

National Certificate: Pharmacist Assistance 2024

Health Science Academy

INTRODUCTION

This training programme leads to a national qualification as a Pharmacist Assistant (Basic), NQF level 3 in the SAQA Field: Health Sciences and Social Services, and SAQA Subfield: Preventative, Curative, Promotive and Developmental and Health Services.

Health Science Academy offers training in all four sectors of pharmacy: community, hospital/institutional, manufacturing and wholesale/distribution. The South African Pharmacy Council has approved the course and has accredited Health Science Academy as a provider of education and training.

WHO SHOULD ENROLL?

Candidates who wish to enrol should be competent in mathematical literacy and communication at NQF level 2. Candidates who wish to enrol must be working in a pharmacy under the supervision of a tutor pharmacist. Both the tutor and the premises must be approved and registered by the South African Pharmacy Council. Once a learner has obtained this qualification by meeting all the necessary requirements, the learner will be able to register as a Pharmacist Assistant (Basic) with the South African Pharmacy Council.

COURSE CONTENT

The qualification is designed to meet the needs of learners who are currently involved in the pharmaceutical field or who wish to do so in future. It will allow access to the pharmaceutical environment and may also open up opportunities for adult learners who wish to develop their careers in related categories.

The purpose of this qualification is to equip learners with the core needs of the pharmaceutical environment. Learners will understand and acquaint themselves with the underlying principles of all the major areas related to the pharmaceutical environment by obtaining grounding in the relevant legislative and ethical requirements as well as the basic technical skills required in this field.

Through a combination of theoretical exercises and workplace learning, the learner will obtain knowledge and understanding to develop skills that will directly improve performance in the work environment.

STUDY MATERIAL

Participants will receive a comprehensive resource guide and learner guide for each module containing all the information required.

One portfolio must be completed for each module. A portfolio for a module consists of all the learning activities from the learner guide of each module. The practical component of the training is completed at work during work hours and the theoretical component is completed at home.

ASSESSMENT

The assessments will be based on a portfolio submitted for each module together with a written questionnaire. A completed portfolio must be submitted before the written questionnaire can be answered. Learners must be assessed and be found competent on every module to qualify for this certificate.

If the learner is assessed on a module and deemed Not Yet Competent, then he/she can be re-assessed twice more to gain competency. If competency is not achieved after three attempts in total, he/she will have to repeat the whole module from the start. Reassessment fees will be applicable.

Each assessment is moderated by a moderator at Health Science Academy.

COURSE DATES

Open registration

CERTIFICATION

Successful participants will receive a certificate of qualification which will only be issued if a minimum of 28 days of the contact session days have been attended and all the assessments have been successfully completed.

Once the qualification and a concurrent twelve months of in-service training are completed, a candidate may apply to the South African Pharmacy Council (SAPC) to be registered as a Pharmacist Assistant (Basic).

 Health Science Academy is a South African Pharmacy Council accredited training provider Knowledge Park, 173 Mary Road, The Willows, Pretoria, 0184
 ☑ PO Box 75324, Lynwood Ridge, 0040 South Africa Tel: 087 821 1109 | Fax: 086 502 5191
 <u>hsaenquiries@healthscience.co.za</u> | www.hsa.co.za

COURSE DESIGN

The course is structured on a modular basis. Each module is based on a registered Unit Standard at NQF level 3. The course comprises of core modules that are applicable to all sectors, with a choice of electives according to the chosen speciality.

All modules are to be completed within the registration period of 14 (fourteen) months. A minimum of 28 days of contact sessions must be attended to receive a certificate. Should the Health Science Academy registration expire after 14 months, re-registration is possible after paying the associated costs, in order to complete any outstanding modules.

Module	Title	Community (days)	Hospital (days)	Manufacture (days)	Wholesale (days)
1	Communication and interpersonal skills	3	3	3	3
2	Introduction to the pharmaceutical environment	2	2	2	2
3	Pharmacy, practice, ethics and law	2	2	2	2
4	Research and data management	2	2	2	2
5	Basic management skills	3	3	3	3
6	HIV and AIDS in the workplace	1	1	1	1
7	Health and safety in the workplace	6	6	6	6
8	Drug supply management I and II	3	3	3	3
9	Health and medicine	2	2		
10	Marketing products in a pharmacy	3			
11	Compounding and packaging of pharmaceutical products	3	3		
12	Providing products in a pharmacy		2		
13	Basic computer skills		1	1	1
14	Good wholesale distribution pharmacy practice				6
15	Large scale pharmaceutical manufacturing			5	
16	Stress management			1	1
17	Customer care			1	

COST

Option 1

100% payment on registration Total course fee: R17 750.00

Option 2

R 9 735.00 (50%) on registration plus R 9 735.00 (50%) six (6) months after registration Total course fee: R 19 470.00

Option 3

R 6 000.00 on registration plus 7 220.00 four (4) months after registration plus R 7 220.00 eight (8) months after registration Total course fee: R 20 440.00

REGISTRATION

Please send completed application forms to: Health Science Academy Knowledge Park, 173 Mary Street The Willows, Lynnwood Ridge Pretoria, 0040

PO Box 75324, Lynnwood Ridge, 0040

Tel: 087 821 1109 Fax: 086 502 5191 E-mail: <u>hsaenquiries@healthscience.co.za</u>

