**THUTO BOPHELO**

**NURSING ACADEMY** (Pty) Ltd

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<table>
<thead>
<tr>
<th>SANC reg no: S1074</th>
<th>FET reg no: 2010/FE07/104 (until 31 Dec 2016)</th>
</tr>
</thead>
</table>

**Dear Learner**

**July 2015**

**STRATEGIC PLAN FOR NURSE EDUCATION, TRAINING AND PRACTICE**

In 2013, the Ministry of Health, Dr PA Motsoaledi, instructed the reconstruction and revitalising of the Nursing Profession.

The Strategic Plan for Nursing Education, Training and Practice of 2012/2013 and the Strategic Plan of 2016/2017 of the SANC refers to the implications of changes to nursing categories in accordance with the Nursing Act (33 of 2005). These changes are significant, placing nursing qualifications in the Higher National Qualifications Framework HNQF (NQF 5 and higher), highlighting the need for better skills and meeting the demand, in particular the development of specialist nurses and recognition of their qualifications.

In view of this change the SANC cancelled the intakes to the course Certificate in Enrolled Nursing Auxiliary at NQF Level 3 (R2176) and the Certificate in Enrolled Nursing at NQF Level 4 (R2175) during October 2014 and the last intake for these courses has been set for 30 June 2015.

The HWSETA (Health and Welfare Sectorial Educational Authority) has in view of this reconstruction developed SAQA qualification 64697 in Nursing: Community Health Work to provide a career path for prospective nursing students at the NQF 4 level in line with the Council of Further Education.

**APPLICATION CRITERIA REQUIRED FOR ENROLMENT OF FETC: Level 4 SAQA Qualification 64697**

- The Academy’s minimum requirements for admission of a learner in compliance with FET, the learner must have the following qualifications to apply for enrolment of the Community Health Work 64697.

- an equivalent health qualification at exit NQF level 1 accredited by HWSETA

  OR

- National Senior Certificate or an equivalent qualification at exit level 4.

**Subject Specific percentages include:**

- Communication: English 50%
- Mathematical literacy: 55%
  or Mathematics 50%
- Life Sciences: 50%
- Computer literacy: 50%

The Council of Higher Education implemented the Higher Certificate: Nursing Auxiliary at NQF Level 5 (R169) and also implemented the National Diploma: Staff Nurse at NQF Level 6 (R171) in compliance

APPLICATION CRITERIA REQUIRED FOR ENROLMENT OF THE HIGHER CERTIFICATE: AUXILIARY NURSING (R169)

- The Academy’s minimum requirements for admission of a learner in compliance with CHE, the learner must have the following qualifications to apply for enrolment of the enrolment of the Higher Certificate: Auxiliary Nursing (R169)
- an equivalent health qualification at exit NQF level 4

OR

- National Senior Certificate or an equivalent qualification at exit level 4.

**Subject Specific percentages include:**
- Communication: English 50%
- Mathematical literacy: 50%
  or Mathematics 50%
- Life Sciences: 50%
- Computer literacy: 50%

If the learner does not have the required exit level outcomes of the National Senior Certificate the learner is advised to enrol for the NQF level 4 course to enable the learner to enrol for R171.

APPLICATION CRITERIA REQUIRED FOR ADMISSION TO THE NATIONAL DIPLOMA: STAFF NURSE (NQF LEVEL 6)

- The Academy’s minimum requirements for admission of a learner in compliance with CHE, the learner must have the following qualifications to apply for enrolment of the Diploma in Nursing: Staff Nurse (R171)
- an equivalent health qualification at exit NQF level 4

OR

- National Senior Certificate with:

**Subject Specific percentages include:**
- Communication: English 55%
- Mathematical literacy: 55%
  or Mathematics 50%
- Life Sciences: 55%
- Computer literacy: 55%

If the learner does not have the required exit level outcomes of the National Senior Certificate the learner is advised to enrol for the NQF level 4 course to enable the learner to enrol for R171.

Due to the prolonged process by the South African Nursing Council (SANC) of phasing out of the R2175/R2176 and implementing the R169/R171, intake dates of 2016 for the R169/R171 has not been determined.

Thuto Bophelo Nursing Academy is still providing a high standard of nursing and we stay true to our vision to become a benchmark for the provision of private nursing education and training.

Yours faithfully

E SMIT
PRINCIPAL
30 September 2014

To: Nursing Education Institutions
National Department of Health
Provincial Departments of Health
All Stakeholders

Legacy Nursing Education and Training Programmes that will be NO LONGER OFFERED after 30 June 2015

Purpose

To inform all stakeholders about the date on which the offering of certain Legacy Nursing Education and Training programmes will be discontinued.

Background

The end date of enrolment for the Legacy Nursing Qualifications is 30 June 2015, with a teach out period of two years as prescribed by South African Qualifications Authority (SAQA). The production of nurses who have undergone the Course Leading to Enrolment as a Nurse (Government Notice No. R.2175 of 19 November 1993 as amended) or Course Leading to Enrolment as Nursing Auxiliary (Government Notice No. R.2176 of 19 November 1993 as amended) has increased alarmingly over the last five years. The table below provides the empirical evidence on the production of these categories of nurses.

Table 1A

<table>
<thead>
<tr>
<th>Category</th>
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<tr>
<td></td>
<td>2009</td>
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<td>ENA</td>
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Table 1B

<table>
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<tr>
<th>Category</th>
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<tr>
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</tr>
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<td>ENA</td>
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</tr>
<tr>
<td>EN</td>
<td>48078</td>
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</table>
It is against this background that the Council resolved that the following Legacy Nursing Qualifications must be discontinued, paving the way for the implementation of the New Nursing Qualifications:

1) The Course Leading to Enrolment as a Nurse (Government Notice No. R.2175 of 19 November 1993 as amended).

2) The Course Leading to Enrolment as a Nursing Auxiliary (Government Notice No. R.2176 of 19 November 1993 as amended).

The Council further resolved that the prospective applicants who wish to offer new qualifications (Higher Certificate: Auxiliary Nurse; Government Notice No. R.169 of 8 March 2013 and Diploma in Nursing: Staff Nurse; Government Notice No. R.171 of 8 March 2013) must apply to:

1) Department of Higher Education and Training (DHET) in order to obtain a registration certificate and number

2) South African Nursing Council (SANC) and submit the programmes in order to get endorsement letter from SANC

3) Council on Higher Education (CHE) and submit the programmes for accreditation.

