On 22 July 2015 I received the May 2015 issue of the SAPJ – it takes a while to cross the Atlantic Ocean, hence this rather delayed comment concerning its contents.

I always read Lorraine Osman's editorial "A Piece of my Mind" first because it neatly summarises the content, and it also touches on what is current in matters pharmaceutical. Just because I have retired from the workforce does not mean I have lost interest in my profession!

In the May "Piece" Lorraine writes that "leadership is a critical current topic" and she continues by asking a few questions such as "Do we have leaders waiting in the wings?"; "Has your branch or sector developed leaders that can serve on the national executive committee?"; "Have you nurtured young pharmacists to take over from the 'oldies'?"; "Are our older, more experienced pharmacists hogging the platform?" She also mentions the Young Pharmacists' Committee.

I then read Johann Kruger's "President's Message" about pharmacists and leadership and his opening sentence reads "As pharmacists you are all leaders, leaders in your pharmacy, the corporate environment you work in, the community you live in". He continues to discuss what leadership entails. He also states that unfortunately the best pharmacists are rarely prepared for the challenges of leadership due to the lack of tools and resources. He further describes the qualities of a leader, these being, inter alia, good communication skills, honesty, ability to delegate, confidence, and commitment. He concludes that pharmacists are some of the best leaders in the world.

The heading of FORUM, which is SAAHIP's section of the Journal, asks the question "Pharmacy leaders for the future – are we doing enough?" The article outlines the proceedings of a workshop that took place during the SAAHIP conference held in March 2015. Questions were asked, group discussions took place, key messages were disseminated, and conclusions were reached. The workshop delegates concluded that "while some attention was being paid to the development of leaders in pharmacy, more needed to be done". Another conclusion reached was that "the development of appropriate leadership skills is not the inevitable consequence of attaining an advanced degree, but that leaders must be grown and nurtured".

I am deliberately referring to and quoting from the above reports and articles because I am concerned about the other side of the coin, the rudderless pharmacists and pharmacist's assistants who seem to have slipped through the cracks and are in need of leadership. It is glaringly obvious that communication from the leaders in the various sectors of pharmacy is non-existent. In this era of electronic communication it is inexcusable. The voluntary organisations, the universities, the statutory bodies, and the government departments are equally guilty.

I have for some eighteen months been a member of a closed group on Facebook entitled PharmacySA and I have been following the discussions and comments with great interest, and in some cases with extreme apprehension. The opinions voiced on this social medium site by members employed in the field of pharmacy, reflect their complete dissatisfaction with the direction pharmacy is taking, their disenchantment with working conditions, and, in their view, leadership is completely lacking in the profession.

I have browsed through the group's membership list (5677 members) and it comprises a wide range of members, including very experienced pharmacists, some of whom can be considered past leaders in SAAHIP and the PSSA, some known to me personally, younger pharmacists, pharmacist's assistants, and persons who appear to be not remotely connected to pharmacy. I have been led to believe that the administrator is a pharmacist. When I first joined the group I saw names of colleagues, also known to me, participating in the discussions and providing excellent answers to queries. But gradually, as the tone, language, and lack of insight deteriorated in the discussions, these experienced pharmacists dropped out, no doubt through frustration and incredulity. The questions being asked, and the comments being made, displayed an abysmal lack of basic knowledge.

Presently members of this group are in the throes of starting a new organisation to deal with their dissatisfaction with salaries, working conditions, frustrations in trying to communicate with the South African Pharmacy Council and the Department of Health, the exploitation by medical aids, and lastly their disapproval of lay ownership of pharmacies.

With the aid of Google, and as a reminder to all, I have listed the organisations in South Africa that are currently in existence to represent pharmacists and the various branches of pharmacy. I hope I have not omitted any. I have copied and pasted from their respective websites and italicised the content.

SAAHIP

"SAAHIP is an acronym for the South African Association of Hospital and Institutional Pharmacists."
As a sector of the Pharmaceutical Society of South Africa (PSSA), SAAHIP has the following as its objectives:

1. To promote the professional, educational and economic interests of the members of the Association and of the pharmaceutical profession, with specific emphasis on pharmacists active in the practice of hospital and institutional pharmacy;
2. To uphold and improve the professional integrity and standards of professional conduct of the members of the Association;
3. To improve, promote and maintain the image of the profession;
4. To represent generally the views and interests of the members on all pharmaceutical matters, including representing the members in dealings with government and similar agencies;
5. To uphold and assist in the promotion and maintenance of the health of the people of South Africa through the provision of a satisfactory and dependable pharmaceutical service;
6. To provide and promote benefits to its members and to do all such things as may advance the interests of its members; and
7. In recognising the diversity of the population of the Republic of South Africa, to promote the representation of all sectors of the South African community in its membership.

