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BOARD NOTICE 816 OF 2025

SOUTH AFRICAN PHARMACY COUNCIL

GUIDELINES FOR WORK-BASED LEARNING (WBL)

The South African Pharmacy Council hereby publishes for **implementation** in terms of Sections 3(e)(i), 33 and 34 of the Pharmacy Act, 53 of 1974, read together with the *Regulations relating to pharmacy education and training,* the **South African Pharmacy Council Guidelines for Work-Based Learning (WBL)**.

SCHEDULE

(a) South African Pharmacy Council Guidelines for Work-Based Learning (WBL)



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South African
Pharmacy Council

GUIDELINES FOR WORK-BASED LEARNING (WBL)

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ABBREVIATIONS

GPE	Good Pharmacy Education
HEQSF	Higher Education Qualifications Sub-Framework
HPCSA	Health Professions Council of South Africa
NQF	National Qualifications Framework
NIMART	Nurse-Initiated Management of Antiretroviral Therapy
OQSF	Occupational Qualifications Sub-Framework
PCDT	Primary Care Drug Therapy
PHC	Primary Health Care
PIMART	Pharmacist-Initiated Management of Antiretroviral Therapy
PSP	Pharmacy Support Personnel
SANC	South African Nursing Council
SAPC	South African Pharmacy Council
SAQA	South African Qualifications Authority
WBL	Work-Based Learning
WIL	Work-Integrated Learning

DEFINITIONS

Preceptor means a supervisory pharmacist with more than three (3) years' experience, who mentors the learners during the workplace-based learning and is appointed by the provider.[1]

Tutor means a pharmacist registered with Council as a tutor, to supervise the internship of a Pharmacist Intern, the traineeship of a Pharmacy Technician (trainee) or the in-service training of a Pharmacist's Assistant (Learner Basic) or Pharmacist's Assistant (Learner Post-Basic).[1]

Distribution Practices in the context of work-based learning, refer to the procurement, purchase, holding, storage, sale, supply, or movement of pharmaceutical products to ensure the effective, efficient, and safe handling, storage, and distribution of pharmaceutical products from production to patient use, maintaining product integrity and adhering to regulatory standards. [2]

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[1] Good Pharmacy Education, Occupational Qualification Sub-Framework

[2] Adapted from the South African Health Products Regulatory Authority, South African Good Wholesaling Practice for Wholesalers

1. PREAMBLE AND PRINCIPLES

The South African Pharmacy Council (hereafter "Council") has a statutory obligation in terms of the Pharmacy Act, 53 of 1974, as follows:

(a) Section 3(e)(i) provides that among the objects of Council shall be to establish, develop, maintain and control universally acceptable standards in pharmaceutical education and training; and

(b) Sections 33 and 34 read together with the *Regulations relating to pharmacy education and training* state that Council is to approve providers of pharmacy education and training and qualifications that lead to registration with itself.

Council implements the above responsibilities by developing scopes of practice and qualifications, accrediting providers and courses, quality assuring the delivery of the programmes, and ensuring consistency and quality across programmes. The part-qualification and qualifications in the field of pharmacy education and training that include WBL components are:

(a) Occupational Certificate: Pharmacist's Assistant (Basic) – at National Qualification Framework (NQF) Level 4 on the Occupational Qualifications Sub-Framework (OQSF);

(b) Occupational Certificate: Pharmacist's Assistant (Post-Basic) – at NQF Level 5 on the OQSF;

(c) Diploma in Pharmacy Technical Support – at NQF Level 6 on the Higher Education Qualifications Sub-Framework (HEQSF);

(d) Bachelor of Pharmacy – at NQF Level 8 on the HEQSF;

(e) Professional Master of Pharmacy in Public Health Pharmacy and Management – at NQF Level 9 on the HEQSF;

(f) Professional Master of Pharmacy in Clinical Pharmacy – at NQF Level 9 on the HEQSF;

(g) Professional Master of Pharmacy in Radiopharmacy – at NQF Level 9 on the HEQSF; and

(h) Professional Master of Pharmacy in Industrial Pharmacy – at NQF Level 9 on the HEQSF.

Supplementary training/short courses which have been approved by Council are:

(a) Family Planning (Reproductive Health) course*;*

(b) Immunisation and Injection Technique course;

(c) Pharmacist-Initiated Management of Antiretroviral Therapy (PIMART) course; and

(d) Primary Care Drug Therapy (PCDT) course.

The purpose of these *Guidelines for Work-Based Learning* (WBL) is to provide guidance to relevant stakeholders on the implementation of the WBL component of the qualifications and supplementary training/short courses approved by Council.

2. INTRODUCTION AND BACKGROUND

Council has introduced requirements for the completion of WBL as a component of the Bachelor of Pharmacy (BPharm) and Pharmacy Support Personnel (PSP) qualifications. WBL is also a requirement of supplementary training/short courses (Family Planning [Reproductive Health], Immunisation and Injection Technique, PIMART and PCDT).

Council has received feedback from both employers and providers of pharmacy education and training on challenges encountered with the implementation of WBL. To fully investigate WBL in the pharmaceutical sector, Council initiated a project to explore the implementation of WBL, with input from relevant role players (providers, employers, students[1] and funders).

