful in achieving learning outcomes  |
| Source of Data                     | MoAs, Learner Agreements, Lis of learners drawn from learner database of the HWSETA  |
| Method of                          | Data will be collected from the lecturers and their supervisors  |
| Calculating/Measuring              |  |
| Means of Verification              | MoAs, Learner Agreements, Lis of learners drawn from learner database of the HWSETA  |
| Assumptions                        | There will be improved performance after exposure to training  |
| Disaggregation of<br>Beneficiaries | Not Applicable   |
| Reporting Cycle                    | Annually (Short-Term)  |
| Desired Performance                | Lectures will achieve learning outcomes  |
| Indicator Responsibility           | Projects Manager   |
| ,                                  | M&E Officer  |

| Outcome Indicator 5.3              |   |
|------------------------------------|---|
| Indicator Title                    | Workers who <b>obtain full qualifications after successfully</b> completing AET and RPL programmes funded by the HWSETA   |
| Definition                         | This indicator measures level of skills gained after successful completion (obtaining degree) of training funded by the HWSETA  |
| Source of Data                     | Workers trained Employers   |
| Method of<br>Calculating/Measuring | Interview workers after six months of successful completion of RPL  |
| Means of Verification              | Database of workers that completed training Evaluation report   |
| Assumptions                        | There will be improved level of skills after successful completion of training  |
| Disaggregation of<br>Beneficiaries | The evaluation will measure whether the following targets are reached in terms of progression: Targets for Women: 50% Targets for Youth: 40% Targets for people with Disabilities: 5% |
| Reporting Cycle                    | Annually but assessing cohort that has a year after successfully completing training (Short-Term)   |
| Desired Performance                | There is measurable improvement of critical skills  |
| Indicator Responsibility           | Learning Programme Manager  |

| Outcome Indicator 5.4    |   |
|--------------------------|---|
| Indicator Title          | The percentage of academic staff with PhDs in health and social development university programmes by 2030.    |
| Definition               | The indicator measures the percentage of academic staff with PhDs in health and social development university |
|                          | programmes by 2030.   |
| Source of Data           | Workers trained   |
|                          | Employers   |
| Method of                | Interview workers after six months of successful completion of RPL  |
| Calculating/Measuring    |   |
| Means of Verification    | Database of workers that completed training   |
|                          | Evaluation report   |
| Assumptions              | There will be improved level of skills after successful completion of training                                |
| Disaggregation of        | The evaluation will measure whether the following targets are reached in terms of progression:                |
| Beneficiaries            | Targets for Women: 50%  |
|                          | Targets for Youth: 40%  |
|                          | Targets for people with Disabilities: 5%  |
| Reporting Cycle          | Annually but assessing cohort that has a year after successfully completing training (Short-Term)             |
| Desired Performance      | There is measurable improvement of critical skills  |
| Indicator Responsibility | Learning Programme Manager  |

| Outcome Indicator 6.1           |   |
|---------------------------------|---|
| Indicator Title                 | Unemployed persons who <b>find employment after successfully completing</b> internships, vocational programmes, skills programmes, learnerships, apprenticeships, under-graduate and post-graduate degrees funded by the HWSETA.                                      |
| Definition                      | The indicator measures the percentage of learners who reported themselves as employed during an interview conducted for the tracer study. This indicator is also measured through confirmation of employment with through employment contract submitted by employers. |
| Source of Data                  | Funded learners Employers that placed the learners  |
| Method of Calculating/Measuring | Total number of learners reported as employed during the tracer study against the total number of learners who participated in the study.   |
| Means of Verification           | Database of learners who completed learnerships, undergrad bursaries, post-graduate bursaries, internships, TVET WIL, and artisans.  Captured data and/or audios  |
| Assumptions                     | Learners will be honest in reporting their employment status Employers will be honest in reporting the employer study   |
| Disaggregation of Beneficiaries | Targets for Women: N/A Targets for Youth: N/A Targets for people with Disabilities: N/A   |
| Reporting Cycle                 | Annually (Short-Term)   |
| Desired Performance             | 60% of learner interviews who participate in the tracer study should be employed  |
| Indicator Responsibility        | Learning Programme Manager Projects Manager M&E Officer   |

