



PATH/Ango Thi Thanh Tuy

Building pharmacy capacity in Vietnam

Improving knowledge and skills in primary health care

In Vietnam, like in many developing countries, pharmacies are often the first place people go for common health issues. They are often a preferred—and sometimes the only—source of health care information and services. With more than 40,000 pharmacies nationwide, pharmacies reach even the most remote areas of the country. However, the majority of these facilities are privately owned and not well incorporated into the national public health system. Despite a national program to implement Good Pharmacy Practice (GPP), an international quality standard for pharmacy service focusing on client-centered care, the sheer size of the network and the lack of human resources for monitoring and regulation enforcement have made it difficult to improve pharmacy services in Vietnam.

Since 2003, PATH has been working in Vietnam to strengthen private pharmacies’ abilities to provide high-quality health services, including improving access to reproductive health services for youth and identifying possible tuberculosis cases. From 2008 to 2012, PATH implemented an innovative program to enhance the role of private-sector pharmacists as primary health care providers. Working with almost 1,000 pharmacies in five provinces, the project implemented a package of interventions to strengthen and improve the role of pharmacies in primary health care, including training, supportive supervision, and linking pharmacies to other health care services. The project also supported pharmacies and provincial departments of health (DOHs) in scaling up GPP accreditation. In addition, PATH worked with community leaders and volunteers to conduct education activities.



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A pharmacist provides information on the referral process to a customer in Vietnam.

BUILDING PHARMACISTS’ CAPACITY AS PRIMARY HEALTH CARE PROVIDERS

Project design

In 2008, PATH began the project with a needs assessment. Pharmacy staff in the five project provinces completed a questionnaire to assess their capacity to provide quality pharmaceutical services and to identify the range of services pharmacies offered. The results revealed that pharmacy staff wanted to improve their knowledge on common health topics that their customers frequently sought advice for such as fever, cough, and diarrhea. They also wished to develop

their skills in building customer relations, improving client-oriented services, and enhancing pharmacy best practices. The assessment also revealed that training needs were similar across all five provinces.

Following the needs assessment, PATH conducted a baseline assessment, using both quantitative and qualitative methods, to determine the pharmacy staff knowledge, attitudes, and practice. Baseline data would serve to gauge the impact of project interventions.

Project interventions

Based on the needs assessment, a technical assistance package was developed that concentrated on client-oriented services. PATH worked with the DOH in each province to develop training and reference materials for pharmacy staff related to the 11 key topics identified through the needs assessment. PATH developed a training curriculum and toolkit that included a manual for master trainers, as well as a variety of pharmacy reference materials for additional information and tools, such as a job aid, for pharmacy staff to use with clients. Working with the DOHs, the project trained 244 master trainers who then trained 5,433 pharmacy owners, pharmacy staff, and supervisors on nine health topics, customer relations, and GPP.

PATH also collaborated with provincial secondary medical schools to integrate the project's training curricula into the schools' training for pharmacy students. In addition to incorporating information on the 11 topics into the schools' curricula, the project's participatory training methodology and focus on counseling skills and building customer relationships were added to facilitate active participation of students during classes and allow them to practice using their knowledge and skills. The schools delivered the enhanced pre-service training to 929 students during the 2011/2012 school year, and they will continue to be used during future school years.



The project logo, displayed at supported pharmacies, promotes community health care.



A young pharmacist in Vietnam gives advice to a customer.

To support the newly trained pharmacy staff, PATH trained provincial teams of supervisors on supervision skills and how to mentor and support pharmacy staff, and gave them tools—such as checklists—to support pharmacy staff during their quarterly visits. Mystery clients were also used as a supervision tool. Trained mystery clients used standard scripts and questionnaires on childhood diarrhea and emergency contraceptives to evaluate services at pharmacies. Pharmacy staff received regular feedback from the supportive supervision and mystery clients visits in order to improve their services.