3. WORK-BASED LEARNING (WBL)

As a subset of work-integrated learning (WIL), WBL is an educational approach used in professional and occupational qualifications to provide students with real-life workplace experience that will allow students to apply their theoretical learning and technical skills in the workplace. Work-based learning is defined as "an educational approach through which a person internalises knowledge, gains insights and acquires skills and competencies through exposure to a workplace to achieve specific outcomes applicable to employment" (van Staden*,* 2015*).* The underpinning principle is to expose students to real-life work experience as part of the formal educational qualification. During the period in the workplace, the student should be provided with the opportunity to apply theoretical knowledge and practical skills acquired during the academic programme to workplace activities (Pandor, 2018).

Work-integrated learning is an umbrella term used to describe various educational strategies that connect formal classroom learning with the workplace environment (Council on Higher Education (CHE), 2011). The concept and practice of WIL was developed in response to concerns about graduates' preparedness for graduation, employability, and civic responsibility. A primary driver for the development of WIL has been to enhance student learning.

There are different forms of WIL that extend from a more theoretical classroom-based approach to time spent in an actual workplace. Formats of WIL include the following: action-learning; apprenticeships; cooperative education; experiential learning; inquiry learning; inter-professional learning; practicum placements; problem-based learning; project-based learning; scenario learning; service-learning; team-based learning; virtual or simulated WIL; WBL; work experience; and workplace learning.

Benefits derived from WBL practices accrue to the student, workplace, and society.

Benefits accruing to the student are:

(a) The experience allows the student to create links between classroom-derived theoretical knowledge and workplace practices;

[1] The term student will be used in this document to indicate both students on the HEQSF and learners on the OQSF.

(b) Provides the student with an opportunity to demonstrate their desirability as a future employee for an extended period;

(c) Develops student knowledge of methods and practices in all categories of pharmacy; and

(d) Broadens the students' experiential exposure further than other WIL opportunities available on campus.

Benefits accruing to the workplace are:

(a) Promotes knowledge transfer between the educational provider and the workplace;

(b) Provides additional resources not committed to normal daily tasks; and

(c) Allows an extended period to assess possible future employees.

Benefits accruing to society:

(a) Development of a more skilled workforce with educational programmes that are relevant to the workplace.

Under certain circumstances, as approved by Council, non-placement WIL can take place in an authentic simulated workplace environment, i.e., simulation. The use of augmented reality, for example, can be used where applicable in such cases.

4. OVERVIEW OF SOUTH AFRICAN PHARMACY COUNCIL REQUIREMENTS FOR WORK-BASED LEARNING

Council has introduced WBL requirements into part-qualifications, qualifications, and supplementary training/short courses. The requirements are stipulated in the relevant Good Pharmacy Education Standards and qualification/course curriculum.

4.1. BPharm Qualification (HEQSF)

The WBL requirement for the BPharm (65130)[2] is at least 400 hours in the overall learning programme.

4.2. Diploma in Pharmacy Technical Support (HEQSF)

The WBL requirement for the Diploma in Pharmacy Technical Support is at least 200 hours in the overall learning programme.

4.3. Professional Master of Pharmacy in Clinical Pharmacy (HEQSF)

The WBL requirement for the Professional Master of Pharmacy in Clinical Pharmacy is two (2) years of practical training. The training site must be registered with Council as a training institution, pharmacy, or health facility where Clinical Pharmacy is routinely practised.

4.4. Professional Master of Pharmacy in Industrial Pharmacy (HEQSF)

The WBL requirement for the Professional Master of Pharmacy in Industrial Pharmacy is two (2) years of practical training. The training site must be registered with Council as a training institution, pharmacy, or health facility where Industrial Pharmacy is routinely practised.

4.5. Professional Master of Pharmacy in Radiopharmacy (HEQSF)

The WBL requirement for the Professional Master of Pharmacy in Radiopharmacy is two (2) years of practical training. The training site must be registered with Council as a training institution, pharmacy, health, or manufacturing facility where radiopharmaceuticals are routinely handled.

4.6. Professional Master of Pharmacy in Public Health Pharmacy and Management (HEQSF)

The WBL requirement for the Professional Master of Pharmacy in Public Health Pharmacy and Management is two (2) years of practical training. The training site must be recognised by or registered with Council as having the necessary scope to train specialist pharmacists in Public Health Pharmacy and Management at any of the levels of pharmaceutical services and public health (operational level, middle management, or strategic management). Different rotation sites must be available for the candidate to gain experience in various fields of Public Health Pharmacy and Management.

4.7. Occupational Certificate: Pharmacist's Assistant (Basic) (OQSF)

[2] South African Qualifications Authority (SAQA) qualification identification number.

The WBL requirement for the Occupational Certificate: Pharmacist's Assistant (Basic) (112811)[3] is a total of 160 hours. The following activities are to be covered during WBL: processes to distribute and control stock (50 hours); processes to manufacture non-sterile medicines (40 hours); processes to compound non-sterile extemporaneous preparations (50 hours); and processes to perform general housekeeping and administrative tasks in the pharmacy (20 hours) as per legislation.