| Outcome Indicator 6.2    |  |
|--------------------------|--|
| Indicator Title          | Unemployed persons who <b>obtain full qualifications</b> after successfully completing AET programmes funded by the HWSETA.                        |
| Definition               | This indicator measures the number of workers who obtain full qualification after successfully completing the AET programmes funded by the HWSETA. |
| Source of Data           | Workers assessed Employers   |
| Method of                | Interview workers after one year of successful completion of AET programmes  |
| Calculating/Measuring    |  |
| Means of Verification    | Database of workers that completed training  |
|                          | Evaluation report  |
| Assumptions              | There will be improved level of skills after successful completion of training   |
| Disaggregation of        | The evaluation will measure whether the following targets are reached in terms of progression:   |
| Beneficiaries            | Targets for Women: 50%   |
|                          | Targets for Youth: 40%   |
|                          | Targets for people with Disabilities: 5%   |
| Reporting Cycle          | Annually but assessing cohort that has a year after successfully completing training (Short-Term)  |
| Desired Performance      | There is measurable improvement of skills  |
| Indicator Responsibility | Provider Accreditation Manager   |

| Outcome Indicator 7.1 |   |
|-----------------------|---|
| Indicator Title       | Number of cooperatives whose sustainability is strengthened through skills development initiatives funded by the HWSETA.  |
| Definition            | This measures the number of cooperatives exposing their employees to skills development participating in the strategic period. The increase will be measured based on additional cooperatives that get to participate who did |
| Source of Data        | Cooperatives Members  |
| Method of             | Increase in the database of cooperatives that get to participate in skills development initiatives of the HWSTEA  |
| Calculating/Measuring |   |
| Means of verification | Database of cooperatives that participate in skills development initiatives of the HWSTEA   |
| Assumptions           | More and more cooperatives will participate in skills development initiatives   |
| Disaggregation of     | Targets for Women: N/A  |
| Beneficiaries         | Targets for Youth: N/A  |
|                       | Targets for people with Disabilities: N/A   |
| Reporting Cycle       | Annually (Short-Term)   |

| Desired Performance      | The HWSETA will fund skills development priorities of cooperatives |
|--------------------------|--|
| Indicator Responsibility | Projects Manager   |

| Outcome Indicator 7.2              |   |
|------------------------------------|---|
| Indicator Title                    | Number of <b>small and emerging business</b> whose sustainability is strengthened through skills development initiatives funded by the HWSETA.  |
| Definition                         | This measures the number of small and emerging businesses exposing their employees to skills development participating in the strategic period. The increase will be measured based on additional small and emerging businesses that get to participate who did not participate before. |
| Source of Data                     | Small and emerging businesses Employees   |
| Method of<br>Calculating/Measuring | Increase in the database of small and emerging businesses that get to participate in skills development initiatives of the HWSTEA   |
| Means of verification              | Database of small and emerging businesses that participate in skills development initiatives of the HWSTEA  |
| Assumptions                        | More and more small and emerging businesses will participate in skills development initiatives  |
| Disaggregation of<br>Beneficiaries | Targets for Women: N/A Targets for Youth: N/A Targets for people with Disabilities: N/A   |
| Reporting Cycle                    | Annually (Short-Term)   |
| Desired Performance                | The HWSETA will fund skills development priorities of small and emerging businesses   |
| Indicator Responsibility           | WSP Manager   |

