# NATIONAL ASSEMBLY

**FOR WRITTEN REPLY**

**QUESTION NO. 1457**

**DATE OF PUBLICATION IN INTERNAL QUESTION PAPER: 05 MAY 2023**

**(INTERNAL QUESTION PAPER NO. 15)**

**Mr K Ceza (EFF) to ask the Minister of Health:**

Noting that in public healthcare facilities at present, especially in clinics, the majority of pharmacy dispensary duties are done by nurses, which then has an impact on nurses focusing on delivering health services within their scope, what (a) total number of healthcare facilities (i) have a shortage of pharmacists and (ii) rely on nurses for dispensary duties and (b) steps does he intend to take to remedy the specified situation? **NW1685E**

**REPLY:**

It is not correct to conclude that majority of pharmacy dispensary duties at clinics, are carried out by nurses. These functions may also be performed by a pharmacist’s assistant (post basic) functioning under the indirect supervision of a pharmacist. Only professional nurses who have been authorised in terms of Section 56(6) of the Nursing Act 53 of 2005, are allowed to dispense medicines up to schedule 4. In some clinics, pharmacist assistants have been appointed to perform duties related to managing medicines in the facility. The process of task sharing is meant to optimise the utilisation of different categories of staff in the team to alleviate bottlenecks that may hamper the dispensing of medicine at a clinic and it does not affect nurses focusing on delivering health services within their scope

1. (i) The tables below provide a Persal breakdown of filled and vacant posts per provinces as of February 2023, which actually shows that vacant posts are minimal and does not impact negatively on service delivery.

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| **Summary of filled and vacant Pharmacy post per province as at April 2023** |
|  | **EC** | **ECP Total** | **FS** | **FS Total** | **GP** | **GP Total** | **KZN** | **KZN Total** | **LP** | **LP Total** |
| **Title** | **Filled** | **Vacant** | **Filled** | **Vacant** | **Filled** | **Vacant** | **Filled** | **Vacant** | **Filled** | **Vacant** |
| CLINICAL PHARMACIST | 3 | 1 | 4 | 0  | 1 | 1 |  - |  -- | -  | -  | -  |  -- | -  | --  |  - |
| PHARMACIST | 319 | 18 | 337 | 83 | 38 | 121 | 364 | 20 | 384 | 499 | 15 | 514 | 389 | 26 | 415 |
| PHARMACIST (COMMUNITY SERVICE) | 61 | 14 | 75 | 34 | 14 | 48 | 88 | 32 | 120 | 139 | 11 | 150 | 60 | 22 | 82 |
| PHARMACIST (INTERN) | 48 | 0  | 48 | 1 | 13 | 14 | 71 | 4 | 75 | 170 | 66 | 236 | 154 | 83 | 237 |
| PHARMACIST ASSISTANT | 141 | 15 | 156 |   | 3 | 3 | 86 | 13 | 99 | 210 | 50 | 260 | 25 | 4 | 29 |
| PHARMACIST ASSISTANT (POST-BASIC) | 456 | 49 | 505 | 343 | 99 | 442 | 636 | 20 | 656 | 1077 | 78 | 1155 | 325 | 35 | 360 |
| **Grand Total** | **1028** | **97** | **1125** | **461** | **168** | **629** | **1245** | **89** | **1334** | **2095** | **220** | **2315** | **953** | **170** | **1123** |

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| --- |
| **Summary of filled and vacant Pharmacy post per province as at April 2023** |
|  | **MPU** | **MPU Total** | **NW** | **NW Total** | **NC** | **NC Total** | **WC** | **WC Total** |
| **Titel** | **Filled** | **Vacant** | **Filled** | **Vacant** | **Filled** | **Vacant** | **Filled** | **Vacant** |
| CLINICAL PHARMACIST | -  | - | - | - | - | - | - | - | - | - | - | - |
| PHARMACIST | 250 | 12 | 262 | 209 | 17 | 226 | 68 | 3 | 71 | 246 | 16 | 262 |
| PHARMACIST (COMMUNITY SERVICE) | 52 | 4 | 56 | 80 | 0  | 80 | 39 | 1 | 40 | 39 | 6 | 45 |
| PHARMACIST (INTERN) | 11 | 2 | 13 | 16 |  0 | 16 | 8 | 2 | 10 | 22 | 1 | 23 |
| PHARMACIST ASSISTANT | 23 | 5 | 28 | 41 | 14 | 55 | 12 | 8 | 20 | 24 | 2 | 26 |
| PHARMACIST ASSISTANT (POST-BASIC) | 207 | 9 | 216 | 139 | 13 | 152 | 158 | 15 | 173 | 576 | 22 | 598 |
| **Grand Total** | **543** | **32** | **575** | **485** | **44** | **529** | **285** | **29** | **314** | **907** | **47** | **954** |

(b) Provinces have established recruitment Task Team that prioritises the filling of positions in line with service delivery needs. To ensure that their expenditure on recruitments does not exceed the allocated Cost of Employment (CoE) Budgets. Where there are records of shortages of health care workers (including Pharmacists), the department mitigates by appointing contract employees to address shortages. To ensure further continuity of services, the department offers permanent employment where funding permits.

END.