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A	pplication	Form	for Pha	irmacis	t's As	sista	nt Bas	ic Trainin	g					
Title														
Surname														
First name/s														
Race	Africa	African White Indian								Coloured				
Gender	Male	Male						Female						
Identity number														
		Work: Home:												
Address for correspondence														
	Hom	Home:							Cell:					
Contact numbers	Work	Home:												
C mail address	VVOIR	•						Fax:						
E-mail address					Year p	assec	4		4		evel			
Highest educational qualification		Year passed						(Adult basic education training)						
Name of current employer														
Address of current employer														
Name of tutor														
Tutor email address														
Tutor approved by the South Afri	can Pharm	- Pharmacy Council (SAPC)?						Р	Р			No		
Pharmacy approved by the South	African Pl	can Pharmacy Council?						Y	Y			No		
Sector of pharmacy in which you	work	c Community Institution					onal Distributi			tion Manufactur			l	
Which assessment centre would	you use?													
Gauteng (Pretoria, Johannesburg)		Western Cape (Cape Town)						Eastern Cape						
Free State		KZN						Northe	Northern Cape					
Mpumalanga		Limpopo						North West Province						
How did you hear about Health S	cience Aca	demy	?					•						
Word of mouth Ad	vertisemen	ement Internet Form					rmer stude	ner student O			Other <i>(please specify)</i>			
I have read and agree to comply with the terms and conditions of the Health Science Academy Policies								Sign here						
Documents to be attached									HSA official					
Proof of qualification (Grade 10 or highest qualification)														
Copy of identity document	utor													
Proof of SAPC approval of t Proof of SAPC approval of														
Provi of SAPC approval of	латасу													

Course fees and payment details													
Course fees for 2024 (incl. VAT) (Mark one)													
Option 1 100% payment on registration Total course fee: R17 750.00													
Option 2 R 9 735.00 (50%) on registration plus R 9 735.00 (50%) six (6) months after registration Total course fee: R 19 470.00													
Option 3 R 6 000.00 on registration plus 7 220.00 four (4) months after registration plus R 7 220.00 eight (8) months after registration Total course fee: R 20 440.00													
A non-refundable R500.00 application fee is applicable to all options													
Learners are responsible	for the fu	II cours	se fee b	efore the	e start th	ereof,	or as	s per av	ailabl	e pay	ment opt	tions	
Send invoice to (mark one)													
Learner					Compa	ny							
Name and surname					Name								
Tel					Tel								
Fax					Fax								
E-mail address					E-mail	addre	SS						
					VAT nu	umber	if app	licable					
Payment method (mark or	e)												
Bank deposit Attach a copy of the deposit slip; use your full name, ID number or HSA number as the payment reference													
Health Science Academy b	ank details	S:											
Bank	First Nation	onal Ba	nk										
Branch code	252045 (I	-											
Account name													
Account number 50631131815													
Credit card: Credit card pa	yments ca	n only £	be done	when the	owner o	t the c	ard is	presen	t in pei	rson	I I		
Credit card number													
	Master C	Card		Visa			Dine	ers Club)		Amex		
Credit card budget accoun	t <i>(mark ap</i>	olicable)				-						
6 months 12 months 18 months													
Expiry date CVV number													
Card holder surname and i	Last 3 digits on back of card Card holder surname and initials Card holder's signature												
Documents to be attached HSA official													
Proof of payment													
Signed agreement													
 Please complete the application form and sign the agreement below. Submit the application by fax or email with the application fee of R500.00 HSA will notify you if your application was successful. Once the application is approved a minimum of R5000.00 is immediately payable to HSA. ONLY once payment is received will an enrolment certificate be issued. If not attached to this application, please send a copy of your proof of payment with your name and contact details to Health Science Academy, marked for the attention of 'Pharmacists' assistant fee payment'. All personal information will only be used for internal or legal purposes. 													
PLEASE NOTE THAT NO APPLICATION FORM WILL BE PROCESSED WITHOUT THESE DOCUMENTS OR WITH INCOMPLETE INFORMATION													
Health Science Academy reserves the right to make changes to courses without prior notification.													



AGREEMENT

I, the undersigned_______ declare that this application constitutes a binding agreement upon the terms set out herein between myself and Health Science Academy.

I understand that it is my responsibility to notify Health Science Academy within 30 days if there have been any changes in my personal, tutor, premises and/or employer information.

I understand that the fees applicable to this course is due 30 days from the date of the invoice and the fee structure will be valid for the applicable financial year only. Failure to pay any invoice within the mentioned time period will lead to legal action by Health Science Academy. No fees paid will be refunded.

I understand that I need to attend 28 of the 30 days scheduled for contact sessions; if absent, I need to provide a doctor's note or other relevant documentation to explain absence from class.

I understand that a rewrite fee will be applicable to any assessment that has been deemed *Not Yet Competent* (NYC) or *Not Enough Evidence* (NEE) by the assessor or moderator.

I agree to the above terms and conditions, including payments due, that govern my application and I agree to be bound by them.

HSA undertakes to collect and process your personal information in accordance with the requirements of the Protection of Personal Information Act, 4 of 2013.

Signature of applicant

Date

Signature of manager

Date

Witness

Witness