

Analysis of Authority and Competency of Pharmacist in Providing Pharmaceutical Service at a Community Health Center

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ABSTRACT

The standard of pharmacy service at the Community Health Center in Indonesia (*Puskesmas*) shall be carried out by the pharmacist and assisted by the pharmacist's assistant. This research will analyze the pharmacist's authority in the standard of pharmacy service in the *Puskesmas*, according to the Regulation of Minister of Health of the Republic of Indonesia Number 26 Year 2020 (PMK No. 26 Year 2020). This research shall constitute normative legal research, which uses secondary data. The result found that the pharmacist shall be the only authorized and competent person responsible for the performance of the standard of pharmacy service at the *Puskesmas*. The research suggested that the government of the Republic of Indonesia needs to carry out reassessment against PMK No. 26 Year 2020 and immediately fulfill the lack of required pharmacist's position at the *Puskesmas*.

Keywords

authority, competency, pharmacist, *Puskesmas*, PMK No. 26 Year 2020.

Introduction

As a developing country, Indonesia becomes the primary priority of the government's program toward a healthy and prosperous community. According to the Constitution of the Republic of Indonesia Year 1945, the government shall protect all the people of Indonesia, improve public welfare, advance the people's intellectual life, and establish a world order based on freedom, abiding peace social justice. One of the efforts to improve public welfare shall be carried out by increasing community health. In manifesting the guarantee of fundamental rights of health, the government shall be obliged to exercise the development of health altogether, one amongst them, through the facility of the Community Health Centre (*Puskesmas*).

The *Puskesmas*, under the Regulation of Minister of Health Number 43 Year 2019 concerning *Puskesmas* (PMK No. 43 Year 2019), is a facility of health service, which exercises the community and individual health efforts at the first level by prioritizing the promotive and preventive measure in its working area.

The Pharmacy service standard shall be the benchmark used as the guidelines for the pharmacy personnel in exercising the pharmacy

service. The pharmacy personnel covers the pharmacist and the technical pharmacy personnel who carry out the pharmacy service at the health facility. (The Republic of Indonesia, Law No. 36 Year 2014).

The pharmacy service shall be the direct service and respond to the patient, which relates to the pharmacy preparations to achieve the specific result to increase patient quality of life. The first standard of pharmacy service at the *Puskesmas* shall be managing pharmacy preparations and consumable medical substances that cover the planning of the need, request, reception, storage, distribution, management, recordation, reporting, archiving, monitoring, and evaluation of management. Second, the service of clinical pharmacy shall cover the review of prescription, delivery of medicine and delivery of information of drugs, drug's information service, counseling, visit of the patient (primarily inpatient *Puskesmas*), monitoring and reporting of side effect of medicine, monitoring of therapy of drugs and evaluation of drug's use. (The Republic of Indonesia, PMK No. 74 Year 2016)

The stipulation of the standard of pharmacy service at the *Puskesmas* shall have the purpose to

increase the pharmacy service quality, guarantee the legal certainty for the pharmacy personnel, protect the patient and the community from the irrational use of drugs framework of patient safety. (The Republic of Indonesia, GR No. 51 Year 2009)

Pharmacy service's standard at the *Puskesmas* is regulated in the Regulation of Minister of Health Number 74 Year 2016 concerning Pharmacy Service Standard at *Puskesmas* (PMK No. 74 Year 2016). The regulation was then amended with Regulation of Minister of Health Number 26 Year 2020 Concerning Amendment of PMK No. 74 Year 2016. (PMK No. 26 Year 2020).

In PMK No. 20 Year 2020, there is an amendment of several articles about the pharmacist's authority and competency at the *Puskesmas*. The amendments occur on Article 6 and deletion of Article 11 and Article 12.

PMK No. 26 Year 2020 arises uncertainty between the authority of Pharmacist and Pharmacist's assistant in providing pharmacy service standard at the *Puskesmas*. It includes the management of pharmacy preparations and consumable medical substances and the assessment and service of prescription, drug information service, and monitoring of drug's side effect.

In providing the standard of pharmacy service at the *Puskesmas*, the pharmacy personnel, which consists of the pharmacist and the pharmacists' assistant, needs legal certainty concerning the authority and competence in each profession.

Literature Review

Theoretical Framework

According to the Great Dictionary of Indonesia Language (Kamus Besar Bahasa Indonesia), the authority shall be the power to create the decision of rule and delegate the responsibility to another person. The authority shall be the basis to carry out an action, performance, and carry out the activity.