All prospective applicants are advised to visit the SANC website (www.sanc.co.za) and to download the following documents for further information:

1) Circular 6/2012 and Circular 8/2013 (these can be found in the Archive page).

2) Revised Qualifications Frameworks issued in July 2014.

This circular becomes implementable on the date of its issue.

For further clarity on this circular, you are advised to contact the Senior Manager: Education and Training; Dr S.W. Mkhize.

Yours sincerely

(Signed)

Mr. T. Mabuda
Registrar and CEO
South African Nursing Council
SOUTH AFRICAN QUALIFICATIONS AUTHORITY

REGISTERED QUALIFICATION:

Further Education and Training Certificate: Community Health Work

<table>
<thead>
<tr>
<th>SAQA QUAL ID</th>
<th>QUALIFICATION TITLE</th>
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<tr>
<td>64697</td>
<td>Further Education and Training Certificate: Community Health Work</td>
</tr>
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ORIGINATOR

SGB Ancillary Health Care

QUALITY ASSURING BODY   NQF SUB-FRAMEWORK

HW SETA - Health and Welfare Sector Education and Training Authority  OQSF - Occupational Qualifications Sub-framework

QUALIFICATION TYPE   FIELD   SUBFIELD

Further Ed and Training Cert  Field 09 - Health Sciences and Social Services  Promotive Health and Developmental Services

ABET BAND   MINIMUM CREDITS   PRE-2009 NQF LEVEL   NQF LEVEL   QUAL CLASS

Undefined   156   Level 4   NQF Level 04   Regular-Unit Stds Based

REGISTRATION STATUS   SAQA DECISION NUMBER   REGISTRATION START DATE   REGISTRATION END DATE

Reregistered  SAQA 10105/14  2015-07-01  2018-06-30

LAST DATE FOR ENROLMENT   LAST DATE FOR ACHIEVEMENT

2019-06-30   2022-06-30

In all of the tables in this document, both the pre-2009 NQF Level and the NQF Level is shown. In the text (purpose statements, qualification rules, etc), any references to NQF Levels are to the pre-2009 levels unless specifically stated otherwise.

This qualification replaces:

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<td>49131</td>
<td>Further Education and Training Certificate: Community Health Work</td>
<td>Level 4</td>
<td>NQF Level 04</td>
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PURPOSE AND RATIONALE OF THE QUALIFICATION

Purpose:

This Qualification is for any individual who is, or wishes to be, involved in Ancillary Health Care services. A learner who has achieved this qualification will integrate a range of awareness and competences to practice the roles of health promoter, health provider and health networker within a community development context.
Learners working towards this Qualification will find that the acquisition of competence in the Unit Standards, which make up the Qualification, will add value to their work performance. This Qualification is intended to enhance the provision of entry-level service within the field of health care within all sectors.

Learners who complete this qualification will have better self and social awareness and will possess a range of thinking and problem solving skills. In addition, they will possess the competence required to perform community health functions in a complex developing world context. They will have the skills required for employment by a range of government and social sector employers, will be in possession of a further education and training certificate and will be eligible for certain credit recognition in various higher education health qualifications.

Qualified learners in this field will provide a service that will assist communities to better manage their own health and wellness. They will have the skills to work as team members and as providers of support services within a multidisciplinary health care team.

In addition, recipients will be able perform some of the following according to their choice of electives:

- Facilitate and administrate community health activities/centre via supervision of a team of health care workers.
- Provide community health care.
- Provide care for persons with intellectual and physical disabilities.
- Assist in planning advocacy campaigns to support primary health care initiatives.
- Assist in facilitating and implementing primary health care projects within the community.
- Engage in inclusive communication with the Deaf in South Africa.
- Practitioners will generally carry out their roles within the context of:
  > The client's home.
  > A community care centre.
  > The broader community.

Rationale:

The South African Government is committed to combining the national human resource development strategy with the rapid upgrading of service delivery to all of the nation’s communities.

An integral part of this strategy is initiatives to strengthen communities’ abilities to empower themselves to participate in the political, economic, social and development spheres of South African life. Two key components in this empowerment are communities’ abilities to integrate with and access state services, and their ability to further the health and wellness of community members.

There is no doubt from the international experience of Community Health Workers (CHW) that they play a role in improving basic health status of communities. In South Africa, the important supportive role of CHWs in the provision of health care services has been extensively documented. This contribution is further exemplified in those parts of the country where there is a shortage of professional health workers to provide the necessary health care services based on identified needs.

The Department of Health is leading the implementation of a multi-professional team-based approach to health care delivery, where each member of the team has a defined role to ensure that there is no duplication and overlapping of functions.

Since Ancillary Health Care workers are found throughout the country - from established urban areas to scattered farms and deep rural areas - the type of learner to enter for this qualification is equally varied. The first level qualification in the bouquet is at NQF Level 1, ABET Level 4 and the last qualification is the FETC: Community Health Work at NQF Level 4. As a result, learners will vary in age, in background and in level of formal schooling.

The common denominator is the desire to help their fellow beings.

**LEARNING ASSUMED TO BE IN PLACE AND RECOGNITION OF PRIOR LEARNING**

- Mathematical Literacy at NQF Level 3.
- Communication at NQF Level 3.
- The Unit Standard ID 254222: Demonstrate stress management as a self-help tool at NQF Level 3.

Computer Literacy at NQF Level 3 is strongly recommended.

Recognition of Prior Learning:

The structure of this Unit Standards' based Qualification makes the Recognition of Prior Learning (RPL) possible. RPL will be done by means of an Integrated Assessment during which the learner should be able to demonstrate competence in the knowledge, skills, values and attitudes implicit in this Qualification.
RPL may allow for accelerated access to further learning. All RPL is subject to quality assurance by the relevant accredited Education and Training Quality Assurance Body (ETQA) or ETQA that has a Memorandum of Understanding in place with the relevant ETQA. RPL is conducted by a registered assessor who is accredited by the relevant ETQA or ETQA that has a Memorandum of Understanding in place with the relevant ETQA.

Access to the Qualification:

Access to this Qualification is open, bearing in mind the conditions of the Learning Assumed to be in Place. It is preferable, however, for the learner to have completed 12 formal years of schooling or equivalent vocational qualifications.

**RECOGNISE PREVIOUS LEARNING?**

Y

**QUALIFICATION RULES**

The Qualification consists of a Fundamental, a Core and an Elective Component.

To be awarded the Qualification, learners are required to obtain a minimum of 156 credits as detailed below.