"For more about SAAHIP visit www.saahip.org.za"

South African Association of Pharmacists in Industry (SAAPI)

(A sector of the Pharmaceutical Society of South Africa)

"SAAPI represents pharmacists and allied professionals who practice in the industry, and provides value to PSSA members who practice in the industry.

"Our Vision

"We see pharmacists in industry taking responsibility for leading change and being at the cutting edge of all relevant scientific, professional, environmental and political ventures and promoting unity in our profession".

"Our Objective

"To maintain and promote professional standards, responsibilities and interests of pharmacists in industry in order to play an active role in ensuring the quality, safety and efficacy of manufactured medicines, as well as in the health care delivery system in SA."

SAACP (South African Association of Community Pharmacists)

"All services are provided only to members of PSSA.

"Community pharmacy services are being continually motivated to key role players at all relative levels. Personal lobbying, promoting the value and cost-effectiveness of broad spectrum community pharmacy practice, is comprehensive, ongoing and includes:

- Opposing mail order medicine delivery systems
- Opposing ownership of community pharmacies by lay people
- Motivating licensing and controls over dispensing by doctors and other non-pharmacist professionals.

- Recognising the pharmacist as an authorised prescriber of medicine by third party payers.
- Acceptance by payers of a professional fee for professional services provided by the pharmacist.
- Developing and expanding the scope of practice for which a pharmacist may levy a fee.
- Submissions to relative authorities on the Health Bills and Regulations thereto focusing on community pharmacy practice.
- Resolving discriminatory pricing practices by some manufacturers adversely affecting community pharmacies.
- Attendance at international meetings with similar type organisations addressing community pharmacy problems and opportunities.
- Recommendations and actions are promoted in liaison with PSSA."

Academy of Pharmaceutical Sciences of the PSSA

“Established in 1979, the Academy caters for the needs of pharmacists and non-pharmacists involved in any sphere of pharmacy. The criteria for membership of the Academy are that members shall through active involvement or through an interest in: education; research and development; production; control or marketing of medicines or; community or hospital practice of pharmacy, contribute to the pharmaceutical sciences and technology and the professional practice of pharmacy.”

“For more about the Academy visit http://www.academy-pssa.org.za"

Young Pharmacists’ Group (YPG)

“The mission of the Young Pharmacists’ Group (YPG) is to promote the goals of the PSSA by encouraging the young members of the Society to participate in PSSA projects and activities. In so doing, YPG aims to develop individuals who can act as agents of positive change at local, national and international levels, both in the profession and in society.

“The YPG network consists of individual members of PSSA who are recent graduates (up to 5 years after graduation from their first degree in pharmacy) or below the age of 35.

“For more information, you can contact YPG at ypg@pharmail.co.za”

South African Pharmacy Students’ Federation (SAPSF)

“The South African Pharmacy Students’ Federation is a professional federation that represents ALL Pharmacy students studying in South Africa.

“Our Mission is to unite and serve Pharmacy Students and to work towards improving the quality of health care for all South Africans.

Aims & Objectives

- To Promote Health Awareness by providing health services in the community
- To promote the profession of Pharmacy & to encourage the highest level of ethical & moral conduct in SAPSF members
- To contribute to the maintenance of high standards of pharmacy education
- To support the establishment & activities of pharmacy student organizations
- To establish & maintain links with other pharmacy students at international levels
- To develop YOUR potential as a competent professional”
Independent Community Pharmacy Association (ICPA)

“…was formed in May 2011 to provide independent community pharmacy with collective strength and a coherent voice that is heard by government, medical schemes, pharmaceutical suppliers and importantly, the consumer.

“ICPA represents the largest pool of professionals in the healthcare sector with over 1 100 pharmacies, about 2 500 pharmacists and 20 000 supportive healthcare personnel spread across metropolitan, urban and rural South Africa.

“ICPA was formed following the amalgamation of USAP (United South African Pharmacies), SAPPA (SA Progressive Pharmacy Association) and owners of independent community pharmacy not aligned with either of these associations.”

Discussion threads on PharmacySA

Bearing all these lofty aims and ideals in mind, I have copied and pasted selected comments and responses which appear in two discussion threads on PharmacySA. The first starts on 17 July 2015 and the second on 23 July 2015. I have removed names and places. I was tempted to use a third thread, but I think I have enough to make my point. I have not tampered with the spelling and the language, and I have no intention of saying anything in regard to the latter. The reader can draw his or her own conclusions. I reiterate that I have copied selected bits, but the thread should still make sense.

Thread 1

What are we pharmacists doing about restoring the standard and integrity of our profession?... except complaining...

For example, the large retailers have a handle on everything on our profession. From manufactory through wholesale to community pharmacy?

Has anyone thought of taking them on? Has anyone thought of challenging or even amending the law that says anyone can own a pharmacy and employ a pharmacist to run it?

Is it because of lack of business skills teaching in the curriculum we were taught in the B.Pharm programme?

Are we okay just surviving with status quo?

Share your views

A response:

We are a group of pharmacist who have come together to address some issues affecting us in the profession. Most of the pharmacists are extremely unhappy with locum rates which have barely broken beyond the R250 - R280 mark in at least the past 10 years. A petition has been drawn to push for R500/h which the agencies are more than happy to pay for public holidays.

Other issues include ownership of pharmacies, shortages of pharmacists; Price competition; DSP; etc.

We have found that with the right numbers we can challenge some of these issues in court so the meeting is essential to tally up what needs to be done & forge a way forward. Meeting is scheduled for Sat Jul 2015 at 9am at Midrand 1662 in Gauteng. Plz visit the following pages on facebook. “& o meeting” to confirm attendance, send apology & invite all pharmacists in ur friends list.

And another:

If you look at the problem carefully you will realize that it is actually our government that is failing us. The disaster started with the now infamous 26%/R26 max "professional fee". It has now been amended but corporate pharmacy has been allowed to use pharmacy as a loss leader in driving traffic into their stores. The professional fee paid by GEMS is yet another indication of how we are rated by them. SAPC has more appointed members than elected pharmacists so is also not representative of us and falls under the DOH anyway. –> to fix our problem: Pharmacy in our country is actually in crisis because at all levels there is not enough money in the system to provide proper pharmaceutical service. Cutting corners with the use of too many assistants and courier pharmacies is not the answer. You will have to either convince the government to intervene on our behalf OR vote out the government and hope that a new one will appreciate us more.

Thread 2

I said to a friend of mine am locuming Sater and Sunday at …….. _ He said to me why do I work on weekends like an uneducated person...why did I go to school. _ This was the second person to ask me to question ... and I was immediately reminded of wat Chris Rock(Comedian)Once said when he said “ How many of you work two jobs just to have enough money to get ur broke ass home” _ and immediately I thought of my recent encounter with S A R S _ S A R S say I owe them money when I ask why _ am told its because I make extra cash thru locuming _ then I say but those locums are taxed _ they say yes they are taxed at 25% instead of 50%. Why should S A R S come to me...I dnt tax myself...why dont u ask Clicks _ Medirente _ Dischem as to why they are taxin me at that percentage..... whole S A R S thing completely annoys me...Why should u be taxed at 50% for work done at ur spare time _ isn't the tax we payin not enough _ I feel we being milked to death _ am sorry I dont money for u S A R S _ take me to jail.If I do pay u for reasons unknown to me _ can only give u R50 pm.I see the economic situation in Greece_ and I sense there is an economic revolution comin in S A.

After several comments regarding the realities of paying taxes, another comment:

It is becoming apparent that economics, financial planning, and personal budgeting should be part of PSSA’s CPD programme!

After many more:

So let’s all sit back, feeling sorry for ourselves, and post crap, because we know no better and haven’t found out the facts... please!! People are naive and lack a proper understanding of the facts ...no wonder pharmacists are being “exploited”

Then a comment summarising rather succinctly:

In the past week I have seen people on this forum blaming corporate employers, like Dischem, Clicks and Medirente. I have seen them blame SAPC, ICPA, and PSSA. Now we are blaming SARS? A petition was even started in an attempt to force locum salaries to R500/hour. But nowhere, not once, was medical schemes, multinational drug manufacturers or Government targeted for the real issue affecting our profession... inadequate dispensing fees. Stop whinging and whining and rather put together a group of pharmacists to lobby acceptable dispensing fees and for recognition from medical schemes about the pivotal role we play in the delivery of health care in this country.
A response to this:

My observation _ often pharmacy owners dont like pharmacist (generalisation) coz obviously that have to deal with their demands of “higher hourly rate” _ but its fine when we have to cheat for ur Bussines and sell scheduled substances without scripts....Xpecialy private pharmacy owners.u entitled to ur opinion yes and u dont have to agree with everyone but u sound unsympathetic to thz tax issue as if it doesn’t affect u.

An exhortation:

Pharmacist and Pharmacist’s Assistants. We are running out of time let’s unite and take back our profession and reclaim our dignity. Let’s us all unite and join UPP(Union of Pharmacy Professionals of South Africa). This platform ( UPP) will allow us to fight productively. I think we have spoken now it’s now time for action let’s take to the street now. At least we have leadership now of which was absent all these years. UPP ( Union for Pharmacy Professionals of South Africa) is now here to guide and serve our interest.

A response:

Some people gets hurt when u tell the truth(me included@times) _ pharmacist do not live in a vaccum but comes frm different communities around the country with different upbringings, mindset and all other factors. If we divided at a community level _ it is naive to think that we can be united by thz platform just because we hold the same qualifications.

Another:

So, now another organization. It does not help matters when pharmacy is so fragmented. There are insufficient pharmacists in the country to form an effective trade union. The government is controlling the profession at every level.

A reply:

I agree. But look at the name of the Union. Its not only for Pharmacist. It includes all the pharmacy personell Pharmacist Assistants and Technicians. So do not be negative about the numbers. If we can be able to unite we can win this war. Join the UPP

Another comment:

It’s not merely about our qualifications or our background/upbringing/ mindset. It’s about a group of people that have studied to be one thing - pharmacists. Yet we are (perceived to be?) exploited by corporate companies, medical aids and, through legislation, the government. And we simply take it lying down. I’ve seen the majority of posts from my colleagues on this fb page, and I share most of their frustrations.

Further comment:

Pharmacist and Pharmacist’s Assistants are employed by wide range of different employers, few are self-employed (private pharmacies), other are defined as independent-contractors(locum) fragmented as we are cannot allow capitalist and government to continue exploiting us. That is why we are saying enough is enough lets join via the platform UPP to start pushing our agenda. Lets reclaim back our profession. We lacked Leadership now a few group of pharmacists and pharmacist’s Assistants have come together and formed UPP Union for Pharmacy Professionals of South Africa lets unite behind them and be the force to push our agenda as pharmacy professionals.

An attempt at clarification:

If my memory serves me correctly, pharmacy support personnel were welcome to join SAAHIP. May I recommend that you invite members of other groups to attend your proposed meetings? That will be the only way to demonstrate solidarity.

A challenge:

United we stand divided we fall. We are now speaking of unity SAAHIP is in the past. Now we are speaking of uniting all pharmacy professionals viz Pharmacist, Pharmacist’s Assistants and Pharmacy Tecnicians. We invite even the SAAHIP only if their mandate is to push the agenda of the mentioned professionals

A final comment:

We invite …..to attend our second meeting that will be on the 12th September 2015. I also invite you to attend so that you will hear what are the views of the attending members. My personal view is that we have been failed by all the past leadership in the pharmacy sector we are in this situation or state because of inaction of all the organization you have mention. UPP will be radical and unapologetic about issues that affects the pharmacy profession.

Someone in the thread shared a link to a letter that a member had written and was published on the site m.news24.com: http://m. news24.com/news24/MyNews24/Bad-state-of-Retail-Pharmacy- services-20140910

Restless and militant pharmacists

I think by now my concerns have become quite clear. Leadership and communication are definitely absent, and the masses are becoming restless and militant. A total rethink on how communication takes place should be considered. What about webinars? Should information be disseminated by different methods? Should the Academy be doing more to teach the students about leadership and professionalism (and language and communication skills)? Becoming a pharmacist does not stop when the preregistration examination is passed. By the way, what was the percentage pass rate of the most recent one?

What is it about pharmacists that they are unable to work together and fight for the same goals? Early in my career I was told that pharmacists think in grains and scruples, so I guess they are unable to see the bigger picture. (For younger pharmacists, these were the measurements in place many years ago. A grain is about 0.06479891 grams, and 0.05 scruples. Ed.) Is it the training they receive or do they follow a career in pharmacy because they don’t care about the profession? What is the percentage pass rate of the most recent one?

Two decades, countless “bosberaads”, and at least forty conferences, have passed since everyone rejoiced at the implementation of the new Constitution. But the profession of pharmacy is still in the doldrums and lacking cohesion. The only visible growth over these years has been the complement of staff at both the South African Pharmacy Council and the respective government departments that work tirelessly at regulating the profession.

Nibbles – your column!