

THE UNITED REPUBLIC OF TANZANIA

MINISTRY OF HEALTH



PHARMACY COUNCIL

NOTIFICE FOR CHANGE OF MANAGEMENT OR PHARMACEUTICAL PERSONNEL OF A **PHARMACY**

(Regulation 17(1) of The Pharmacy (Pharmacy Practice and the Conduct of Business of Pharmacy) GN No. 267)

	Changes to be Made: Superintendent Other Pharmaceutical Personnel
Æ	A. TO BE COMPLETED BY THE SUPERINTENDENT/OTHER PHARMACEUTICAL PERSONNEL AND OWNER OF THE PHARMACY. A.1. DETAILS OF THE PHARMACY
	Name of the Pharmacy VITAL CARE PHARMACY LIMITED. Facility Identification Number (FIN). 010289
	Physical address: Street เมื่อเราเรา Ward เราเรา District/Municipal LALA Region DAR เราะเลลผ
	A.2. DETAILS OF SUPERINTENDENT/OTHER PHARMACEUTICAL PERSONNEL Full Name. FATH FADHIL MBISE PIN 0405012 Phone 0756951503 Address
	A.3. REASON(s) FOR CHANGE FND OF CONTRACT
	Time frame of notification: (As per Contract)
	A.4. OWNER'S DETAILS Full Name VITALCARS PHARMACY LIMITED Phone Number 0719140475 Remarks Date 14081203
B.	TO BE COMPLETED BY THE OWNER ONLY
	B.1. NEW SUPERINTENDENT / OTHER PHARMACEUTICAL PERSONNEL Full Name
	 B.2. QUALIFICATION DOCUMENTS OF THE NEW SUPERINTENDENT / OTHER PHARMACEUTICAL PERSONNEL (To be attached) (i) Copies of registration certificate and valid license to practice (ii) Contract Agreement/MOU (iii) Commitment Letter
C.	FOR OFFICIAL USE ONLY
	INSPECTION/REGISTRATION OR ZONAL OFFICE
	Recommendations
	NOTE; Failure to acquire the services of another superintendent/ Other Pharmaceutical Personnel within the mentioned time frame, shall lead to immediate closure of the premises as per Section 43 of the Pharmacy Act Cap 311.
	NB: Other pharmaceutical personnel mean any pharmaceutical personnel apart from superintendent.

WIZARA YA AFYA, MAENDELEO YA JAMII, JINSIA, WAZEE NA WATOTO



BARAZA LA FAMASI



FOMU YA KUKIRI KUTEKELEZA MAJUKUMU YA MWANATAALUMA WA DAWA KWENYE MAJENGO YA KUTOLEA HUDUMA YA DAWA (kutoka katika Kifungu No. 44 (1) (a) cha Sheria ya Famasi)

SEHEMU YA KWANZA: - TAARIFA ZA MWANATAALUMA
☐ MFAMASIA ☑ FUNDI DAWA SANIFU ☐ FUNDI DAWA MSAIDIZI ☐ PHARM. DISP
1. Jina la mwanataalumaJo YCE GOEL PIN 0405268
2. Namba ya simu 6765943409 barua pepe
3. Tarehe ya mwisho kuhuisha jina <i>(Retention)3.!!!ぇ</i> ゚゚゚ 2024
4. Je, umehuisha taarifa zako kwenye mfumo kupitia tovuti ya baraza la famasi?
(http://196.45.42.57/pcmis.data/view/modules/registration/pharmacist-
signup.php)
SEHEMU YA PILI: - KUKIRI KWA MWANATAALUMA:
Mimi. Joyce Joel mwenye
taaluma ya dawa ngazi ya <u>FUNDI</u> <u>DAWA</u> <u>JANIFU</u> nakiri kwamba nitafanya
kazi yangu ya kitaaluma katika jengo la kutolea huduma ya dawa liitwalo
VITAL CARE PHARMACY LIMITED FIN 0102891 lililopo katika
Wilaya ya LALA Mkoani DAR-ES- JALAAM
Sahihi 12 08 3 08 2025
Uthibitisho wa Mfamasia wa Halmashauri
Nadhibitisha kwamba mwanataaluma tajwa ni miongon i/ si miongoni mwa
wanataaluma waliopo katika halmashauri hinayosimamia Muhuri KNY: DMO
Jina na Sahihi Dajah A Tarehe S 08/205 Kny: MGANGA MANU K
SEHEMU YA TATU: - UTHIBITISHO WA MAKAZI:
Ithibitishwe na: Afisa Mtendaji
Jina la mtendaji (Kata). SHIDA A. MGONGOLWA Kata ya JANGWANI
Nathibitisha kwamba Ndugu Joyce Josh anaishi Muhuri
langu mtaa/kijiji LumumBA ,kuanzia mwaka 2022 AFISAMMTENDAJI WA MTAA
Sahihi Afisamtendaji Tarehe , MTAA WA UKOMBOZI
12/8/2025



THE UNITED REPUBLIC OF TANZANIA PHARMACY COUNCIL





LICENSE TO PRACTICE

The Pharmacy Act
(Made under Sect.26 of The Pharmacy Act No. 1 of 011)

I Hereby Certify that

JOYCE JOEL

PIN NO: 0405247

Having complied with the provision of Section 26 of The Pharmacy Act, Cap 311

is entitled to practice as a pharmaceutical Technicians upon the

terms and subject to the conditions set forth in the

aforesaid Act and its Regulations thereto.

