

#### **2<sup>nd</sup> National Pharmacy Conference**

**Moving to Pharmacy 2030 - Shaping the Future** 

21 - 24 October 2016 - Durban ICC



#2NPCSAPC



SAPC Update SAPRAA

TA Masango (Registrar/CEO) 8 April 2016



### **Overview**

- Conditions under which a pharmacy shall be conducted
- Responsibilities of the RP
- Inspections
- Mid-level workers in pharmacy
- Competence standards for pharmacists
- Online processes

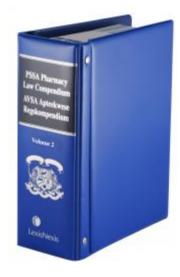




## Conditions under which a pharmacy shall be conducted

- Acts / services performed in a pharmacy must be in line with (Chapter VII of Practice Regulations 20-23)-
  - Good Pharmacy Practice
  - Code of Conduct
  - Provisions applicable to legislation









# Conditions under which a pharmacy shall be conducted (cont.)

- Scheduled medicines (S0 to S6) in a pharmacy may only be handled by (refer to Reg. 20 of practice regs.):
  - Pharmacist
  - Pharmacist intern under direct personal supervision by a pharmacist
  - Pharmacy support personnel under direct personal supervision by a pharmacist
- Hence, dispensary must not be accessible to unregistered people (public and private)
- S1/2 area must be under the continuous supervision of a pharmacist in the dispensary





# Conditions under which a pharmacy shall be conducted (cont.)

- Every pharmacy must be conducted under direct personal supervision of responsible pharmacist (RP)
  - Exceptions determined by Council
  - Name of RP must be displayed conspicuously over the main entrance of the pharmacy
- Name of pharmacist(s) on duty must be displayed conspicuously in the pharmacy for purposes of identification of such person(s) by the public





### Responsibilities of the RP

- RP must (Chapter VIII of Practice Regulation 28):
  - continuously supervise his/her pharmacy
  - have appropriate qualifications & experience
  - ensure that persons practising scope of practice in a pharmacy are appropriately registered with Council
  - notify Council on termination of his/her services as RP
  - take corrective measures re: inspection reports
  - ensure no unauthorised access to scheduled medicines
  - establish policies and procedures
  - ensure safe and effective storage/keeping of medicines
  - correct and effective record keeping of medicine sales, purchases, possessions, storage, safekeeping & returns





### **Trends in Disciplinary Action**

- Dispensing errors by pharmacy support personnel as a result of no supervision or systems that promote insufficient supervision
- Pharmacies being operated without an RP or even a pharmacist present
- Pharmacists and locum pharmacists not knowing the registration status of pharmacy support personnel – so they are working outside of their registered Scope of Practice





### Who will be held responsible?

- The RP is ultimately responsible to Council for the overall management of the pharmacy, however, in the absence of a registered RP with Council:
  - it will be the owner (private sector)
  - it will be the HOPS (public sector)
- RPs are being held accountable for GPP short comings (Grade C pharmacies) and failing to put systems in place that minimize or reduce transgressions by other pharmacists and pharmacy support personnel





### **2015 Community Pharmacy Inspections Report**

Grading	Eastern Cape	Free State	Gauteng	KwaZulu-Natal	Limpopo	Mpumalanga	North West	Northern Cape	Western Cape	<b>Grand Total</b>
A	35	15	121	51	8	37	17	7	56	347
В	21	12	98	48	28	21	18	6	53	305
С	10	1	43	25	13	7	4	1	14	118
	70	29	275	128	50	73	42	14	135	816





### **2015 Hospital Pharmacy Inspections Report**

Grading	Eastern Cape	Free State	Gauteng	KwaZulu- Natal	Limpopo	Mpumalanga	North West	Northern Cape	Western Cape	<b>Grand Total</b>
Institutional Private	5	2	16	9	3	5	6		6	52
A	5	1	15	7	1	5	3		5	42
В		•	1	2	2		1		1	7
D		1	-	_			2			3
Institutional Public	27	8	28	33	9	10	11	13	20	159
Α	12	6	15	21	7	7	8	1	12	89
В	9		9	6	2	2	1	4	4	37
С	6	1	3	5				7	1	23
D		1	1	1	harmacy Cour	1	2	1	3	10



## 2015 Manufacturing Pharmacy Inspections Report

Grading	Eastern Cape	Free State	Gauteng	KwaZulu-Natal	Limpopo	Mpumalanga	North West	Northern Cape	Western Cape	<b>Grand Total</b>
Manufacturing Pharmacy	2		19	3		1			8	33
A	2		14	1		1			2	20
В			3	2					3	8
С			1						2	3
D			1						1	2





