

Integration of pharmacy support personnel into general practice : A South African perspective

Dr NomaChina Kubashe



South African
Pharmacy Council

3rd NATIONAL PHARMACY CONFERENCE

3-5 OCTOBER 2019
SUN CITY, SOUTH AFRICA



Sponsored by:



Background to the Pharmacy Support Personnel (PSP)

Why this cadre? or is it necessary to have this cadre and how is this cadre beneficial to the profession

- Task shifting – assume technical roles to free pharmacists for more clinical patient focused roles
- Assist with roll out of NHI which will require well trained pharmaceutical pharmacy support personnel – alignment with Human Resource requirements is essential
- Stock management is PT's area of expertise, SA has a great need to optimise pharmacy stock, decrease expired stock and especially in public sector where wastage is a chronic problem. Also understanding importance and implementing good cold chain practice – strengthen rational drug (medicines) use.
- Quicker turnover - PT qualification - NQF level 6 (PAB level 3, PAPB level 4)



Background cont....

■ Legislation

Ever since this cadre was first legally recognized by SAPC and formally registered in 1987, there has been 4 versions of the qualifications enabling and regulating the training and practice of this cadre

- **1st version (1987)** – The training of the PSP was workplace based
 - Training material (manuals) and assessments were conducted by Council
 - Candidates were required to be employed in approved premises
 - Supervisor needed to be a pharmacist registered with the SAPC as a tutor
 - Candidates had to work in the sector they were trained in



Background cont....

- **2nd version (2000)** - The training of the PSP was workplace based
 - Virtual qualification
 - The qualifications were sector specific with training occurring in either community pharmacy, hospital pharmacy, wholesale pharmacy or manufacturing pharmacy.
 - Assessment was conducted by the provider and the SAPC served as the accreditation and quality assurance body.
 - In a case where pharmacist's assistant wanted to work in a different sector to that within which they trained - additional modules specific to the new sector had to be completed first. (Only after completion of the additional modules could the pharmacist's assistant be registered in the new sector of pharmacy.



Background cont....

- **3rd version (2008)** – The training of the PSP was workplace based

Introduction of two qualifications (PAB and PAPB) - Although still workplace and sector specific:

- A mandatory face to face contact sessions between the provider and the learner had to occur;
- The qualification was conducted over a period of 12 months
- Learners were granted a maximum period of 30 months to complete the 12 month qualification
- Qualification was still sector specific no additional modules were required for transition between the community and hospital pharmacy sectors.



Background cont....

Currently – in terms of the progress in the development and support of the Pharmacy support Personnel we are at the:

- **4th version of qualifications** for PAB, PAPB, and pharmacy technician
 - Direct supervision of a qualified pharmacist - All cadres of the PSP in all categories of pharmacies with one exception.
 - Indirect supervision of a qualified pharmacist – The two PSP (PAPB or a PT), when working in a public sector primary health care clinic and other facility approved by Council.



Background cont....

- **Conditions for indirect supervision**
 - Pharmacist to be readily/at all times available virtually for consultation by these PSPs
 - Must visit the clinic at least once a month
 - PSPs must work according to the Standard Treatment Guidelines and Essential Medicines Lists stipulated
 - PAPB/PT is required to consult with the pharmacist, telephonically, regarding all prescriptions for patients who presented with co-morbidities.
 - 2013 - supervisory capacity set at 1 (pharmacist):3 pharmacy personnel (interns, pharmacy students and support)



Experiences with the training and practice of this cadre

- **POSITIVES** or highlights associated with the training and practice of this cadre
 - PT qualification - NQF level 6 (PAB level 3, PAPB level 4)
 - Indirect supervision in PHC – optimization of pharmacy work force and consequently patient outcomes
 - Some feedback from employers find them far more knowledgeable and better equipped to deal with patients and admin/technical roles
 - Managerial skills better developed than PAB and PAPB, increased job responsibilities vs current support staff therefore alleviate pharmacist workload more effectively.
 - Supervision (guiding) and mentoring (training) of PAB and PAPB



Experience cont..

