

CONFERENCE ABSTRACTS

FIP CAPE TOWN 2024

82nd FIP World Congress of Pharmacy and Pharmaceutical Sciences in Cape Town, South Africa,
1 to 4 September 2024

Pharmacy technicians

Pharmacists' perceptions of task shifting: A South African experience

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Introduction: Task shifting is a globally accepted strategy used to optimise limited human resources by shifting defined specific tasks from a higher-trained health worker with a broad scope of practice to a lesser-trained health worker with a narrower scope of practice; thus, tasks shifted from pharmacists to pharmacy support workers (PSP) in a pharmacy context. The motivation for this study originated in the researcher's passion for the profession of pharmacy and the perceived need to optimise the limited human resources for health (HRH) in South Africa.

Objective: This study explored a select group of South African pharmacists' perceptions and understanding of task shifting in the context of community and institutional pharmacies.

Methods: This study employed a qualitative, phenomenological design using the interpretive paradigm and logic of inquiry. Pharmacists working with PSP were recruited to participate through convenience sampling. Data were collected through the analysis of semi-structured interviews conducted in person and via Microsoft Teams. Interview transcripts were thematically analysed using Atlas Ti® to manage the data and identify codes and themes. Pharmacists' perceptions of task shifting and the factors that influenced implementation were coded, and trustworthiness was achieved using Guba's four quality criteria. Verification of codes by an independent reviewer and the interpretation and accuracy of analysis of the interview transcripts were confirmed by participant member checks. The role of the

researcher was considered, and perception was bracketed during a pilot interview.

Results: Data were collected from fourteen pharmacists for this study. The participants represented pharmacists working in community and institutional pharmacies in the Eastern Cape (Port Elizabeth, Uitenhage, East London and King Williams Town), the Western Cape, and the North West Province of South Africa. Eight participants were employed in institutional pharmacies (one private), and six participants were employed in community pharmacies (three independent and three corporate). Results showed that the relationship between pharmacists and PSP influenced task shifting. Factors such as competence, motivation, available resources, work ethic, and management styles influenced the relationship between pharmacists and PSPs, which in turn affected pharmacists' perceptions of task shifting.

Conclusion: Most pharmacists viewed task shifting as a powerful tool to address staff skill optimisation and compensate for staff shortages. However, it needs to be implemented in a safe manner that does not introduce risk to patients by decreasing the quality of services provided or jeopardising a safe work environment for staff. Pharmacists perceived task shifting favourably, and pharmacists experienced increased involvement in advanced pharmacist roles through time saved by shifting technical tasks to PSP.

A 2023 nationwide survey of immunising pharmacy technicians

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Introduction: Pharmacy technicians began administering immunisations in one U.S. state in 2017. At the beginning of the COVID-19 pandemic, a Public Readiness and Emergency Preparedness Act (PREP Act) amendment expanded the legal authorisation of pharmacy technicians to immunise in all U.S. states as long as specific criteria for training and certification were met. Although past research has evaluated the role of the immunising technician, opinions of the technicians themselves regarding the impact of immunisation training have not been explored in detail. The objective of this research was to evaluate the perceptions of immunisation-trained pharmacy technicians.

Methods: In 2023, a cross-sectional survey was sent to 6000 pharmacy technicians who had previously been trained to administer immunisations using the American Pharmacists Association (APhA) Pharmacy-Based Immunisation Delivery for Pharmacy Technician training program. Potential participant technicians were emailed an electronic link to the survey questionnaire using the contact information provided during the training. The questionnaire was created by the developers of the APhA program and piloted by national immunisation and pharmacy technician workforce experts. The Institutional Review Board at Washington State University found this work to be exempt from the need for full board review.

Results: Two hundred thirty-six technicians responded to the survey. When asked what percentage of the immunisations given in the pharmacy were administered by a technician, 34% reported that the majority of immunisations were given by a technician, and an additional 45% reported that about half were given by a technician. Eighty percent of technicians report feeling supported by their pharmacist(s) to immunise. Sixty-four percent of technicians also reported that their job satisfaction has increased since becoming an immunising technician. The most common factors in the decision to participate in immunisation administration training reported by technicians included wanting to learn a new skill (27%), obtain an advanced role (16%), assist with pharmacy workflow/workload (15%), because they were financially incentivised by their employer (13%), and to build their

CV/resume (12%). Financial incentives reported by the technicians included the employer paying for the training (39%), a one-time financial incentive such as a bonus (32%), and a wage increase (15%). The majority (90%) of the trained technicians believe that properly trained technicians should be allowed to immunise in all U.S. states.

Conclusion: The COVID-19 pandemic and PREP Act have led to rapid expansion of immunising technicians in the U.S. Although many technicians were incentivised to participate in immunisation training, they report that their job satisfaction has improved since they began immunising. Immunising technicians surveyed reported they are giving half or more of the immunisations in their pharmacies. The majority of technicians feel supported by supervising pharmacists in this new role and believe properly trained technicians should be allowed to immunise in all U.S. states.