In addition to improving pharmacy practice, we also wanted to help improve community access to available primary health care services. The project developed and implemented a referral system from project pharmacies to local health facilities. We provided pharmacies with referral slips, or coupons, that pharmacy staff could provide to clients when they needed medical care, which staff could better identify through the project trainings. Pharmacies provided more than 39,000 referral coupons to clients during the project. To support the referral system, we organized regular workshops between project pharmacies and health care facilities to promote health care networks.

Community education activities were also a component of the interventions in each province. PATH created a project logo to display at supported pharmacies for easy recognition. We developed and trained a health promotion network of village health workers and members of the Women's Union, Youth Union, and

Fatherland Front to provide health information to their communities through face-to-face communication and consultations at regular community meetings. PATH also created materials for the health promoters to use during their work. Additionally, we supported TV spots and talk shows on local TV and provided pamphlets to pharmacies, to promote GPP standards and the project’s client-oriented approach.

Project evaluation

After four years of implementation, PATH conducted a final evaluation, using both quantitative and qualitative methods, to measure changes in pharmacy staff knowledge of the primary health care topics, pharmacy staff attitudes and practice related to diarrhea in children and emergency contraception, and community health-seeking behaviors and knowledge of key primary health care topics. Additionally, the final evaluation surveyed pharmacy staff in project areas who did not receive project support in order to serve as a comparison group.

Qualitative data, gathered through focus group discussions and in-depth interviews, provided information on local stakeholders’ perceptions on quality and impact of project activities. It also offered the opportunity to obtain recommendations and feedback on project implementation and performance, and the way forward.

KEY FINDINGS AND RESULTS

The project-supported pharmacists made significant positive shifts in both knowledge and practice. The project team achieved these improvements through strengthening client communication and counseling skills, on-the-job training, mentoring, and supportive supervision.

Pharmacy staff surveys

Based on data from baseline and final evaluations, we saw significant improvements in knowledge among pharmacy staff participating in the project, including consistent improvements in knowledge of management of fever, cough, diarrhea, oral contraception, and other common health problems (Table 1). Knowledge was also better than that seen in non-project pharmacies.

Mystery client surveys

Mystery client surveys were used to determine change in actual pharmacy staff practice in project-supported pharmacies. Overall, the improvements seen in pharmacy staff knowledge were translated into practice. The percent of pharmacies that counseled clients on diarrhea prevention and emergency contraception significantly increased from baseline to final evaluation (Figure 1).

In addition to pharmacy staff’s improved counseling practice, mystery clients also reported improvements in staff attitude and client’s satisfaction with services, a key aspect of delivering client-oriented services (Figure 2).

“They [pharmacy staff] have changed a lot. Before the project, they only knew selling drugs for benefit and how to make money. After joining the project, they realized the strong connection between their benefits and community health care.”

– FGD with supervisors in Khanh Hoa

Community surveys

The community survey aimed to measure exposure to interventions and change in health knowledge and awareness among community members, as well as their perception of the enhanced role of pharmacies. Although more than one-quarter of surveyed community members reported seeing the project logo in pharmacies, overall exposure to project-specific interventions was low. Additionally, results of the surveys did not show any consistent positive changes in regard to people’s knowledge about diarrhea prevention or for other primary health care topics.

TABLE 1. Comparison of knowledge among pharmacy staff, 2008 and 2012

	2008	Project sites, 2012	Non-project sites, 2012
Asked about signs of dehydration in a child with diarrhea	57%	76%	52%
Counseled clients on diarrhea prevention	56%	69%	55%
Explained side effects of emergency contraception	46%	69%	48%

FIGURE 1. Comparison of practice among pharmacy staff during mystery client surveys, 2008 and 2012