4.8. Occupational Certificate: Pharmacist's Assistant (Post-Basic) (OQSF)

The WBL requirement for the Occupational Certificate: Pharmacist's Assistant (Post-Basic) (112807)[4] is a total of 370 hours. The following activities are to be covered during WBL: processes to manage stock (80 hours); processes to manufacture non-sterile and sterile medicines (50 hours); processes to compound sterile and extemporaneous preparations (60 hours); processes to dispense medicines (150 hours); processes to perform general housekeeping and administrative tasks in the pharmacy (Post-Basic) (30 hours) as per legislation.

4.9. Occupational Certificate: Pharmacy Technician (OQSF)

The WBL requirement for the Occupational Certificate: Pharmacy Technician (Basic) (102235)[5] is a total of 500 hours. The following activities are to be covered during WBL: processes to manage and supervise the supply chain (100 hours); processes to manufacture non-sterile and sterile medicines and to supervise select manufacturing activities (60 hours); processes to compound and supervise the compounding of sterile and non-sterile extemporaneous preparations (70 hours); processes to dispense and supervise dispensing of medicines (150 hours); processes to conduct screening tests (20 hours); management of pharmacy resources (100 hours).

4.10 Family Planning Course (Reproductive Health)

The student must be exposed to a minimum of ten (10) clinical cases, of which five (5) are observed and five (5) form part of a formal assessment

4.11. Primary Care Drug Therapy (PCDT)

At least 200 patient examinations at the Primary Health Care (PHC) level must be completed. The200 patient examinations must include all the conditions listed in the PHC Standard Treatment Guidelines (STG) and Essential Medicines List (EML) in line with the scope of practice of a PCDT pharmacist. The number of patient examinations required per condition is stipulated in the *Criteria for accreditation: Primary Care Drug Therapy* (see Addendum A).

4.12. Immunisation and Injection Technique

A minimum of twenty (20) intramuscular immunisations and five (5) subcutaneous immunisations must be performed.

4.13. Pharmacist-Initiated Management of Antiretroviral Therapy (PIMART)

[3] South African Qualifications Authority (SAQA) qualification identification number.
[4] South African Qualifications Authority (SAQA) qualification identification number.
[5] South African Qualifications Authority (SAQA) qualification identification number.

A minimum of twenty (20) clinical cases, of which ten (10) are observed and ten (10) form part of the formal assessment, must be completed and documented.

5. PLACEMENT SITES AND DURATION FOR WORK-BASED LEARNING (WBL)

Placement sites for WBL should, for generalist qualifications/courses, include the various categories of pharmacy. Requirements will differ according to the specialisation area for the professional Master's qualifications and certain courses.

5.1. BPharm Qualification (HEQSF)

Placement sites for WBL should ensure exposure to each category of pharmacy. Placement sites must include, but should not be limited to, community pharmacy, institutional pharmacy, a Primary Health Care (PHC) setting, and manufacturing pharmacy. Distribution practices are to be included in all four (4) categories.

The placement in the various categories of pharmacy should include a minimum of 80 hours in community pharmacy; 80 hours in institutional pharmacy, 80 hours in a PHC setting; and 40 hours in manufacturing pharmacy. Distribution practices are to be included in all four (4) categories of pharmacy. The balance of at least 120 hours is to be allocated to any or all the categories of pharmacy at the discretion of the provider and in agreement with Council.

5.2. Diploma in Pharmacy Technical Support (HEQSF)

Placement sites for WBL should ensure exposure to each category of pharmacy. Placement sites must include, but should not be limited to, community pharmacy, institutional pharmacy, a PHC setting, and manufacturing pharmacy. Distribution practices to be included in all four (4) categories of pharmacy.

The placement in the various categories of pharmacy should include at least a minimum of 32 hours in community pharmacy; 32 hours in institutional pharmacy, 32 hours in a PHC setting; and 32 hours in manufacturing pharmacy. Distribution practices to be included in all four (4) categories of pharmacy. The balance of at least 72 hours is to be allocated to any or all categories of pharmacy at the discretion of the provider and in agreement with Council.

5.3. Professional Master of Pharmacy in Clinical Pharmacy (HEQSF)

The site for WBL (practical training) must be registered with Council as a training institution, pharmacy, or health facility where clinical pharmacy is routinely practised.

Following completion of the academic qualification, a minimum of two (2) years of practical training is required.

5.4. Professional Master of Pharmacy in Industrial Pharmacy (HEQSF)

The site for WBL (practical training) must be registered with Council as a training institution, pharmacy, or health facility where industrial pharmacy is routinely practised.

Following completion of the academic qualification, a minimum of two (2) years of practical training is required.

5.5. Professional Master of Pharmacy in Radiopharmacy (HEQSF)

The site for WBL (practical training) must be registered with Council as a training institution, pharmacy, health, or manufacturing facility where radiopharmaceuticals are routinely handled.

Following completion of the academic qualification, a minimum of two (2) years of practical training is required.

5.6. Professional Master of Pharmacy in Public Health Pharmacy and Management (HEQSF)

The site for WBL (practical training) must be recognised by or registered with Council as having the necessary scope to train specialist pharmacists in public health pharmacy and management at any of the levels of pharmaceutical services and public health (operational level, middle management, or strategic management). Different rotation sites must be available for the candidate to gain experience in various fields of public health pharmacy and management.