**Fundamental Component:**

The Fundamental Component consists of Unit Standards in:

- Mathematical Literacy at NQF Level 4 to the value of 16 credits.
- Communication at NQF Level 4 in a First South African Language to the value of 20 credits.
- Communication in a Second South African Language at NQF Level 3 to the value of 20 credits.

It is compulsory therefore for learners to do Communication in two different South African languages, one at NQF Level 4 and the other at NQF Level 3.

All Unit Standards in the Fundamental Component are compulsory.

**Core Component:**

The Core Component consists of Unit Standards to the value of 84 credits, all of which are compulsory.

The Unit standards in the Core Component will equip the learner with the essential skills and knowledge required to effectively perform the Ancillary Health Care function. The Core Unit Standards consist of competencies relevant to managing individual and team performance to achieve health care objectives, examining the effects of fatigue in the workplace, assisting with the facilitation and implementation of primary health care projects within a community, including conducting a needs assessment and advocating campaigns to support these projects.

**Elective Component:**

The Elective Component consists of a number of Unit Standards. Learners are to choose a combination of Unit Standards to the minimum value of 16 credits.

**EXIT LEVEL OUTCOMES**

1. Assist in planning and implementing promotion programmes for Health Care within communities.
2. Assist in the facilitation and implementation of primary health care projects within the community.
3. Achieve ancillary health care objectives within own community/work context.

**Critical Crossfield Outcomes:**

- Identify and solve problems related to community health work for the supervision and administration of community health projects in relation to community needs.
- Work effectively with others as a member of a team, group, organisation or community to promote primary health care in the community and with all stakeholders that affect the success of community health projects.
• Organise and manage oneself and one's activities responsibly to ensure proactive supervision of own local health care projects.
• Collect, organise and critically evaluate information relating to the health care industry, legislation, structures and processes that affect primary health care, in order to ensure that community needs' assessments are conducted effectively and the community health projects are planned effectively.
• Communicate effectively using visual, mathematics and language skills in the modes of oral and/or written persuasion to engage stakeholders and promote primary health care within the community and with external stakeholders, colleagues and managers that may impact the success of the health care projects within own work context.
• Use science and technology effectively and critically showing responsibility towards the environment and the health of others in order to effectively manage the primary health care function within own local context and to engage with relevant stakeholders.
• Demonstrate an understanding of the world as a set of related systems by recognising that problem-solving contexts relating to primary health care not exist in isolation and that a variety of external factors, including political, socio-economic, capacity, resources, budgets and community needs will affect how a community health project is planned and administrated.

In addition this qualification contributes to the full personal development of each learner and the social and economic development of the society at large, by making it the underlying intention of any programme of learning to make the individual aware of the importance of:

• Reflecting on and exploring a variety of strategies to learn more effectively in order to maximise the community health competences in other spheres of life and in other functions.
• Being culturally and aesthetically sensitive across a range of social contexts in liaising with other stakeholders in the performance of his/her function in order to ensure community participation in health care.
• Participating as a responsible citizen in the life of local, national and global communities by ensuring that health care projects are effective and overall community objectives are met proactively.

ASSOCIATED ASSESSMENT CRITERIA

Associated Assessment Criteria for Exit Level Outcome 1:

1.1 Basic community needs assessments are conducted to determine priority health needs within the community.
1.2 An understanding of the Health Care system in South Africa is demonstrated with examples and in relation to own community priorities and objectives.
1.3 An understanding of the Primary Health Care approach is demonstrated in relation to own objectives to promote health care in own community.
1.4 An understanding of advocacy principles and processes are demonstrated in order to assist stakeholders in putting advocacy plans together.
1.5 Assistance is provided in the implementation, monitoring and evaluation of awareness campaigns arising from advocacy plans.

Associated Assessment Criteria for Exit Level Outcome 2:

2.1 Community needs assessments are evaluated to determine priority health care projects within the community.
2.2 Stakeholders are identified and engaged to ensure effective impact of Primary Health Care projects.
2.3 Health care projects are identified and planned in consultation with the community.
2.4 Health care projects are implemented in line with priority needs in own work context.
2.5 Health care projects are monitored and evaluated on an ongoing basis.

Associated Assessment Criteria for Exit Level Outcome 3:

3.1 Individual and team performance is managed on an ongoing basis according to objectives that need to be achieved.
3.2 Business plans are produced as a management tool to effectively manage health care projects within the community.
3.3 Targeted training and development is conducted amongst teams and with other community health workers to achieve objectives.
3.4 The effects of fatigue in the workplace are managed to ensure productive work teams.
3.5 Stress management techniques are demonstrated as a self-help tool for primary health care workers in order to ensure ongoing productivity in achieving health care objectives.
3.6 Occupational health and safety procedures are implemented and adhered to on an ongoing basis.

Integrated Assessment:

A variety of methods must be used in assessment and tools and activities must be appropriate to the context in which the learner is working. Where it is not possible to assess the learner in the workplace or on-the-job,
simulations, case studies, role-plays and other similar techniques should be used to provide a context appropriate to the assessment.

Assessment should ensure that all specific outcomes, embedded knowledge and critical cross-field outcomes are evaluated. The assessment of the critical cross-field outcomes should be integrated with the assessment of specific outcomes and embedded knowledge.

**INTERNATIONAL COMPARABILITY**

There are no internationally recognised qualifications for Ancillary Health Care workers. This qualification, as an outcomes' based education programme, is uniquely South African and is appropriate for the unique requirements in this country. It can be adapted to neighbouring (SADC) and other third-world countries.

Other countries, affected by the global shortage in the health sector workforce, have responded with initiatives using Community Health Workers and have created facilitative training initiatives for them. However, much Ancillary Health training is reactive in response to regional needs rather than proactive, as this qualification attempts to be. Whilst the content of qualifications and skills programmes varies from country to country, based on current urgent needs, they are comparable in content and level. Common themes enable Community Health Workers to act as a bridge between the community and the health care system and deal directly with some simpler community based problems.

The academic background and training of Community Health Workers vary widely in different regions. According to the World Health Organization, Community Health Workers should have a level of basic education that enables them to read, write, and do simple mathematical calculations.

Globally, Community Health Workers provide basic health services to a large number of populations, including poor people from rural areas. However, their efficiency is limited by lack of knowledge and skill. Continuing medical education and training programmes should provide problem oriented education, which would enable Community Health Workers to conduct programmes and provide primary health care.

Nepal, India, Bangladesh, Brazil, South East Asia:

Countries and continents using Community Health Workers include, but are not limited to, Nepal, India, Bangladesh, Brazil, South East Asia and Africa.