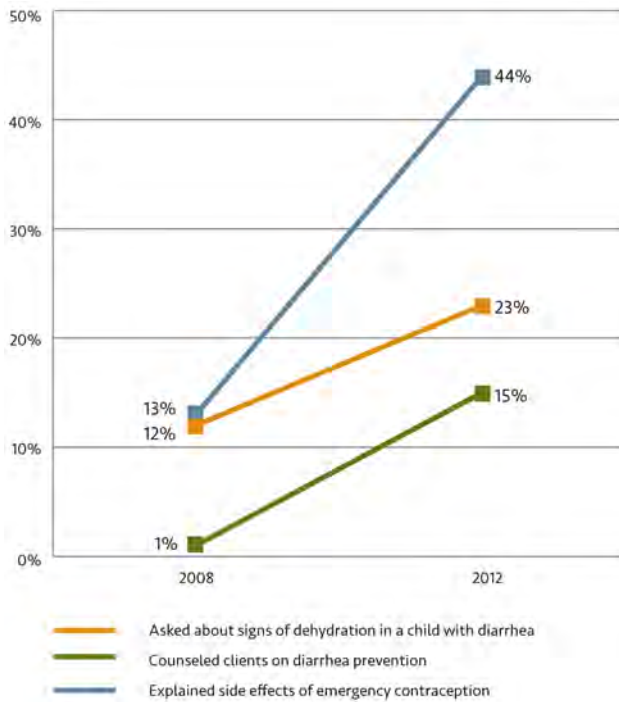
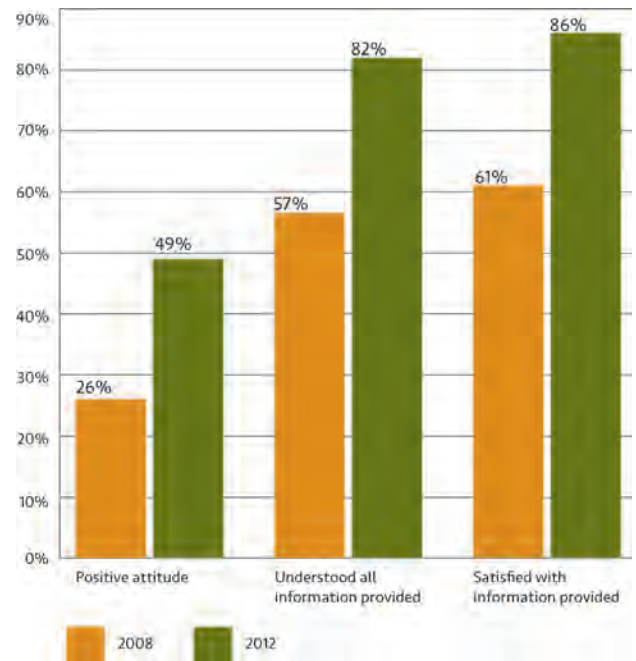


FIGURE 2. Percent of mystery clients reported understanding and satisfaction with information provided by pharmacy staff on emergency contraception and positive staff attitude, 2008 and 2012



Stakeholder interviews and focus group discussions

The qualitative feedback confirmed that pharmacies can, and do, play an important role in community health. Data revealed that project support, such as supportive supervision, provided useful benefits to the various stakeholders. The supportive supervision teams were trained to provide on-the-job guidance to pharmacy staff. The pharmacy staff noted that they appreciated being able to talk with the supervisors about difficulties they had when providing client-oriented information and services. Supportive supervisory visits were also opportunities for the pharmacy personnel to obtain additional training. Pharmacy owners said that supportive supervision has helped to alleviate issues related to staff turnover as new staff would have the means to obtain skills in providing counseling and other client-oriented services to provide GPP-standard services.