Following completion of the academic qualification, a minimum of two (2) years of practical training is required.

5.7. Occupational Certificate: Pharmacist's Assistant (Basic) (OQSF)

Placement sites for WBL should ensure exposure to each category of pharmacy. Placement sites must include, but should not be limited to, community pharmacy, institutional pharmacy, and manufacturing pharmacy. Distribution practices are to be included in all four (4) categories of pharmacy.

The placement in the various categories of pharmacy should include at least a minimum of 32 hours in community pharmacy; 32 hours in institutional pharmacy; and 50 hours in manufacturing pharmacy (including distribution practices). The balance of at least 56 hours is to be allocated to any or all categories of pharmacy at the discretion of the provider and in agreement with Council.

Total number of WBL hours: 160 hours.

5.8. Occupational Certificate: Pharmacist's Assistant (Post-Basic) (OQSF)

Placement sites for WBL should ensure exposure to each category of pharmacy. Placement sites must include, but should not be limited to, community pharmacy, institutional pharmacy, PHC setting and manufacturing pharmacy. Distribution practices are to be included in all four (4) categories of pharmacy.

The placement in the various categories of pharmacy should include at least a minimum of 64 hours in community pharmacy; 64 hours in institutional pharmacy; 64 hours in a PHC setting; and 50 hours in manufacturing pharmacy. Distribution practices are to be included in all four (4) categories of pharmacy. The balance of at least 128 hours is to be allocated to any or all of the categories of pharmacy at the discretion of the provider and in agreement with Council.

Total number of WBL: 370 hours.

5.9. Occupational Certificate: Pharmacy Technician (OQSF)

Placement sites for WBL should ensure exposure to each category of pharmacy. Placement sites must include, but should not be limited to, community pharmacy,

institutional pharmacy, PHC setting and the manufacturing pharmacy. Distribution practices to be included in all four (4) categories of pharmacy.

The placement in the various categories of pharmacy should include a minimum of 80 hours in community pharmacy; 80 hours in institutional pharmacy; 80 hours in a PHC setting; and 60 hours in the manufacturing pharmacy. Distribution practices to be included in all four (4) sectors. The balance of at least 200 hours is to be allocated to any or all categories of pharmacy at the discretion of the provider and in agreement with Council.

Total number of WBL hours: 500 hours.

5.10. Family Planning Course (Reproductive Health)

Placement sites for WBL should be as stipulated by the provider and approved by Council.

5.11. Recommendation: placement in the WBL site should include at least five (5) observed clinical cases and five (5) clinical cases supervised by a pharmacist who has completed family planning or PCDT supplementary training, or a nurse or medical practitioner in a PHC setting, to be presented in a mini portfolio for assessment.Primary Care Drug Therapy (PCDT)

Placement sites for WBL should ensure exposure to patients at a PHC level. Placement sites can include, but should not be limited to, a PHC setting or a community pharmacy where a PCDT pharmacist practises PCDT.

5.12. Immunisation and Injection Technique

Placement sites for WBL should ensure exposure to patients in a relevant clinical setting. Placement sites must include, but should not be limited to, a PHC setting; a community pharmacy where the pharmacist has completed the Immunisation and Injection Technique or PCDT supplementary training, a community pharmacy where a PCDT pharmacist practises or a registered nurse practises; or a hospital setting.

5.13. Pharmacist-Initiated Management of Antiretroviral Therapy (PIMART)

Placement sites for WBL should ensure exposure to patients in a relevant clinical setting. Placement sites must include but should not be limited to a PHC setting; a community pharmacy where a pharmacist, who has completed the PIMART supplementary training and has a Section 22A permit practises. The clinical cases must be undertaken under the supervision of either a pharmacist who has a Section 22(A)15 permit for PIMART; a medical practitioner registered with the Health Professions Council of South Africa (HPCSA) with prior experience or an additional qualification in HIV management; or a nurse practitioner registered as a professional nurse with the South African Nursing Council (SANC) who is approved to practise Nurse-Initiated Management of Antiretroviral Management (NIMART).

6. WORK-INTEGRATED LEARNING (WIL): SIMULATION

A requirement for WBL is placement in the workplace. An alternative, under certain circumstances as approved by Council, is “non-placement WBL” in an authentic simulated workplace environment, i.e., simulation. The use of augmented reality should be encouraged and used where applicable in such cases.

6.1 BPharm Qualification (HEQSF)

In the BPharm programme, WBL placement in a manufacturing pharmacy is a requirement. “Non-placement WBL” in an authentic simulated workplace, as approved by Council, is permitted as a replacement for WBL placement in a manufacturing pharmacy. In exceptional cases, Council may consider deviations.

6.2 Diploma in Pharmacy Technical Support (HEQSF)

In the Diploma in Pharmacy Technical Support, placement in a manufacturing pharmacy is a requirement. “Non-placement WBL” in an authentic simulated workplace, as approved by Council, is permitted as a replacement for WBL placement in a manufacturing pharmacy. In exceptional cases, Council may consider deviations.

6.3 Professional Master of Pharmacy in Clinical Pharmacy (HEQSF)

No deviation from WBL placement in the workplace will be permitted.

6.4 Professional Master of Pharmacy in Industrial Pharmacy (HEQSF)

No deviation from WBL placement in the workplace will be permitted.

6.5 Professional Master of Pharmacy in Radiopharmacy (HEQSF)

No deviation from WBL placement in the workplace will be permitted.

6.6 Professional Master of Pharmacy in Public Health Pharmacy and Management (HEQSF)

No deviation from WBL placement in the workplace will be permitted.

6.7 Occupational Certificate: Pharmacist’s Assistant (Basic) (OQSF)

In the Occupational Certificate: Pharmacist’s Assistant (Basic), WBL placement in a manufacturing pharmacy is a requirement. “Non-placement WBL” in an authentic simulated workplace, as approved by Council, is permitted as a replacement for WBL placement in a manufacturing pharmacy. In exceptional cases, Council may consider deviations.

6.8 Occupational Certificate: Pharmacist's Assistant (Post-Basic) (OQSF)

In the Occupational Certificate: Pharmacist’s Assistant (Post-Basic), WBL placement in a manufacturing pharmacy is a requirement. “Non-placement WBL” in an authentic simulated workplace, as approved by Council, is permitted as a replacement for WBL placement in a manufacturing pharmacy. In exceptional cases, Council may consider deviations.

6.9 Occupational Certificate: Pharmacy Technician (OQSF)

In the Occupational Certificate: Pharmacy Technician, placement in a manufacturing pharmacy is a requirement. “Non-placement WBL” in an authentic simulated workplace, as approved by Council, is permitted as a replacement for WBL placement in a manufacturing pharmacy. In exceptional cases, Council may consider deviations.

6.10 Family Planning (Reproductive Health)

No deviation from WBL placement in the workplace will be permitted.

6.11 Primary Care Drug Therapy (PCDT)

No deviation from WBL placement in the workplace will be permitted.

6.12 Immunisation and Injection Technique

No deviation from WBL placement in the workplace will be permitted.

6.13 Pharmacist-Initiated Management of Antiretroviral Therapy (PIMART)

No deviation from WBL placement in the workplace will be permitted.

7. BPHARM: YEAR LEVEL FOR WORK-BASED LEARNING (WBL) PLACEMENT

A total of 400 hours of WBL placement is required over the duration of the four-year BPharm degree. Students who exit from the BPharm programme prior to successful completion of the fourth and final year of the programme may apply to Council for registration as Pharmacy Support Personnel (PSP)[6].

A student who exits from the BPharm programme following successful completion of the first year of the programme may, within a two-year period from exiting the BPharm programme, apply to Council for registration as a Pharmacist's Assistant (Basic) as determined by Council.

A student who exits from the BPharm programme following successful completion of the second year of the programme may, within a two-year period from exiting the BPharm programme, apply to Council for registration as a Pharmacist's Assistant (Post-Basic) as determined by Council.

A student who exits from the BPharm programme following successful completion of the third year of the programme may, within a two-year period from exiting the BPharm programme, apply to Council for registration as a Pharmacy Technician.

Early exit from the BPharm programme with subsequent registration as PSP highlights the need for relevant WBL placements to be implemented from the first year of the BPharm programme. The *Regulations relating to the practice of pharmacy* stipulate the scope of practice of a BPharm student for the purposes of education[7]: "A pharmacy student may, for purposes of education and training, and under the auspices of a provider approved to offer education and training for a qualification in pharmacy and with whom such student is enrolled, provide or perform all of the services or acts pertaining to the scope of practice of a pharmacist under the direct personal supervision of a pharmacist; and the services or acts referred to in sub-regulation 8(1) must be provided or performed in accordance with a programme developed by the provider and approved by the Council". These regulations permit students from the first year of the programme to be placed in the workplace for WBL.

The WBL placement during the different year levels of the BPharm programme should include at least a minimum of 40 hours during the first year; 80 hours during the second

[6] Resolution of the South African Pharmacy Council on 14 to 15 October 2020.
[7] Regulations 8.1 and 8.2.

year; 120 hours during the third year, and 160 hours during the fourth year as indicated in Table 1 below.

Table 1: WBL minimum requirements for each year of study in the BPharm programme

BPharm Year of study	First year	Second year	Third year	Fourth year
WBL minimum hours	40	80	120	160
Number of Weeks of WBL	1	2	3	4
Category of registration on completion of a year of study	Basic*	Post-Basic*	Technician*	Pharmacist Intern

*After completing the applicable year of study, a student who is unable to complete the remainder of the BPharm programme can go through a further process, as determined by Council, to register in the appropriate category of mid-level workers.

8. SCHEDULING OF WORK-BASED LEARNING (WBL) DURING THE ACADEMIC YEAR

At the discretion of the provider, the WBL placements may be scheduled either during the academic semester, during the vacation (recess) periods, or during both periods. Where the required placement period is more than 40 hours, a minimum duration per period spent at the placement site is 40 hours and must be completed in five (5) consecutive days for all qualifications except for supplementary training courses. Shorter periods of placement are not permitted. In the case of Occupational Certificate: Pharmacist's Assistant (Basic) and Diploma in Pharmacy Technical Support, the 32 hours stipulated must be completed in four (4) consecutive days.