United States of America, Canada and the United Kingdom:

In some parts of the United States, Canada and the United Kingdom, in response to changing demographics and an influx of immigrants from diverse regions (Cambodia, Vietnam, and Thailand), ancillary health care programmes to and training for Community Health Workers have also been introduced.

United States of America:

The Minnesota Department of Health uses bilingual Community Health Workers to act as health guides or bridges between the health care system and patients in immigrant communities. Their roles include informal counselling, social support, and health education, enrolment in health insurance programs, advocacy, and referral and follow up services. Community Health Worker programmes have been found to be both cost effective and to improve health outcomes among minority and immigrant populations. Training programmes have been developed by the Healthcare Education Industry Partnership and the Blue Cross Blueshield Foundation and are presented at a number of institutions, e.g. The Minneapolis Community & Technical College, which provides a Community Health Worker Enhanced Role Certificate consisting of 17 Credits made up as follows:

- HCCC 1010 Behaviours for Success in Health Careers (0.50).
- HCCC 1020 Communication in Healthcare (1.00).
- HCCC 1030 Awareness and Sensitivity to Client Needs (0.50).
- HCCC 1040 Respecting Client and Staff Diversity 0.50.
- HCCC 1050 Healthcare Safety and Standard Precautions 0.50.
- HCCC 1060 Legal Issues in Health Care 0.50.
- HCCC 1070 Ethics 0.50.
- HCCC 1080 Nursing Assistant Skill Set 2.00.
- CMHW 1000 The Community Health Worker: Role, Advocacy and Outreach 3.00.
- CMHW 1015 Organization and Resources: Community and Personal Strategies 2.00.
- CMHW 1025 Teaching and Capacity Building 2.00.
- CMHW 1035 The Community Health Worker: Legal and Ethical Responsibilities 1.00.
- CMHW 1045 Community Health Worker Coordination, Documentation and Reporting 1.00.
- CMHW 1055 Communication Skills and Cultural Competence 2.00.
Other states with diversity issues utilising such programmes include Texas and California.

Project based training:

In much of Africa, Ancillary Health Care workers are trained as part of international aid projects.

Kenya:

The community based HIV/AIDS Prevention and Support Project used and trained Community Health Workers using a 'cascading' method. A group of 250 master trainers trained larger groups of trainers who trained even larger groups of Community Health Workers and HIV/AIDS counsellors in community home-based care. Through this process almost 1,500 Community Health Workers were trained and provided continuing support to over 71,000 primary care givers.

Community Health Workers taught primary caregivers simple nursing skills such as the proper way to turn a client, how to wash the client in bed, nutritional needs, proper storage of drugs and monitoring adherence, and the importance of encouragement and avoiding stress.

Community Health Workers also helped patients and their families identify resources such as food security and financial support provided by local community and faith-based organizations.

SADC:

An examination of the situation within the SADC region indicates that the region is aware of the needs that can be met by such programmes. However, South Africa seems to be taking the lead in this regard and there is little comparative literature available on existing SADC programmes.

Conclusion:

On the whole the Further Education and Training Certificate: Community Health Care compares more than favourably with the courses and/or programmes in Community Health Work offered internationally. It is much more comprehensive and intensive than most programmes offered or accredited by organisations and/or institutions abroad.

This qualification, as an outcomes' based education programme, is unique to South Africa and is appropriate for the specific requirements of this country in terms of holistic and comprehensive health care and delivery. This qualification can be adapted to individual sub-Saharan countries and more especially, the SADC region countries, as well as all other countries with similar health provision services.

**ARTICULATION OPTIONS**

This Qualification articulates horizontally with:


It articulates vertically with:

- National Certificate: Business Studies: Medical Secretary, NQF Level 5.

**MODERATION OPTIONS**

- Anyone assessing a learner or moderating the assessment of a learner against this Qualification must be registered as an assessor with the relevant ETQA or with an ETQA that has a Memorandum of Understanding in place with the relevant ETQA.

- Any institution offering learning that will enable the achievement of this Qualification must be accredited as a provider with the relevant ETQA or with an ETQA that has a Memorandum of Understanding in place with the relevant ETQA.
• Moderation of assessment will be overseen by the relevant ETQA or by an ETQA that has a Memorandum of Understanding in place with the relevant ETQA, according to the ETQA’s policies and guidelines for assessment and moderation.

• Moderation must include both internal and external moderation of assessments at exit points of the Qualification, unless ETQA policies specify otherwise.

• Moderation should also encompass achievement of the competencies described both in individual Unit Standards as well as in the exit level outcomes described in the Qualification.

CRITERIA FOR THE REGISTRATION OF ASSESSORS

For an applicant to register as an assessor for this Qualification, the applicant should be:

• In possession of a relevant qualification at least one NQF Level higher than that of the Qualification.
• Registered as an Assessor with the relevant ETQA.
• Acknowledged as an expert in the field of Community Health Work.

NOTES

This qualification replaces qualification 49131, "Further Education and Training Certificate: Community Health Work", Level 4, 156 credits.

UNIT STANDARDS:

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<tr>
<th>ID</th>
<th>UNIT STANDARD TITLE</th>
<th>PRE-2009 NQF LEVEL</th>
<th>NQF LEVEL</th>
<th>CREDITS</th>
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<tbody>
<tr>
<td>Core</td>
<td>260406 Assist in facilitating and implementing primary health care projects within the community</td>
<td>Level 4</td>
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<td>Core</td>
<td>260379 Assist with planning and implementing advocacy campaigns for primary health care</td>
<td>Level 4</td>
<td>NQF Level 04</td>
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<td>Core</td>
<td>110053 Conduct a basic community needs assessment</td>
<td>Level 4</td>
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<td>Core</td>
<td>117870 Conduct targeted training and development using given methodologies</td>
<td>Level 4</td>
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<tr>
<td>Core</td>
<td>120366 Demonstrate understanding of the implementation of occupational health, safety and environmental legislation in the work place</td>
<td>Level 4</td>
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<tr>
<td>Core</td>
<td>114491 Educate and work closely with the community with regard to sexually transmitted infections (STIs) including Human Immune Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS)</td>
<td>Level 4</td>
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<td>Core</td>
<td>260378 Manage the effects of fatigue in the workplace</td>
<td>Level 4</td>
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<td>Core</td>
<td>260383 Plan and promote nutritional programmes to improve health</td>
<td>Level 4</td>
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<td>Fundamental 119472</td>
<td>Accommodate audience and context needs in oral/signed communication</td>
<td>Level 3</td>
<td>NQF Level 03</td>
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<td>Fundamental 119457</td>
<td>Interpret and use information from texts</td>
<td>Level 3</td>
<td>NQF Level 03</td>
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<td>Fundamental 119467</td>
<td>Use language and communication in occupational learning programmes</td>
<td>Level 3</td>
<td>NQF Level 03</td>
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<td>Fundamental 119465</td>
<td>Write/present/sign texts for a range of communicative contexts</td>
<td>Level 3</td>
<td>NQF Level 03</td>
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<td>Fundamental 9015</td>
<td>Apply knowledge of statistics and probability to critically interrogate and effectively communicate findings on life related problems</td>
<td>Level 4</td>
<td>NQF Level 04</td>
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Directors: RP Zondo, PE du Preez, L Graupner

11 of 28
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<tr>
<td>Fundamental 119462</td>
<td>Engage in sustained oral/signed communication and evaluate spoken/signed texts</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>5</td>
</tr>
<tr>
<td>Fundamental 119469</td>
<td>Read/view, analyse and respond to a variety of texts</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>5</td>
</tr>
<tr>
<td>Fundamental 9016</td>
<td>Represent analyse and calculate shape and motion in 2-and 3-dimensional space in different contexts</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>4</td>
</tr>
<tr>
<td>Fundamental 119471</td>
<td>Use language and communication in occupational learning programmes</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>5</td>
</tr>
<tr>
<td>Fundamental 7468</td>
<td>Use mathematics to investigate and monitor the financial aspects of personal, business, national and international issues</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>6</td>
</tr>
<tr>
<td>Fundamental 119459</td>
<td>Write/present/sign for a wide range of contexts</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>5</td>
</tr>
<tr>
<td>Elective 120391</td>
<td>Apply leadership skills to relationship management</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>8</td>
</tr>
<tr>
<td>Elective 117484</td>
<td>Apply palliative care principles when assisting and supporting the child and family to manage life threatening disease</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>12</td>
</tr>
<tr>
<td>Elective 117865</td>
<td>Assist and support learners to manage their learning experiences</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>5</td>
</tr>
<tr>
<td>Elective 115076</td>
<td>Deliver a monologue for a known audience on a familiar topic using South African Sign Language</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>10</td>
</tr>
<tr>
<td>Elective 115073</td>
<td>Demonstrate knowledge of Deaf culture, the Deaf community and technology, services and education for the Deaf in South Africa</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>8</td>
</tr>
<tr>
<td>Elective 115078</td>
<td>Demonstrate the production and reception of regional South African Fingerspelling</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>4</td>
</tr>
<tr>
<td>Elective 260377</td>
<td>Develop and implement a community based rehabilitation programme</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>10</td>
</tr>
<tr>
<td>Elective 117505</td>
<td>Educate and support parents in childcare</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>12</td>
</tr>
<tr>
<td>Elective 115074</td>
<td>Engage in short conversations with a Deaf person on a familiar topic using SASL</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>6</td>
</tr>
<tr>
<td>Elective 120389</td>
<td>Explain and apply the concept, principles and theories of motivation in a leadership context</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>6</td>
</tr>
<tr>
<td>Elective 260380</td>
<td>Facilitate the optimal functioning of the client with intellectual disability</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>15</td>
</tr>
<tr>
<td>Elective 115077</td>
<td>Give and ask for directions to places and locations, using South African Sign Language</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>4</td>
</tr>
<tr>
<td>Elective 117504</td>
<td>Identify and support the abused child</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>6</td>
</tr>
<tr>
<td>Elective 242821</td>
<td>Identify responsibilities of a team leader in ensuring that organisational standards are met</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>6</td>
</tr>
<tr>
<td>Elective 260382</td>
<td>Institute preventive measures to reduce the potential impact of disasters</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>15</td>
</tr>
<tr>
<td>Elective 114586</td>
<td>Manage finances of a new venture</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>5</td>
</tr>
<tr>
<td>Elective 11473</td>
<td>Manage individual and team performance</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>8</td>
</tr>
<tr>
<td>Elective 114589</td>
<td>Manage time productively</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>4</td>
</tr>
<tr>
<td>Elective 242819</td>
<td>Motivate and Build a Team</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>10</td>
</tr>
<tr>
<td>Elective 115079</td>
<td>Perform everyday communicative tasks using South African Sign Language</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>4</td>
</tr>
<tr>
<td>Elective 114592</td>
<td>Produce business plans for a new venture</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>8</td>
</tr>
<tr>
<td>Elective 117496</td>
<td>Provide care and support to an elderly person</td>
<td>Level 4</td>
<td>NQF Level 04</td>
<td>10</td>
</tr>
</tbody>
</table>
LEARNING PROGRAMMES RECORDED AGAINST THIS QUALIFICATION:

When qualifications are replaced, some (but not all) of their learning programmes are moved to the replacement qualifications. If a learning programme appears to be missing from here, please check the replaced qualification.

NONE

PROVIDERS CURRENTLY ACCREDITED TO OFFER THIS QUALIFICATION:

This information shows the current accreditations (i.e. those not past their accreditation end dates), and is the most complete record available to SAQA as of today. Some Quality Assuring Bodies have a lag in their recording systems for provider accreditation, in turn leading to a lag in notifying SAQA of all the providers that they have accredited to offer qualifications and unit standards, as well as any extensions to accreditation end dates. The relevant Quality Assuring Body should be notified if a record appears to be missing from here.

NONE

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South African Nursing Council

Regulations Relating to the Approval of and the Minimum Requirements for the Education and Training of a Learner Leading to Registration in the Category Auxiliary Nurse

The Minister of Health has, in terms of section 58(1)(f) of the Nursing Act, 2005 (Act No.33 of 2005), after consultation with the South African Nursing Council, made the regulations in the Schedule.

