

BOARD NOTICE 82 OF 2020

THE SOUTH AFRICAN PHARMACY COUNCIL

GUIDANCE DOCUMENT FOR CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

The South African Pharmacy Council hereby publishes for implementation, the **GUIDANCE DOCUMENT FOR CONTINUING PROFESSIONAL DEVELOPMENT (CPD)** in terms of Regulation 5(1) of the *Regulations relating to continuing professional development* (GNR 668, published on 17 May 2019).

SCHEDULE

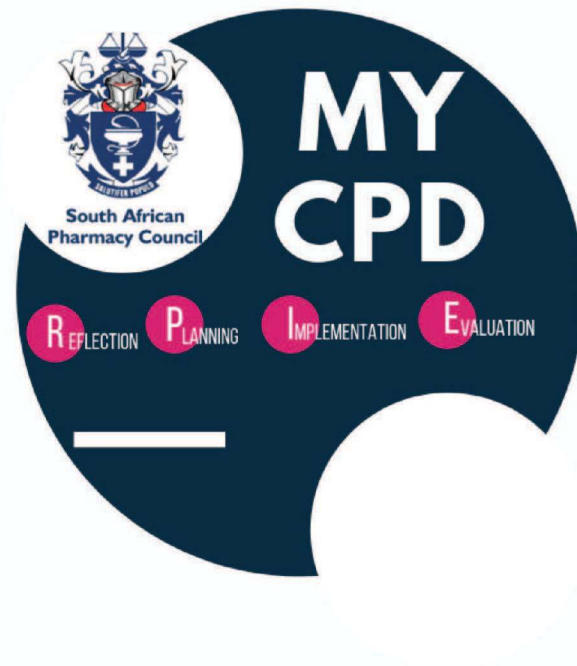
(a) Guidance document for continuing professional development (CPD).

In this notice "the Act" shall mean the Pharmacy Act, 53 of 1974 (as amended), and any expression to which a meaning has been assigned in the Act shall bear such meaning.



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REGISTRAR

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GUIDANCE DOCUMENT FOR CONTINUING PROFESSIONAL DEVELOPMENT (CPD) FOR PERSONS REGISTERED WITH THE SOUTH AFRICAN PHARMACY COUNCIL

Issued by the South African Pharmacy Council
In the interest of accessible quality pharmaceutical services

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1. DEFINITIONS

“**Act**” means the Pharmacy Act, 53 of 1974;

“**Assessment**” means a process of measuring compliance with the requirements of Council relating to participation and recording of activities for purposes of continuing professional development in accordance with the requirements of the *Regulations relating to continuing professional development*, 2019 (CPD Regulations);

“**Continuing professional development**” means the process by which registered persons maintain and enhance their competence throughout their professional careers, and encompasses a range of activities including continuing education and supplementary training;

“**Continuing professional development committee**” means a committee appointed by Council in terms of Section 4(o) of the Act to deal with matters relating to continuing professional development;

“**Continuing professional development system**” means the system provided by Council that enables registered persons to record their continuing professional development activities as provided for in the CPD Regulations;

“**Council**” refers to the South African Pharmacy Council;

“**CPD Regulations**” means the *Regulations relating to continuing professional development* (GNR. 668, published on 17 May 2019);

“**Deferment**” means formal permission granted by the Council on the recommendation of the Continuing Professional Development Committee to defer a registered person from compliance with the requirements relating to continuing professional development;

“**Domain**” represents an organised cluster of competencies within a framework;

“**GxP**” a general abbreviation for quality guidelines, with the “**x**” denoting the field to which the guidelines apply, such manufacturing (**GMP**), clinical (**GCP**), pharmacy (**GPP**), laboratory (**GLP**), storage (**GSP**) and distribution (**GDP**) practices, amongst others;

“**Non-practising**” means the designation on the applicable register indicating that the registered person is currently not providing one or more of the services, or performing one or more of the acts, pertaining to the scope of practice of the category in which he or she is registered, or does not intend to provide such services or perform such acts;

“**Practising**” means the designation on the applicable register indicating that the registered person is currently providing one or more of the services, or performing one or more of the acts, pertaining to the scope of practice of the category in which he or she is registered, or intends to provide such services or perform such acts.

2. INTRODUCTION

- (a) The South African Pharmacy Council (hereafter referred to as "Council") has a statutory obligation in terms of Section 3 of the Pharmacy Act, 53 of 1974 to:
- (i) promote the provision of pharmaceutical care which complies with universal norms and values, in both the public and the private sector, with the goal of achieving definite therapeutic outcomes for the health and quality of life of a patient;
 - (ii) uphold and safeguard the rights of the general public to universally acceptable standards of pharmacy practice in both the public and the private sector; and
 - (iii) maintain and enhance the dignity of the pharmacy profession and the integrity of persons practising that profession;
- (b) Council resolved to introduce Continuing Professional Development (CPD) for registered persons to encourage and enhance career development and safeguard the rights of the general public to universally acceptable standards of pharmacy practice;
- (c) The submission, acceptance and assessment of CPD activities will be regulated in terms of the Pharmacy Act, 1974, and the *Regulations relating to continuing professional development* (CPD Regulations);
- (d) Registered persons will be required to submit a record of their CPD activities in accordance with the CPD cycle. The CPD system will be used for the submission of details of CPD activities;
- (e) Registered persons will be required to keep copies of their own personal electronic portfolio of evidence, which Council may request from time to time;
- (f) Council will assess submissions for compliance with the requirements relating to participation in and recording of CPD activities;
- (g) A competency (*plural* competencies) represents the individual qualities or attributes of professional activity (the how of performance). These are learned behaviours and are thus able to be effectively incorporated into developmental programmes that require practitioners to apply learned behaviours. Since competency standards are developed with a focus on performance, they facilitate identification of the aspects of performance in the workplace and provide the best means to deduce professional competence. Competency is a broad concept that includes all aspects of practice, including:
- (i) skills to perform particular tasks;
 - (ii) managing a number of different tasks/activities within an occupation or profession;
 - (iii) responding to problems and non-routine events; and

- (iv) dealing with all aspects of the workplace including working with others;
- (h) Competence to practise will not be assessed but registered persons (except for pharmacist interns) are reminded that they have an ethical obligation to ensure that they are competent to practise.

3. POWERS OF THE CPD COMMITTEE

The powers of the CPD Committee as approved by Council are:

- (i) to promote awareness of the need for CPD;
- (ii) to liaise with stakeholders on matters relating to CPD;
- (iii) to establish, develop and maintain the requirements and tools relating to participation in and the recording of CPD activities;
- (iv) to set the criteria for the assessment of compliance with the requirements for CPD;
- (v) to set the criteria for the appointment of assessors for the purpose of assessing the participation and recording of CPD activities;
- (vi) to adjudicate requests for deferment from the requirements for compliance with CPD;
- (vii) to assess compliance with the requirements and criteria relating to participation and recording of CPD activities;
- (viii) to implement the quality assurance of processes relating to CPD; and
- (ix) to set standards for the approval of CPD providers, CPD courses and activities.

4. WHY IS CPD NECESSARY?

Registered persons have an obligation to promote the provision of pharmaceutical care which complies with universal norms and values, with the goal of achieving definite therapeutic outcomes for the health and quality of life of patients, by ensuring that the general public receives maximum therapeutic benefits from medicines, medical devices and in-vitro diagnostic medical devices (IVD).

CPD will ensure that the professional practice standards of registered persons are maintained and implemented so as to safeguard the public and enhance the dignity of the profession and the integrity of persons practising the profession.

5. WHO MUST PARTICIPATE IN CPD?

Council will periodically publish the categories of registered persons required to record CPD activities, by way of Board Notice.

- (a) Participation in CPD activities is mandatory for all persons registered with Council as follows:

- (i) Pharmacist Interns;
 - (ii) Community service pharmacists;
 - (iii) Pharmacists; and
 - (iv) Specialist pharmacists;
- (b) Requirements for participation in CPD activities shall be published, by way of Board Notice, in due course for:
- (i) Pharmacy support personnel (Pharmacist's Assistant (Basic and Post-Basic));
- (c) Registered persons with the following additional roles **shall be designated as "practising"** and must meet the CPD requirements:
- (i) Tutors and any pharmacist involved in the training of any category of registered person;
 - (ii) Responsible pharmacists;
 - (iii) Inspection Officers;
 - (iv) Panel members conducting accreditation and monitoring visits for Higher Education Institutions and Skills Development Providers;
 - (v) Assessors, examiners and moderators;
 - (vi) Pharmacists who are evaluators of courses;
 - (vii) Council members who are pharmacists; and
 - (viii) Pharmacists employed by the Office of the Registrar.
- (d) All accredited providers of Pharmacy education (Higher Education and Skills Development), where such education and training give rise to a qualification for purposes of registration, are required to prepare pharmacy learners/students to participate in and record CPD activities.