The pharmacist shall be a graduate Bachelor of Pharmacy who passed pharmacy professional school. The Pharmacist Assistant shall be employee personnel that assists the pharmacist in carrying out the duty of pharmacy. (The Republic of Indonesia, GR No. 51 Year 2009).

The pharmacy service standard shall be the benchmark used as the guidelines for the pharmacy personnel in exercising the pharmacy service. (The Republic of Indonesia, PMK No. 74 Year 2016).

The *Puskesmas* shall be the facility of health service that exercises the community's effort and the effort the health of individual of the first level by prioritizing the promotive and preventive measure in its working area. (The Republic of Indonesia, PMK No. 43 Year 2019)

The authority may be classified to become : (Soejono Soekamto, 2013)

- a. Charismatic authority, which constitutes the authority based on charisma, includes a unique capability attached to an individual, which shall be believed as the nature of an individual since he/she was born.
- b. Official authority, which leaned back to the law system, prevails in the community. The law system shall be understood as the rules acknowledged and obeyed by the community and substantiated by the state. The unofficial authority shall constitute the relations between the individuals, situational in nature, and the nature of which shall be highly determined by the parties that related to each other previously. The official authority shall be systematical, calculatable, and rational.
- c. Limited authority and broad authority, the limited authority shall be the authority, which is limited in nature, in the sense of not covering all sectors or fields of life, however, limited only to one of the sector or fields. The broad authority shall constitute the authority that is not limited by a specific sector of life.

According to its nature, two bases of authority are distinguishable. However, it has become one unified and inseparable. First, the authority is based on the expertise or material authority solely

attached to the pharmacy's individual. The authority according to the law shall be referred to as the formal authority. A pharmacist may carry out pharmacy work if he/she has both of the said authorities. (Adami Chazawi, 2007).

The pharmacists' authority and competency can be obtained after the pharmacist passed the professional exam. The competence needs to be aGR lied in pharmaceutical practices and attached to the authority based on its competence. (The Republic of Indonesia, GR No. 51 Year 2009)

The legal certainty shall be originated from the teaching of juridical dogmatic based on positivism. Positivism tends to see the law as an autonomous matter that is independent due to the adherence of this sect. The purpose of law shall be nothing more than guaranteeing the manifestation of law that general in nature. The general in nature of law shall prove that the said law shall not have the purpose to manifest justice or expedience. It is simply for certainty. (Syahrani Riduan, 2011)

The legal certainty principle shall mandate that all persons are subject to the law and obtain justice in the exercise of community protection. The state shall guarantee legal certainty. (Abdul Halim Barkatullah, 2016).

Methodology

In this research, the writer shall use the type of normative legal research. The normative legal research shall assess the law from the internal perspective with the research object, which shall be the law norm, theories, law principles, and regulations. This aGR roach shall be used to learn whether there is conformity between a law with another law.

This research shall use secondary data. It consists of laws and regulations. It will be used to analyze the authority and competency of the pharmacist in providing pharmacy service standards at the *Puskesmas*, according to PMK No. 26 Year 2020. The data shall be analyzed qualitatively by using the normative aGR roach by way of interpreting and constructing the statement existing in the

document and regulations to establish the conclusion.

Results and Analysis

The authority and competency of a pharmacist

The pharmacy service standard shall be the benchmark used as the guidelines for the pharmacy personnel in providing the pharmacy service at the health facility. (The Republic of Indonesia, PMK No. 74 Year 2016).

The *Puskesmas* shall constitute one of the health facilities that exercise the effort of community and the effort of the health of individual of the first level by prioritizing the promotive and preventive measures in its working area. (The Republic of Indonesia, PMK No. 43 Year 2019).

The pharmacy service standard at the *Puskesmas* shall not be inseparable from the pharmacy personnel, namely the pharmacist and the pharmacist's assistant. Several laws concerning the service of pharmacy at the health facility which provides the authority to the pharmacist shall be as follows:

1. According to Law No. 36 Year 2009 concerning health, Article 23 paragraph (1) states that "The health personnel shall be authorized to exercise the service of health." Article 108 paragraph (1) regulates the authority and competency of pharmacy personnel (the pharmacist). It says that "The practice of pharmacy, which covers the making of including the quality control of pharmaceutical preparation, security, procurement, storage and distribution of medicine, service of medicine upon prescription, drug information service and development of medicine, the substance of medicine and traditional medicine must be carried out by a health personnel, which has the competency and authority accordance with the provisions of the laws and regulation." The health personnel referred to in the said article shall be the pharmacist.