SCHEDULE

Definitions

1. In this schedule “the Act” means the Nursing Act, 2005 (Act No. 33 of 2005), and any expression to which a meaning has been assigned in the Act shall bear such meaning and, unless the context indicates otherwise—

“academic year” means a period of at least 44 weeks of learning in any calendar year;

“assessment” means a structured process for gathering evidence and making judgements about a learner’s performance in relation to the prescribed requirements for the programme;

“assessment method” means the act that the assessor engages in, utilising a variety of assessment strategies;

“assessor” means a practitioner registered as such with the Council who will be responsible for the assessment of the learner achievement of learning outcomes for the programme;

“clinical accompaniment” means a structured process by a nursing education institution to facilitate assistance and support to the learner by the nurse educator at the clinical facility to ensure the achievement of the programme outcomes;
“clinical facility” means a continuum of services to promote health and provide care to individuals and groups, used to teach learners;

“clinical learning opportunities” means the range of learning experiences available in a healthcare setting or other experiential learning sites for a learner to gain the required clinical skills;

“clinical placement” means the period spent by a learner in clinical and other experiential learning sites to ensure that the purpose of the programme is achieved;

“clinical supervision” means the assistance and support extended to the learner by the professional nurse and staff nurse at a clinical facility with an aim of developing a competent, independent practitioner;

“competence” means the ability of a practitioner to integrate the professional attributes including, but not limited to, knowledge, skills, judgement, values and beliefs required to perform as an auxiliary nurse in all situations and practice settings;

“fee” means a fee or fees determined by the Council from time to time and published by notice in the Gazette;

“integrated assessment” means forms of assessment which permit the learner to demonstrate applied competence and which use a range of formative and summative assessment methods;

“learner” means a person registered with the Council as a learner nurse in terms of section 32;

“learning outcomes” means the prescribed competencies and educational outcomes for the programme;

“moderation” means the process conducted by an independent moderator, which ensures that assessment of the outcomes prescribed for the programme is fair, valid and reliable;

“moderator” means a practitioner registered as such with the Council who will be responsible for the moderation of assessment conducted by the nursing education institutions for the programme;

“programme” means a purposeful and structured set of learning experiences that leads to registration in the category auxiliary nurse;

“programme outcomes” means the equivalent of the exit level outcomes of the qualification;

“qualification” means a planned combination of learning outcomes with a defined purpose that is intended to provide qualifying learners with applied competence for meeting the prescribed requirements of the auxiliary nurse qualification that is registered on the National Qualifications Framework (NQF);
“recognition of prior learning” means the evidence-based assessment comparison of previous learning and experience against the learning outcomes required for a specific programme and the acceptance of such previous learning for the purpose of accessing a programme; and

“section” means a section of the Act.

Requirements for registration in the category auxiliary nurse

2. (1) A person shall be registered in the category auxiliary nurse in terms of section 31(1)(d) if such a person—

(a) received education and training at a nursing education institution that is accredited to provide the programme;

(b) was registered with the Council as a learner for the duration of the programme;

(c) has met the requirements of the accredited programme;

(d) has been assessed and found competent in all exit level outcomes of the programme; and

(e) has complied with any other conditions as determined by the Council.

(2) On completion or termination of the programme, the person in charge of the nursing education institution where the learner was registered must submit to the Council—

(a) a record of theoretical education and training;

(b) a record of clinical education and training;

(c) a record of summative assessments conducted, including recognition of prior learning where applicable;

(d) if applicable, a declaration certifying that the learner has met the prescribed educational requirements and is competent for registration in the category auxiliary nurse, signed by the person in charge of the nursing education institution, in a format as determined by the Council; and

(e) any other information as may be required by the Council.

(3) The application for registration in the category auxiliary nurse must be in accordance with the Regulations Relating to the Particulars to be Furnished to the Council for Keeping of the Register for Nursing Practitioners; the Manner of Effecting Alterations to the Register; and Certificates that may be Issued by the Council published in Government Notice No. R.195 of 19 February 2008.

(4) In the case of a person that was not duly registered with the Council as a learner in terms of subregulation (1)(b), education and training undergone during the period when the person was not registered as a learner shall not be recognised by Council.
Accreditation of a nursing education institution to offer the programme

3. An institution must be accredited to offer the programme in terms of the Regulations Relating to the Accreditation of Institutions as Nursing Education Institutions.

Admission requirements to the programme

4. (1) A candidate shall apply to a nursing education institution that is accredited to provide the programme referred to in these regulations.

(2) In order to be admitted to the programme, a person must be in possession of at least a National Senior Certificate or an equivalent educational qualification.

Minimum requirements for the programme

5. (1) The requirements of the programme must be read and applied in conjunction with the directives of such programme, as determined by the Council. Such directives may be published by notice in the Gazette.

(2) Learners are required to achieve all exit level outcomes of the qualification.

(3) The duration of the programme is one (1) academic year of fulltime study.

(4) A learner shall, throughout the programme, receive integrated education and training to achieve both theoretical and clinical outcomes.

(5) A learner shall comply with all clinical placement requirements of the programme as determined by the Council.

(6) The maximum period that a learner may spend in a simulated learning environment must comply with the conditions determined by Council, which may be published by notice in the Gazette at the discretion of the Council.

Clinical education and training

6. (1) Clinical education and training must only be provided in clinical facilities that are approved in terms of the accreditation of the programme.

(2) Clinical learning must take place in a range of clinical settings and other learning sites that will facilitate the achievement of the programme outcomes.

(3) The nursing education institution must set clinical learning outcomes for each of the learning areas of the programme.
The nursing education institution must keep records of all clinical training.

The nursing education institution is accountable for clinical accompaniment and clinical supervision.

Clinical education and training shall include learning experience at night which—
(a) shall not exceed two (2) months of an academic year; and
(b) shall not take place within the first six (6) months of the commencement of the programme.

Assessment and moderation of learning outcomes

7. (1) Assessment of learning by a nursing education institution must comply with the following—
(a) It must be conducted by an assessor registered with the Council;
(b) the learner must be assessed and found competent in all learning outcomes of the programme, in line with the assessment criteria outlined in the qualification registered on the National Qualifications Framework;
(c) a minimum of 60% of formative clinical assessment activities must be done in real life situations;
(d) there must be evidence of continuous assessment throughout the period of study;
(e) there must be evidence of internal moderation of all assessments;
(f) records of assessment and moderation must be kept by the nursing education institution for a period as prescribed by relevant legislation and be produced on request of the Council;
(g) summative assessment must be conducted at the end of learning periods as determined by institutional policies, which must include a final assessment at the end of the programme; and
(g) [should be paragraph (h)] any other requirements as may be determined by the Council.

(2) Notwithstanding the provisions in subregulation (1), the Council may delegate the assessment and moderation functions to any person or organisation.

Transfers

8. (1) In case of a learner transferring to another nursing education institution, the person in charge of the nursing education institution transferring the learner must—
(a) submit to the receiving nursing education institution, on request, a record of all education and training that the learner has undergone; and

(b) submit to the Council—

(i) a record of education and training undergone by the learner, in a format determined by the Council; and

(ii) a notice of termination of education and training in a format determined by the Council.

