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National Primary Care Pharmacist Competency System at MOH in Saudi Arabia

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Abstract

National Primary Care Pharmacy Competency System is the first founded by Ministry of Health in Saudi Arabia. The system is a part of the pharmacy strategic plan in Kingdom of Saudi Arabia. The system contained three sections, including a general core of primary care pharmacist and clinical pharmacist, primary care pharmacy administration commentaries, and primary care clinical pharmacy with different specialization. The system should do at least every year. It is difficult to find a study to examine the extent of primary care pharmacy competency. Most of the kind of literature discussed in single or one section of pharmacy practice. This system improves primary care pharmacy practice, with the emphasis on patients' medication education and counseling. Monitor drug therapy, and improve pharmacist communications skills with health care providers.

Keywords: National, Primary Care, Pharmacist Competency, Pharmaceutical Care, Ministry of Health, Saudi Arabia.

Introduction

In 2010, Ministry of Health (MOH) in Saudi Arabia released established general strategic planning for health care system for ten years 2010-2020 [1]. The plan covers on more than 2150 primary care centers [2].In 2012, General Administration of Pharmaceutical Care (GAPC) updated the general strategic planning of pharmaceutical for all hospitals and primary healthcare centers [3]. GAPC established some tools to follow up the implementation of this plan; pharmacist competencies system was one of them [3]. The definition statement of competency is "having the requisite ability or qualities" applies in pharmacy practice and clinical pharmacy specialties [4-5]. The international standard of Joint Commission of Hospital Accreditation and local standards of Saudi center of health care accreditation recommend this system as a part of health care institution accreditation [6-7]. The system improves pharmacy total quality management with emphasis on pharmacy practice and clinical pharmacy specialties.

Primary Care Pharmacy Competency

Pharmacy competencies improve pharmacy practice and clinical pharmacy proficiency. The study in the UK; conducted to measure the impact of hospital pharmacy competency from the baseline. The authors found the competencies improved significantly of medication history taking; medication management; identification, documentation and resolution of drug-related problems; appraisal of therapeutic options; and communication with doctors and nurses, and the majority of pharmacists found the system very useful professional tools. Another study conducted in the United state of America of a hospital pharmacist, the authors the competency system very informative and improve pharmacist daily practice by 88% of responders pharmacist. Also, in Croatia conducted study community pharmacist competency improves patient consultation, monitoring drug therapy, medicine information, and patient education. All previous studies none carried out at primary care centers [8-10].

Primary Care Pharmacy Competency in Kingdom of Saudi Arabia

The author and his team revised the literature from international pharmacy organizations including American College of Clinical Pharmacist (ACCP), The Pharmacy Council of New Zealand, Internal Pharmaceutical Federation (FIP), The National Association of Pharmacy Regulatory Authorities in Canada, and Pharmaceutical Society of Ireland (PSI). Not all these institution mentioned specific primary care pharmacy competency. The ACCP, only organization, stated specific primary care clinical pharmacy services establishing and evaluation [11-17]. The primary care pharmacist competency consisted of three parts, the first part of basic requirements for all pharmacists including Pharm D or Bachelor degree of pharmacy. The second part of administrative primary care pharmacy practice competencies including but not limited to the following; director of the primary care pharmacy, primary care clinical manager, staff pharmacist, fire safety, infection control, information management, medication safety, and patient counseling as showed Figure 1. The third part of the requirement specialization on type primary care practice. The pharmacist had post graduate year one (PGY1), post graduate year two (PGY2), and post graduate year three (PGY3) as explored in Table 1 [18-23].