Article 98 paragraph (2) states that "Each person who does not have any expertise and

authority shall be prohibited from procuring, storing, processing, promoting and distributing the medicine and substance which efficacy of the medicine." This article marks that other than the pharmacist shall be prohibited from carrying out pharmacy work because it does not have any expertise and authority.

2. Under Law No. 36 Year 2014, concerning Health Personnel, Article 11 paragraph (6) mentions that "the types of health personnel included in the group of pharmacy personnel shall consist of the pharmacist and the pharmacy technical personnel." Article 26 paragraph (1) states that "The health personnel who has been placed at the facility of service of health shall be obliged to carry out the duty in accordance with its competence and authority."

Article 62 paragraph (1) states that "The health personnel in exercising the practice must be carried out in accordance with the authority which based on the competence which owned by it." The Elucidation of article 62 paragraph (1) explains that the pharmacist shall be authorized to carry out pharmacy work based on competence.

3. Based on Government Regulation (GR) No. 51 Year 2009 concerning Work of Pharmacy, Article 1 point 3 defines "The pharmacy personnel shall be the person who carries out the work of pharmacy which consist of the Pharmacist technical Personnel." Article 2 paragraph (2) mentions that "The work of pharmacy as referred to in paragraph (1) must be carried out by the health personnel which has the expertise and authority for the same".

The pharmacist's authority in exercising the practice must also fulfill the requirement of administrative law. Article 73 paragraph (1) states that "The pharmacist who carries out the pharmacy work must have the certificate of competence of the profession." Article 39 paragraph (1) mentions that "Each pharmacy personnel who carries out the work of pharmacy in Indonesia shall be obliged to have the certificate of registration (*Surat Tanda Registrasi*)."

Article 52 paragraph (1) states that "Each pharmacy personnel who carries out the work of pharmacy in Indonesia obliges to have SIPA (*Surat Izin Praktek Apoteker/ Permit Letter to Practice*) for those who work at the service facility, and SIKKA (*Surat Izin Kerja Apoteker / Permit Letter to Work*) for those who work at production facility and distribution."

4. According to PMK No. 43 Year 2019 concerning *Puskesmas*, Article 17 paragraph (3) states that "Other Health personnel at the *Puskesmas* shall at least consist of the nurse, midwives, personnel of health facilitator and behavioral science, environment, sanitation officer, nutritionist, pharmacist and or pharmacy technical and medical laboratory technology personnel." The pharmacist shall keep on becoming the minimum standard as one of the health personnel at the *Puskesmas*.

According to Law 36 Year 2009 concerning Health, Law 36 Year 2014 concerning Health Personnel, GR 51 Year 2009 concerning Work of Pharmacy, PMK 43 Year 2019, pharmacy personnel who is authorized and responsible to provide pharmacy service at the facility of health is pharmacists. It includes giving pharmacy service standards at the *Puskesmas* all over Indonesia. Meanwhile, the pharmacy technical personnel or pharmacist's assistant shall only assist the pharmacist in carrying out its duty. Due to the Pharmacist has the authority and expertise on the pharmacy service standard at the *PLawkesmas*. According to its nature, this matter shall be in accordance with the one expressed by Adami Chazawi, that according to its nature, two bases of authority become one unanimous unified and inseparable. First, the authority is based on the expertise or material authority solely attached to the pharmacist's individual, the second authority according to the law, referred to as the formal authority. A Pharmacist may carry out the practice of or carry out pharmacy work if it has both of the said authorities. (Adami Chazawi, 2007).

The authority and competency of pharmacists according to No PMK 26 Year 2020

The standard of pharmacy service at the *Puskesmas* of Indonesia has been regulated with PMK 74 Year 2016 concerning Pharmacy service standards at *Puskesmas*. On 16 October 2020, PMK 26 Year 2020 concerning Amendment of PMK 76 Year 2016 concerning Pharmacy service standard at *Puskesmas* has been enacted. Some amendments occur on Article 6, Article 11, and Article 12.

On PMK 74 Year 2016 concerning Pharmacy service standard at *Puskesmas*, before having the amendment, shall be read as follows :

