Dear Healthcare Practitioner



Accredit it© Manuals

Licensed Healthcare Practitioners (HCPs) and their licensed premises have to comply with the standards and requirements of the "Good Pharmacy Practice" (GPP) guidelines of the SA Pharmacy Council, pertaining to Section 35A(b)(ii) of the Pharmacy Act, 1974, (*Act 53 of 1974*), as amended.

Accredit it© is a tool to assist licensed HCPs in complying with all the relevant requirements regarding their dispensing services and premises. Accredit it© is tailored according to your individual practice!

It comprises the following sections:

- STANDARDS: A quick reference guide to the important aspects of the "Good Pharmacy Practice" document, with which the HCP and their licensed premises have to comply;
- POLICIES AND STANDARD OPERATING PROCEDURES (SOPs): A compilation of policies and SOPs that a licensed HCP must follow in their dispensing practice. These proposed SOPs contain the necessary steps which need to be taken during a specific process but should be used as a starting document for the HCP, which they need to amend and tailor-make to suit their own unique circumstances in their dispensing facility;
- QUALITY ASSURANCE: An "Audit Checklist" should be utilised as an assessment tool to measure
 whether the HCP and the facility comply with all the relevant specifications set out in the GPP. Such
 assessment should be conducted to identify all the "Not-yet-competent" areas, should there be any,
 where corrective action should be implemented to achieve compliance in those areas. After that,
 such an audit should be conducted regularly (e.g. quarterly) to ensure continued maintenance of
 standards and compliance;
- **FORMS:** Lastly, this tool provides several standardised forms, which the licensed HCP could use (also after adaptation to the facility) to save time and facilitate specific processes required by the GPP (e.g. an "Adverse Drug Reaction" report form).

To purchase an Accredit it@ manual with an electronic copy:

- R2 350.00 (incl. Vat.); or
- Discount to qualifying S Buys Wholesale customers (contact Academy for price); or
- Discount to applicants applying for 10 or more pharmacies (contact Academy for price).

Annual updates are available @ R160 per annum, payable by or before the end of March. A reminder for annual payment will be sent via SMS annually in February. It is the pharmacy's responsibility to update email addresses and cell no to keep receiving annual communication. The first annual update is included in the purchase fee.

Best regards

Estelle Victor

Executive Manager: S Buys Academy

Accredit it@ Order Form: Healthcare Professional

INFORMATION TO BE PRINTED IN THE MANUAL: use note that cell phone numbers and email addresses are very impor-

(Flease note that cell phone numbers and email addresses are very important)					y important/
Name and surname of Practitioner					
ID number					
HPCSA Registration No.					
Dispensing license No (if applicable)					
Practice Address (Physical)					
Telephone No:		Fax	No:		
Mobile Number:					
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S Buys Wholesaler Customer Account Number (if applicable):					
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(If different from pharma	acy address)				
DOCUMENT FORMAT:					
Please note:					
The S Buys Academy updates the SOP manual at the end of March each year.					
Mark the option below that will best suit you:					
Please print and courier the SOP document now and email me a soft, updated copy at the end of March 2024.					
Please email me a soft copy of the SOP document now and then print and courier the updated					
hard copy at the end of March 2024.					

Please fax or email to: 086 457 4790 or dispensing@sbuys.co.za

The process:

- Our friendly personnel will:
 - ✓ Check your account status with S Buys Wholesaler and apply a discount if applicable; and
 - ✓ Then email you an invoice.
- Once you have made a payment on the invoice by using the reference given on the invoice, please email us the proof of payment.
- The manuals will be generated and couriered after receipt of proof of payment.
- A soft copy of the manual will also be emailed to the pharmacy.

<u>Declaration</u> :
I,
I agree that the Academy may \square / may not \square (tick the relevant box) send me notifications via email regarding updates available for the Accredit It manual.
Applicant's Signature: Date