



# PSSA Perspectives

Pharmaceutical Society of South Africa

When this year started, the world could never have envisaged that 2020 would be a year like no other. Everyone was forced into a remarkable shift in the way that people all over the globe went about their daily lives. With lockdown regulations, the PSSA's interactions with everyone were disrupted. Business and people responded by going on with their daily lives using online technology for almost everything. Schools and universities implemented e-learning platforms; workforce migrated to work-from-home in those sectors where this was possible. E-commerce boomed and commercial shopping centres saw a dramatic decline in people visiting these facilities. Digitisation, long being talked about, was accelerated due to COVID-19.

Healthcare workers suddenly became a country's most valuable asset. With pharmacists as the most accessible healthcare worker, PSSA members were challenged with the way they provided services to their communities. What became clear was that what was known as being "normal" will never be the same again, and the way people all over the world interact will never be the same.

The PSSA is proud of our members serving their communities, and hope that the new normal will develop in such a way that everyone will benefit from it from a personal and a business perspective.

## Webinars

It seems like the age old saying of "if one door closes, another one opens" came true for webinars. The PSSA purchased a webinar programme in December 2017 and has hosted a few webinars in the past but the appetite for webinars was small. With lockdown, members could no longer attend CPD evenings, and since CPD is compulsory for all pharmacists as from 2020, the appetite for webinars exploded.

The PSSA hosted a webinar series on COVID-19 and the pharmacist, resilience building, a few clinical webinars, and then embarked on a twelve-episode webinar series on pharmacy legislation. The attendance grew so much that the PSSA had to increase the capacity of the webinar software. And yes, as more and more regulations are lifted on gatherings, some members will be able to attend CPD evenings again, however, for a vast number of members – especially members not based in the big cities – they now have access to CPD events that they did not have before. The PSSA receives numerous emails expressing gratitude and excitement for the opportunity granted to these members, and for this reason the webinars will continue into 2021 and beyond. For as long as there are members interested in attending webinars, the PSSA will provide the service at national, branch and sectoral levels.

## Virtual meetings

Another "new" that the PSSA has experienced is virtual meetings. The PSSA held its 75<sup>th</sup> AGM virtually, as well as an open meeting

with the PSSA President and Executive Director. The National Executive Committee of the PSSA also met virtually in November. Virtual meetings have advantages such as no travel being required, and less time and money are lost due to this. It also grants members who previously might not have been able to attend an opportunity to attend. Going forward a mixture of virtual and face-to-face meetings will be investigated. The PSSA plans to host a face-to-face conference in Port Elizabeth in 2021, however, only a small number of members can attend a conference physically, so virtual options will be explored to grant other members the opportunity to attend some of the sessions at conference.

## FIP statements of policies adopted at 2020 FIP Council meeting

During the past year, three PSSA members were involved in FIP working groups to draft reference papers and statements of policies for the Federation.

Mariet Eksteen was invited to participate in the development of a reference paper of Patient and Medication safety. This document addresses problems and proposed solutions to minimise the harm medication can cause patients when used incorrectly. These medication errors can be caused by several actions. However, the pharmacist has an important role to play in ensuring the safe use of medicines. After the completion of the reference paper, an FIP statement of policy was developed directing the implementation of patient and medication safety by governments, member organisations, pharmacists and FIP. The reference paper was launched virtually on 13 August and Mariet Eksteen presented a case study from South Africa. The reference paper can be accessed by going to <https://www.fip.org/file/4757>.

Joggie Hattingh represented PSSA on a working group which developed a statement of policy on medicine shortages. This document outlines reasons for medicine shortages and then suggests how this can be better managed locally.

Another working group, where PSSA was represented by Sham Moodley, developed a statement of policy on sustainability of pharmacist delivered professional services through viable remuneration models. The remuneration for professional services delivered by the pharmacist continues to be the subject of careful review by payers (governments, health insurers) so that it supports their objectives of cost containment and, at the same time, reflects new societal needs and expectations through the development of (newly) requested pharmacist delivered services. As universal health coverage (promoted by the World Health Organization [WHO] and United Nations' [UN] Goal 3 of the Sustainable Development Goals) will not be achieved without investment in the global pharmaceutical workforce; equally, sustainable remuneration models for pharmacy should also be considered in light of accessibility to quality, patient-centred healthcare.

The three statements of policy were tabled at the FIP Council meeting in September and were adopted. All of these policies are valuable and relevant to the South African context and will be adopted in 2021.

### Interactions with SAMA

During lockdown level five and four, a number of PSSA members reached out to the PSSA with complaints about doctors and their prescribing behaviours, difficulty in obtaining prescriptions for chronic patients, receptionists signing prescriptions, etc.

The PSSA approached SAMA and on 7 September 2020, the PSSA and SAMA met virtually. It was a very positive and productive meeting and both the PSSA and SAMA agreed that a closer working relationship would benefit both associations and their members. One of the positive outcomes of the meeting was that SAMA wanted to advertise some of the legislation webinar episodes to their members and ask their members to attend these sessions in order for them to be educated on legislation relevant to them, for instance the episode regarding prescriptions. The PSSA is looking forward to many more positive interactions with SAMA.

## The PSSA/Alpha Pharm distance learning programme 2020

*The PSSA/Alpha Pharm distance learning programme continues to offer pharmacists useful, practical, up-to-date information that enables them to provide optimal pharmaceutical care to their patients.*

### Module 5, 2020 – Screening services in pharmacies: blood pressure, blood glucose and cholesterol

Primary care is becoming increasingly important and pharmacists are well positioned and qualified to play a valuable role in this regard. As a component of primary care, screening services have become part of the armamentarium of services which pharmacists

can provide in a pharmacy. This is recognised by the South African Pharmacy Council which has listed the services that may be provided by pharmacists and for which a fee may be levied.

This module addresses blood pressure, blood glucose and cholesterol screening as the early identification of hypertension, diabetes and hyperlipidaemia is important so that these conditions can be treated, and better health outcomes achieved.

*For more information about this programme contact Gill or Glynis at Insight Medicine Information on 011 706 6939 or email: cpdalphapharm@insightmed.co.za.*

## The PSSA/Alpha Pharm clinical education programme 2020 for pharmacy staff

*The PSSA/Alpha Pharm pharmacy staff clinical education programme continues to offer front-shop assistants or pharmacist's assistants up-to-date information that enables them to provide optimal pharmaceutical care to their patients. All pharmacy staff need to be familiar with the use of unscheduled medicines and should be reminded of when it is necessary to refer the patient to the pharmacist.*

### Module 5 – High blood pressure

High blood pressure (BP) or 'hypertension' is a common condition and a major risk factor for heart attacks, strokes and kidney disease.

High blood pressure does not usually cause any symptoms. People who have high blood pressure, therefore, are often unaware that they have the condition. Hypertension is therefore frequently referred to as a 'silent epidemic' or a 'silent killer' in South Africa because it remains under-diagnosed and inadequately treated.

Community pharmacies can help reduce the number of people living with high blood pressure by:

- Offering blood pressure screening tests and referring patients with high blood pressure readings to the doctor or clinic.
- Encouraging patients to change their lifestyle.
- Ensuring that patients take all their blood pressure medicines as prescribed.

This module discusses high blood pressure, its causes, risk factors and management in the community pharmacy setting.

*If you would like to participate in the PSSA/Alpha Pharm pharmacy staff clinical education programme please contact Gill or Glynis for further information on 011 706 6939 or email: cpdalphapharm@insightmed.co.za.*