
A STUDY ON LEGAL POLICY OF PHARMACY EDUCATION AND PHARMACY WORKERS RELATED TO THE URGENCY OF ESTABLISHING PHARMACY LAW

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Abstract. According to the 1945 Constitution of the Republic of Indonesia, health is one of the basic human rights. One of the aspects that support health is the aspect of pharmacy. Pharmacy workers consist of Pharmacists and Pharmacy Technical Workers according to Law No. 36/2014 regarding Health Workers. In practice, pharmacy education in Indonesia is considered not sufficient to prepare the pharmacy workforce. There are currently contradictions in the applied pharmaceutical policy, where the number of pharmacy undergraduate programs is 279, while the number of pharmacist study programs is only 45. This results in an imbalance of graduates. There is a tendency that most pharmaceutical graduates will continue their professional education to become a pharmacist so that he can have full authority and is responsible for pharmaceutical work. Differences in curriculum background and type of education will lead to confusion regarding competency assessment. At the Pharmacist education level, there is no nationally applicable curriculum until this date. The difference in curriculum causes variations in the knowledge and abilities of graduates. The method used in this study is a review of articles from various legal rules related to pharmaceutical education in Indonesia. The results of this study indicate a need for synchronization of the pharmaceutical policy into one legal aspect so that there is no disharmony among the applied legal regulations. Eventually synergistic legal regulations will emerge, from education to legal certainty for Pharmacist as health professionals.

Keywords: Pharmacy Workers, Pharmacy Education, Pharmaceutical policy

INTRODUCTION

Health is one of the basic human needs because health is one of the factors which determine the performance, and the level of activity a human's body can do. The right to be healthy has been stated in the 1945 Constitution of the Republic of Indonesia Article number 28H section 1. Therefore, the efforts to provide health for the entire community must be carried out properly. One main aspect supporting health is pharmacy, starting from pharmaceutical goods, pharmacy workers, pharmacy work, and pharmacy education (1).

Universities carried out the implementation of pharmacy education. Pharmacy education aims to produce pharmacy workers who are virtuous, dignified, high quality, competent, habitual helper, ethical, highly dedicated, professional, moral, and highly sociable; improving and developing science

and technology in the sector of pharmacy; and fulfilling the need for pharmacy workers in all areas of the Unitary State of the Republic of Indonesia in a fair manner (2). the Ministry of Education fosters the implementation of pharmacy education in coordination with the Ministry of Health (3).

To become a pharmacy worker, one must complete and pass pharmacy education which consists of vocational education, academic education, and professional education. Vocational education is an associate's degree program in pharmacy education whose graduates become Pharmacy Technical Workers (4). Academic education consists of bachelor programs, master programs, and doctoral programs. The bachelor program graduates can continue to professional education programs to become Pharmacists (5).

Pharmacy workers in Indonesia consist of Pharmacists and Pharmacy Technical Workers. According to Law No. 36/2014 regarding Health Workers, pharmacists are bachelor of pharmacy students who graduated as pharmacists and have taken the oath as pharmacists, while Pharmacy Technical Workers are personnel who assist pharmacists in carrying out pharmacy work, which consists of bachelor of pharmacy, associate of pharmacy, analyst of pharmacy and pharmacy intermediate staff/pharmacist assistants, who is carrying out their pharmacy work both require a Certificate of Pharmacist Registration or Certificate of Pharmacy Technical Workers Registration which is legally registered, and a profession's oath ceremony will be carried out after passing the national competency test (6).

In practice, pharmacy education is still not ready to produce pharmacy workers. There is a clash between regulations made by different institutions. There are currently 279 undergraduate pharmacy study programs, while the number of pharmacist professional study programs is only 45 (7). This is a problem because there is an imbalance of graduates. The paradigm is that every Bachelor of Pharmacy needs to continue their study to professional education to become a pharmacist so that they can have full authority and responsibility for pharmacy work. This imbalance of graduates causes many bachelor of pharmacy who then find it difficult to continue as pharmacists or become confused because of their status if they want to carry out pharmacy work, they only become Pharmacy Technical Workers (8).

In Indonesia, legal regulations on pharmacy are still partial and not comprehensive. The regulations that are still separated and partial have resulted in disharmony in pharmacy administration, including in the case of pharmacy education. In addition, the legal rules related to pharmacy currently in effect in Indonesia are still in the form of Government's Regulations and Minister of Health's Regulations, so it can be said that there is no strict rule which covers all aspects of pharmacy.

METHODS

The method used in this study is a review of articles from various legal rules related to pharmaceutical education in Indonesia. The data are documents of laws and regulations, articles, and other literature related to policies in the pharmacy sector. Data collection was carried out by reviewing documents and literature study, then comparing several regulations that contradicted one another for further discussion.

RESULTS AND DISCUSSION

Government's Regulations No. 51/2009 regarding Pharmacy Work, Article 33 section (1) states that "pharmacy workers consist of Pharmacists and Pharmacy Technical Workers". Then in section (2), it is stated that "Pharmacy Technical Workers as referred to consist of bachelor of pharmacy, associate of pharmacy, analyst of pharmacy and pharmacy intermediate staff/pharmacist assistants ". At the Higher Education Database or PDPT, currently, there is still some D4 program in Pharmacy, where the graduates are called Applied Graduates. Therefore, a problem arises where D4 graduates cannot be said to be Pharmacy Technical Workers because they are not included in the formal law. By not acknowledging applied graduates as Pharmacy Technical Workers, the result is that these graduates cannot legally carry out pharmacy practices because there is no legal certainty from current regulations (9).

Law No. 36/2014 regarding Health Workers Article 21 section (1) states that "Undergraduate students of health sector must take a national competency test at the end of their vocational and professional education period" (6). The regulation state that the designation of national competency examinations is only for vocational and professional students, of which a pharmacy undergraduate or bachelor of pharmacy is not mentioned, even though it is stated in Government' Regulation No. 51/2009 regarding Pharmacy Work, a Bachelor of Pharmacy is included in Pharmacy Technical Workers but is not regulated in statutory regulations. This indicates an inconsistency between laws and or regulations. This is because the law regarding health workers is still too general as it means to be applied for all health workers. For pharmacy itself, the highest regulation is still at the level of Government's Regulation, which has not yet accommodated all the provisions and needs related to pharmacy (9).

The expected output of a bachelor of pharmacy is to continue to a professional level such as doctor education, where the medical graduates continue as a doctor (10). This shows that the existing regulations are not synchronized and not keeping up with existing developments. However, because there are rules that indicate that a Bachelor of Pharmacy is included in Pharmacy Technical Workers, many Bachelor of Pharmacy have practiced pharmacy as Pharmacy Technical Workers, rather than continuing to the Pharmacist professional level. Another fact is that the number of Bachelor of Pharmacy in Indonesia exceeds pharmacist graduates because the number of pharmacy undergraduate programs currently reaches 279 while the pharmacist professional study program is only 45. This shows a bottleneck problem, where Bachelor of Pharmacy

also find it difficult to continue to the Pharmacist professional study program because the facilities are insufficient. This results in the expectation that a Bachelor of Pharmacy needs to continue to the pharmacist profession to become a pharmacist is hampered.

Refer to Law No. 36/2014 regarding Health Workers Article 18 section (5), "In the preparation of the education curriculum for Health Workers, higher education providers for health sector must refer to the National Higher Education Standards set by the Minister in charge of the government affairs in the education sector and coordinate with the Minister." The current condition, however, the implementation of the pharmacy curriculum has no specific national guideline. The reference used is still independent and separated for each faculty (6). The Indonesian Pharmacy Higher Education Association, which handles higher pharmacy education throughout Indonesia, is still in the process of arranging Academic Manuscripts for Graduates Competency Standards and Pharmacy Education Curriculum Standards for the Undergraduate Pharmacy and Pharmacist Profession Study Program. Therefore, there are no guidelines that can be used as a reference for pharmaceutical curriculum. On the other hand, the associate pharmacy already had a core curriculum for pharmacy diploma education issued by the Indonesian Ministry of Health. This shows that there is still no synchronization in the conquest to create a complete and sustainable pharmacy education (11).

CONCLUSION

Pharmacy education in Indonesia still does not have a generic and sustainable curriculum. There is no regulation to stimulate pharmacist professional study program facilities to solve the bottleneck problem of pharmacy undergraduate, which exceeds professional pharmacist graduates. There is still a discrepancy between the laws and or regulations related to the pharmacy workforce and their mandatory education.

RECOMMENDATION

In the effort to establish a continuing pharmacy education and adequate facilities and harmonize the regulations related to pharmacy workers, a regulation related to the pharmacy is needed. Topics related to pharmacy education are important points in forming the pharmacy profession from the beginning. Pharmacy education must be made as a whole and continuous, and then be included in one of the

chapters in the law draft on pharmacy so that there will be a complete and synergistic regulation produced.

REFERENCES

- [1] Pemerintah RI. Undang-Undang Dasar Negara RI Tahun 1945. Jakarta;
- [2] Kementerian Kesehatan RI. Undang-Undang Nomor 36 Tahun 2009 tentang Kesehatan. Jakarta; 2009.
- [3] Pemerintah RI. Undang-Undang Nomor 20 Tahun 2003 tentang Sistem Pendidikan Nasional. Jakarta; 2003.
- [4] Kementerian Hukum dan HAM RI. Undang-Undang Nomor 12 Tahun 2012 tentang Pendidikan Tinggi. Jakarta; 2014.
- [5] Kementerian Kesehatan RI. Peraturan Menteri Ketenagakerjaan Republik Indonesia Nomor 21 Tahun 2014 tentang Pedoman Penerapan Kerangka Kualifikasi Nasional Indonesia. Jakarta; 2014.
- [6] Kementerian Kesehatan RI. Undang-Undang Nomor 36 Tahun 2014 tentang Tenaga Kesehatan. Jakarta; 2014.
- [7] Kemendikbud. Pangkalan Data Perguruan Tinggi [Internet]. 2020 [cited 2020 Nov 14]. Available from: <https://pddikti.kemdikbud.go.id/>
- [8] Kementerian Kesehatan RI. Peraturan Menteri Kesehatan Republik Indonesia Nomor 80 Tahun 2016 tentang Penyelenggaraan Pekerjaan Asisten Tenaga Kesehatan. Jakarta; 2016.
- [9] Kementerian Hukum dan HAM RI. Peraturan Pemerintah Nomor 51 tahun 2009 tentang Pekerjaan Kefarmasian. Jakarta; 2009.
- [10] Pemerintah RI. Undang-Undang Nomor 29 Tahun 2004 tentang Praktik Kedokteran. Jakarta; 2004.
- [11] Kementerian Kesehatan RI. Kurikulum Inti Pendidikan Diploma III Farmasi. Jakarta; 2016.