



Faculty of Health and Medical Sciences



# The constantly changing role & job market for pharmacists – what does the future hold?

Final – ver\_4

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# The title

**The constantly changing role & job market for pharmacists – what does the future hold?**

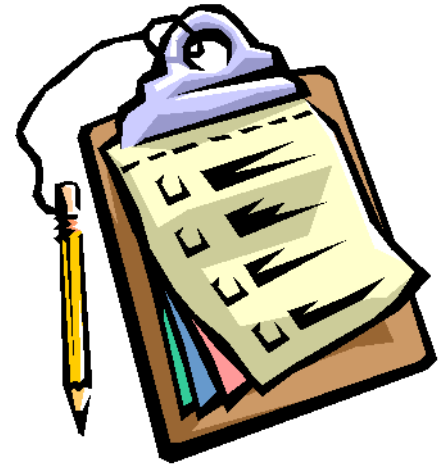


I HAVE NO IDEA  
WHAT'S GOING  
TO HAPPEN.



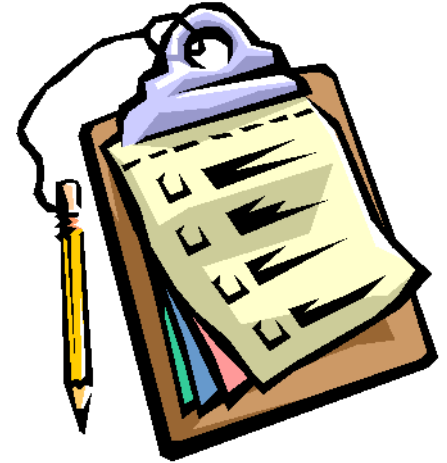
# Program

- **Societal Trends**
- **Professions/Pharmacists**
- **Job market**
- **The future**
- **Be inspired....**



# Societal Trends

- **Demographics**
- **Economy**
- **Technology**
- **New Public Management**
- **Medicine – in the Media**



# Demographics

## Aging European population



## Living longer

- **More people over 65 years in Europe than children**

## Burden of disease\*

- **2015 - 23% of the total global BoD – disorders in people aged 60 plus**

**\*“disease burden”: impact of health problems measured by financial cost, mortality, morbidity etc.**

Source: OECD; Lancet 2015





# Demographics

## Immigration

| Country | 2000   | 2015          |
|---------|--------|---------------|
| Sweden  | 14.5 % | <b>21.5 %</b> |
| Norway  | 6.3 %  | <b>15.6 %</b> |
| Denmark | 7.1 %  | <b>11.6 %</b> |
| Iceland | 3.2 %  | <b>9.5 %</b>  |
| Finland | 2.1 %  | <b>5.5 %</b>  |

**% of total population that are either themselves immigrants or children of 2 immigrant parents**

Source: National Statistics quoted in Wikipedia, May 2015





# Demographics

## Challenges of increased immigration

- **Language**
- **Culture**
- **Issues of trust**



# Economy

**Dominates the public debate**

**how to justify society's expenses?**

- **Issues of:**
  - **Reimbursement**
  - **"regulatory affairs"**



# Economy

**During difficult times the policy agenda focuses on:**

- **Sustainability & austerity programs**
- **Budget cuts “saving money”**
- **Effectiveness, efficiency & productivity**
- **Prioritization & rationalization**



# Technology

## **“Game changing” medical advances**

- expand healthcare choices
  - add to costs
  - require investment to meet increasing demands

## **Robots**

- In the pharmacy
- In the home



# Technology

## Internet commerce

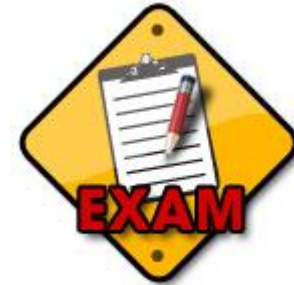
- Massive uptake of social media & smart phone apps
- Increase in distance selling of prescription medicines
- Digital pharmacies