### **2015 Wholesale Pharmacy Inspections Report**

Grading	Eastern Cape	Free State	Gauteng	KwaZulu-Natal	Limpopo	Mpumalanga	North West	Northern Cape	Western Cape	Grand Total
Wholesale Pharmacy Private	5	1	21	7	2	1	1		12	50
Α	3		6	2	1	1			6	19
В		1	9	5			1		1	17
С	1		1						4	6
D	1		5		1				1	8
Wholesale Pharmacy Public	1				1					2
В	1									1
С				c	1 outh Africa	2			www.5	1 apc.za.org

**Pharmacy Council** 



### Selling of HIV screening test kits

- HIV screening test kits that claims to be conclusive in diagnosing HIV may not be sold in pharmacies
- A pharmacist, pharmacist intern or pharmacy support personnel must have adequate training to properly counsel the caregiver/agent/patient before the sale of such HIV screening test kits
- The pharmacist must provide the caregiver/agent/patient with
  - information on how to conduct the test,
  - how to correctly interpret the test results; and
  - where to access follow-up and support services in the surrounding area





### Mid-level workers in pharmacy

- Extension to offer qualifications for pharmacists' assistants is granted until 30 June 2018
- Council in July 2015 resolved that pharmacy support personnel are:
  - Pharmacist's assistants (Basic) at NQF level 4
    - Scope of practice to remain
  - Pharmacist's assistants (Post-Basic) at NQF level 5
    - Scope of practice to remain
  - Pharmacy Technicians at NQF level 6
    - Currently practising scope of practice of Post-Basic Pharmacist's Assistant until amended Regulations are published

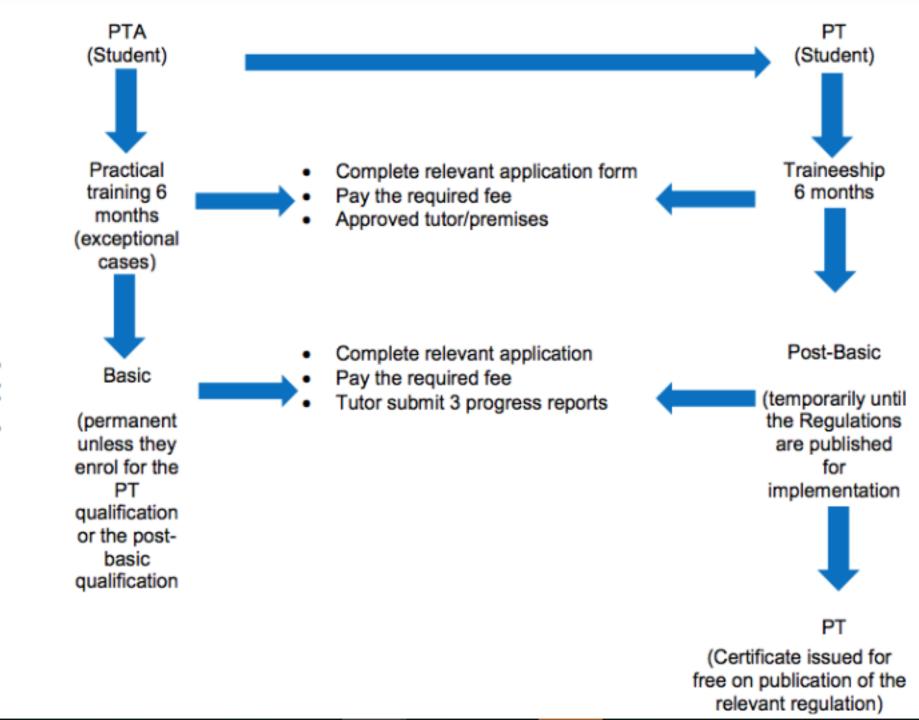




### **Training of mid-level workers**

- Training of PTs will be in two ways:
  - CHE sub-framework
  - QCTO sub-framework
- CHE sub-framework
  - Current (see flow chart in the next slide): Higher Certificate / PTA (NQF 5) as prerequisite to Advanced Certificate / PT (NQF 6) as allowed by the education framework at that time
  - Proposed: 2-year diploma (NQF 6) to be developed (in progress)







### Training of mid-level workers (cont.)

- Current PAB (NQF 3) & PAPB (NQF 4) qualifications
  - Expired on 30 June 2015
  - Extended (for accredited providers) until 30 June 2018 pending new qualification being developed in the QCTO format
- New qualification in QCTO sub-framework, i.e. occupational qualification, with 3 parts or exit points
  - ⇒ PAB (NQF 4) = part qualification
  - ⇒ PAPB (NQF 5) = part qualification
  - ⇒ PT (NQF 6) = full qualification
  - Plan to finalise in 2016 and accredit providers in 2017