6. ANNUAL DECLARATION

- (a) A person registered in a category which is required by Council to record CPD activities must, on an annual basis, make a declaration to Council as to whether he or she wishes to be designated as practising or non-practising;
- (b) In addition, the annual declaration will provide a summary of a person's qualifications and area of practice/speciality and allow the registered person an opportunity to reflect on the activities that form part of their daily practice and future development. Registered persons must identify the competencies required for their daily practice (**Annexure A**).

7. DESIGNATION ON THE REGISTER

Practising

- (a) All first-time applicants and registered persons will be designated as practising until such time that they declare they are non-practising or fail to comply with CPD Regulations;
- (b) If a person has not submitted CPD activities for the preceding year by 1 May of the following year, he/she will be automatically designated as non-practising;
- (c) The following categories of registered persons will be considered practising and will be obliged to meet the CPD requirements:
 - (i) Tutors and any pharmacist involved in the training of any category of registered person;
 - (ii) Responsible pharmacists;
 - (iii) Inspection officers;
 - (iv) Assessors, examiners, moderators;
 - (v) Panel members conducting accreditation and monitoring visits for Higher Education Institutions and Skills Development Providers;
 - (vi) Pharmacists who are evaluators of courses;
 - (vii) Council members who are pharmacists; and
 - (viii) Pharmacists who are employed by the Office of the Registrar;
- (d) A person who is designated on the register as practising will be able to change their designation online to non-practising;
- (e) Persons who have declared that they are practising will be issued with a proof of the practising status annually.

Non-practising

- (a) All the registered persons who do not meet CPD requirements will be designated as non-practising;
- (b) The following will apply to persons who have been designated or who have declared themselves as non-practising:
 - (i) they will be issued with a proof of the non-practising status annually;
 - (ii) they will have access to the online annual declaration and CPD system; and
 - (iii) they will be designated as 'non-practising' on Council's website;

- (c) The following procedure and conditions will apply for a person wishing to change designation from non-practising to practising:
 - (i) a duly completed application form for the change of designation from non-practising to practising must be submitted to the Registrar;
 - (ii) payment of the prescribed fee;
 - (iii) the application must be received at least 30 days prior to commencing the performance of functions that fall within the scope of practice of the category in which such a person is registered;
 - (iv) in cases where the Registrar does not approve the application and an appeal is received, such an appeal will be forwarded to Council for consideration;
 - (v) each application will be evaluated and treated on its own merit.

Inactive

- (a) Persons removed from the register in terms of Section 23 and Section 45(1)(b) and (c) of the Pharmacy Act, 53 of 1974;
- (b) The name of a person whose name has, in terms of the above-mentioned sections, been removed from the register, or an entry removed from the register, shall be restored to the register by the Registrar upon:
 - (i) the person applying on the prescribed form for such restoration;
 - (ii) paying the fee prescribed in respect of such restoration (if any); and
 - (iii) complying with the restoration requirements as determined by Council in the Guidelines for Restoration as published by Council from time to time;
- (c) Persons who wish to be designated as practising after restoration may be required to comply with certain conditions as contained in the Guidelines for Restoration determined by Council from time to time;
- (d) All persons whose names were removed and subsequently restored to the registers within a twelve (12) months period will be restored with the designation they assumed prior to the erasure date.

8. ACCESS TO CPD RECORDING SYSTEM

- (a) All registered persons will have access to the CPD recording system; and
- (b) Persons whose names have been removed from Council registers will not have access to the CPD recording system.

9. REQUIREMENTS RELATING TO CPD FOR PERSONS REGISTERED WITH THE COUNCIL

- (a) To comply with CPD requirements each registered person needs to submit at least six (6) CPD activities on an annual basis. Council may review the number of activities required annually from time to time (See Regulation 5(1) of the CPD Regulations);
- (b) In cases where a person has been designated as practising on the applicable register for a portion of the period, they will be required to complete the pro-rated number of CPD activities;
- (c) Registered persons are urged to keep their portfolio of evidence in electronic format and not upload their evidence on the CPD online system unless specifically requested to do so;
- (d) Council may at any time require evidence for purposes of assessment and may request registered persons individually to electronically upload their evidence;
- (e) All registered persons who are designated as practising will be required to participate in CPD by following the CPD cycle as prescribed by Council;
- (f) All the required entries relating to a person's CPD activities for the current year (1 January to 31 December) must be submitted by 31 December of that year;
- (g) A grace period ending on 30 April of the subsequent year of submission will be allowed;
- (h) Council will monitor the level of activity of persons required to record CPD activities on an ongoing basis;
- (i) An audit trail will be available for practising persons to view the history of their data capturing;
- (j) Council will send CPD entry reminders to all practising persons via SMS/email.

10. THE CPD CYCLE

- (a) **The CPD cycle assists registered person to maintain, update and develop their competencies by:**
 - Identifying individual learning needs;
 - Recognising the learning that may occur in the workplace;
 - Acknowledging that people learn in a variety of ways;
 - Planning and prioritising how to address the learning activities;
 - Choosing a preferred learning style to gain knowledge;

- Evaluating the outcome of the learning activity; and
 - Applying knowledge to the individual practice situation.
- (b) **The CPD cycle is a process that involves four steps, namely:**
- Step 1: Reflection on practice** (answers the questions: *What do I need to know? What do I need to be able to do?*)
- Step 2: Planning** (answers the question: *How can I learn?*)
- Step 3: Implementation** (describes the action taken)
- Step 4: Evaluation or reflection on learning** (answers the questions: *What have I learnt? How is it benefitting my practice?*).
- (c) Council introduced a two-step CPD cycle to allow registered persons to complete only the implementation and the evaluations steps of the CPD cycle. Registered persons are allowed to submit a maximum of three (3) activities using the two-step CPD cycle per annum.

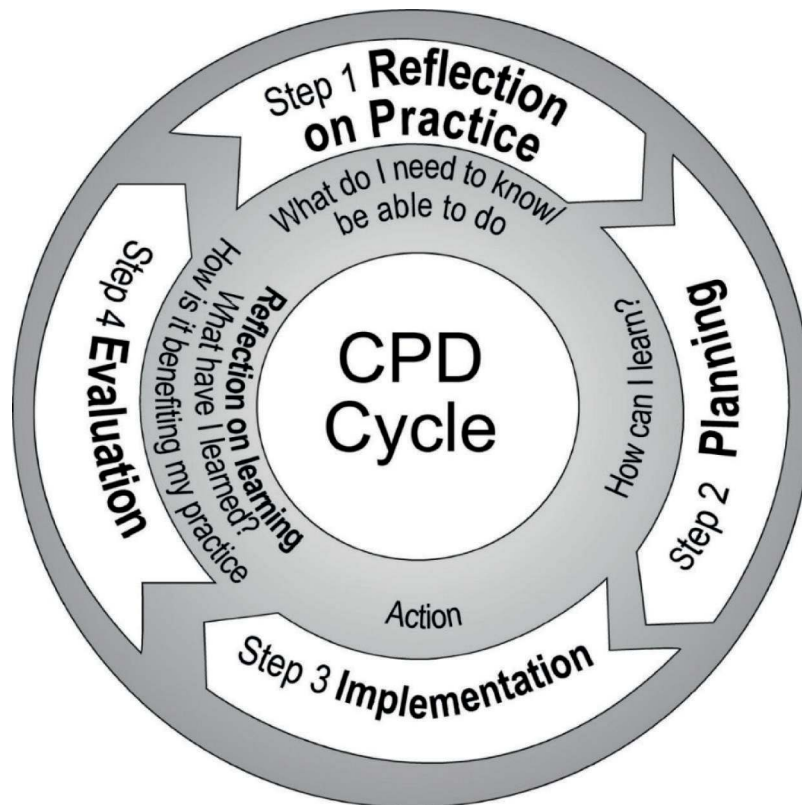


Figure 1: CPD cycle

STEP 1: Reflection on practice

- (a) A key part of CPD is the identification of learning needs through reflection on practice;
- (b) Registered persons in each practice setting are required to accept responsibility for their self-development and assessment of continued competence throughout their professional working lives;
- (c) Registered persons are encouraged to identify the learning needs relevant to their existing and future roles in the profession and, through CPD, update their knowledge, skills and behaviours;
- (d) Council developed the following tools of reference to assist in determining the learning needs:
 - (i) Domains and Competency Reflection Plan (**Annexure A**): A competency framework consisting of six domains - domains represent an organised cluster of competencies within a framework; and
 - (ii) The Personal Development Plan (**Annexure B**): which may be used to analyse learning gaps and to link development, career and business plans to service needs and their delivery. Completion of a personal development plan will assist in the development of a CPD learning plan. This tool may be useful for any of the categories of persons registered with Council.

STEP 2: Planning

- (a) Registered persons must plan their development according to their identified learning needs and continually assess the impact of their achievements and progress on their practice;
- (b) Having identified the learning needs, the registered person should prioritise, taking into consideration the relevance, urgency and importance of the learning objectives;
- (c) The importance of the learning need will be determined by how frequently a registered person will use the acquired knowledge or skill in their work;
- (d) The Learning Plan (**Annexure C**) is designed to assist with the recording of planned learning activities.