9. FORMAL WRITTEN AGREEMENT BETWEEN EDUCATION PROVIDER AND PLACEMENT SITE

The formal written agreement, in the form of a Memorandum of Understanding (MoU), should be signed for a specified time period with the executive management level of the organisation/practice. For the Department of Health (DoH) sites, the agreement should be between the provider and the relevant division in the provincial DoH head office structure. For corporate placement sites, the agreement should be between the provider and the relevant division in the head office structure and the placement sites. For independent placement sites, the agreement can be with the owner and/or the Responsible Pharmacist (RP).

As required by Good Pharmacy Education (GPE) standards[8], a formal written agreement, between the provider and the placement site, must be in place for each placement site. It is the responsibility of the provider to approach the placement site at least three (3) months before the placement of the students. The students should not be deputised to approach the provider and request placement.

The minimum information required in the formal written agreement includes, but is not limited to:

(a) Provider information:

[8] Good Pharmacy Education Standards for the Occupational Qualification Sub-Framework (OQSF) and Good Pharmacy Education Standards (GPES) for the Higher Education Qualification Sub-Framework (HEQSF)

(i) Contact details, e.g., communication details and contact person details;

(ii) Site-specific requirements, e.g., required activities;

(iii) Projected number of students requiring placement;

(iv) List of student names and details;

(v) Staff responsibilities;

(vi) Immunisation requirements;

(vii) Professional conduct expectations;

(viii) Procedures for handling underperforming students;

(ix) Grievance/appeal process; and

(x) Procedure for student absence from the workplace.

(b) Placement site information:

(i) Contact details, e.g., communication details and contact person details;

(ii) Site-specific requirements, e.g., number and year level of students that can be placed;

(iii) Projected placement sites that can be offered;

(iv) Projected number of preceptors available;

(v) List of preceptor names and details;

(vi) Staff responsibilities;

(vii) Resource requirements;

(viii) Immunisation requirements;

(ix) Professional conduct expectations;

(x) Confidentiality requirements;

(xi) Placement duration and schedule;

(xii) Procedures for handling underperforming preceptors/tutors; and

(xiii) Registration and approval for training, where applicable.

10. ANNUAL PLANNING COMMUNICATION REGARDING WORK-BASED LEARNING (WBL) PLACEMENTS

An annual written communication between the provider and the placement site should stipulate arrangements for the upcoming academic year. The communication should occur a minimum of three (3) months prior to the first placement date for the academic year.

The annual written communication should include, but is not limited to:

(a) Provider information:

(i) Number of sites required for placement;

(ii) Number of students to be placed;

(iii) Geographical sites required for placement;

(iv) Desired dates and durations for placements; and

(v) Activities required during placements, which should include but not be limited to, assessments.

(b) Placement site information:

(i) Number of preceptors available;

(ii) Dates preceptors are available;

(iii) Geographical sites available for placement; and

(iv) Areas available for placements, i.e., types of activities to which exposure can be provided.

11. SUPERVISION DURING WORK-BASED LEARNING (WBL)

During placement in the workplace for WBL, the student must be supervised at all times. A preceptor should be appointed by the provider to supervise the student. A preceptor is a pharmacist or relevant health professional with more than three years (3) of work experience who mentors the student during the WBL. The registration details of the relevant health professional will differ for the various qualifications/courses.

11.1 BPharm Qualification (HEQSF)

During WBL placement in the BPharm programme, the preceptor role may be fulfilled by a registered pharmacist with three years' (3) work experience, or a relevant health care practitioner when a pharmacist is not available at the specific placement site. The health care practitioner must be registered with the relevant professional council and hold a qualification that is at least one (1) NQF level higher than the student's current academic registration status.

11.2 Diploma in Pharmacy Technical Support (HEQSF)

For the Diploma in Pharmacy Technical Support programme, a preceptor means a supervisory pharmacist with more than three years' (3) experience, who mentors the students during the WBL and is appointed by the provider.[9]

11.3 Professional Master of Pharmacy in Clinical Pharmacy (HEQSF)

[9] As defined in GPE Standards (OQSF).

The practical training must be supervised by a registered clinical pharmacist or pharmacist with at least a relevant master's degree and a minimum of two years' (2) experience in clinical pharmacy.

11.4 Professional Master of Pharmacy in Industrial Pharmacy (HEQSF)

The practical training must be supervised by a registered industrial pharmacist or pharmacist with at least a relevant master's degree and a minimum of two years' (2) experience in industrial pharmacy.

11.5 Professional Master of Pharmacy in Radiopharmacy (HEQSF)

The practical training must be supervised by a Radiopharmacist or pharmacist with at least a relevant master's degree and a minimum of two years' (2) experience in the field.

11.6 Professional Master of Pharmacy in Public Health Pharmacy and Management (HEQSF)

An appropriately trained and qualified person, with at least a relevant master's degree and a minimum of two (2) years' extensive experience in the fields of public health, pharmacy, and management. Additionally, the individual must be jointly approved by the training institution and Council, to be appointed to supervise the practical training.