# Technology

## Information/communication

- Advising patients
  - Often the “internet” exam
  - Chat function
- Monitoring



# New Public Management

Since 1980's - policy decisions dominated by NPM

- paradigm shift from Public **Administration** to Public **Management**
- Driving motives: three E's
  - Economy
  - Efficiency
  - Effectiveness
- NPM focuses on earning money not simply spending it
- Stress on private sector styles of management practice



# New Public Management

- **Private actors - better equipped to perform public activities at a lower expense**
- **Government must promote competition among service-providers**
  - **Competition in the public sector will obtain higher quality at lower costs**





# New Public Management

## Managerialism

- Belief in perpetual change as a necessary precondition for achieving increasingly efficient resource management
- Nothing is perfect so even if it works fix it
- An ideology that reframes healthcare
- Encourages health care professionals to accept managerialist thinking



**Managerialist society - not one which responds to the needs, desires, & wishes of a majority of its citizens, but one which is influenced by organizations.**

# **NPM – where are the patients?**

## **Policy Research: where is the patient? 2005**



- **Analysis of the official political debate prior to the deregulation of the Danish medicine distribution system**

**Conclusions: documents lacked explicit reference to medicine users; the deregulation occurred without the direct involvement of medicine users & with very limited explicit consideration to their needs, interest and problems.**

**M. Noerreslet et al. 2005**



# **NPM – where are the patients?**

**Policy Research: where is the patient?  
2015**



- **Content analysis of the political rationale behind the reregulation of the Swedish pharmacy sector**

**Conclusion: the 2009 reform was done almost solely in order to introduce private ownership in the pharmacy sector & was not initiated in order to solve any general problems, or to enhance patient outcomes of medicine use**

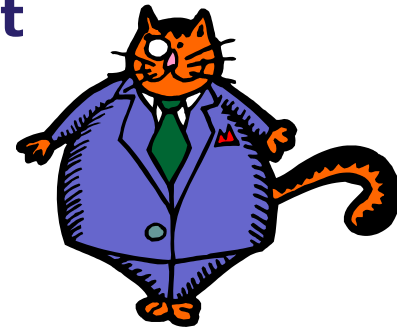
**Wisel et al 2015**



# Medicine in the media

## Mistrust:

- **Pharma industry:**
  - 'Extremely high profit rates'
  - 'New products do not deliver value-for-money'
  - 'Unethical market behavior'
  - 'Austerity measures do not harm the 'fat cat''
- **Healthcare budgets exploding due to pharmaceuticals**

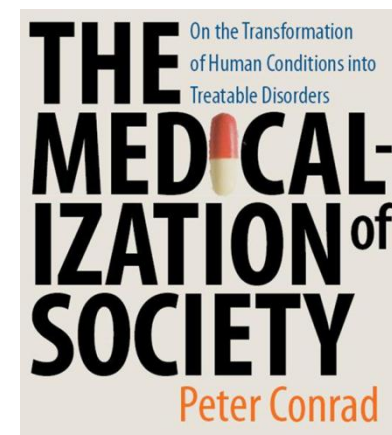


# Medicine in the media

## From medicalization to pharmaceuticalization

- **1970's:**
  - **Medicalization:** "...defining a problem in medical terms, usually as an illness or disorder, or using a medical intervention to treat it".

*Conrad*



# Medicine in the media

- **2000's:**
  - **Pharmaceuticalization: "...the process by which social, behavioral or bodily conditions are treated, or deemed to be in need of treatment/intervention, with pharmaceuticals by doctors, patients, or both"** *Abraham, 2010*



# Medicine in the media

## Bad Pharma™

**Ben Goldacre**

Bestselling author of *Bad Science*

How drug companies  
mislead doctors and  
harm patients

448 pages



# Medicine in the media

## Examples of Recent Campaigns





# "Too Much Medicine" BMJ campaign 2014



- **Aim:** to highlight the threat to human health posed by over diagnosis & the waste of resources on unnecessary care
- **Driver:** escalating healthcare spending & threats to health from climate change
- **Goal:** How to wind back unnecessary tests & treatments

# "Choosing Wisely" US campaign 2014

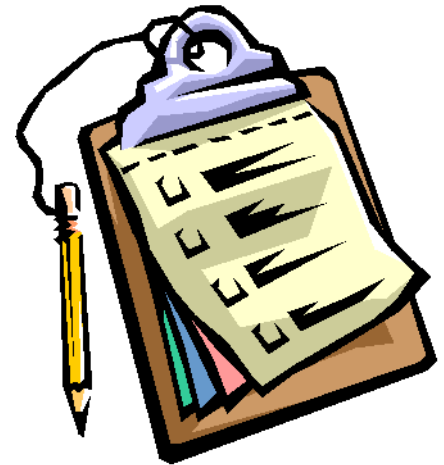
## Information campaign aimed at physicians

- **Goal:** to save money by identifying & eliminating waste of resources
- **Focus on:** problem of unnecessary treatment, which creates waste in healthcare system
- **Motivated by:** OECD study showing that US spends more than 20 times what comparable countries spend per person on healthcare



# Pharmacy profession

- **What is a profession**
- **Pharmacist as a profession**
- **Conflicting opinions of pharmacists**
- **The job market**
- **Pharmacists in Denmark**
- **The Future ?**
- **Be inspired.....**



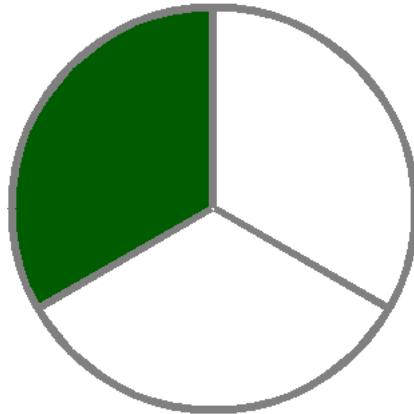
# Professions

## Characteristics

- **Authority (over the lay person)**
- **Sanction/contract with the state/community**
- **Confidential professional/client relationship**
- **Code of ethics (rules)**
- **Theoretical basis underlying the practice**
- **A professional culture – i.e. broad consensus about how to behave – socialization of new members**



# Pharmacist as a profession



**Pharmacists represent the third largest health professional group globally after nurses & physicians.**



**No other health professionals have so much of their education devoted to medicinal products.**

# The pharmacy profession



## No one description of the pharmacy profession today

- embedded in the culture & the laws of the land where it is practiced
- increasingly influenced by:
  - globalization
  - new technological advances
  - a constantly changing & diversified job market

# Contributions to Public Health

## Pharmacists/pharmacies can & do contribute to public health

- **Maintain patient medication records**
- **Promote patient medication adherence**
- **Provide out-of-hours services**
- **Undertake domiciliary visits**
- **Deal with pharmaceutical hazard alerts**
- **Facilitate disposal of waste medicines**
- **Participate in health promotion campaigns**
- **Support patients with chronic illness**
- **Provide advice on how medicines work**

Source: Walker R 2000



# Challenge

## Pharmacy as a Profession?



### Lack of understanding about:

- Who pharmacists are
- What they do
- What they are capable of doing



# Policymakers, Public

## Conflicting views of pharmacy & pharmacists

- **part of health care team?**
- or**
- **private business?**



# Pharmacy sector as a commercial enterprise

- **Drug distribution center (retail shop)**
- **Contributes to the economic good of the community/state**
- **View pharmacists as business (wo)men.**

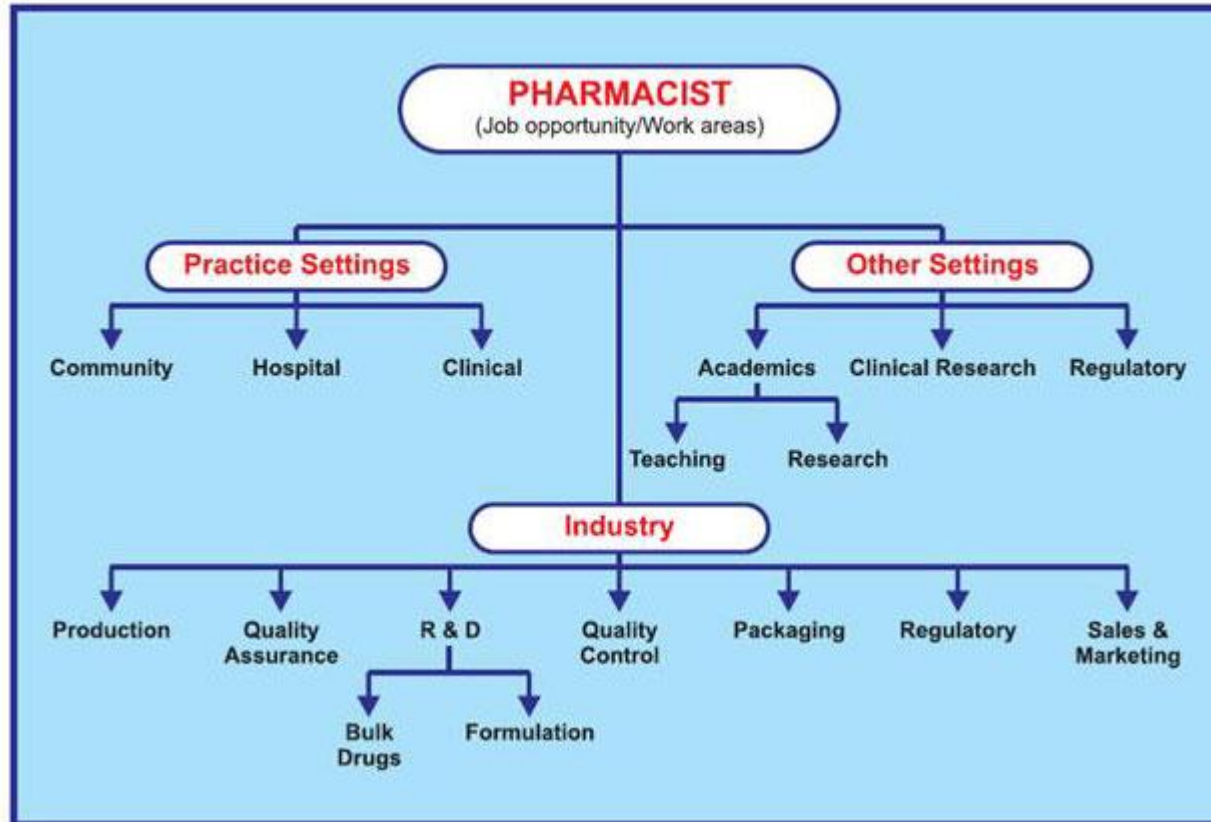


# Pharmacy sector as part of the health care services

- **Local health care center (1<sup>st</sup> contact to the health care system)**
- **Contributes to health services & public health**
- **Policymakers view pharmacists as the most easily accessible health care professionals**



# Where Pharmacists Work



# Pharmacists mainly work in community pharmacies

## Canada:

- **75% pharmacies**
- **15% to 20% hospitals & other health care facilities**
- **5% to 10% industrial sector & other settings**

(CIHI, 2008b)

## Japan:

- **50% community pharmacies - in 2006, up from one-third in 1990**

(Japanese -Pharmaceutical Association, 2008)



# Pharmacists in Denmark?



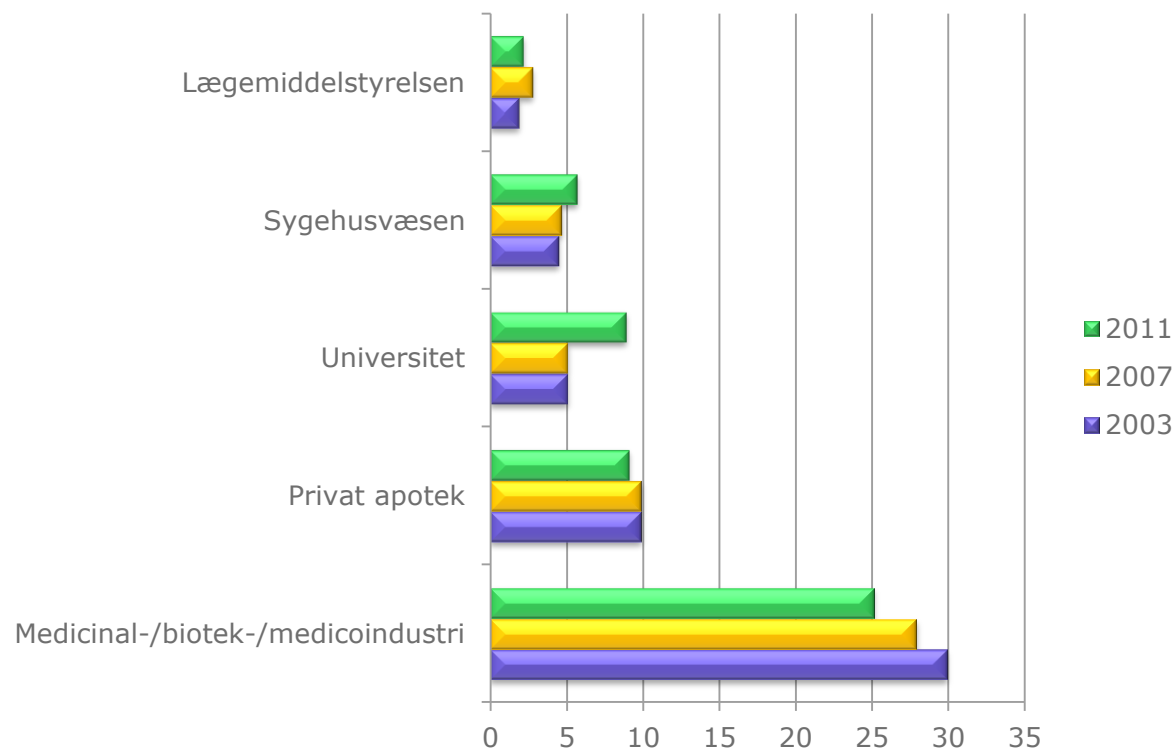
## Inclusion

- **provide services directly to patients (clients)**
- **work in administration & management positions requiring a pharmacy education**
- **conduct research, test drugs to determine identity, purity & strength**
- **Participate in development of controls & regulations**
- **prepare scientific papers & reports**

Danish, National Board of health 2014

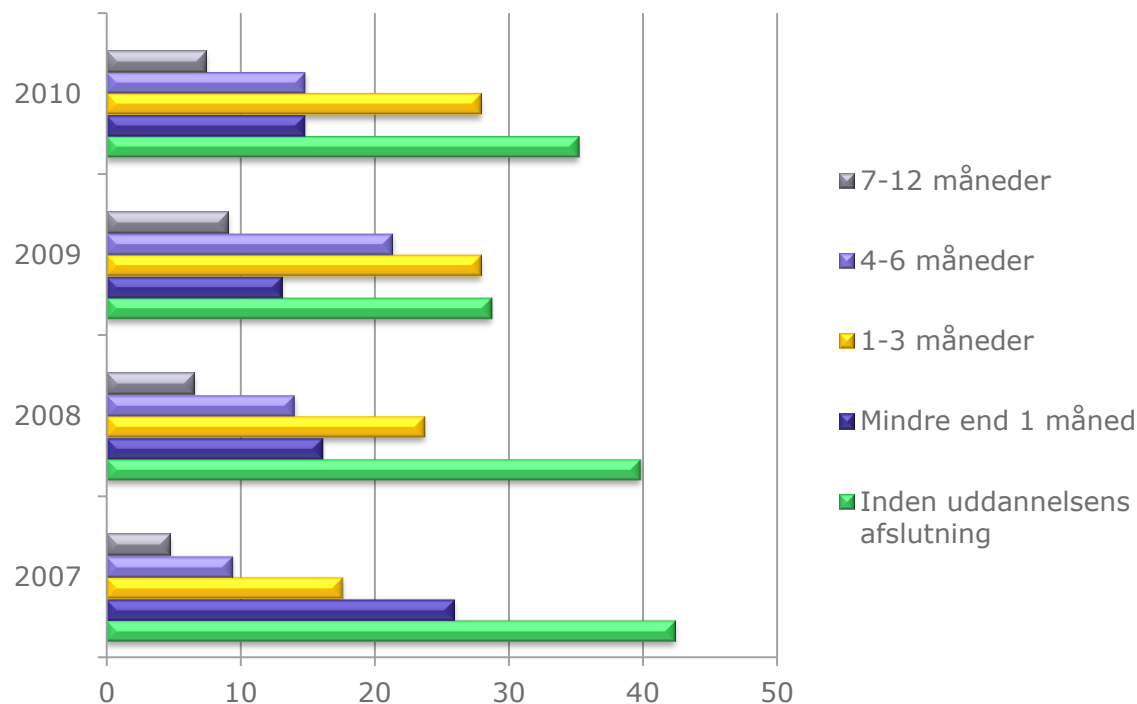


# Where do Danish Pharmacists work?



- **Increase in staff at universities (and in the hospital system)**
- **Decrease in employees in the pharmaceutical and biotech industry**

# First Jobs-graduates from 2007-2010



- First recruitment comes easy for many
- Less than 10% are waiting for 7-12 months

**None wait more!**



# Trends affecting pharmacy

## Net sales getting bigger & bigger

- **Drivers:**

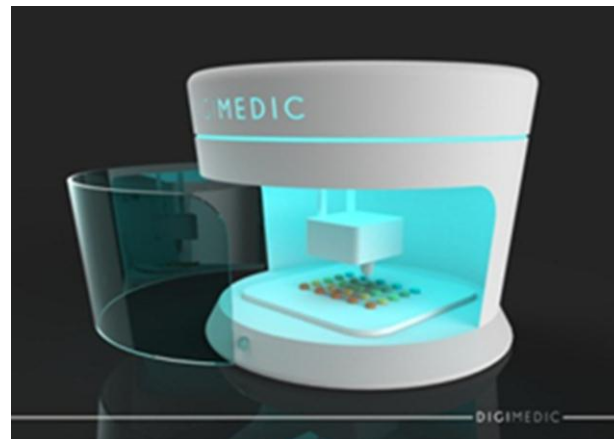
- **Consumers who are used to net sales**
- **More profitable**
- **Less staff needed**



- **Consequences for the Pharmacy profession?**
  - **More commercialized**
  - **Less focus on professional interests**

# Trends affecting pharmacy

- **Home care**
  - **Nursing homes mainly for the senile**
- **Robotics**
  - **Everywhere**

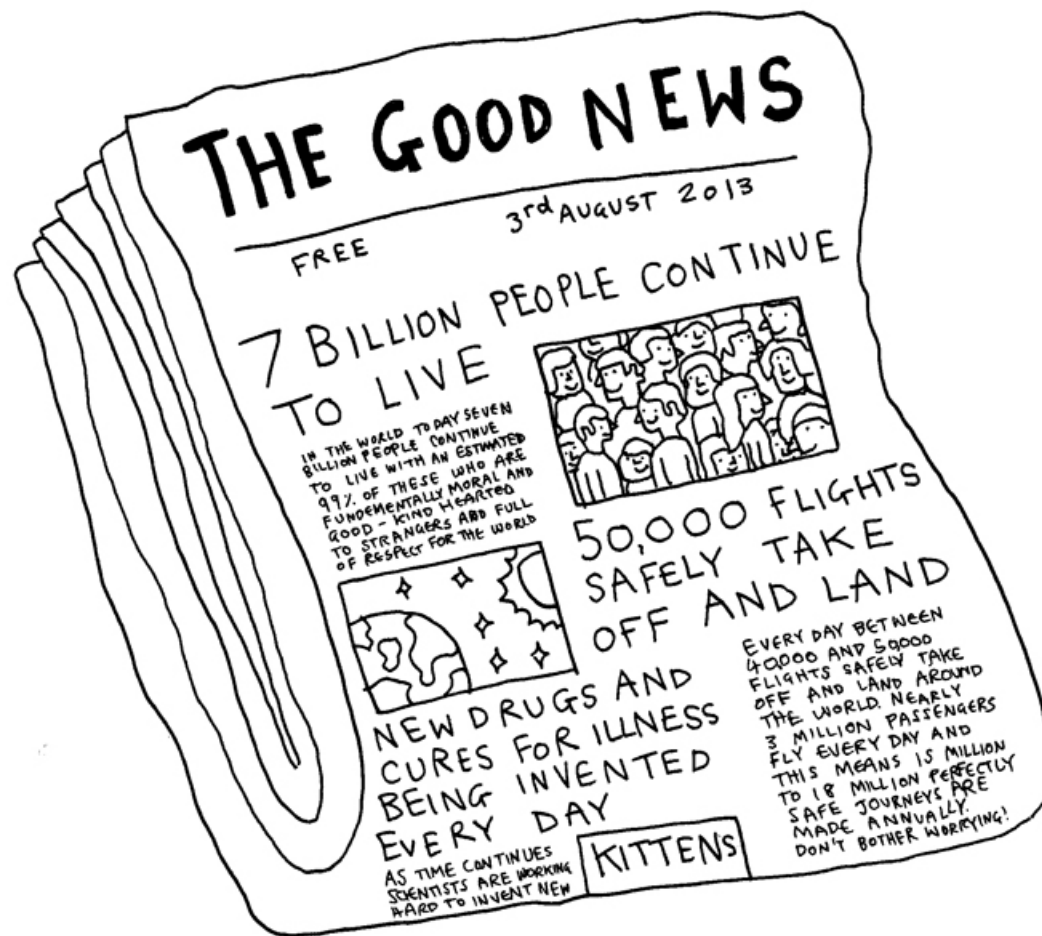


# Education

## Future specializations













- **Clinical specialization in pharmacy & hospitals**
  - **Biopharmaceuticals**
  - **Regulatory sciences**
  - **Formulation & manufacture of medicinal products**
  - **Radiopharmaceuticals**
- 
- **Medicinal chemistry training as an independent master's degree**
  - **Human Biology as an independent master's degree**



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# 10 BEST JOBS IN HEALTHCARE

Earlier this year CareerCast, a career guidance website, evaluated income, outlook, environmental factors, stress, and physical demands for 200 professions across a wide variety of industries, salary ranges, and skill levels. Using this data – gathered from the US Bureau of Labor Statistics, the Census Bureau, trade association studies and other sources – CareerCast was able to determine the best and worst jobs of 2014. These are the top 10 in healthcare.

| RANK |   | JOB TITLE                     | AVERAGE ANNUAL SALARY | PROJECTED GROWTH BY 2022 |
|------|---|-------------------------------|-----------------------|--------------------------|
| 1.   |    | Audiologist                   | \$69,720              | 34%                      |
| 2.   |    | Dental Hygienist              | \$70,210              | 33%                      |
| 3.   |    | Dietitian                     | \$55,240              | 21%                      |
| 4.   |    | Medical Laboratory Technician | \$34,160              | 22%                      |
| 5.   |    | Medical Technologist          | \$47,820              | 22%                      |
| 6.   |    | Optician                      | \$33,330              | 23%                      |
| 7.   |    | Pharmacist                    | \$116,670             | 14%                      |
| 8.   |  | Physical Therapist            | \$79,860              | 36%                      |
| 9.   |  | Physiologist                  | \$42,690              | 19%                      |
| 10.  |  | Podiatrist                    | \$116,440             | 23%                      |

Source: CareerCast

BUSINESS INSIDER



# EU - shortage of Pharmacists



- **Europe expects a shortage of 1.000.000 health workers by 2020 (190.000 of those pharmacists and physiotherapists).**

**(PGEU 2015)**

# According to the Danish Ministry of Education



**"....becoming a pharmacist is a sure way to a job. Only 2 out of 100 are unemployed. It is one of the lowest unemployment rates of all the courses that you can take at the University."**

**([www.ug.dk/job](http://www.ug.dk/job) accessed 05.05.2015)**

# Pharmacist – competencies & Qualifications

- **Analyzing information**
- **Administering medication**
- **Judgment (making decisions)**
- **Verbal communication**
- **Dealing with authorities (Board of Health)**
- **Pharmacology**
- **Quality focus**
- **Attention to detail**
- **Meticulous & systematic way of working**





# Pharmacist – competencies & qualifications

- **Medicine experts**
  - Essential – medicines & medicine treatment is becoming more & more complex
- **Administering medication**
- **Judgment (making decisions)**
- **Verbal communication**
- **Dealing with authorities (Board of Health)**
- **Pharmacology**
- **Quality focus**
- **Attention to detail**
- **Meticulous & systematic way of working**





## These competencies & qualifications

- are needed & wanted by the HC system
  - the primary, secondary & tertiary sectors – all need these competencies

## These competencies & qualifications

- are needed & wanted by the pharmaceutical industry

# Conclusion

**Pharmacists have a good, relevant, basic education**

- **Build on that**
  - **Continually upgrade your skills**
  - **Seriously consider an “additional” education**
    - **Research**
    - **Management**
    - **Economics**
    - **Etc.**

**Course  
Descriptions**



# Inspiration

# Be inspired.....see what pharmacists are doing

Former students at the Section for Social Pharmacy

**Dorthe**

Regional Manager

Clinical Pharmaceutical Service

The Capital Regional Pharmacy



# Be inspired.....see what pharmacists are doing

Former students at the Section for Social Pharmacy

## Jakob

Special Consultant for policy affairs  
The Pharmaceutical Industry Association.

## Hanne

Programme Manager  
Health Technologies & Pharmaceuticals  
Division of Health Systems & Public Health  
WHO Regional Office for Europe



# Be inspired... see what pharmacists are doing

## Birna

Project director

SURE –(Securing Ugandans' Right to Essential Medicines)

Uganda

Formerly

Ministry of Health in Denmark (10 years)

Danida Program Manager in Zimbabwe

South East Asian Regional WHO office in New Delhi



# Be inspired... see what pharmacists are doing

## Rasmus

Market Access & Public Affairs Manager (Africa)

Novo Nordisk – Dubai, United Arab Emirates

Formerly

Global Market Access Manager

Novo Nordisk

Denmark





# Be inspired... see what pharmacists are doing

**Karen**

Manager

Training & Learning Management

Hoffmann-La Roche

Switzerland

Mikkel

Pharmacy Owner

"Research Pharmacy"



# Be inspired... see what pharmacists are doing

**Mikkel**

Pharmacy Owner

"Research Pharmacy"









**SOME**  
**OPPORTUNITIES**  
*only come once*  
**SEIZE**  
**THEM**

THE THINGS WE SAY.COM



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