PATH also learned important information about the referral system that helped to explain some of the findings from the quantitative surveys. For example,

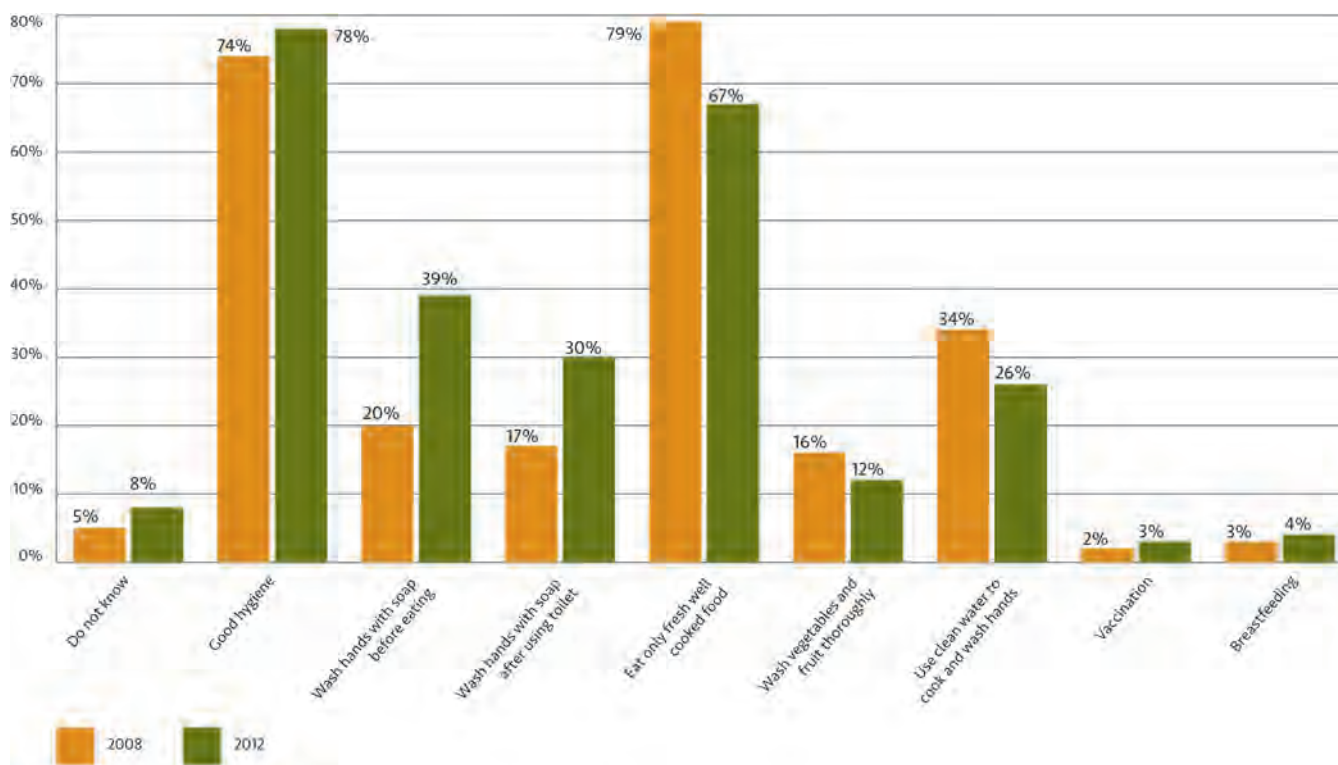
“To be honest, when I gave referral cards to clients, about half of them took them. Some went to a health clinic with the referral cards. Some might be skeptical if there was any affair between pharmacy and referred health clinic so they did not get there but went to another clinic instead.”

– FGD with pharmacy staff in Thua Thien Hue

in focus group discussions (FGDs) with pharmacy staff, they expressed concern over how their referral may be perceived by clients—like they may have an arrangement with the health facility to send patients to them for some benefit. Many pharmacy staff mentioned that referrals did not benefit the pharmacy in any way and that it was not a two-way system; instead, the pharmacy would lose money if they referred clients as they would not sell any drugs and that, in the future, clients may not come back to the pharmacy. Another obstacle mentioned was the lack of priority for health care facilities for the referred clients. Their clients still have to wait in the queue when arriving to the health care clinic.