(2) The nursing education institution receiving the transferred learner referred to in subregulation (1) must submit to the Council an application for readmission of the learner into the programme in terms of section 32 and in accordance with prescribed requirements.

Recognition of prior learning

9. (1) A learner may be assessed on prior learning for no more than 50% of the prescribed credits towards the programme by—

(a) applying to a nursing education institution accredited to offer the auxiliary nurse programme;

(b) providing evidence of prior learning by means of portfolios, other forms of appropriate evidence or challenge examinations, and

(c) complying with the nursing education institution’s recognition of prior learning policies and procedures.

(2) The process referred to in subregulation (1) must meet the Council’s and the general prescripts for recognition of prior learning.

(3) The assessment of prior learning referred to in subregulation (1) must be conducted by an assessor registered in terms of regulation 8(1)(a).

(4) The nursing education institution must submit the credits obtained from the assessment of prior learning as part of the completion of training records referred to in regulation 2(2)(c).

(5) The nursing education institution where recognition of prior learning has taken place must keep a full record of the assessment conducted and all documentation pertaining to such assessment for a period as prescribed by relevant legislation and, on request, supply such records to the Council.

(6) Where a nursing education institution fails to produce the recognition of prior learning records on request of the Council, the Council may refuse such an application for credits or where credit was already granted, such credits may be withdrawn.

Application of these regulations

Directors: RP Zondo, PE du Preez, L Graupner
10. These regulations shall apply in South Africa to—

(a) all programmes leading to registration in the category auxiliary nurse; and

(b) all learners following such programmes.

Transitional arrangements

11. (1) The regulations relating to the course leading to enrolment as a nursing auxiliary published by Government Notice No. R.2176 of 19 November 1993 will remain in force until repealed by notice in the Gazette.

(2) Notwithstanding the provisions of subregulation (1), the Council will, from the publication date of these regulations, cease to accredit any new nursing education institution to offer the education and training programme referred to in subregulation (1).

(3) Notwithstanding the provisions of subregulation (1), nursing education institutions accredited for education and training programmes in terms of the regulations mentioned in subregulation (1) will cease to admit new learners to such programmes on a date to be determined by the Council and published by notice in the Gazette.

(4) The nursing education institutions referred to in subregulation (3) must ensure that all education and training programmes that commenced prior to the date referred to in subregulation (3) are completed within a period of three (3) years from that date.

(5) Notwithstanding the provisions of subregulation (1), no person may, after the date published in terms of subregulation (3), be registered as a learner for the first time for the education and training programmes in terms of the regulations mentioned in subregulation (1).

(6) Notwithstanding the provisions of subregulation (1), learners registered in terms of the regulations mentioned in subregulation (1) will continue to be regulated under those regulations until the end of the three-year period mentioned in subregulation (4).
Regulations Relating to the Approval of and the Minimum Requirements for the Education and Training of a Learner Leading to Registration in the Category Staff Nurse

The Minister of Health has, in terms of section 58(1)(f) of the Nursing Act, 2005 (Act No. 33 of 2005), after consultation with the South African Nursing Council, made the regulations in the Schedule.

SCHEDULE

Definitions

1. In this schedule “the Act” means the Nursing Act, 2005 (Act No. 33 of 2005), and any expression to which a meaning has been assigned in the Act shall bear such meaning and, unless the context indicates otherwise—

“academic year” means a period of at least 44 weeks of learning in any calendar year;

“assessment” means a structured process for gathering evidence and making judgements about a learner’s performance in relation to the prescribed requirements for the programme;

“assessment method” means the act that the assessor engages in, utilising a variety of assessment strategies;

“assessor” means a practitioner registered as such with the Council who will be responsible for the assessment of the learner achievement of learning outcomes for the programme;

“clinical accompaniment” means a structured process by a nursing education institution to facilitate assistance and support to the learner by the nurse educator at the clinical facility to ensure the achievement of the programme outcomes;

“clinical facility” means a continuum of services to promote health and provide care to individuals and groups, used to teach learners;

“clinical learning opportunities” means the range of learning experiences available in a healthcare setting or other experiential learning sites for a learner to gain the required clinical skills;

“clinical placement” means the period spent by a learner in clinical and other experiential learning sites to ensure that the purpose of the programme is achieved;
“clinical supervision” means the assistance and support extended to the learner by the professional nurse at a clinical facility with an aim of developing a competent, independent practitioner;

“competence” means the ability of a practitioner to integrate the professional attributes including, but not limited to, knowledge, skills, judgement, values and beliefs required to perform as a staff nurse in all situations and practice settings;

“fee” means a fee or fees determined by the Council from time to time and published by notice in the Gazette;

“integrated assessment” means forms of assessment which permit the learner to demonstrate applied competence and which use a range of formative and summative assessment methods;

“learner” means a person registered with the Council as a learner nurse in terms of section 32;

“learning outcomes” means the prescribed competencies and educational outcomes for the programme;

“moderation” means the process conducted by an independent moderator, which ensures that assessment of the outcomes prescribed for the programme is fair, valid and reliable;

“moderator” means a practitioner registered as such with the Council who will be responsible for the moderation of assessment conducted by the nursing education institutions for the programme;

“programme” means a purposeful and structured set of learning experiences that leads to registration in the category staff nurse;

“programme outcomes” means the equivalent of the exit level outcomes of the qualification;

“qualification” means a planned combination of learning outcomes with a defined purpose that is intended to provide qualifying learners with applied competence for meeting the prescribed requirements of the qualification in the category staff nurse that is registered on the National Qualifications Framework (NQF);

“recognition of prior learning” means the evidence-based assessment comparison of previous learning and experience against the learning outcomes required for a specific programme and the acceptance of such previous learning for the purpose of accessing a programme; and

“section” means a section of the Act.

Requirements for registration in the category staff nurse

2. (1) A person shall be registered as a staff nurse in terms of section 31(1)(c) if such a person—
(a) received education and training at a nursing education institution that is accredited to provide the programme;

(b) was registered with the Council as a learner for the duration of the programme;

(c) has met the requirements for the accredited programme;

(d) has been assessed and found competent in all exit level outcomes of the programme; and

(e) has complied with any other conditions as determined by the Council.