### **Review of Competence Standards**

- The current competence standards (CS) for pharmacists were developed in 2006
- In 2010 and 2011, the BPharm qualification was revised
- Current qualification implemented in 2013
- BPharm qualification will expire in June 2018
- In 2015, Council resolved that the CS be reviewed
  - inline with the FIP CS used for pharmacists
  - to inform the *new curriculum* to be implemented in 2018
- The team to review the CS will include members from professional associations and pharmacy schools





## Review of Competence Standards(cont.)

- The draft CS developed will follow the process:
  - presented to the Task Team approved by Council
  - presented to the CPD Committee
  - Approved by Council
  - Published for narrow consultation
  - Published for wider consultation
  - Published for implementation





### **Current Competence Standards**

- organise and control the manufacturing, compounding and packaging of pharmaceutical products
- 2. organise the procurement, storage and distribution of pharmaceutical materials and products
- 3. dispense and ensure the optimal use of medicines prescribed to the patient
- 4. provide pharmacist initiated care to the patient and ensure the optimal use of medicine
- 5. provide information and education on health care and medicine



## Current Competence Standards (cont.)

- 6. promote community health and provide related information and advice
- 7. participate in the registration of medicine and research to ensure the optimal use of medicines
- 8. facilitate the development of pharmaceutical personnel
- 9. practise pharmacy professionally and ethically
- 10. manage the pharmacy/pharmaceutical service





### **Specialities in Pharmacy**

- 2 Existing categories of specialities
  - Radio Pharmacist (240 credits new qualification)
  - Pharmacokineticist (will not be there in future as it is part of the clinical pharmacy speciality)
- 3 Additional categories approved by Council in 2011
  - Public Health Pharmacist (240 credits)
  - Industrial Pharmacist (240 credits)
  - Clinical Pharmacist (360 credits)
- 3 qualifications were approved by Council 13/14 May 2015
  - Radio Pharmacist
  - Clinical Pharmacist
  - Public Health Pharmacist





### **Industrial Pharmacist**

- Draft qualification- Council meeting in May 2016
- Narrow consultation
- Wider consultation
- Process of drafting regulations





### Online registration processes

- Online applications are implemented for the following:
  - Pharmacist's assistant learner basic and post-basic registration
  - Pharmacist's assistant basic and post-basic registration
  - Pharmacist's assistant submission of progress report (4, 8 and 12 months)
  - Student registration (BPharm, PTA and PT)
  - Pharmacist intern registration
  - Pharmacist intern application to write pre-registration examination

Pharmacy Council



## Online registration processes (cont.)

- Online applications are implemented for the following:
  - Pharmacist intern submission of progress report
  - Pharmacist registration to perform remunerated community service(CSP)
  - Pharmacist completion of remunerated community service
  - Pharmacist voluntary removal from register
  - Responsible pharmacist application and resignation
  - Tutor application and resignation
  - Premises approval and recording of pharmacy





## Online registration processes (cont.)

- Group owner pharmacy login
  - Update employee details
  - Make bulk payments
  - Recording of new pharmacy
  - Respond to inspection shortcomings
  - Respond to GPP shortcomings for license applications
  - View inspections, tutors, learners, RP
- Tracking your application status with Council
- License applications planned to go online from 1 May 2016





#### 2<sup>nd</sup> National Pharmacy Conference – www.sapcconference.za.org

(Moving to Pharmacy 2030 - Shaping the Future, 21 - 24 Oct 2016 Durban ICC)

### CALL FOR NOMINATIONS

THE SEARCH FOR SA's PIONEER PHARMACY PROFESSIONAL / FACILITY IS ON

You have the opportunity to nominate outstanding achievements 2016 SAPC NATIONAL PIONEER PHARMACY PROFESSIONAL / FACILITY





MAKE YOUR NOMINATION BY 16 APRIL 2016

Download the Nomination form and Awards Criteria of all the categories http://www.sapc.za.org/D\_Conf2016.asp

Complete nomination entries to be submitted by: 1 July 2016





#### 2<sup>nd</sup> National Pharmacy Conference – www.sapcconference.za.org

(Moving to Pharmacy 2030 – Shaping the Future, 21 – 24 Oct 2016 Durban ICC)

The official publication of the South African Pharmacy Council





#### www.pharmaciae.org.za



Calendar

Newsletter Archive

SAPC Website



- Did you receive your e-Pharmaciae?
- Ensure your e-mail address is correct to receive the latest e-news from council



For more information visit: www.sapc.za.org



### **Questions**







### Thank you