STEP 3: Implementation

- (a) Registered persons will be required to record any learning events/activities undertaken;
- (b) The learning activities could include a wide range of activities including, self-study, attendance of journal clubs, lectures, symposia, courses and workshops, as well as formal education programmes;
- (c) In cases where a formal course, workshop or symposium has been attended, evidence of learning must be retained in the portfolio of evidence. Although this evidence will not be submitted on a regular basis, Council may ask for this evidence as part of the assessment process.

STEP 4: Evaluation – Reflection on learning

- (a) Evaluation is the step where the practising person:
 - (i) assesses the progress made towards achieving their learning objectives;
 - (ii) assesses what they have learnt and how they are able to apply the knowledge and skills gained;
 - (iii) assesses if the learning needs identified during the Reflection on Practice (Step 1) has been met; and
 - (iv) identifies further learning activities in an ongoing CPD cycle.

11. IMPLEMENTATION OF MANDATORY CPD FOR PERSONS REGISTERED WITH COUNCIL

- (a) Council resolved to implement CPD activities for registered persons to encourage and enhance career development and safeguard the rights of the general public to universally acceptable standards of pharmacy practice;
- (b) CPD activities will be regulated in terms of the Pharmacy Act, 1974, and the *Regulations relating to continuing professional development*;
- (c) Council will announce from time to time, by way of Board Notice, the categories of registered persons required to record CPD activities.

12. ASSESSMENT OF COMPLIANCE WITH THE REQUIREMENTS RELATING TO CPD

- (a) The assessments will be done as follows per category of registered persons:
 - (i) Pharmacy Students will be assessed in accordance with the provider requirements;
 - (ii) Pharmacist Interns' CPD activities will be assessed for competence to practice;

- (iii) all other registered persons will be assessed for compliance to the requirements of CPD.
- (b) The assessment of a registered persons' CPD activities for the preceding year will commence on 1 May of the following year.

13. ASSESSMENT OF COMPETENCE OF REGISTERED PERSONS

- (a) Council may assess the competence of any registered person, or person wishing to be restored to the register, by assessing CPD activities submitted by such person;
- (b) Council may, on an annual basis, and in each category, perform assessments on a sample of registered persons designated as practising, as follows:
 - (i) The percentage of persons to be assessed will be determined by Council on an annual basis and may be increased as the capacity to conduct assessments increases;
 - (ii) Persons who have changed their designation from non-practising to practising within the last year will be included in the group of persons to be assessed;
 - (iii) The activities will be assessed using a set of assessment criteria developed as a tool to assess the level of competence of such sample;
 - (iv) Assessors will be appointed by Council in terms of the *Regulations relating to pharmacy education and training* to assess the competence of the person using the CPD activities submitted by registered persons based on assessment criteria;
 - (v) Council will monitor the assessor's performance to ensure they remain fair and consistent in the assessment of CPD activities;
 - (vi) The assessment process will be subject to the normal process of moderation and verification. Sample sizes for moderation and verification will be determined by Council;
- (c) Where necessary for purposes of assessing competency, Council may require a practising person to submit their portfolio of evidence for assessment;
- (d) In the event that a person is found not to be competent based on their submission of CPD activities, the CPD committee may:
 - (i) request further assessment;
 - (ii) grant the person deferment for a period of time as determined by the committee, subject to compliance with conditions which may be determined by Council;
 - (iii) require the person to follow a support or remedial programme; or

(iv) require the person to be subjected to another method of assessment.

14. RECOMMENDED GRID FOR SELF/PEER ASSESSMENT

Self-assessments and peer review are voluntary and are meant to ensure the quality of CPD activities.

STEP 1: REFLECTION	ASSESSMENT CRITERIA	SELF	PEER
Domains and competency standards	The learning title is linked to the competency and associated behavioural statement		
Learning title	There is a title, which is descriptive and relevant to the behavioural statement. The title is relevant to what the registered person needs to learn and is not the same as the competency or domain		
Describe the learning need	There is a description of the identified learning need and what the registered person hopes to achieve in addressing the learning need		
Comments:			

STEP 2: PLANNING	ASSESSMENT CRITERIA	SELF	PEER
Start date	The date is current, i.e. during the current year		
Brief description	The registered person must describe the plan and provide a brief description of the reasoning behind the planned selection		
Comments:			

STEP 3: IMPLEMENTATION	ASSESSMENT CRITERIA	SELF	PEER
Supporting documentation – evidence	At the request of Council, registered persons will be required to upload evidence or supporting documents. The evidence must be: <ul style="list-style-type: none"> • valid – relevant to the outcome • current – collected during the current year 		
Achievement date	The achievement date must be current		
Description	A brief description of the learning activity and its relevance to the evidence		
Comments:			

STEP 4: EVALUATION	ASSESSMENT CRITERIA	SELF	PEER
Description	Provide a description of how the learning has been applied and feedback on the impact on practice. Provide examples of where the knowledge and skills acquired have been applied		
Comments:			
Overall Comments			

15. NON-COMPLIANCE WITH CPD REQUIREMENTS

Non-compliance with CPD requirements will be managed in terms of Regulation 6 of the *Regulations relating to continuing professional development*, 2019.

16. APPEALS

- (a) A person who is aggrieved by a decision of Council in terms of the CPD Regulations may, in writing and within 60 days of such a decision having come to the knowledge of that person, appeal against such decision to an appeals committee appointed in terms of Regulation 7(3);
- (b) An appeal must clearly state-
 - (i) the decision against which the appeal is lodged; and
 - (ii) the grounds on which the appeal is lodged.
- (c) The Registrar must appoint an appeals committee that consists of no fewer than three persons, constituted as follows:
 - (i) The chairperson, appointed on account of his or her knowledge of the law; and
 - (ii) two other members appointed on account of their skills and knowledge of pharmacy practice.
- (d) A member of an appeals committee may not have a direct or indirect interest in the affairs of the appellant or respondent.

17. DEFERMENT

- (a) A person registered with Council may apply for deferment from compliance with the CPD requirements for reasons acceptable to Council. Council may consider reasons such as (but not limited to):
 - (i) Temporary incapacity as defined in the Compensation for Occupational Injuries and Diseases Act, 130 of 1993;
 - (ii) A person having no access to the online CPD recording system by virtue of being suspended;
 - (iii) A person who has been deployed on assignment whereby the performance of certain functions may lead to a breach of national security;
 - (iv) National deployment to a country where there is no internet connection;
 - (v) Practising in another country where there is mandatory CPD, on condition that the person submits documentary evidence showing they were compliant with the CPD requirements of that country. If CPD is not mandatory in the country of practice, registered persons will be required to comply with Council's CPD requirements;

- (vi) A person who cannot submit all required entries due to illness and unforeseen circumstances; and
 - (vii) Other reasons substantiated by the applicant and deemed fit by Council.
- (b) Such applications may be prospective or retrospective;
 - (c) Such applications will be evaluated on merit, upon submission of the required evidence;
 - (d) Deferment may only be granted by Council, for a period not exceeding twelve (12) months;
 - (e) Any person who wishes to apply for deferment for a period exceeding twelve (12) months will be advised to move to the register of non-practising persons; and
 - (f) Applications for potential deferment will be subject to application criteria as Council may determine from time to time.

18. CPD LEARNING GUIDE

- (a) Recorded CPD activities should be relevant to the practice of the registered person or be concerned with or encourage and enhance career development;
- (b) The activities must be current within the period of exposure to the learning activity and should ideally be spread evenly throughout the year;
- (c) The following are examples of different types of learning activities:
 - (i) Non-measurable learning activities: These are learning activities undertaken or presented on a once-off, non-continuous basis and do not necessarily have a clearly measurable outcome.
 - (aa) Self-study;
 - (bb) Written assignments submitted to a non-accredited organisation;
 - (cc) Events presented by a non-accredited organisation or individual;
 - (dd) Breakfast meetings, presentations or journal clubs;
 - (ee) Case study discussions;
 - (ff) Formally or informally organised special purpose teaching/learning ward rounds; and
 - (gg) Conferences, symposia, refresher courses, short courses without a measurable outcome.

- (ii) Measurable/structured learning programmes: These are learning activities presented by an accredited service provider or training institution, carried out over a period of not more than six months.
 - (aa) Certificate received for participation in a short course, multiple-choice questions in a journal, including an electronic journal, with a pass rate of 60% from an accredited institution or provider;
 - (bb) Principal author or co-author of a peer-reviewed publication or chapter in a book;
 - (cc) Review of an article/chapter in a book;
 - (dd) Keynote speaker at an accredited conference;
 - (ee) Guest/occasional lecturer to present an accredited activity; and
 - (ff) External examiner of an undergraduate examination paper, or a master's or doctoral thesis on completion.
- (iii) Structured learning / formal programmes: This includes learning activities that are planned, recorded and/or presented by an accredited training institution, or evaluated by an accredited assessor, with a measurable outcome. These are learning activities performed over a period exceeding six months.
 - (aa) Supplementary courses;
 - (bb) Diploma; and
 - (cc) Postgraduate studies undertaken over a period of not less than seven months.

19. LIST OF ANNEXURES

- (a) Annexure A – Domains and Competency Reflection Plan
- (b) Annexure B – Personal Development Plan
- (c) Annexure C – Learning Plan

Annexure A - Domains and Competency Reflection Plan

Summary of domains and competencies

Introduction

- (a) Competency standards have been developed as a tool to help professionals assess their own learning needs and to assist with identifying areas, within current or future practice, that may require modification and/or improvement in knowledge, skills, attitudes and values;
- (b) Gaps in knowledge, skills, attitudes and values are identified by comparing personal knowledge, skills, attitudes and values with those required by the competency standards;
- (c) Pharmacists in each field of practice need to accept responsibility for the self-assessment and maintenance of their competency throughout their professional lives;
- (d) As pharmacists practise in a variety of practice settings, each professional must evaluate the domains and competencies in accordance with their category of practice;
- (e) A new competency framework consisting of six domains and several competencies suitable for the South African context was developed;
- (f) A domain represents an organised cluster of competencies within a framework;
- (g) It is expected that a pharmacist at a higher level of practice, in addition to the behaviours associated with that level, must also exhibit the behaviours from the lower level(s) of practice;
- (h) The competency standards and associated behavioural statements are presented within the six domains;
- (i) This tool was developed as a guidance tool; and, as such, it is not compulsory.

DOMAIN 1: Public Health

Introduction

Domain 1 covers public health and includes competencies that are required in both the public and private healthcare sectors to promote health and wellness through the provision of healthcare information and education to the public and other members of the healthcare team.

The provision of medicines and healthcare information and education forms an integral part of the scope of practice of a pharmacist. The availability of specialised pharmaceutical knowledge at all levels of care, including primary healthcare (PHC), is an important component for the delivery of effective and efficient pharmaceutical services.

The domain covers competencies that are required to promote health, promote and monitor adherence and apply pharmacoeconomic principles.

The public health domain competencies are:

- 1.1 Promotion of health and wellness
- 1.2 Medicines information
- 1.3 Professional and health advocacy
- 1.4 Pharmacoeconomics
- 1.5 Epidemics and disaster management
- 1.6 Primary healthcare

The behavioural aspects must be demonstrated as follows:

1.1 Promotion of health and wellness

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Advise on health promotion, disease prevention and control, and healthy lifestyles.	Assess the healthcare needs of communities considering the cultural and social context and public health priorities in South Africa.	Collaborate with other healthcare professionals in the planning, development and implementation of evidence-based public health campaigns.
Participate in public health campaigns.	Assist and encourage communities to make use of available health resources.	Incorporate national health and medicines policy and guidelines into organisational practices.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

1.2 Medicines information

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Participate in pharmaceutical and therapeutics committees.	Play an advisory role in pharmaceutical and therapeutics committees.	Play a leading role in pharmaceutical and therapeutics committees.
Participate in antimicrobial stewardship.	Play an advisory role in antimicrobial stewardship.	Play a leading role in an antimicrobial stewardship team.
Apply principles of palliative care for the management of patients with life-limiting conditions.	Recognise and manage the changing pharmacological and pharmaceutical care needs of patients with life-limiting conditions.	Develop and review policies to support the application of the palliative care approach in medicine management.
Identify and use medicine information centres and relevant evidence-based sources of information for medicines.	Identify and use medicine information centres and relevant evidence-based sources of information for medicines.	Interpret and use relevant evidence-based sources when consulting on advanced medicine information queries.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

1.3 Professional and health advocacy

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Participate as a pharmacist within a healthcare team.	Promote the role of the pharmacist within healthcare teams.	Act as a patient advocate to ensure that pharmaceutical care is optimised.
Apply health policy and procedures in practice.	Participate in the implementation of health policy.	Contribute to the development and review of health policy.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

1.4 Pharmacoeconomics

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Monitor and encourage adherence to formularies and guidelines.	Report on adherence to formularies.	Evaluate reports and develop interventions to improve formularies and guidelines.
Apply developed interventions to ensure the cost-effective use of medicines.	Collate reliable information and conduct analysis to ensure the cost-effective use of medicines.	Develop interventions to improve the cost-effective use of medicines.
Participate in collecting pharmaceutical data to determine if pharmaceutical use is in accordance with the burden of disease.	Compile and analyse reports such as Defined Daily Doses (DDDs) and ABC analysis to determine if pharmaceutical use is in accordance with the burden of disease.	Develop reporting systems to determine whether pharmaceutical services are in accordance with the burden of disease.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

1.5 Epidemics and disaster management

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Assist in the implementation of the outbreak/disaster plan.	Participate as a member of a disease outbreak/disaster response team.	Implement, monitor and evaluate the rollout of an outbreak/disaster pharmaceutical response plan.
Identify disease trends in your pharmacy practice setting (patient-based).	Identify and report disease trends in the community to the relevant authority.	Identify and report the incidence and prevalence of disease in the population with detection of source and cause of infectious diseases.
Identify threats for outbreak/disaster in your pharmacy practice setting (patient-based).	Identify threats for the outbreak of disease/disasters in the community.	Identify possible threats for the outbreak of disease/disasters in the population.
Assist in managing outbreaks/disasters.	Implement activities aimed at managing outbreaks/disasters.	Plan actions and prepare for possible outbreaks/disasters.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

1.6 Primary healthcare

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Engage in lifestyle changes in a multidisciplinary setting, that may prevent communicable and non-communicable diseases and/or improve therapeutic outcomes.	Work in a multidisciplinary healthcare team to optimise therapeutic outcomes.	Play a leading role in a multidisciplinary healthcare team to optimise therapeutic outcomes.
Participate in screening and disease prevention programmes and campaigns.	Advocate for lifestyle changes that may prevent communicable and non-communicable diseases and/or improve the outcomes of medicinal therapy.	Advocate for lifestyle changes that may prevent communicable and non-communicable diseases and/or improve the outcomes of medicinal therapy.
Advise patients on self-care and adherence to treatment regimens.	Implement strategies to encourage patients to take responsibility for their own health and adherence to treatment guidelines.	Develop strategies to encourage patients to take responsibility for their own health and adherence to treatment guidelines.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

DOMAIN 2: SAFE AND RATIONAL USE OF MEDICINES AND MEDICAL DEVICES

INTRODUCTION

Domain 2 covers the rational use of medicines, a concept adopted by the World Health Organisation (WHO), which advocates that patients receive medicines and medical devices that are:

- appropriate to their clinical needs;
- in doses that meet individual requirements;
- for an adequate period; and
- cost-effective for the patient and community.

Participation of the pharmacist in the promotion of rational use of medicines will contribute to improved access to quality medicines and other pharmaceutical services. Pharmacists have a professional obligation to the public to ensure an adequate and reliable supply of safe, cost-effective medicines and medical devices of acceptable quality as prescribed in the National Drug Policy (1996). Patients must be educated in respect of the correct use of medical devices that meet all regulatory, safety and performance requirements. Patients and healthcare workers are encouraged to report all medicine safety related complaints, and pharmacists should monitor, record and process such complaints.

In the domain of safe and rational use of medicines and medical devices, effective verbal and non-verbal methods of communication with patients and other healthcare professionals, are essential competencies. Pharmacists require these competencies to improve patient health outcomes and to build and maintain professional working relationships within a healthcare team. This domain also encompasses activities such as pharmacist-initiated therapy (PIT), medicine utilisation reviews and use of evaluations and monitoring of therapeutic outcomes.

The competencies required in the domain for the safe and rational use of medicines and medical devices are:

- 2.1 Patient consultation
- 2.2 Patient counselling
- 2.3 Patient medicines review and management
- 2.4 Medicines and medical devices safety
- 2.5 Therapeutic outcome monitoring
- 2.6 Pharmacist-initiated therapy (PIT)
- 2.7 Pharmacovigilance
- 2.8 Clinical trials

The behavioural aspects must be demonstrated as follows:

2.1 Patient Consultation

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Undertake consultations in an appropriate setting with minimal interruption while maintaining verbal, auditory and personal privacy.	Undertake more complex consultations in an appropriate setting with minimal interruption while maintaining verbal, auditory and personal privacy.	Ensure that appropriate facilities are available to permit patient consultation.
Use appropriate communication and questioning techniques to gather relevant patient information on allopathic, complementary and alternative medicines and therapy use.	Provide accurate and evidence-based information on allopathic, complementary and alternative medicines and therapy use.	Provide guidance to pharmacists and pharmacy support personnel on allopathic, complementary and alternative medicines and therapy use, using evidence-based information.
Consult with a patient and/or caregiver to determine health needs in a culturally sensitive manner.	Implement protocols to ensure that all personnel maintain cultural sensitivity in all patient interactions.	Develop and review protocols to ensure that all personnel maintain cultural sensitivity in all patient interactions.
Identify the need for further information and/or referral to an appropriate healthcare provider/resource.	Implement protocols for referral in consultation with other members of the healthcare team.	Develop and review protocols for referral in consultation with other members of the healthcare team.
Where appropriate and after obtaining patient consent, use diagnostic aids and/or tests.	Implement protocols to ensure appropriate use/application of diagnostic aids and/or tests.	Develop and review protocols to ensure appropriate use/application of diagnostic aids and/or tests.
Where applicable, examine patient records to obtain patient medication and disease history.	Implement care plans based on patient records.	Develop and review a care plan based on patient records and monitor patient outcomes.
Maintain confidentiality of patient information in line with legislative requirements.	Manage the risk assessment plan relating to the breach of confidentiality of patient information in line with legislative requirements.	Develop and review the risk assessment plan relating to the breach of confidentiality of patient information in line with legislative requirements.
Keep and maintain appropriate records.	Implement procedures and protocols for document management and recordkeeping.	Develop and review procedures and protocols for document management and recordkeeping.
Do these Behavioral Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		

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Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Comment:		

2.2 Patient Counselling

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Establish existing understanding and knowledge of health conditions, medicines use for a patient and the need for counselling.	Formulate a counselling plan according to the needs of the patient to ensure the safe and effective use of medicines.	Ensure that all patients receive appropriate counselling that is in line with facility-specific protocols.
Counsel patients on the safe and rational use of medicines and medical devices (including selection, use, contraindications, storage, and side effects).	Implement systems to ensure that patient counselling is performed in accordance with GPP.	Develop and manage systems to ensure that patient counselling is performed in accordance with GPP.
Listen effectively, using active and reflective listening techniques.	Respond appropriately to more challenging or complex scenarios that require attentive listening.	Use advanced listening skills to differentiate or distinguish challenging and complex scenarios.
Use an appropriate counselling plan based on patient needs and ensure the safe and effective use of medicine.	Respond appropriately to more challenging or complex scenarios requiring patient counselling.	Develop and review counselling plan templates to ensure the safe and effective use of medicine.
Maximise opportunities for counselling and the provision of information and advice to patients.	Identify opportunities for counselling and the provision of information and advice to patients.	Create opportunities for counselling and the provision of information and advice to patients.
Communicate in a manner that demonstrates sensitivity to alternative customs and approaches to healthcare.	Implement communication techniques/systems that consider alternative customs and approaches to healthcare.	Develop communication techniques/systems that consider alternative customs and approaches to healthcare.
Use language, including verbal and nonverbal cues, that the patient is likely to understand.	Implement and monitor the use of a language policy that includes verbal and nonverbal cues that the patient is likely to understand.	Develop a language policy that includes verbal and nonverbal cues that the patient is likely to understand.
Where appropriate, use instructional aids.	Implement the use of instructional aids appropriately.	Develop instructional aids that can be used to maximise counselling.
Obtain feedback from the patient to confirm their understanding of the information provided during the counselling process.	Implement processes and procedures to obtain patient feedback regarding counselling.	Develop processes and procedures to obtain patient feedback in counselling.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

2.3 Patient medicine review and management

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Confirm patient adherence to a medicine regimen or treatment plan.	Encourage and facilitate patient adherence to a medicine regimen or treatment plan.	Identify, prioritise and resolve medicine management problems.
Assist with medicine utilisation reviews.	Perform medicine utilisation reviews, as appropriate, to ensure the rational use of medicine and positive clinical outcomes.	Recognise and manage trends associated with inappropriate medicine prescribing behaviour.
Liaise with the prescriber or other healthcare professionals	Liaise with the prescriber or other healthcare professionals to	Contribute to strategies to optimise patient medication management using clinical tools where appropriate.

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to ensure the optimal use of medicines.	implement a plan to ensure the optimal use of medicines.	
Use appropriate protocols to ensure cost-effective use of medicines and medical devices.	Use appropriate protocols to ensure cost-effective use of medicines and medical devices.	Develop protocols to ensure the cost-effective use of medicines and medical devices.
Identify patients requiring additional monitoring.	Recognise and advise on any additional patient monitoring required.	Recognise and advise on any additional patient monitoring required in complex scenarios.
Do these Behavioral Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

2.4 Medicine and medical device safety

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Report dispensing errors, side and adverse effects.	Implement developed protocols to avoid common dispensing errors such as 'look-alike' and 'sound-alike' medicines.	Develop protocols to avoid common dispensing errors such as 'look-alike' and 'sound-alike' medicines.
Keep abreast of emerging medicine safety information.	Implement and maintain a 'near misses' and error reporting system.	Disseminate information relating to medicine safety and alter practice accordingly.
Participate in prevention and resolution of medication errors.	Identify, record, act and report medication errors.	Review and interpret medication error reports to identify trends and implement appropriate corrective action.
Identify medicines, and medical devices with quality issues and report according to applicable policies.	Source medicines and medical devices of acceptable quality and standard, in accordance with relevant SOPs	Develop SOPs to ensure that medicines and medical devices are of acceptable quality and standard, and are sourced from licensed and approved suppliers.
Identify medicines and medical devices that are a high risk in respect of medication errors or that exhibit increased safety risks and take steps to minimise and mitigate the risk.	Implement developed systems and protocols to minimise and mitigate medication errors and adverse effects.	Develop systems and protocols to minimise and mitigate medication errors and adverse effects.
Store medicines and medical devices in a safe, secure, organised and systematic manner.	Implement developed systems to ensure safe, secure, organized and systematic storage of medicines and medical devices.	Develop systems to ensure safe, secure, organised and systematic storage of medicines and medical devices.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

2.5 Therapeutic outcome monitoring

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Monitor therapeutic outcomes.	Monitor and optimise therapeutic outcomes for more complex scenarios.	Ensure that protocols are in place to support the optimisation of therapeutic outcomes by pharmacists.
Consult with other healthcare professionals to optimise therapeutic outcomes.	Contribute to the PTC or at the formulary design level to optimize therapeutic outcomes.	Participate in the optimisation of therapeutic outcomes at PTC/formulary design level.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

2.6 Pharmacist initiated therapy (PIT)

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Assess and treat a patient based on objective and subjective signs and symptoms as guided by relevant legislation and within the scope of practice.	Ensure all medicine selection and advice provided reflects the best evidence and guidance.	Ensure that protocols are in place to facilitate supervision of pharmacy support personnel involved in pharmacist initiated therapy (PIT).
Discuss the use of appropriate medicines and obtain consensus from the patient, considering patient preferences, allergies and medical history.	Implement the guidelines and policies on the appropriate use of medicines.	Develop guidelines and policies for the appropriate use of medicines.
Document any intervention, including medicine supply, according to current legislative requirements.	Implement the developed pharmacist intervention documentation system.	Develop a pharmacist intervention documentation system.
Refer patients, when required, to an appropriate healthcare provider/resource.	Implement the referral system to an appropriate healthcare provider/resource.	Develop a patient referral system.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

2.7 Pharmacovigilance

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Monitor, receive, record and report quality defects, adverse drug reactions and events.	Manage pharmacovigilance activities and classify the events accordingly.	Design and implement interventions to prevent and minimise adverse drug events.
Perform post-marketing surveillance studies.	Compile reports of the post-marketing surveillance studies.	Review pharmacovigilance reports and report to the regulatory authority.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

2.8 Clinical Trials

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Apply master documents (e.g. SOPs) according to GxP.	Implement and monitor compliance inline with GxP.	Interpret guidelines, legislation and policies in line with GxP.
Compile master documents.	Review master documents.	Approve master documents.
Do these Behavioural Statements form part of my Current Practice?		
Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this		
Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

DOMAIN 3: SUPPLY OF MEDICINES AND MEDICAL DEVICES

INTRODUCTION

Domain 3 includes competencies required to address the supply of medicines and medical devices, from production processes to the disposal of unused, expired and obsolete medicines and medical devices. The domain encompasses the planning and management of all activities involved in sourcing, procurement, and logistics management and includes coordination and collaboration with suppliers and other healthcare professionals in delivering pharmaceutical services to patients.

The pharmacist plays a critical role in the registration and manufacturing of safe, quality and effective medicines and medical devices. Procurement of safe, quality and effective medicines and medical devices involves the identification and careful selection of suppliers who provide products manufactured in accordance with current Good Manufacturing Practice (cGMP) and relevant legislation. In addition, behavioural statements for Domain 3 pertain to packaging, storage and transport of medicines and medical devices, and the legislation applicable to manufacturing, storage and distribution of medicines and medical devices.

The procurement, storage and distribution of pharmaceutical products are a major determinant in the availability of affordable, quality, safe and effective medicines. Given the impact of procurement activities on the operation and effectiveness of health services, it is essential that these activities are managed by pharmacists capacitated to apply sound procedures and who have access to reliable stock control, consumption and distribution information in order to manage medicine supply.

The dispensing process is also incorporated in the supply of medicines domain. The process in which the pharmacist interprets and evaluates a prescription, from both legal and pharmacological perspectives, selects appropriate medicine(s), prepares, packs and labels the medicine(s), and counsels the patient on the correct use of the medicine(s), are behaviours included in Domain 3. To improve therapeutic outcomes, the supply of medicines should include behaviours encompassing patient care encounters, prescription review, and medicine utilisation review.

In addition, pharmacists are responsible for minimising pharmaceutical waste. This includes the coordination of continuous monitoring of pharmaceutical waste generation, and the destruction or disposal procedures for any unused, unwanted or expired medicine.

The supply of medicines and medical devices competencies are:

3.1 Medicine production according to GxP

3.2 Supply chain management

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- 3.3 Formulary development
- 3.4 Medicine dispensing
- 3.5 Medicine compounding
- 3.6 Medicine disposal/destruction

The behavioural aspects must be demonstrated as follows:

3.1 Medicine production according to GxP

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Apply SOPs and production documentation for receiving materials.	Implement and monitor compliance about materials receiving requirements in accordance with SOPs.	Interpret guidelines, legislation and policies for receiving material.
Apply SOPs and production documentation for storage requirements.	Implement and monitor compliance with storage requirements in accordance with SOPs.	Interpret guidelines, legislation and policies for storage of raw materials and finished products.
Apply SOPs and production documentation according to the manufacturing processes.	Implement and monitor compliance with production requirements in accordance with SOPs.	Manage deviations, investigate production failures, develop, review and update guidelines, SOPs and policies relating to the manufacturing process.
Apply SOPs and production documentation to packaging process.	Implement and monitor compliance with packaging requirements in accordance with SOPs.	Manage deviations, investigate packaging failures, develop, review and update guidelines, SOPs and policies relating to the packaging process.
Apply SOPs and review production documentation for final product release.	Implement and monitor compliance with the final product release specifications.	Review and approve manufacturing records for final product release.
Review and apply SOPs and production documentation in line with quality management systems.	Develop and implement quality management systems to ensure product safety, quality and efficacy.	Develop and manage quality management policies.
Apply principles of validation.	Develop validation protocols and reports.	Approve validation protocols and reports.
Apply Section 15 of Act 101 to compile medicine registration dossiers.	Review the dossier for correctness and completeness, and respond to variations from the regulatory authority.	Approve the dossier for submission to the regulatory authority.
Compile master documents.	Review master documents.	Approve master documents.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

3.2 Supply chain management

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Monitor and report stock requirements and shortages.	Implement medicines supply chain protocols to ensure access and availability of safe, effective, quality medicines and medical devices.	Develop and review protocols to ensure access and availability of safe, effective, quality medicines and medical devices for various supply and distribution models.
Advise consumers/caregivers of reasons for the delay in the supply of medicines and medical devices and implement the contingency plans to ensure continuity of care.	Convey medicine or medical device shortage contingency plan information to the relevant healthcare professionals.	Develop, and monitor contingency plans for medicines and medical device shortages.
Use the tools to monitor and review stock levels.	Assess and determine suitable stock levels and the maintenance thereof.	Develop tools to monitor and review stock levels.
Supply suitable alternative medicines and medical devices in emergency and life-threatening situations.	Source and obtain suitable alternative medicines and medical devices in emergency and life-threatening situations.	Liaise with prescribers and other stakeholders to identify suitable alternative medicines and medicine devices where supply difficulties are likely to occur.
Procure medicines and medical devices in line with approved procurement/supply chain management policies and procedures appropriate to the practice setting.	Implement and manage procurement/supply chain management policies and procedures appropriate to the practice setting.	Develop and review procurement/supply chain management policies and procedures ensuring no conflict of interest or inappropriate inducements in the sourcing and supply of medicines.
Distribute medicines and medical devices in line with approved protocols and policies developed in accordance with GxP.	Communicate policies and protocols for medicine and medical device distribution developed in accordance with GxP to other members of the healthcare team.	Apply GxP principles and relevant legislation in the development of policies and protocols for medicine supply management.
Supply unregistered medicines in accordance with relevant legislation.	Manage the supply of unregistered medicines in accordance with relevant legislation.	Develop systems and protocols for the supply of unregistered medicines in accordance with relevant legislation.
Implement an effective stock management and rotation system, including systems for forecasting patient needs and demands, and contingency plans for shortages and discontinuations.	Work with documented policies and procedures to implement an effective stock management and rotation system, including systems for forecasting patient needs and demands and contingency plans for shortages and discontinuations.	Manage sector-wide pharmaceutical quantification.
Compile master documents.	Review master documents.	Approve master documents.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

3.3 Formulary development

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Contribute to product selection based on systematic evidence-based evaluation criteria, e.g. suitability for intended use, quality and cost of medicines and medical devices, safety profile, reliability of source and bioequivalence.	Play an advisory role in product selection based on systematic evidence-based evaluation criteria, e.g. Suitability for intended use, quality and cost of medicines and medical devices, safety profile, reliability of source and bioequivalence.	Play a leading role in product selection based on systematic, evidence-based evaluation criteria, suitability for intended use, quality and cost of medicines and medical devices, safety profile, reliability of source and bioequivalence.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

3.4 Medicine dispensing

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Evaluate, interpret and prepare the prescription in line with legislative requirements and inform patients of the availability of generic medicines.	Manage, organise and prioritise the dispensing of prescriptions according to professional judgment, up-to-date clinical knowledge and in line with legislative requirements.	Manage, organise and prioritise the dispensing of prescriptions according to professional judgment, up-to-date clinical knowledge and in line with legislative requirements.
Maintain, review and update patient history.	Ensure that patient history is recorded and stored appropriately in accordance with applicable legislation.	Ensure that patient history is recorded and stored appropriately in accordance with applicable legislation.
Perform a therapeutic review of a prescription to ensure pharmaceutical and clinical appropriateness of the treatment.	Perform a therapeutic review of more complex prescriptions to ensure pharmaceutical and clinical appropriateness of treatment.	Undertake a therapeutic review of highly complex prescriptions for patients with multiple coexisting conditions to ensure pharmaceutical and clinical appropriateness of the prescribed treatment for the patient.
Apply GPP principles and ensure accurate dispensing in an organised and systematic way and apply sequential accuracy checks to all phases of dispensing.	Apply GPP principles and ensure accurate dispensing in an organised and systematic way and apply sequential accuracy checks to all phases of dispensing.	Put systems in place to ensure that all phases of dispensing as detailed in the GPP are complied with.
Prepare extemporaneous preparations according to GxP.	Ensure that extemporaneous preparations are prepared in accordance with GxP.	Develop SOPs for preparation of extemporaneous preparations in line with GxP.
Perform pharmaceutical calculations accurately.	Ensure that pharmaceutical calculations are accurate.	Provide reference sources and develop procedures for pharmaceutical calculations.
Consult prescribers regarding anomalies or potential problems, e.g. incorrect doses, drug interactions.	Address prescription anomalies in clinical meetings with healthcare professionals.	Advise and guide prescribers on potential problematic treatment regimens.
Document and record all interventions.	Implement a recordkeeping system and ensures that all interventions are documented.	Develop a recordkeeping system and undertake an analysis of all documented interventions to improve patient care.
Use dispensing technology in line with practice-specific protocols.	Implement and monitor the use of dispensing technology developed in line with protocols.	Develop protocols to ensure accurate use of all dispensing technologies
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

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3.5 Medicine compounding

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Apply pharmaceutical knowledge to the formulation and compounding of medicines.	Ensure that the pharmaceutical formulation and compounding of medicines are in line with legislation.	Source appropriate references for the formulation and compounding of medicines in line with GPP and GxP.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

3.6 Medicine disposal/destruction

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Request patients to return any unused, unwanted and/or expired medicines to the pharmacy for safe disposal and implement the protocols for any returned, unused, unwanted, expired and recalled medicines, including the assessment of the impact on patient care and required patient follow up.	Request patients to return any unused, unwanted and/or expired medicines to the pharmacy for safe disposal and implement the protocols for any returned, unused, unwanted, expired and recalled medicines, including the assessment of the impact on patient care and required patient follow up.	Develop protocols to ensure the proper management of returned, recalled, expired and unusable products for safe disposal taking into consideration environmental legislations.
Quarantine any returned, damaged, expired, recalled or discontinued medicines and implement and monitor the safe destruction and disposal of waste material, pharmaceutical products and cytotoxic products in accordance with relevant legislation.	Quarantine any returned, damaged, expired, recalled or discontinued medicines and implement and monitor the safe destruction and disposal of waste material, pharmaceutical products and cytotoxic products in accordance with relevant legislation.	Develop a protocol for the safe destruction and disposal of waste material, pharmaceutical products and cytotoxic products in accordance with relevant legislation.
Apply the guidelines for the recall of medicines.	Apply the guidelines for the recall of medicines.	Ensure compliance with the guidelines for the recall of medicines.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

DOMAIN 4: ORGANISATION AND MANAGEMENT SKILLS

INTRODUCTION

Domain 4 includes competency standards that relate to the way pharmacists apply organisational and managerial skills to ensure the effective and efficient delivery of pharmaceutical services. It includes behavioural statements relating to the operation and maintenance of facilities and infrastructure; application of sound fiscal principles; and quality assurance to ensure sustainable pharmaceutical services that are adaptive to changing environments.

Human and financial resources are central to planning, delivering and managing pharmaceutical services. In pharmacy, the goal of human resources management is to develop and sustain an adequate supply of skilled professionals motivated to provide effective pharmaceutical services.

The organisation and management competencies are:

- 4.1 Human resources management
- 4.2 Financial management
- 4.3 Pharmaceutical infrastructure management
- 4.4 Quality assurance
- 4.5 Change management
- 4.6 Policy development

The behavioural aspects must be demonstrated as follows:

4.1 Human resources management

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Contribute to the effective management of pharmacy personnel.	Effectively manage pharmacy personnel under personal supervision.	Identify human resources requirements and manage human resources effectively.
Undertake continuing professional development.	Participate in the provision of staff training and continuing professional development.	Identify staff training needs, facilitate appropriate training opportunities and participate in continuing professional development.
Conduct self-assessments or appraisal in line with the performance management policy.	Conduct staff assessments or appraisals in line with the performance management policy.	Review performance management policies and processes.
Adhere to basic human resources management legislation, e.g. the Labour Relations Act and Basic Conditions of Employment Act.	Monitor adherence to relevant human resources management legislation, e.g. the Labour Relations Act and Basic Conditions of Employment Act.	Develop and train pharmacy personnel.
Compile master documents.	Review master documents.	Approve master documents.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

4.2 Financial management

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level into Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Submit patient prescription claims to health funders to ensure optimum use of patient benefits.	Monitor patient prescription claims submitted to health funders to ensure optimum use of patient benefits.	Determine dispensing and professional fees to be charged in line with legislation.
Work according to the approved budget.	Monitor income and expenditure in line with budget prescripts.	Develop and effectively analyse and manage financial data and budgets.
Comply with all relevant legislative prescripts.	Monitor adherence to all relevant legislative prescripts.	Ensure adherence to all relevant legislative prescripts.
Perform cost-benefit analysis.	Apply the principles of pharmacoeconomic assessments.	Apply the principles of pharmacoeconomic assessments.
Compile master documents.	Review master documents.	Approve master documents.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

4.3 Pharmaceutical infrastructure management

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Identify pharmaceutical facility and equipment needs.	Identify pharmaceutical facility and equipment needs.	Identify pharmaceutical facility and equipment needs and develop a plan to achieve and meet the needs.
Monitor the suitability of pharmaceutical facilities and equipment.	Monitor the suitability of pharmaceutical facilities and equipment.	Manage pharmaceutical facilities and equipment.
Work according to the approved workplace procedures and policies.	Implement and monitor workplace procedures and policies.	Develop and review workplace procedures and policies as required.
Prioritise and organise workflow and demonstrate time management skills.	Manage, prioritise and organise workflow and demonstrate time management skills.	Develop and review workflow systems in order to manage, prioritise and organise daily work and demonstrate time management skills.
Maintain the existing pharmaceutical infrastructure.	Contribute to the improvement of the existing pharmaceutical infrastructure.	Ensure pharmaceutical infrastructure is in line with legislative requirements.
Compile master documents.	Review master documents.	Approve master documents.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

4.4 Quality assurance

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Participate in the updating of the SOPs and attend training on SOPs.	Contribute to the development, implementation, maintenance and training of staff in respect of SOPs.	Conduct regular audit activities, report and act upon findings.
Assist with procedures and processes that ensure quality assurance is achieved.	Participate in quality assurance audits.	Use feedback from complaints and audits to implement improvement strategies, and monitor and evaluate the outcomes.
Work according to the approved document management and recordkeeping systems.	Implement a system for documentation and recordkeeping for quality assurance purposes.	Develop and update systems for documentation and recordkeeping for quality assurance purposes.
Compile master documents.	Review master documents.	Approve master documents.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

4.5 Change management

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Participate in change management processes within the team.	Manage a change management process for the team.	Contribute to and lead a change management process beyond the team/workplace or across disciplines.
Overcome internal barriers and self-limiting beliefs to change by analysing the climate and the readiness for change followed by measures to improve personnel growth and contribute to organisational success and outcomes.	Motivate staff to overcome barriers to change in order to drive organisational success and outcomes.	Develop strategies to inspire and motivate staff to overcome barriers to change in order to drive organisational success and outcomes.
Compile master documents.	Review master documents.	Approve master documents.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

4.6 Policy development

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Apply policies and SOPs.	Implement and monitor policies and SOPs.	Develop a policy framework and SOPs.
Compile master documents.	Review master documents.	Approve master documents.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

DOMAIN 5: PROFESSIONAL AND PERSONAL PRACTICE

INTRODUCTION

Domain 5 is the professional and personal practice domain and includes behavioural statements that relate to the practice of pharmacy in a professional, legal and ethical manner to deliver patient-centred pharmaceutical services in a multidisciplinary setting. The professional and personal practice competencies are:

- 5.1 Patient-centered care
- 5.2 Professional practice
- 5.3 Ethical and legal practice
- 5.4 Continuing professional development
- 5.5 Leadership
- 5.6 Decision-making
- 5.7 Collaborative practice
- 5.8 Self-management
- 5.9 Communication

The behavioural aspects must be demonstrated as follows:

5.1 Patient-centered care

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Assist patients to make informed healthcare decisions.	Educate and empower patients to manage their own health and medicine use.	Act as a patient advocate to ensure that patient care is optimised.
Ensure patient safety and quality of care are at the centre of the pharmacy practice.	Monitor pharmacy practice to ensure patient safety and quality of care.	Put systems in place, including patient experience feedback, to ensure patient safety and quality of care are at the centre of the pharmacy practice.
Uphold the patients' rights.	Monitor that patients' rights are upheld.	Champion patients' rights through the implementation of the Patients' Rights Charter.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

5.2 Professional practice

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Practice in a manner that upholds professionalism.	Monitor that pharmacy personnel practice in a manner that upholds professionalism.	Develop strategies to ensure that pharmacy personnel practice in a manner that upholds professionalism.
Treat all with sensitivity, empathy, respect and dignity.	Monitor that patients are treated with sensitivity, empathy, respect and dignity.	Develop systems and processes to ensure that patients are treated with sensitivity, empathy, respect and dignity.
Take responsibility for own actions and patient care.	Encourage pharmacy personnel to take responsibility for their own actions and patient care.	Teach pharmacy personnel to take responsibility for their own actions and patient care.
Maintain a consistently high standard of work.	Ensure that pharmacy personnel consistently achieve a high standard of work.	Put systems in place to ensure that pharmacy personnel consistently achieve a high standard of work.
Contribute effectively in a multidisciplinary team.	Contribute effectively in a multidisciplinary team.	Lead and participate effectively in a multidisciplinary team.
Maintain appropriate boundaries with patients, staff and other healthcare professionals according to established ethical and professional practice guidelines.	Mentor and coach pharmacy personnel on the maintenance of appropriate boundaries with patients, staff and other healthcare professionals using established ethical and professional practice guidelines.	Develop ethical and professional practice guidelines to establish appropriate boundaries with patients, staff and other healthcare professionals.
Embrace technology and innovation that can improve patient care.	Encourage the use of technology and innovation to improve patient care.	Develop and establish policies and approaches that support the use of technology and innovation to improve patient care.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment: <input type="text"/>		

5.3 Ethical and legal practice

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Apply the Pharmacy Act (No. 53 of 1974), Medicines and Related Substances Act (No. 101 of 1965) and any other applicable legislation in daily practice.	Monitor compliance with the Pharmacy Act, Medicines Act or any other applicable legislation in daily practice.	Develop and update protocols to ensure that practice is in line with current legislation.
Practice within the scope of practice of a pharmacist, recognising own limitations of personal competency and expertise.	Practice within the scope of practice of a pharmacist, recognising own limitations of personal competency and expertise.	Practice within the scope of practice of a pharmacist, recognising own limitations of personal competency and expertise.
Keep abreast of legislation and apply relevant amendments accordingly.	Keep abreast of legislation and apply relevant amendments accordingly.	Contribute to the development of new and amended pharmacy-related legislation, and guidelines.
Comply with professional indemnity requirements.	Encourage compliance with professional indemnity requirements.	Ensure compliance with professional indemnity requirements.
Practice and adhere to the obligations of a pharmacist in terms of the principles of the statutory Code of Conduct for Pharmacists.	Apply the principles of ethics in managing ethical dilemmas in a structured manner.	Apply the principles of ethics in managing ethical dilemmas in a structured manner.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		

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Comment:	
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5.4 Continuing professional development

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Inculcate the principles of life-long learning into daily practice.	Inculcate the principles of life-long learning into daily practice.	Inculcate the principles of life-long learning into daily practice.
Take personal responsibility for engaging in CPD to achieve professional development goals, and document CPD activities appropriately.	Take personal responsibility for engaging in CPD to achieve professional development goals, and document CPD activities appropriately.	Take personal responsibility for engaging in CPD to achieve professional development goals, and document CPD activities appropriately.
Critically reflect on personal practice and skills and identify and address learning needs.	Critically reflect on personal practice and skills and identify and address learning needs.	Critically reflect on personal practice and skills and identify and address learning needs.
Do these Behavioural Statements form part of my Current Practice?		
Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this		
Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

5.5 Leadership

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Build professional credibility and portray the profession in a positive light.	Being assertive in order to inspire confidence as an accountable leader.	Lead by example.
Provide appropriate supervision and mentoring to pharmacy support personnel.	Provide appropriate supervision and mentoring to pharmacy support personnel and other pharmacists	Contribute to the initiation, development and continuous improvement of pharmaceutical services.
Do these Behavioural Statements form part of my Current Practice?		
Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this		
Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

5.6 Decision-making

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Make considered and timely evidenced-based decisions incorporating consultation if required.	Demonstrate attention to detail and accuracy in decision-making.	Play a leading role in pharmaceutical decision making.
Do these Behavioural Statements form part of my Current Practice?		
Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this		
Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

5.7 Collaborative practice

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Practice in a multidisciplinary team with cognisance of the roles and services delivered by healthcare and other related professionals.	Practice in a multidisciplinary team with cognisance of the roles and services delivered by healthcare and other related professionals.	Advocate for the inclusion of pharmacists in all multidisciplinary healthcare teams.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

5.8 Self-management

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Work in an organised and efficient manner.	Work in an organised and efficient manner.	Develop systems and processes to ensure that work is carried out in an organised and efficient manner.
Ensure time and work processes are appropriately planned, prioritised and managed.	Modify behaviour and practice in response to feedback, experience and critical incidents.	Design behavioural and practice models in response to feedback, experience and critical incidents.
Take appropriate responsibility in the workplace.	Take responsibility and be accountable for pharmacy practice issues in the workplace.	Identify gaps and areas for personal improvement and ensure implementation.
Ensure punctuality and reliability.	Implement effective and efficient work methodology.	Develop time management strategies.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

5.9 Communication

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Use appropriate language and listening skills and confirm understanding between patient and pharmacist.	Use appropriate language and listening skills and confirm understanding between patient and pharmacist.	Determine the appropriate language and develop appropriate listening skills to use and confirm understanding between patient and pharmacist.
Understand and demonstrate respect, sensitivity, empathy and cultural awareness.	Embody and promote the principles of respect, sensitivity, empathy and cultural awareness.	Educate pharmacy personnel on the principles of respect, sensitivity, empathy and cultural awareness.
Convey accurate and relevant information.	Demonstrate the principles of accurate, concise and relevant information.	Educate pharmacy personnel on the principles of accurate, concise and relevant information.
Apply problem-solving and conflict management skills.	Apply advanced problem solving and conflict management skills.	Educate pharmacy personnel on problem-solving and conflict management skills.
Build trust relationships to ensure effective communication with patients, healthcare professionals and relevant staff.	Advance trust relationships to ensure effective communication with patients, healthcare professionals and relevant staff.	Educate pharmacy personnel on the importance of trust relationships to ensure effective communication with patients, healthcare professionals and relevant staff.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

DOMAIN 6: EDUCATION, CRITICAL ANALYSIS AND RESEARCH

INTRODUCTION

Domain 6 includes the behavioural statements relating to education and training, critical analysis and research.

Education is essential for the initial development of pharmacists and is required throughout a pharmacist's career to keep abreast of knowledge, skills, attitudes and values. Pharmacists should participate in the education and training of patients, interns, pharmacy support personnel and other healthcare practitioners.

Critical analysis competencies provide the link between practice and research by assisting in the identification of areas where research is required. Pharmacists should participate in practice-based research. The research may include investigations into prescribing practices, patterns of medicine usage, evaluation of medicine use, the monitoring of adverse reactions, the benefits of the pharmacist's advisory role, computerised data handling, health economics, legislation, and aspects of abuse and irrational use of medicines.

Practising pharmacists are increasingly participating in health systems and quality improvement research, which must be encouraged as a means of providing databases and information for future policy, guidelines and practice development. Such research is often conducted in collaboration with other healthcare providers.

The education, research and critical analysis competencies are:

6.1 Education and training policy

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- 6.2 Provision of education and training
- 6.3 Practice embedded education or workplace education
- 6.4 Gap analysis
- 6.5 Critical analysis
- 6.6 Research
- 6.7 Supervision of other researchers
- 6.8 Collaborative research

The behavioural aspects must be demonstrated as follows:

6.1 Education and training policy

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Apply national policy relating to pharmaceutical education.	Interpret national policy in order to design strategic approaches for pharmaceutical education.	Shape and contribute to national education policy.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

6.2 Provision of education and training

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Teach effectively according to an agreed training plan with guidance from a more experienced colleague.	Mentor and assist with implementation of training plans.	Design and manage a course of study, with appropriate use of teaching approaches, assessment and study methods.
Perform self-assessment and identify own learnings needs.	Assess the performance and learning needs of others.	Shape, contribute to and be accountable for the performance and learning needs of others.
Participate in developing learning activities.	Plan a series of effective learning experiences for others.	Shape, contribute to and be accountable for the creation and/or development of pharmacy education qualification(s).
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

6.3 Practice embedded education or workplace education

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Participate in the formal education of students in a practice environment.	Design and manage a study programme, based in a practice environment.	Shape, contribute to or be accountable for the creation and/or development of practice-based components of pharmacy education qualification(s).
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

6.4 Gap analysis

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Identify gaps in the practice of pharmacy and education using evidence-based research.	Formulate appropriate and rigorous research questions to address gaps in the practice of pharmacy and education.	Design an appropriate research strategy to address research questions.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

6.5 Critical analysis

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Critically evaluate literature in the context of the practice of pharmacy and education.	Apply critical evaluation skills in the context of the practice of pharmacy and education.	Undertake peer review activities in the practice of pharmacy and education.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

6.6 Research

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Describe the core features of research protocols.	Design a research protocol to address previously formulated research questions.	Critically review research protocols.
Conduct research according to approved protocols.	Present research findings at relevant fora.	Publish an article on research findings.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

6.7 Supervision of other researchers

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Apply research governance principles.	Supervise research at the undergraduate level of study.	Supervise postgraduate research.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

6.8 Collaborative research

Behavioural Statements (tick Appropriate for your level of practice)		
Entry-Level into Practice <input type="checkbox"/>	Intermediate Practice <input type="checkbox"/>	Advanced Practice <input type="checkbox"/>
Work as a member of a research team.	Establish new multidisciplinary links to conduct research projects.	Lead a multidisciplinary research team.
Do these Behavioural Statements form part of my Current Practice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Based on the competencies I have, I can do this Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comment:		

Annexure B – Personal Development Plan – Not Compulsory

The following questions will help to establish some CPD priorities relating to your current role.

1. Describe up to three incidents in your workplace during recent years that caused you to feel you had made a difference, or which you regard as a personal and/or professional success.

- _____
- _____
- _____

2. In evaluating your response to the previous question, try to identify a learning need that relates to each incident that might help you build on that success.

- _____
- _____
- _____

3. Describe up to three incidents in your workplace during the past years that caused you to feel uncomfortable, unhappy, threatened or simply fed-up.

- _____
- _____
- _____

4. In evaluating your response to the previous question, try to identify a learning need that relates to each incident that might help you handle similar situations more effectively.

- _____
- _____
- _____

The following four questions will help you establish how your current role(s) may change over the coming years, and how you may prepare for these changes.

5. If your workplace has developed a plan for the next five years, briefly summarise the three points of that plan that will most affect you.

- _____
- _____
- _____

6. What learning needs do you have that relate to these three points?

- _____
- _____
- _____

7. Can you identify three local, provincial and national policies and priorities that will affect you, patients and other users of your services and organisations for whom you work?

- _____
- _____
- _____

8. What learning needs do you have arising from each of these policies and priorities as listed in 7 above?

- _____
- _____
- _____

Your career: The following questions should help you focus on your key career goals over the coming years.

9. Looking at your career plans for the next five years, identify three new things that you want to be doing within that time frame.

- _____
- _____
- _____

10. What learning needs do you have that relate to each of these career aspirations?

- _____
- _____
- _____

Annexure C – Learning Plan – Highly Recommended

1. I have identified the following learning gaps where I need to improve my knowledge and skills:

2. I have identified gaps in the following Domains:

3. I have identified the following options or methods of improving my knowledge and skills:

4. I have identified the following resources/institution to assist me in improving my knowledge and skills:

5. I have identified the following target dates by which I need to start improving my learning needs:

6. I have identified the following target dates by which I need to complete my learning needs:

7. I have identified the following behavioural aspects in respect of my learning needs:

Behavioural Statements	How it will assist me

8. I have identified how the behavioural aspects will assist me in my present work or personal development:

Behavioural Statements	How it will assist me