| Outcome Indicator 7.3    |  |
|--------------------------|--|
| Indicator Title          | Percentage of large, medium, and small firms submitting WSPs against those that pay the skills levy in the health and welfare sector   |
| Definition               | This measures the number of large, medium, and small firms submitting WSPs in the strategic period. The increase will be measured based on additional firms that get to submit who did not before. |
| Source of Data           | Large, medium, and small firms WSPs/ATRs   |
| Method of                | Increase in the database of large, medium, and small firms that submit WSPs in the strategic period  |
| Calculating/Measuring    |  |
| Means of verification    | WSP/ATR database of the HWSTEA   |
| Assumptions              | More and more large, medium, and small firms submit WSPs in the strategic period   |
| Disaggregation of        | Targets for Women: N/A   |
| Beneficiaries            | Targets for Youth: N/A   |
|                          | Targets for people with Disabilities: N/A  |
| Reporting Cycle          | Annually (Short-Term)  |
| Desired Performance      | The HWSETA will fund skills development priorities of large, medium, and small firms   |
| Indicator Responsibility | WSP Manager  |

| Outcome Indicator 8.1           |   |
|---------------------------------|---|
| Indicator Title                 | Number of projects whose sustainability is strengthened through skills development initiatives funded by the HWSETA   |
| Definition                      | This measures the number of levy exempt organisations exposing their employees to skills development participating in the strategic period. The increase will be measured based on additional levy exempt organisations that get to participate who did not participate before. |
| Source of Data                  | Levy exempt organisations Members   |
| Method of Calculating/Measuring | Increase in the database of levy exempt organisations that get to participate in skills development initiatives of the HWSTEA   |
| Means of Verification           | Database of levy exempt organisations that participate in skills development initiatives of the HWSTEA  |
| Assumptions                     | More and more levy exempt organisations will participate in skills development initiatives  |
| Disaggregation of               | Targets for Women: N/A  |
| Beneficiaries                   | Targets for Youth: N/A  |
|                                 | Targets for people with Disabilities: N/A   |
| Reporting Cycle                 | Annually (Short-Term)   |
| Desired Performance             | The HWSETA will fund skills development priorities of levy exempt organisations   |
| Indicator Responsibility        | WSP Manager   |

| Outcome Indicator 8.2 |  |
|-----------------------|--|
| Indicator Title       | The number of Trade Union officials who gained relevant skills through skills development programmes funded by the |
|                       | I HWSETA   |

| Definition               | This measures the number of trade union officials exposing their employees to skills development participating in the strategic period. The increase will be measured based on additional trade union officials that get to participate who did not participate before. |
|--------------------------|---|
| Source of Data           | Trade union officials   |
| Method of                | Increase in the database of trade union officials that get to participate in skills development initiatives of the HWSTEA   |
| Calculating/Measuring    | *   |
| Means of verification    | Database of trade union officials that participate in skills development initiatives of the HWSTEA  |
| Assumptions              | More and more trade union officials will participate in skills development initiatives  |
| Disaggregation of        | Targets for Women: N/A  |
| Beneficiaries            | Targets for Youth: N/A  |
|                          | Targets for people with Disabilities: N/A   |
| Reporting Cycle          | Annually (Short-Term)   |
| Desired Performance      | The HWSETA will fund skills development priorities of trade union officials   |
| Indicator Responsibility | Projects Manager  |

| Outcome Indicator 8.3              |   |
|------------------------------------|---|
| Indicator Title                    | The number of <b>NGOs</b> and <b>NPOs</b> whose governance has been strengthened through skills development programmes funded by the HWSETA   |
| Definition                         | This measures the number of levy exempt organisations exposing their employees to skills development participating in the strategic period. The increase will be measured based on additional levy exempt organisations that get to participate who did not participate before. |
| Source of Data                     | Levy exempt organisations Members   |
| Method of<br>Calculating/Measuring | Increase in the database of levy exempt organisations that get to participate in skills development initiatives of the HWSTEA   |
| Means of verification              | Database of levy exempt organisations that participate in skills development initiatives of the HWSTEA  |
| Assumptions                        | More and more levy exempt organisations will participate in skills development initiatives  |
| Disaggregation of<br>Beneficiaries | Targets for Women: N/A Targets for Youth: N/A Targets for people with Disabilities: N/A   |
| Reporting Cycle                    | Annually (Short-Term)   |
| Desired Performance                | The HWSETA will fund skills development priorities of levy exempt organisations   |
| Indicator Responsibility           | WSP Manager   |