During the FGDs, many facility-based health care providers acknowledged that pharmacies play an important role in providing primary health care services to the community. Both pharmacies and the health care providers recognized the mutual benefit of having more interaction and cooperation between their sectors.

FIGURE 3. Community members’ knowledge related to diarrhea prevention



LESSONS LEARNED

Based on data gathered from the project, PATH has developed the following lessons learned and recommendations for the next generation of interventions targeting pharmacies and pharmacists:

- Pharmacists can be effective counselors provided they are given appropriate training in client-centered care, moving beyond the traditional role of drug seller to be more effective health care professionals. The government’s requirements for GPP in Vietnam require pharmacies to have staff who participate in self-treatment, including providing medicines and counseling.
- Pharmacists need continuing professional development to improve current and future performance. Continuing professional development could take various forms, including in-service training, supportive supervision mechanisms, or formalized requirements for continuing pharmacy education.

“Pharmacies’ role in primary health care is very important because of people’s habits. When they get sick, they go to pharmacies first. That’s why pharmacies play important role in primary health care.”

– FGD with health care providers in Vinh Long

- To optimize therapeutic outcomes for patients, a two-way referral system is needed. Two-way referrals would promote optimal treatment outcomes for patients and help ensure that patients receive comprehensive care. The system also ensures that benefits and incentives for referring are for both the pharmacy and for the other health care facility.
- Pharmacies are currently underutilized and could serve as a site for delivering primary health care services. Hospitals in Vietnam’s major cities operate at more than 100 percent capacity. Promotion and investment in pharmacies could increase primary health care options.
- Technical assistance to pharmacies and local departments of health can help scale-up GPP throughout Vietnam. Moreover, working at the national level with the Department of Drug Administration to standardize GPP definitions and requirements—such as a minimum standard for counseling—can improve local implementation.

- To be effective, health communication strategies need to be targeted and focused. Although not a major focus, the project engaged in several health communication efforts that did not result

in improved knowledge among the community. Communication efforts may have been too diffuse, the health topics covered too broad, and the intensity of exposure to such messages not frequent enough.

Delivering more than medicine

Like many pharmacists in Vietnam, Suong, a pharmacist in central Danang province, provides medicine and advice to many clients each day. Some clients visit her pharmacy for specific medicines, while others come with a cough or fever and need advice on how to get better. Her job is to sell them medicine. At least that was her view before participating in PATH's pharmacy project. Today, she recognizes the important role she plays as a client counselor and patient advocate—a community health provider.

A key tenant of Good Pharmacy Practice, an international standard for pharmacy services, is putting clients at the center of work. After participating in the project, Suong says that the knowledge and skills she gained promote trust and communication between her and her clients.

"The project training has not only improved my knowledge of health care and my counseling skills, but it also provided an opportunity to discuss and share experiences with other participants, something that we rarely have the opportunity to do because of the demands of running our own businesses."

Before participating in PATH's project, Suong's business philosophy and practice was to "buy products cheaply and sell them with interest and commission." Now she realizes that although her business must make a profit, it is important to provide good information and counseling to



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customers, particularly since many community members know very little about medicines. Suong is now more than just a business owner; she is a primary health care provider.

In 2010, Suong's pharmacy was one of the first Good Pharmacy Practice-certified pharmacies in Danang. The number of clients visiting her pharmacy has increased. She now sees more than 100 clients per day, a 30 percent increase from 2009. After completing the project's trainings, she has the necessary knowledge and skills to provide them with high-quality information and counseling.

PATH is grateful for the collaboration and support of many partners:

- National level: Ministry of Health, Drug Administration of Vietnam.
- Provincial level (in Danang, Khanh Hoa, Thai Nguyen, Thua Thien Hue, and Vinh Long provinces): People's Committees, departments of health, secondary medical schools, project pharmacies, health facilities, community members, Women's Union, Youth Union, and Fatherland Front.
- Project donor: The Atlantic Philanthropies.



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August 2012