In the international literature, a Thailand study found the highest score of competency skills of providing pharmaceutical care followed by Care of primary health and drug use plans in the community among hospital pharmacists [24]. Another Saudi study of Competency of Metered-Dose Inhaler Use with community pharmacists, with range 5-100% competencies skills [25]. Another study in Qatar, the author found 20% of the hospital pharmacist respondents; inadequate competenciesof developing research protocols [26].The author stated that's National Primary Care Pharmacy Competency System is the first existed in Saudi Arabia, Gulf, and the Middle Eastcountries; Qatar stated released a general pharmacy competency not specified for a primary care center [27]. The author is not familiar with any kinds of literature or published studies about the extent applications of the new system. The system started in 2013 and distributed to overall Ministry of Healthcare primarycenters; it applies on annual basis.

Conclusion

National Primary Care pharmacist competency system is new existed system at MOH primary care centers; the system improves pharmaceutical care skills. It improves monitoring of drug therapy lead to prevent drug-related problems, and get better the communication between the pharmacist and health care providers.

Figure 1: Administrative primary care pharmacy practice competencies

Table 1: Some examples of Competencies of Primary care pharmacist for adults and pediatrics

Program	Competency of Pharmacy Practice	Competencyof Clinical Pharmacy
Adults	Adults MTM Ambulatory Care Pharmacy Competency Adults Pharmacy InformaticsCompetency Adults Pharmacy Human ResourcesCompetency Adults Medical and Pharmacy Education Competency Adults Pharmacy Public Health Competency	**Adult General Medicine** Adult Internal Medicine Competency Adults Cardiology Competency Adults Nephrology Competency Adults Infectious Diseases Competency Adults Pharmacy Infection Control Competency Adults Endocrinology& Metabolism Competency Adult Pulmonary Diseases Competency Adult Hematology and Anticoagulation Competency Adult Drug Utilization Evaluation Competency Adult Drug Information Competency Adult Medication Safety Competency Adults Pharmacoeconomics Competency Adults Pharmacogenomics Competency Adults Pain Management Competency **General Psychiatry** Addiction Medicine Competency Child / Adolescent Psychiatry Competency Addiction Medicine Competency Geriatric Psychiatry Competency Adults Psychiatry Competency **General Family Medicine** Managed Care Pharmacy Competency Pharmacy Public Health Competency Geriatric Medicine Competency Adults Ambulatory Care and Primary Care Competency Pediatrics-Ambulatory Care and Primary Care Competency Pharmacy Home Health Care Competency Mass Gathering Pharmaceutical Care Competency Ramadan Pharmaceutical Care Competency
Pediatrics	Pediatrics MTM Ambulatory Care Pharmacy Competency Pediatrics Pharmacy InformaticsCompetency Pediatrics Pharmacy Human Resources Competency Pediatrics Medical and Pharmacy Education Competency Pediatrics Pharmacy Public Health Competency	**General Pediatrics** Pediatrics Endocrinology Competency Pediatrics Nephrology Competency Pediatrics Hematology and AnticoagulationCompetency Pediatric Infectious Diseases Competency Pediatrics Pharmacy Infection ControlCompetency Pediatrics Pulmonary Diseases Competency Pediatrics Cardiology Competency Pediatrics Drug Utilization Evaluation Competency Pediatrics Drug Information Competency Pediatrics Medication Safety Competency Pediatrics Pharmacoeconomics Competency Pediatric Pain Management Competancy Pediatrics Pharmacogenomics Competancy

Definitions Referral Primary care center	M1: Referral PCC for post graduated studies services up to 32,000 of population M2: Referralinternal sector PCC services up to 32,000 of population M3:Referral PCC services internal cities up to 44,000 of population M4:Referral PCC services internal cities with housing up to 32,000 of population M5:Referral external sector PCC services up to 16,000 of population M6:Referral external sectorwith housing PCC services up to 16,000 of population M7:Referral small PCC services up to 32,000 of population
A0	Primary care centers located at more than 35 km distance, andservices 2,000-9,000 of population
B	Big Primary care centers located at outside cities, and within 35 km distance from referral PCC B1 :PCC services 15,000-25,000 of population B2 :PCC services 12,000-15,000 of population B3 :PCC services 3,000-12,000 of population
C0	Big Primary care centers located at inside cities services up to 32,000 of population

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