Issued: 18 September 2022

Expires on:31 December 2025

Registrar Pharmacy Council





EMPLOYMENT CONTRACT

BETWEEN

VITALCARE PHARMACY LIMITED. T/A VitalCare PHARMACY

AND

JOYCE JOEL

Made and entered into this day of. August, 2025

AGREEMENT FOR EMPLOYMENT OF PHARMACEUTICAL TECHNICIAN

This Agreement is made on this 1 St day of August 2025

BETWEEN

VitalCare Pharmacy Limited of P.O.BOX Region (hereinafter referred to as the EMPLOYER) the expression which includes his assignees, agents or his legal representative of his business

AND

AND NOW WHEREFORE THIS AGREEMENT WITNESSED AS FOLLOWS;

1. Interpretation:

"Act" means the Pharmacy Act, Cap 311.

- "Agreement" means the Agreement between the parties to operate a business of Pharmacist.
- "Business of pharmacy or pharmacist" includes professional pharmacy practice and any activity carried on by a person in relation to medicines, medical devices or herbal medicines;
- "Pharmacy" means any approved premises wherein or from which any services pertaining to the practice of a pharmacist is provided, and shall include a community Pharmacy, consultant Pharmacy, Institutional Pharmacy or wholesale Pharmacy.
- "Company/Employer" means an owner of Pharmacy and includes his assignees, agents or his legal representative.
- "Superintendent" means a pharmacist in charge of the business of a pharmacist
- "Pharmacist" means a person registered as such under section 16 of the Act.
- "Pharmaceutical Technician" means a pegson enrolled under section 24 of the Act.
- "Transfer of ownership" means any disposition of ownership of the facility

subject of this agreement to a third party either by way of sale, lease, or any other form, which has the effect of changing or transferring power of authority of owning of pharmacy to a third person during existence of its operation

2. Duration of Agreement

This Agreement shall be effective for a period of months, commencing from the 1st day of Aug20 2st to 31st day of July 0

3. Commencement of Supervision

The Pharmaceutical technician shall commence technical assistance of the above namedPharmacy on the day of AUG 2025

- 4. Obligation of the Parties:
- 4.1 The Company / Employer:

The Employer shall have the following duties and responsibilities; -

4.1.1 The **COMPANY / Employer** shall pay Monthly salary/emoluments of TZS. 500,000 = payable monthly to the **PHARMACEUTICAL TECHNICIAN** upon discharging his duties and functions as per this Agreement. At any event, the salary **shall not be paid in advance.**

- 4.1.2 The salary/emoluments shall be net of any applicable taxes and/or deductible employment benefits and shall be paid monthly and no later than the 1St day of the following month.
- 4.1.3 Comply with the Laws, Regulations, Guidelines and standard Prescribed by the Pharmacy Council and other relevantauthorities
 - 1.1.1 Implement and ensure that standards required for pharmacy and pharmaceutical properties are maintained in high level at all times.
 - Hire other pharmaceutical personnel for providing services or dispensing personnel recognized by the Pharmacy Council.
 - 1.1.3 Apply adequate funds necessary to rehabilitating or modifying the present premises and maintaining the modern pharmacy practice.

- 1.1.4 Follow up and implement on matters advised by a Pharmaceutical Technician and approved by Superintendent on professional and matters related to provision of good pharmaceutical services.
- 1.1.5 Shall ensure pharmaceutical services are provided with due care.
- 1.1.6 Shall ensure all proper records are maintained and managed well.
- 4.1.10Shall ensure the use of reference and other relevant materials whenever necessary for provision of pharmaceutical services and operations.
- 4.1.11. Shall report to the Pharmacy Council on poor attendance, service provided malpractices done by the Pharmaceutical Technician.
- 1.1.7 Shall purchase and ensure availability of all necessary tools for pharmacy operations are in place, i.e Superintendent log book, PC logo, dispensing register, ledgers etc.
- 1.1.8 Shall not interfere with the performance of professional matters in the premises or cause non-performance of professional services in the pharmacy.
- 1.1.9 Shall ensure all purchases or procurement and deliverables of pharmacy items are signed by a superintendent.
- 1.1.10 Perform any other duty as the Council may determine from time to time.

1.2 The Pharmaceutical Technician;

At a salary or emolument stipulated in clause 4.1.1 of this Agreement, the Pharmaceutical Techninican shall, with all commitment and professional diligence, take the necessary steps to establish and efficiently perform the duties according to their **scope of practice** to the said Pharmacy, dealing in Pharmaceuticals.