11.7 Occupational Certificate: Pharmacist's Assistant (Basic) (OQSF)

For the Occupational Certificate: Pharmacist's Assistant (Basic) programme, a preceptor is a supervisory pharmacist with more than three (3) years' experience, who mentors the students during the WBL and is appointed by the provider.[10]

11.8 Occupational Certificate: Pharmacist's Assistant (Post-Basic) (OQSF)

For the Occupational Certificate: Pharmacist's Assistant (Post-Basic), a preceptor is a supervisory pharmacist with more than three (3) years' experience, who mentors the students during the WBL and is appointed by the provider.[11]

11.9 Occupational Certificate: Pharmacy Technician (OQSF)

For the Occupational Certificate: Pharmacy Technician programme, a preceptor means a supervisory pharmacist with more than three (3) years' experience, who mentors the students during the WBL and is appointed by the provider.[12]

11.10 Family Planning (Reproductive Health)

For the Family Planning Course, WBL supervision will be as stipulated by the provider and approved by Council. The preceptor role should be fulfilled by a registered pharmacist competent to provide family planning services (Reproductive Health), a professional nurse registered as such with the South African Nursing Council (SANC), or an authorised medical practitioner, with a Bachelor of Medicine and Bachelor of Surgery (MBChB) degree or equivalent and registered as such with the Health Professions Council of South Africa (HPCSA).

[10] As defined in GPE Standards (OQSF).

[11] As defined in GPE Standards (OQSF).

[12] As defined in GPE Standards (OQSF).

11.11 Primary Care Drug Therapy (PCDT)

The preceptor role should be fulfilled by a registered pharmacist who has completed the PCDT supplementary training, has recorded their PCDT supplementary training with Council, and is in possession of a valid Section 22A(15) permit issued by the DoH, or an authorised medical practitioner, with an MBChB degree or equivalent and registered as such with the HPCSA.

11.12 Immunisation and Injection Technique

The preceptor role should be fulfilled by a registered pharmacist competent to provide immunisation and injection services, a professional nurse registered as such with SANC, or a medical practitioner registered as such with the HPCSA.

11.13 Pharmacist-Initiated Management of Antiretroviral Therapy (PIMART)

The preceptor role should be fulfilled by: a registered pharmacist who has a Section 22(A)15 permit for PIMART recorded with Council; a person, with an MBChB degree, registered as a medical practitioner with HPCSA with prior experience or an additional qualification in HIV management; or a nurse practitioner registered as a professional nurse with SANC who is approved to practise NIMART.

12. WORK-BASED LEARNING (WBL) STUDY GUIDES FOR STUDENTS AND PRECEPTORS

A comprehensive study guide must be available for both the preceptor and the student. The study guide must lead the student through the WBL process and should integrate all required activities.

The minimum content required for the preceptor guide should include, but may not be limited to:

(a) Outcomes to be measured – if outcomes for the WBL component are not stipulated in the qualification documents, the provider must develop appropriate outcomes;

(b) Provider responsibilities;

(c) Preceptor responsibilities;

(d) Student responsibilities;

(e) Standards for required performance by students;

(f) Guidance on the evaluation of students;

(g) Guidance on handling underperforming students;

(h) Appeal process;

(i) Procedure for student absence from the workplace; and

(j) Provider liaison person contact details.

The minimum content required for the student study guide should include, but is not limited to:

(a) Outcomes to be measured – if outcomes for the WBL component are not stipulated in the qualification documents, the provider must develop appropriate outcomes;

(b) Student responsibilities;

(c) Student required activities;

(d) Standards for required performance by students;

(e) Guidance on the evaluation of students;

(f) Appeal process;

(g) Procedure for student absence from the workplace;

(h) Professional behaviour in the workplace; and

(i) Provider liaison person contact details.

The preceptor must be provided with copies of both the preceptor guide and the student study guide.

13. ORIENTATION/TRAINING FOR STUDENTS AND PRECEPTORS

Students and preceptors must receive orientation/training prior to the commencement of the WBL placement. The training can be delivered face-to-face or online.

The minimum content for the preceptor training should include, but is not limited to:

(a) Preceptor role and responsibilities;

(b) Expected outcomes;

(c) Assessment practices;

(d) Time to be spent at the placement site by the student;

(e) How to deal with student absences from the workplace;

(f) Appeal and grievance processes;

(g) Consequences of under/non-performance; and

(h) Disciplinary procedures.

The minimum content for the student training should include, but is not limited to:

(a) Dress code and professional behaviour;

(b) Scope of practice;

(c) Patient and data confidentiality;

(d) Relevant legislation;

(e) Expected outcomes;

(f) Assessment processes;

(g) Time to be spent at the placement site by the students;

(h) Absence from the workplace - processes and consequences;

(i) Appeal and grievance processes;

(j) Consequences of under/non-performance; and

(k) Contact details of the provider liaison person

The preceptor should be given a copy of the student training material.

The preceptor must orientate the student to the workplace during the first day of the placement.

14. WORK-BASED LEARNING (WBL) ASSESSMENT

WBL must be properly documented, and evidence of activities must be available (i.e. completed logbooks which have been signed off).