(2) On completion or termination of the programme, the person in charge of the nursing education institution where the learner was registered must submit to the Council—

(a) a record of theoretical education and training;

(b) a record of clinical education and training;

(c) a record of summative assessments conducted, including recognition of prior learning where applicable;

(d) if applicable, a declaration certifying that the learner has met the prescribed educational requirements and is competent for registration in the category staff nurse, signed by the person in charge of the nursing education institution, in a format as determined by the Council; and

(e) any other information as may be required by Council.

(3) The application for registration in the category staff nurse must be in accordance with the Regulations Relating to the Particulars to be Furnished to the Council for Keeping of the Register for Nursing Practitioners; the Manner of Effecting Alterations to the Register; and Certificates that may be Issued by the Council published in Government Notice No. R.195 of 19 February 2008.

(4) In case of a person that was not duly registered with the Council as a learner in terms of subregulation (1)(b), education and training undergone during the period when the person was not registered as a learner shall not be recognised by Council.

Accreditation of a nursing education institution to offer the programme

3. An institution must be accredited to offer the programme in terms of the Regulations Relating to the Accreditation of Institutions as Nursing Education Institutions.

Admission requirements to the programme
4. (1) A candidate shall apply to a nursing education institution that is accredited to provide the programme referred to in these regulations.

(2) In order to be admitted to the programme, a person must be in possession of at least a National Senior Certificate or an equivalent educational qualification.

**Minimum requirements for the programme**

5. (1) The requirements of the programme must be read and applied in conjunction with the directives of such programme, as determined by the Council. Such directives may be published by notice in the *Gazette*.

(2) Learners are required to achieve all exit level outcomes of the qualification.

(3) The duration of the programme is three (3) academic years of fulltime study.

(4) A learner shall, throughout the programme, receive integrated education and training to achieve both theoretical and clinical outcomes.

(5) A learner shall comply with all clinical placement requirements of the programme as determined by the Council.

(6) The maximum period that a learner may spend in a simulated learning environment must comply with the conditions determined by Council, which may be published by notice in the *Gazette* at the discretion of the Council.

**Clinical education and training**

6. (1) Clinical education and training must only be provided in clinical facilities that are approved in terms of the accreditation of the programme.

(2) Clinical learning must take place in a range of clinical settings and other learning sites that will facilitate the achievement of the programme outcomes.

(3) The nursing education institution must set clinical learning outcomes for each of the learning areas of the programme.

(4) The nursing education institution must keep records of all clinical training.

(5) The nursing education institution is accountable for clinical accompaniment and clinical supervision.

(6) Clinical education and training shall include learning experience at night which—

(a) shall not exceed two (2) months of an academic year; and

(b) shall not take place within the first six (6) months of the commencement of the programme.
Assessment and moderation of learning outcomes

7. (1) Assessment of learning by a nursing education institution must comply with the following—

(a) It must be conducted by an assessor registered with the Council;

(b) the learner must be assessed and found competent in all learning outcomes of the programme, in line with the assessment criteria outlined in the qualification registered on the National Qualifications Framework;

(c) a minimum of 60% of formative clinical assessment activities must be done in real life situations;

(d) there must be evidence of continuous assessment throughout the period of study;

(e) there must be evidence of moderation of all assessments;

(f) records of assessment and moderation must be kept by the nursing education institution for a period as prescribed by relevant legislation and be produced on request of the Council;

(g) summative assessment must be conducted at the end of learning periods as determined by institutional policies, which must include a final assessment at the end of the programme; and

(h) any other requirements as may be determined by the Council.

(2) Notwithstanding the provisions in subregulation (1), the Council may delegate the assessment and moderation functions to any person or organisation.

Transfers

8. (1) In case of a learner transferring to another nursing education institution, the person in charge of the nursing education institution transferring the learner must—

(a) submit to the receiving nursing education institution, on request, a record of all education and training that the learner has undergone; and

(b) submit to the Council—

(i) a record of education and training undergone by the learner, in a format determined by the Council; and

(ii) a notice of termination of education and training in a format determined by the Council.

(2) The nursing education institution receiving the transferred learner referred to in subregulation (1) must submit to the Council an application for readmission of the
learner into the programme in terms of section 32 and in accordance with prescribed requirements.

**Recognition of prior learning**

9. (1) A learner may be assessed on prior learning for no more than 50% of the prescribed credits towards the programme by—

(a) applying to a nursing education institution accredited to offer the staff nurse programme;

(b) providing evidence of prior learning by means of portfolios, other forms of appropriate evidence or challenge examinations, and

(c) complying with the nursing education institution’s recognition of prior learning policies and procedures.

(2) The process referred to in subregulation (1) must meet the Council’s and the general prescripts for recognition of prior learning.

(3) The assessment of prior learning referred to in subregulation (1) must be conducted by an assessor registered in terms of regulation 8(1)(a).

(4) The nursing education institution must submit the credits obtained from the assessment of prior learning as part of the completion of training records referred to in regulation 2(2)(c).

(5) The nursing education institution where recognition of prior learning has taken place must keep a full record of the assessment conducted and all documentation pertaining to such assessment for a period as prescribed by relevant legislation and, on request, supply such records to the Council.

(6) Where a nursing education institution fails to produce the recognition of prior learning records on request of the Council, the Council may refuse such an application for credits or where credit was already granted, such credits may be withdrawn.

**Application of these regulations**

10. These regulations shall apply in South Africa to—

(a) all programmes leading to registration in the category staff nurse; and

(b) all learners following such programmes.

**Transitional arrangements**
11. (1) The regulations relating to the course leading to enrolment as a staff nurse published by Government Notice No. R.2175 of 19 November 1993 will remain in force until repealed by notice in the Gazette.

(2) Notwithstanding the provisions of subregulation (1), the Council will, from the publication date of these regulations, cease to accredit any new nursing education institution to offer the education and training programme referred to in subregulation (1).

(3) Notwithstanding the provisions of subregulation (1), nursing education institutions accredited for education and training programmes in terms of the regulations mentioned in subregulation (1) will cease to admit new learners to such programmes on a date to be determined by the Council and published by notice in the Gazette.

(4) The nursing education institutions referred to in subregulation (3) must ensure that all education and training programmes that commenced prior to the date referred to in subregulation (3) are completed within a period of four (4) years from that date.

(5) Notwithstanding the provisions of subregulation (1), no person may, after the date published in terms of subregulation (3), be registered as a learner for the first time for the education and training programmes in terms of the regulations mentioned in subregulation (1).

(6) Notwithstanding the provisions of subregulation (1), learners registered in terms of the regulations mentioned in subregulation (1) will continue to be regulated under those regulations until the end of the four-year period mentioned in subregulation (4).

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