The Pharmaceutical Technician under personal supervision of a pharmacist shall have the following duties and obligations

- 1.2.1 Shall implement and ensure that standards required for pharmacy and pharmaceutical properties are maintained in high level at all times.
- 1.2.2 Shall ensure services provided are provided under his/ her physical supervision.
- 1.2.3 Shall manage and undertake all technical and professional matters in the pharmacy under supervision of a pharmacist.
- 1.2.4 Shall facilitate capacity building to all pharmaceutical personnel in the pharmacy.
- 1.2.5 Shall provide pharmaceutical service with due care.
- 1.2.6 Shall ensure all proper records are maintained and managed in accordance to good pharmacy practice standards.
- 1.2.7 Shall ensure all availability of all necessary reference and other relevant materials necessary for provision of pharmaceutical services and operations are in place.
- 1.2.8 Shall report to the Pharmacy Council on any malpractices or violations done by the Proprietor.
- 1.2.9 Shall ensure all availability of all necessary tools for pharmacy operations are in place.
- 1.2.10 Shall ensure all certificates (Business permit, premise registration, copy of certificates of pharmaceutical personnel any other certificates from other are conspicuously displayed in the premises.
- 1.2.11 Shall ensure medicines, medical supplies and other pharmacy items are properly arranged and kept in compliance with good pharmacy practice standards.
- 1.2.12 Shall ensure all property in the pharmacy are kept safe and maintained.
- 1.2.13 Shall ensure he/she provide proper services in professional manner and customer care.
- 1.2.14 Shall perform any other duty as the council may determine.

5. REMUNERATION

The Employer shall pay to the Employee a take home salary of 500,000. T.shs. (Five Local Control Contr

employees' supervisor/superintendent. Overtime will be compensated with a day off and not an additional salary. Unauthorized and overtime not authorized or approved will not be paid. The employee may be provided additional allowance, bonuses, and or any additional payments based on work and company performances which are at employer's discretion.

6. SICK LEAVE

The Employee shall be entitled to sick leave upon production of Medical Certificate issued by a duly qualified doctor recognized by the company that he is incapable of work.

The sick leave shall be calculated as follows:-

- (a) The first sixty three (63) days shall be paid full salary.
- (b) The second sixty three (63) days shall be paid half salary.

The Employee shall not be entitled to sick leave pay by the Employer upon a failure to produce a medical certificate.

7. ANNUAL AND OTHER LEAVES

The Employee shall be entitled to 'Annual Leave' for twenty eight (28) days with full payment of his monthly salary.

The Employer, after approval, may allow the employee to such 'other leaves' for days not exceeding Fourteen (14) days within a year of contract.

Any such number of days for leave, other than 'Sick Leave' and or 'other leaves', shall be deducted from Twenty eight (28) days of 'Annual Leave'.

8. Public Holidays

The employee shall be entitled to basic agreed pay for each paid public holiday should the employee work of that day. Where the employee works on a public holiday, the employee shall be paid the basic agreed pay on that day. Leave: must be requested in writing 2 weeks prior to departure and go through approval process All time off requests must be approved in writing prior to departure.

9. ABSENCE FROM WORK

Employee shall only be absent from work upon written permission of Employer or approval of a recognized supervisor on approved company sick sheet.

10. Termination

This Agreement shall be terminated;

- 10.1 Upon expiry of the contract, unless otherwise the parties agree to renew the terms of agreement.
- 10.2 By mutual agreement or consent between the parties when find it appropriate that the

agreement be terminated

10.3 By Notice; by either party by giving One (1) written notice to other party of the intention to terminate the agreement.

The written notice shall be addressed to the other part and copy shall be submitted to the Registrar, Pharmacy Council for notification.

The Parties agree that the Council shall not be obligated to issue another notice of termination but a closure order as per the Act.

11. Dispute Settlement

- 11.1 In the event of dispute in connection with this agreement both parties will make every effort to resolve the matter amicably.
- 11.2 If amicable settlement becomes impossible, then, an aggrieved party may seek legal remedy.
- 11.3 Nothing in clause 6 (6.1) and (6.2) shall prevent the Employer or Superintended from initiating or proceeding to The Commission for the Mediation and Arbitration (CMA).

12. Applicable Law and Jurisdiction

- 12.1 The laws of Tanzania hereto shall govern the validity, construction and interpretation of this agreement and the rights and duties of the parties.
- 12.2 Any dispute, controversy or claim arising or relating to this agreement or the breach, termination or invalidity of the Agreement shall firstly be settled amicably by the parties

IN WITNESS WHEREOF the parties hereto have duly signed and sealed this presents on the date and in the manner herein after appearing.

Signed and delivered by the parties at this day of Aur 2025 Who is known to me personally/Introduced to me bythe latter known to me personally In the presence of: Name: SECILLA F. ASSENCIA Designation: ADVOCATE Signature: SIGNED and DELIVERED By the said Joyce Who is known to me personally/Introduced to me PHARM TECH bythe latter known to me personally In the presence of: F. ASSENCE Designation:.. Signature:...