Assessment of WBL must be designed by the provider and should be administered by the preceptor or the provider. The assessments and time frames will be conducted uniformly as per the specific qualification and approved within each curriculum. The preceptor should provide feedback to the student following the assessment process. Alternatively, all assessments may be undertaken by the provider if the provider so decides. However, such provider-administered assessment of WBL must take place in the workplace. Final confirmation of competence or not yet competent must be undertaken by the provider, whether the assessment is administered by the preceptor or the provider. Assessments should be designed to ensure that the assessment is not time consuming to administer.

15. REMUNERATION FOR STUDENTS

The placement site should not financially remunerate the student for time spent in the workplace for the hours stipulated by Council. If the placement site wishes to further employ a student, a separate agreement between the workplace and the student should be in place.

16. FINANCIAL CONSIDERATIONS

It is the provider’s responsibility to ensure that a financial burden is not placed on the student because of travel and accommodation expenses relating to WBL. Any additional cost to the student must be in writing and communicated by the provider to the student in advance.

17. ENVIRONMENTAL FACTORS THAT MAY AFFECT WORK-BASED LEARNING PROCESSES

Natural disasters and events such as pandemics can impact the delivery of WBL. Council is cognisant of the impact of events such as this. When relevant, Council will liaise with providers regarding the impact and possible methods to manage the resultant disruption of WBL.

18. VACCINATION STATUS

Council strongly recommends that all students and provider staff placed in clinical sites for WBL should be immunised (either through vaccination or naturally acquired immunity) against the following illnesses:

(a) COVID-19;

(b) Hepatitis A;

(c) Hepatitis B;

(d) Influenza;

(e) Measles, Mumps and Rubella;

(f) Meningococcal meningitis;

(g) Pneumococcal disease (for students with a history of asthma, smoking, diabetes, liver disease or immune suppression);

(h) Polio;

(i) Tetanus, Diphtheria and Pertussis; and

(j) Varicella.

Neither the placement site nor the provider will be responsible for a student who may contract any vaccine-preventable diseases during the WBL period.

19. SOUTH AFRICAN PHARMACY COUNCIL REGISTRATION AND PROFESSIONAL INDEMNITY COVER

All students completing WBL placements must be registered with Council and must be in possession of professional indemnity cover. It is the student's responsibility to obtain professional indemnity cover, and providers should ensure that students possess an indemnity cover prior to placing them.

20. ANNUAL FEEDBACK ON WORK-BASED LEARNING (WBL)

At the end of the annual WBL cycle, feedback should be obtained from all parties involved – students and preceptors, and possibly from placement site management and provider staff involved in WBL placements. The information derived from the

feedback questionnaires[13] should be used by the provider to review and update the WBL processes.

Annual amalgamated feedback from students (with identifiers removed) should be provided to the preceptors.

[13] See Addendum B for suggested topics for feedback questionnaires on WBL.

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ADDENDUM A

CRITERIA FOR ACCREDITATION: PRIMARY CARE DRUG THERAPY: SECTION 10

The portfolio must contain at least 200 patient examinations and should include at least the following number of patient examinations per condition:

Section (As per PHC STG & EML Chapters)	Conditions	Number of health examinations
1	Dental and oral	Min. 5
2	Gastro-intestinal	Min. 20
3	Blood and nutrition	Min. 10
4	Cardiovascular	Min. 20
5	Skin	Min. 5
6	Obstetrics and Gynaecology	Min. 10
7	Family planning (Reproductive Health)	Min. 10
8	Kidney and urology	Min. 20
9	Endocrine	Min. 5
10	Infections and related conditions	Min. 10
11	HIV	Min. 10
12	Sexually transmitted diseases[14]	Min. 10
13	Immunisation	Min. 10
14	Musculoskeletal	Min. 5
15	Central nervous system	Min. 5
16	Mental health	Min. 5
17	Respiratory	Min. 20
18	Eye	Min. 10
19	Ear, nose and throat	Min. 20
20	Pain	Min. 5
21	Trauma and emergencies	Min. 5

[14] Syndromic STI diagnosis and treatment, no genitourinary examination is allowed, as it does not form part of the scope of practice of a PCDT pharmacist.

ADDENDUM B

Suggested topics for the preceptor feedback questionnaire:

(a) Logistics
    (i) Sufficient warning/reminder of upcoming placements
    (ii) Timing of placements
    (iii) Communication
(b) Student performance
    (i) Preparedness for placement
    (ii) Sufficient background knowledge
    (iii) Suitability of required activities
    (iv) Attitude
(c) Assessment processes
    (i) Ease of use
    (ii) Time to complete
    (iii) Effectiveness
(d) General
    (i) Suggestions to improve the process

Suggested topics for the student questionnaire:

(a) Placement selection
    (i) Process effective
    (ii) Timeous provision of information on placement site
    (iii) Timing of placement
(b) Preceptor role
    (i) Accessibility of preceptor
    (ii) Level of mentoring provided by preceptor
    (iii) Conducting assessments
    (iv) Feedback received from the preceptor
(c) Required activities
    (i) Provide scope for learning
    (ii) Clear instructions and outcomes
    (iii) Achievable in the placement environment
(d) Assessment processes
    (i) Transparent process
    (ii) Feedback on assessment received
(e) General
    (i) Suggestions to improve the process

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