- Reaching rural areas that have poor human resource for health.
 - PT training focused on PHC, helps address the imbalance between public (84% population) and private (16% population) by preparing more staff for public sector.
 - PT in PHC much safer for patients benefit than current situation where porters and healthcare assistants dispense medicine.
- Optimization of financial resources as salary of PSPs is less than that of a pharmacist, but with higher knowledge than PA and PAPB
 - Stock management is PT's area of expertise, SA has a great need to optimise pharmacy stock, decrease expired stock and especially in public sector where wastage is a chronic problem. Also understanding importance and implementing good cold chain practice – optimize rational drug use
- Wholesale and manufacturing is part of tertiary training of the PT *soon to be implemented for PAB and PAPB QCTO qualification*



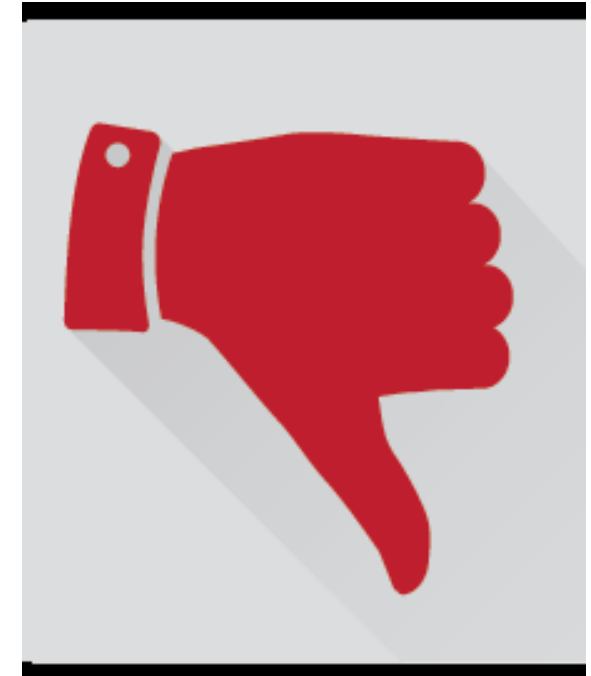
Experience cont..

- Employment growth for PT is faster due to aging population and increase in chronic illnesses
- PT's also trained in clinical skills (BP, glucose and cholesterol testing) so PT's able to do this in community pharmacies instead of current use of nurses (cheaper)
- PT's help with managing repeats for chronic illness and improved adherence by counselling patients (SA's high burden of disease, especially HIV, TB and diabetes with their training on dealing insulin)
- PT's represent variety of SA languages, enabling counselling in mother tongue
- Only takes 2 years academic and 6 months traineeship to qualify, therefore quicker to get into the workforce to address chronic human resource shortage.



Experience cont..

- Negatives or lows associated with the training of this cadre
 - The scope for this cadre is not finalised.
 - Risk of potential conflict because of the threat to existing experienced (older) PAPB. (experience vs knowledge)
 - Fear of unknown, due to not having a proper understanding of the PT scope
 - Some employers don't feel the need for PT as they have invested time and money into training current support staff effectively (private sector)
 - Lack of funding for PT posts in public sector



Where to from here?

- Integration into practice
 - The introduction and/or implementation of the National Health Insurance is imminent – document released September 2019
 - Two profound points regarding NHI:
 - Rendered treatment **will depend on how sick an individual is, not on how wealthy you are.**
 - **Includes all involved – patients and all Health Care Professionals**
 - Task shifting and extended role of the pharmacist - Pharmacist to
 - Delegate technical activities and stock management to PSP and develop confidence in focusing and assuming their role as critical thinkers in the health care chain
 - Model a true Multi-Disciplinary approach to optimizing patient outcomes



Where to from here?

- Authorized pharmacist prescriber
 - Pharmacists to equip themselves to be competent prescribers and promote rational drug utilization
 - Pharmacists are in a unique space of understanding mechanisms with which drugs combats disease states and the possible way in which the body would react to drugs – capitalize on it
- The HR requirements for health system
 - All institutions of higher learning to develop and/or tailor curriculum to respond to the societal/Country's health needs



THANK YOU!



South African
Pharmacy Council

3rd NATIONAL PHARMACY CONFERENCE

3-5 OCTOBER 2019
SUN CITY, SOUTH AFRICA



Sponsored by:





South African
Pharmacy Council

3rd NATIONAL PHARMACY CONFERENCE

3-5 OCTOBER 2019
SUN CITY, SOUTH AFRICA



Sponsored by:

