# Original Article

# ROLE AND CHALLENGES OF HOSPITAL PHARMACISTS WORKING IN LIAQUAT UNIVERSITY HOSPITAL HYDERABAD/ JAMSHORO, A PUBLIC SECTOR HOSPITAL, PAKISTAN

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### **ABSTRACT:**

**INTRODUCTION:** Hospital Pharmacist plays vital role and challenge in public sector. It is important component of health care system.

**AIM OF THE STUDY:** To institutionalize Hospital Pharmacists in the Public Sector Health System.

**OBJECTIVES:** To assess role of Hospital Pharmacists currently working, to identify Hospital Pharmacists' experience and the factors influencing while working in Public Sector in Liaquat University Hospital, Hyderabad/ Jamshoro.

**METHOD AND DESIGN:** Descriptive Cross-sectional study was carried out in District Hyderabad/ Jamshoro with census sampling of Hospital Pharmacists. Duration of study was from Oct 2016 to Feb 2017. Self-administered questionnaire was developed from the job description of Hospital Pharmacists provided by the Health Department, GoS for study to assess role of Hospital Pharmacists. Questionnaire has 4 parts include the questions on the duties, responsibilities, recognition, development and working environment for Hospital Pharmacists. The data was analyzed in SPSS IBM version 21.0.

**RESULTS:** 26 Hospital Pharmacists participated, among them 04(16%) were female and 22 (84%) were male. Majority of the participants (55%) were in the age group 25-35 years. Response rate was 96%. The mean age was calculated as  $\pm$ 34 years with monthly income of  $\pm$ 40000 PKR and mean of job experience was  $\pm$ 7 Years. Majority were having basic education of Pharm D.

**CONCLUSIONS:** Study results showed that there is a dire need of institutionalizing and proper training of the Hospital Pharmacist(s) in Liaquat University Hospital, Hyderabad/Jamshoro.

**KEYWORDS:** Hospital Pharmacist, Adverse Drug Reactions, Narcotic Drugs, Compounding, Dispensing, Prescription, Purchasing, Guidelines, Public Sector, Liaquat University Hospital.

# **INTRODUCTION:**

World Health Organization (WHO) has defined health as the state of complete physical, mental and social well-being and not merely the absence of disease or infirmity<sup>[1]</sup>. Within the

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context of this definition, health care providers play a major role in striving for health in a population. In terms of modern health care delivery, studies have shown that engaging multidisciplinary expertise is one of the goals for achieving ultimate population health. [2] Although the pharmacy profession is recognized for its importance as a health care provider in many developed countries, in most developing countries it is still underutilized<sup>[2]</sup>. Pharmacy is the health profession that links the health sciences with the basic sciences; it is committed to ensuring the safe and effective use of medication[3]. Pharmacist's professional roles and responsibilities have evolved historically from a focus on medication compounding and dispensing to extended pharmaceutical care services<sup>[4]</sup>. An increase in health demands, with a complex range of chronic medicines and poor adherence to prescribed medicines, has forced pharmacists to take a patient-centered approach[5]. The paradigm shift for pharmacy practice took turn in 1990, when Helper and Strand introduced the term "pharmaceutical care<sup>[6]</sup>. Over the last few decades, pharmacy organizations and academic training programs around the world have promoted pharmaceutical care as a philosophy and standard of provision of care for patients<sup>[7]</sup>. In essence, the pharmaceutical care concept has transformed the pharmacy profession to be more accountable in patient care, especially to ensure that a patient achieves positive outcomes from drug therapy[9]. In many parts of the world, pharmacists have played a significant role in provision of pharmaceutical care services. In addition, it is also widely believed that pharmacists can make a great contribution to the provision of the primary health care, especially in developing countries<sup>[9,10]</sup>. Their role varies in different parts of the world: some deal with the preparation and supply of medicines, while some focus on sharing pharmaceutical expertise with doctors, nurses and patients[11]. Aim of the study is to institutionalize the Hospital Pharmacist in the Public Sector Health System in Sindh. Objectives of the study are to assess the role of Hospital Pharmacist, to identify their experiences and the factors influencing while working in Public Sector in LUH, Hyderabad/ Jamshoro, Sindh.

#### **METHODOLOGY:**

Descriptive Cross-Sectional study was conducted in Hyderabad and Jamshoro Districts Liaquat University Hospital from all HPs who were working in LUH, Hyderabad/ Jamshoro. Duration of the study was from October 2017 to February 2017. Census sampling was done. Hospital Pharmacist working in hospitals of Public Sector in Liaquat University Hospital was included

Data was collected through questionnaire designed from the job description of the Hospital Pharmacist appointed in Public Sector based on a questionnaire (based on job description of HPs) which had following 4 section include;

- Demographic Information of Hospital Pharmacist
- Duties and Responsibilities of Hospital Pharmacist
- 3. Professional Development and Recognition of Hospital Pharmacist
- 4. Working Environment of Hospital Pharmacist.

Each section of the questionnaire comprised of, over a set of statement against which respondents were asked to indicate the level of agreement. The tool was used and designed from job description and Minnesota satisfaction questionnaire. In second section, the respondents required to say "Yes" or "No". In addition, the 3<sup>rd</sup> and 4<sup>th</sup> section 4 point Likert Scale. For uni-variate, Non-parametric Statistical Tests, appropriate description and inferential statistics were applied to the collected data. The demographic information collected includes age, gender, years of experience and frequencies. For Bivariate, the Fisher Exact Test [FET] was used to test the significance of association between the Independent Variables (Age, Gender, Years of Experience) and Dependent Variables (Job Responsibilities, Job Satisfaction, Job Development and Recognition). Statistical significance was applied at **p-Value** < 0.05 and was calculated to determine the association of different factors. Quantitative data was coded into SPSS 20.

**Table 1: Socio-Demographic of Variables Statistics of Hospital Pharmacists** 

Frequency	Percentage
22	84.6
04	15.4
<u>+</u> 34	
<u>+</u> 30	
<u>+</u> 7	
<u>+</u> 40000	
	22 04 ± 34 ± 30 ± 7

The study comprised of 26 Hospital Pharmacists. **Table 1** presents socio-demographic characteristics of the participants including Male 22(85%) and Females 4(15%). Mean age of males was 34 years and female was 30. Hospital Pharmacists [HPs] had permanent employment; with professional experience was  $\pm 7$  years. All participants had Pharm D Degree and posted in Liaquat University Hospital, Hyderabad/Jamshoro among them they reported monthly income of more than 40,000 PKR.

**Table 2: Responsibilities and Duties of Hospital Pharmacist** 

VARIABLE		Frequency	Percentage
Gender	Male	22	84.6
	Female	04	15.4
Checking of prescription	Yes	26	100
	No	00	00
Advice on dosage form	Yes	23	88.5
	No	03	11.5
Ward round in hospital	Yes	23	88.5
	No	03	11.5
Involvement in decision making	Yes	15	57.7
	No	11	42.3
Storage of medicine	Yes	24	92.3
	No	02	7.7
Supervision of less trained staff	Yes	25	96.2
	No	01	3.8
Writing guidelines	Yes	14	53.8
	No	12	46.2
Research and development	Yes	04	15.5
	No	22	84.6
Information on drug expenditure	Yes	14	53.8
	No	12	46.2
Preparation of sterile products	Yes	05	19.2
	No	21	80.8
Quality of drugs	Yes	21	80.8
	No	05	19.5
Treatment discussion with patients	Yes	22	84.6
	No	04	15.4
Treatment discussion with general	Yes	17	65.4
practitioner	No	9	34.6
Supervision of clinical trials	Yes	03	11.5
	No	23	88.5

Teaching in pharmacy of hospitals	Yes	5	19.2
	No	21	80.8
Recording of Adverse Drug Reaction (ADRs)	Yes	15	57.7
	No	11	42.3
Purchase of drugs	Yes	5	19.2
	No	21	80.8
Role in pharmacy and therapeutics	Yes	8	30.8
committee	No	18	69.2
Prepare and compound of drugs	Yes	5	19.2
	No	21	80.8
Maintain record of pharmacy and narcotic	Yes	13	50
drugs	No	13	50
Requisition for dispensing drugs	Yes	15	57.7
	No	11	42.3
Preparation of periodic report	Yes	11	42.3
	No	15	57.7

## **RESULTS:**

Results of the study was analyzed and presented in following descriptive Statistics. Data was presented in form of frequencies and presentation of the participants as following;

**Table 2**, based on 22 questions describing the responsibilities and duties of HPs working in Public sector presents that almost (26 respondents) 100% were of the view that they check prescription to ensure that it is appropriate and safe for individual patient. It also suggested that the fundamental duties of Pharmacist are at par excellence as far as their job. When asked if they provide advice on dosage of medicine i.e. appropriate form of medicine, around 88.5% said yes and 11.5% casted their response in No which indicates that their worth of subjective and administrative is very obvious. Similar percentage was also observed for the active participation in ward round for taking patient drug history. Situation in which HPs were involved in decision making on appropriate was around 57.7% in Yes while 42.3% negated which signifies that there was a professional gap on taking most of the HPs on board for effective utilization of their skills and knowledge. On asking the appropriate and safe storage of medicine, 92.3% of the HPs declared the Yes whereas 7.7 negatively remarked. 96.2% HPs responded positively for the supervision of less trained staff and 3.4% responded in negative. It indicated that they are involved in developing not themselves but also they are found to develop others as well during their official hours. The divided opinion was given in 53.8% for writing guideline for drug use in the hospital from the HPs and 46.2% responded in negative. It showed that administration should give more attention to the professional knowledge of HPs in future as recommendation. The 84.6 % of HPs did not contribute to research and development which open an opportunity for the Hospital Pharmacy while 15.5 % positively responded in relation with this study being conducted in this regard. 53.8% HPs were found in provision of information on expenditure of drugs of the hospital and 46.2% did not do so. 80.8% of the professional HPs showed that they did not prepare any sterile medication within hospital and 19.2% positively responded. Quality of drugs is utmost important in healthcare set ups. In this regard, 80.8% HPs optimistically responded for checking the quality of drugs and 19.5% did not agree with the statement. 84.6% and 65.4% of the respondents are involved in discussing treatment with patients or their relatives and Community Pharmacist or General Practitioner respectively. It was already mentioned that there was less contribution of HPs in the Research and Development, 88.5% no clinical trials conducted for the development of the Pharmacy Services in the hospital. When asked for their involvement in teaching in Pharmacy department and hospital, the 80.8% response

was in saying No which required focus attention to make use of HPs for imparting their academic abilities academically for the betterment of Services in Public Health. 57.7% of the HPs were found playing a role in recording of Adverse Drug Reactions in the hospitals and 42.3% were having no role as such in recording ADRs. There is a dynamic role of HPs in purchasing the drugs for pharmacy but the

situation is very opposite that 80.8% HPs were not authorized to purchase the drugs while 1.2% shared their positive response. 69.2% of HPs have no specific role in Pharmacy and Therapeutic Committee in Hospital. 80.8 % HPs responded that they did not prepare, compound, dispense or manufacture pharmaceuticals in hospital's Pharmacy.

Table 3: Professional Development and Recognition of Hospital Pharmacist

Contents	SA*	A*	DA*	SDA*
Adequate opportunities to develop	8(30.8%)	10(38.5%)	8(30.8%)	0
Expectation at Work	6(23.1%)	16(61.5%)	4(15.4%)	
Freedom at work	4(15.4%)	17(65.4%)	4(15.4%)	1 (3.8)
Enough time for job activities	6(23.1%)	20(76.9%)	0	0
Responsibility	7(26.9%)	18(69.2%)	1(3.8%)	0
Public Appreciation	7(26.9%)	10(38.5%)	9(34.6%)	0
Status in Society	8(30.8)%	9(34.6%)	9(34.6%)	0

<sup>\*</sup>SA= strongly agree, \*A=agree, \*DA=disagree, \*SDA=strongly disagree

**Table 3** comprised over 7 questions for knowing the satisfaction level of HPs in their professional development and recognition in career. Most of the participants were satisfied with the level of satisfaction in terms of personal growth at workplace with an adequate opportunity to develop 69.3, and was lower among the participants 30.8%%. The majority of HP reported recognition for the expectation at work satisfaction level was 84.6% and dissatisfaction was found in 15.4%. Most of the



They also reported satisfaction of public appreciation 65.1% and 65.4% of status in society. However, overall job satisfaction for development and recognition in career include were 25.28% strongly Agree, 54.94% Agree and 19.22% Disagree, was reported by participants, as represented in **figure 1**.

HPs felt freedom at work was at level of 80.8% to that of lower level of 19.2%. HPs found 100% of time for job activities in the hospital. 96.1% of the participants were found to have responsibility for their professional development in career.



73.1% strongly disagreed lowering down the level satisfaction for any involvement in decision-making. It showed that the maximum role of HPs is not institutionalized yet. 53.81% level of satisfaction was taken into account for HPs for sufficient staff which may hamper the professional skills their as desired by the Public Sector. However, overall job satisfaction for effective working environment in career include were 25.47% strongly Agree, 53.33% Agree, 18.26% Disagree and 2.87% strongly Disagree, was reported by participants, represented in **figure 2**.

Contents	SA*	A*	DA*	SDA*
Working relationship with peers /	8(30.8%)	18		
contemporaries		(69.2%)		
Working relationship with sub-ordinates /	11(42.3%)	14(53.8%)	1(3.8%)	
juniors				
Working relationship with seniors	7(26.9%)	18(69.2%)	1(3.8%)	
Co-operation between staff and	8(30.8%)	14(53.8%)	4(15.4%)	
management				
Channel of communication	8(30.8%)	9(34.6%)	9(34.6%)	
Seniors concerned about well-being	3(11.5%)	18(69.2%)	4(15.4%)	1 (3.8%)
Involvement in decision making	5 (19.2%)	9(34.6%)	10(38.5%)	2(7.7%)
Sufficient support staff	3(11.5%)	11(42.3%)	9(34.6%)	3
		,		(11.5%)

**Table 4: Working environment of Hospital Pharmacist** 

**Table 4** Comprised of 8 questions for knowing the satisfaction level of working environment of HPs in their professional career. The tables showed that there is a higher l00%, 96.1% and 96.1% satisfaction for working relationship among peers/ contemporaries, sub-ordinates / juniors and seniors respectively. It put forwards an opinion that there was a team work and great level of co-ordination among the HPs with members of an organization i.e. Hospital where all professionals are developing themselves in achieving organizational goals to provide better

services to the patients. 84.4% level of satisfaction was found for co-operation between staff and management which reflected the interconnectedness of all health personnels. Besides, 65% of satisfaction level was reported for channel of communication which required to be improved for fair and optimum services smoothly with in facility. There was 80.7% satisfaction was observed with regards to seniors concerned about well-being of HPs in the hospitals.

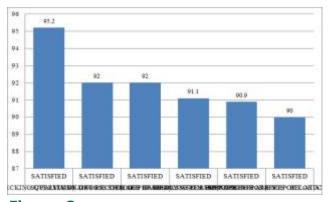


Figure: 3

the most of the HPs were found 80-95% satisfied with statement as mentioned in the questionnaire include checking quality of drugs (n=20, 95.2%), supervision of work of less trained staff (n=23,92%), maintaining record of Pharmacy and Narcotic Drugs (n=12, 92%), appropriate / safe storage of medicine (n=22, 91.7%), discussing treatment with patients or their relatives (n=20, 90.9%), preparing periodic report or annual report (n=10, 90%).

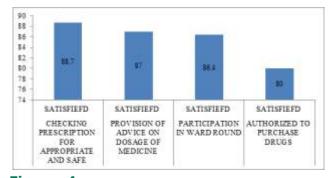


Figure: 4

The most of HPs were 80-90% satisfied against the statements as following, checking prescription for appropriate and safe for individual patient (n=23, 88.5%), provision of advice on dosage of medicine (n=20, 87%), participation in ward round in taking patient history (n=19, 86.4%) and authorization in purchasing of drugs for Pharmacy (n=4, 80%) in the hospital shown in **Figure 4**.

<sup>\*</sup>SA= strongly agree, \*A=agree, \*DA=disagree, \*SDA=strongly disagree

Table 5: Level of Satisfaction of Hospital Pharmacist on their Duties and Responsibilities.

Contents		Satisfied (%)	P-Value
GENDER	MALE	20(90.9)	0.408
	FEMALE	3(75)	
Checking of pres	cription	23(88.5)	
Advice on dosage	e form	20(87)	.681
Ward round in ho	ospital	19(86.4)	1.000
Involvement in d	ecision making	15(100)	.063
Storage of medic	cine	22(91.7)	.222
Supervision of le	ss trained staff	23(92)	.115
Writing guideline	S	14(100)	.085
Research and de	velopment	4(100)	.592
Information on d	rug expenditure	14(100)	.085
Preparation of st	erile products	5(100)	.512
Quality of drugs		20(95.2)	.085
Treatment discus	sion with patients	20(90.9)	.408
Treatment discus	ssion with General Practitioner	17(100)	.032
Supervision of cl	inical trials	3(100)	.681
Teaching in phar	macy of hospital	5(100)	.512
Recording of ADI	Rs	15(100)	.063
Purchase of drug	S	4(80)	.488
Role in pharmacy	and therapeutics	8(100)	.314
Prepare and com	pound of drugs	5(100)	.512
Record of narcot	ics drugs	12(92)	.500
Requisition for di	spensing drugs	15(100)	.063
Periodic report		10(90)	.619

**Table 5;** All HPs were found 100% satisfied with statement as mentioned in the questionnaire include, their involvement in decision making on appropriate treatment (n=15), writing guidelines for drug use (n=14), contribution for Research and Development (n=4), provision of information on expenditure of drugs (n=14), preparation of sterile medicine (n=5), discussing treatment with Community Pharmacist / General Practitioner (n=17),

supervision of clinical trials (n=3), , involvement in teaching in Pharmacy department / hospital (n=5), role in recording of Adverse Drug Reactions (ADR) in Hospital (n=15), specific role in Pharmacy and therapeutics committee (n=8), preparing, compound or dispense manufacture pharmaceuticals (n=5), control over requisition and dispensing of medicine (n=15), in Pharmacy of the hospital.

**Table: 6 Drug Related Duties** 

01	Checking of Prescription	23(88.5%)
02	Advice on Dosage Form	20(87%)
03	Storage of Medicine	22(91.7%)
04	Information on Drug Expenditure	14(100%)
05	Preparation of Sterile Products	5(100%)
06	Quality of Drugs	20(95.2%)
07	Purchase of Drugs	4(80%)
08	Requisition of Dispensing Drugs	15(100%)
09	Preparation and Compounding Drugs	5(100%)
10	Record of Narcotics	12(92%)
	SATISFACTION	84.6%

It is quite clear from this table that the Drug Related HPs duties are of prime importance and shows around 84.6% satisfaction level shown in **Table 6**. Since the HPs are supposed to fulfill the duties in relation with adequate information about drugs/ medicine in the hospital set ups. This overall satisfaction indicates that the most

of HPs are working and performing their duties ranging from checking of Prescription, Storage, expenditure, preparation and purchase of drugs. Represented drug related duties among them 84.6% were found satisfied whereas 15.4% were assessed as not satisfied as shown in above figure.

**Table 7: Treatment Discussion Related Duties** 

01	With Patients	20(90.9%)
02	With General Practitioner	17(100%)
03	Role in Pharmacy & Therapeutic Committees	8(100%)
	SATISFACTION	97%

Hps play very significant role in healthcare system. HPs are working very effectively among patients, General Practitioner and discussing the role in Pharmacy & Therapeutic Committees. About 97% of satisfaction was found as shown in **Table 7**, in order to discussing the treatment with mentioned

statements. It revolves a satisfactory role of HPs in the hospitals. According to data assessed regarding either treatment were being discussed with patients or not. Results were as 3% were declared as not satisfied with contents and 97% were satisfied that they were satisfied.

**Table 8: Hospital Focused Duties** 

01	Ward Round in Hospitals	19(86.4%)
02	Involvement of Decision Making	15(100%)
03	Supervision of less Trained Staff	23(92%)
04	Teaching in Pharmacy of Hospitals	5(100%)
	SATISFACTION	94.5%

Hospitals have in-door Pharmacies where HP is very much busy in performing the basic duties. Along with his core duties. The satisfaction level

was around 94.5% was found as shown in **Table 8**. 5% HPs were found satisfied and 95% was not satisfied to the hospital focused duties

Table 9: Research based Duties

01	Writing Guidelines	14(100%)
02	Research and Development	4(100%)
03	Supervision of Clinical Trials	3(100%)
04	Recording of ADRs	15(100%)
05	Maintenance of Annual Report	10(90%)
	SATISFACTION	98%

On the whole, Research based duties and responsibilities; the satisfaction was around 98% as shown in **Table 9**.

# **DISCUSSION:**

This study, role of Hospital Pharmacists were tried to determine in the Public Sector and the multiple challenges were being faced by simultaneously. Male hospital pharmacists were

more than female in the working hospitals also mean age of males were higher. In assessment of responsibilities checking of prescription were completely positive. Pharmacists were found to advice in dosage form. Pharmacists were also in good numbers in visiting of wards regarding medicine issue. Involvement in decision making was found in mid, therefore pharmacists were not more involved in the interest of patients' decision. This study was carried out to know

about working system of HPs in Public Sector hospital in Hyderabad / Jamshoro. Storage of medicine was found quite remarkable in the statistics. Supervision of less trained staff was found excellent. Writing guidelines were not satisfactory. In the study HPs were found failure in research conduction and development. There were the least trials of the medicine to be conducted. HPs were not responsible for purchasing of the medicines. There were 50% maintenance of the medicine and narcotic record. Analyzed that the most of the HPs were highly satisfied on a number of questions include their involvement in decision making on appropriate treatment that shows their positive contribution in the system, also found satisfied in writing guidelines for drug use which enhanced their clinical aspect of Pharmacy to be sharpened academically and practically (12). In this study, HP take part in ward rounds, involvement of decision making, supervision of less trained staff, Additionally, the HPs are found involved in teaching in the hospitals. It opened a window of an opportunity for coming PGs, HPs, Nurses and other allied professionals to have interactive approach to new developments in the Hospital Management as far as the effective role of HPs is concerned. As well role of preparing, compounding and dispensing the pharmaceutical was found minimal in the hospital. Since their role n control over requisition and dispensing of medicines, is not fully addressed in Pharmacy of the hospital. It showed that the hospital purchased finished pharmaceuticals from different sources under the prescribed rules. 19.2% showed positive response. 50% in Yes and 50% in No response was found in maintaining of recording of Pharmacy and Narcotic Drugs. The needful administrative action was required. 57.7% HPs have control over requisition and dispensing of all medicine and 42.3% did not have. On asking the preparation of periodic report or Annual Report, the 42.3% of HPs responded in positive and 57.7% did not. During the study, it was important to note that number of HPs is very low in the Hospital. This study is an important contribution to recognize and institutionalize the responsibilities, working environment, recognition and development and on the level of

satisfaction. Most of the HPs were also satisfied on checking quality of the drugs very carefully, believed in the storage of medicine in safe and appropriate place; to greater extent they preserved the record of Pharmacy and Narcotics drugs. Maintained and prepared periodic report or annual report of the Pharmacy and also interested in supervision of less trained staff (13). HPs were mostly discussing treatment plan with patients, general practioners but the least with therapeutic committees It was noteworthy that their job related responsibilities were lower down from in these two important descriptions include participation in ward and authority for purchasing drugs for Pharmacy. HPs were deprived of taking any opinion for purchasing essential drugs / medicines with cost effective approach for the Hospital. There is a lot of gaps research to be conducted on the great emerging, dynamic role of HP in Public Sector. The controlling official of Hospital should get written guidelines from HPs for safe and effective role in R&D. The HPs supervise the clinical trials of certain generics for better and cost-effective purchasing and client oriented needs. Since the most of HPs are working in the hospitals routinely, have an opportunity for addressing and recording of ADRs. They have a professional approach and smart package of information for maintenance of Annual Report. If such activities should be done in favor of development & recognition of HPs crucial role in the healthcare system.

## **CONCLUSION:**

Study concluded that job of HPs is very challenging in nature in Public Sector. To gain knowledge, this is initial effort to re-organize in Sindh specially Hyderabad / Jamshoro to assess the role and challenge including their institutionalization in the Public Sector. The finding of study suggests that most of the HPs have same kind of perception on the role / challenge, duties / responsibilities, recognition / development and working environment. Findings suggest that there are certain variable socio-economic status, subjective experience, job experience, age and education which increase vulnerability of HPs with respect to their effective role and challenge of HPs in Public

Sector. The main identified issues leading including salary package, professional training and recognition & development.

## LIMITATION:

To measure the satisfaction level with a sound technique process aimed to qualify has not been possible so far. However, it can be assessed only and extrinsic subjects is involved which vary from employee to employee. The questionnaire was self-administrated. It therefore points that the respondents have over or under spotted their level of satisfaction. The findings and outcomes are not necessary be generalized to all HPs working in other set ups include Public and Private Sector. The study has only from hospitals working in LUH. The other professions include paramedics and support staff is excluded for the study the cost, feasibility and timeline.

### **RECOMMENDATION:**

Based on the findings of this study, the following are the recommendations for improving responsibilities and duties with level of a satisfaction of HPs. Although the results of a single survey can not be foundation of decision making in health, planning. The results of this study, the following interventions should be brought to increase the base for proper dispensing of responsibilities and duties and level of job satisfaction of HPs in Public Sector.

- The government and Ministry of Health [MoH] give opportunity to the development in their work providing chances of higher education as well as promote in relation their work out-put.
- The gender equity should be revisited for induction of HPs in health facility.
- The scale should be regularly revised in line with marked protection and job profile.
- Job training should be given to implement new and up to date information.
- Increase the monthly salary of HPs.
- For betterment for Hospital Pharmacy, shortage of HPs should be addressed by filling the existing vacancy and create new job when required.
- Priority should be given to improve

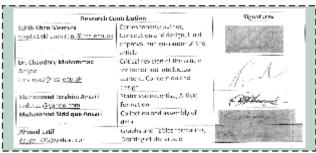
- relationship between administration and HPs be great interpersonal communication, decision-making attitude among HPs.
- There should be some social activities within job for employees to revise to communication gaps and to develop good working relationship with co-workers.
- Working condition must be improved along with working hours.
- An award for good job should be initiated.
- Regular meetings should be scheduled between seniors and juniors staff for developing of good working relation.

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After Revision

Take warning! He has not exposed so many of your sinful activities that it appears as if He has forgiven you (it may be that He has given you time to repent).

Hazrat Ali (Karmulha Wajhay)