1. Article 6 paragraph (1) stated that "The exercise of Service of Pharmacy at the *Puskesmas* shall be carried out at the unit of service in the form of pharmacy room." Paragraph (2) mentions that "The pharmacy room as referred to in the paragraph (1) shall be presided over by a Pharmacist as the responsible party."
2. Article 11 "Any violation to the provisions in this Regulation of Minister may be subject to the administrative sanction under the provision of the laws and regulations."
3. Article 12 paragraph (1) states that "At the time this Regulation comes into effect, *Puskesmas* which does not have pharmacist, the exercise of limited pharmacy's service shall be carried out by the pharmacy technical personnel or other health personnel with the supervision of the head of the agency of health of regency/city." Meanwhile, paragraph (2) of the same article stated that "The limited Service of Pharmacy as referred to in the paragraph (1) shall cover: a. management of pharmacy preparations and consumable medical substances; and b. service of prescription in the form of compounding of medicine, and giving of information of Medicine". Paragraph (3) mentions that "The exercise of limited Service of Pharmacy as referred to in the paragraph (2) shall be under the development and monitoring of the Pharmacist aGR ointed by the head of the agency of health of regency/city". Paragraph (4) states that "The *Puskesmas* as referred in the paragraph (1) must adjust the

provision of this Regulation at the latest 3 (three) years as of this Regulation of Minister being enacted."

In No. PMK 26 Year 2020 of the amendment of No. PMK 74 Year 2016 Concerning Pharmacy service standard at *Puskesmas*. After having the amendment, therefore shall be read as follows:

Article 6 states:

- (1) "The exercise of Service of Pharmacy at the *Puskesmas* shall be carried out at the unit of service in the form of pharmacy room.
- (2) As referred to in paragraph (1), the pharmacy room shall be presided over by a Pharmacist as the responsible party.
- (3) In exercising the pharmaceutical service at the *Puskesmas*, pharmacists referred to in paragraph (2) may be assisted by the Pharmacist, Pharmacy Technical Personnel, and/or other health personnel based on the necessity of following the provision of the laws and regulations.
- (4) If the *Puskesmas* does not have the pharmacist yet as the responsible party, the exercise of limited Service of Pharmacy shall be carried out by the pharmacy technical personnel under development and monitoring of the pharmacist aGR ointed by the head of the agency of health of regency/city.
- (5) The limited Service of Pharmacy as referred to in paragraph (4) shall cover a. management of Pharmacy Preparations and Medical Consumable Substance; and b. assessment and service of prescription, drugs information service, and monitoring of drug side effect."

Article 11 and Article 12 were deleted.

The deletion of article 11 shall reflect that the Government of the Republic of Indonesia provides the concession for the Rural Clinic, which does not have the pharmacist yet to exercise pharmacy service at the *Puskesmas* without any sanction. The deletion of article 12 shall reflect that the Government of the Republic of Indonesia does not also apply any limitation of time of the *Puskesmas* which does not have the pharmacist to be immediately fulfilled, which previously it is regulated under the deleted article 12 paragraph (4).

PMK 26 Year 2020 makes the limited service of pharmacy services at the *Puskesmas* with no pharmacist carried out by the pharmacists' assistant. It covers pharmacy preparations and consumable medical substance and assessments, service of prescription, drug information services, and monitoring of drugs side effects. However, the pharmacist's assistant does not have any competence and authority in the said limited pharmacy service, even though under the monitoring of the pharmacist. The obscurity of PMK 26 Year 2020 concerning the arrangement of the authority and competency of the pharmacist and the pharmacist's assistant in the pharmacy service standard at the *Puskesmas* has caused legal uncertainty. It needs synchronization of the regulation. The stipulation of the pharmacy personnel in the pharmacy service standard at the *Puskesmas* shall have a purpose of increasing the quality of service of pharmacy, guaranteeing the legal certainty for the pharmacy personnel, protecting the patient and community from the irrational use of medicine in the framework of patient safety.

Conclusion

According to the above analysis, the only health personnel authorized and responsible for providing pharmacy service standards at the *Puskesmas* shall be pharmacists. The pharmacist shall have the expertise attached to it and the authority mandated by the law.

The analysis of PMK No. 26 Year 2020 proved that the arrangement of authority and competency between the pharmacist and the pharmacy technical personnel or the pharmacist's assistant in the standard of pharmacy service at the *Puskesmas* does not provide legal certainty. There is no synchronization from PMK No. 26 Year 2020 with Law No. 36 Year 2009 concerning Health, Law No. 36 Year 2014 concerning Health Personnel, GR No. 51 Year 2009 concerning Work of Pharmacy, and PMK No. 43 Year 2019 concerning *Puskesmas*.

Recommendations

The researcher recommends reassessing the deletion of Article 11 and Article 12 of PMK No.

26 Year 2020. The researcher also recommends to that Minister of Health of the Republic of Indonesia immediately fulfill the lack of the pharmacist at the *Puskesmas*, to increase the quality of service of pharmacy, guarantee the legal certainty for the pharmacy personnel, protect the patient and community from the irrational use of medicine in the framework of patient's safety.

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