



ISSN: 2277- 7695
TPI 2017; 6(2): 100-104
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www.thepharmajournal.com
Received: 16-12-2016
Accepted: 17-01-2017

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Justification of the role of authorized person for social issues in the chain of main parties of social protection of pharmacy professionals

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Abstract

The role of “authorized person for social issues” was justified in the chain of the main parties of social protection of pharmacy professionals in pharmaceutical institution. Pharmacy professionals’ attitude towards social protection at their workplace was studied. Relationship was studied in the following chain: “labour collective (LC) – Employer (E) – authorized person for social issues (APSI) – non-governmental organizations (NGOs) – executive branch (EB)”. The basic relationship in this chain and problems were considered.

Keywords: Social protection, pharmacy professionals, pharmaceutical institutions, authorized person for social issues

1. Introduction

Analysis of the literature showed that the main focus of researches was made on the specific aspects of social protection targeted at social responsibility of business, which were described by Kotvitska A.A., Mushko Z.F., Nemchenko A.S., Ponomarenko M.S., Posylkina A.V., Tolochko V.M. and other authors, but there was no analysis of the justification of the role of authorized person for social issues (APSI) in pharmaceutical institutions of various forms of ownership in Ukraine. Therefore, in our studies we make focus on the structure of the existing scheme of relations in the chain “labour collective (LC) – employer (E) – non-governmental organizations (NGOs) – executive branch (EB)” and introduction of APSI as the main part of social protection of pharmacy professionals (SPPhP).

Lack of sector-specific legislation on social protection of the employees of pharmaceutical sector of health industry make pharmacy professionals (PhP) more vulnerable in the face of social and economic difficulties. Poor social guarantees lead to increased social tension in the labour collectives of pharmacies, consequently, to decline in efficiency of PhP^[13].

2. Materials and methods of research

Purpose of our research was justification of the role of “authorized person for social issues” in the chain of main parties of SPPhP in pharmaceutical institution.

Study subject was social condition of PhP. It was complex and various, and it included PhP’s activity in pharmaceutical institutions of various forms of ownership, i.e. in the conditions of various communications, media space, interfaith relations, etc., where it was object of influence and subject of activity.

During the study we used methods of logical, historical, analytical analysis and social researches. We analyzed the legislative and regulatory framework of Ukraine in the field of social protection and social security of the population emphasizing the members of certain professions (particularly pharmacy professionals).

3. Results and Discussion

Integration processes in Ukraine regarding the accession to the European Union (EU) aim at standardization of the economy, business and various sectors of the economy, including pharmaceutical sector of health industry according to European standards. It improves the quality of life of the employees^[4].

It should be mentioned that current system of health care in Ukraine is rather conservative; changes in social and economic life of the country do not lead to reforming of social security for employees of the pharmaceutical sector of health industry–PhP (chemists, pharmacists).

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Current system of SPPhP demonstrates its inefficiency, especially in the pharmaceutical institutions of private form of ownership; the results of our research indicate this. To detect PhP's satisfaction in the social protection provided at the workplace, we used questionnaire survey, and it was found out that not all PhPs felt socially protected and, as a result, there was a need to improve this issue (Figure 1) ^[4, 13].

For this purpose we conducted questionnaire survey for PhPs, who worked in the private, municipal and state pharmaceutical institutions in the following regions of Ukraine: Vinnytsia, Donetsk, Zhytomyr, Kyiv, Luhansk, Poltava, Chepnihiv, Kharkiv regions and cities of Kyiv and Kharkiv. PhPs were interviewed according to the occupying positions, which were divided to the following positions: Heads of pharmaceutical institution, Deputy Heads of pharmaceutical institution, managers of divisions, pharmacists. The total sample constituted about 1000 respondents.

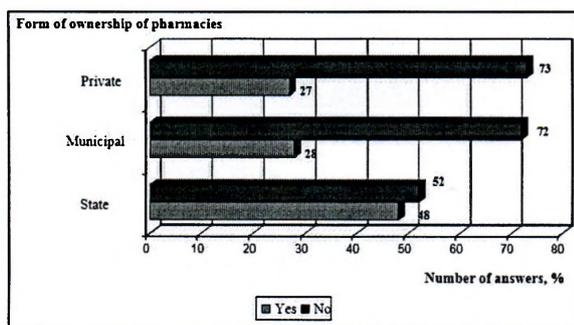


Fig 1: Analysis of PhP's satisfaction with social protection in pharmaceutical institutions

Figure 1 shows that pharmaceutical institutions of private ownership (73.0% of respondents) constitute a proportion of PhP, who feel socially unprotected. Pharmaceutical municipal institutions take the second place with 28.0% of PhP, who feel socially protected. Most PhP (52.0%) feel socially protected in state pharmaceutical institutions. While interviewing the PhP it was found out that they were not satisfied with their social protection because they were unable to protect themselves against occupational diseases (occupational allergies, professional burnout, etc.), they were not satisfied with working conditions, and employers disregarded the profession. In the EU developed countries, the worker of health industry is a respected and highly paid profession with high level of social protection, and this profession is protected by the law.

Taking into account present circumstances it is high time to reform the system of SPPhP. One of such reforming steps may include involvement of self-regulatory organizations, such as public professional organizations, to the health care sector. Appropriate mechanisms for implementing of public interests in the form of SPPhP can be delegated to these organizations. This requires a close contact with LC of pharmaceutical institutions, and APSI can provide it, being a person responsible for the implementation of SPPhP at the workplace ^[12].

Therefore, to reform the pharmaceutical sector of health industry successfully and to create an effective system of SPPhP, we need sweeping reforms in the health care sector and development of a clear system of coordination between employers, organizations and executive authorities regarding

the implementation of SPPhP.

Creation of a modern system of SPPhP, which is one of the most important needs of the pharmaceutical sector of health industry of Ukraine, is relevant. The supply of social needs to PhPs guarantees adequate social and labour relations and effective cooperation between the parties of social partnership in the chain: "PhP – employer". The supply of SpPhP requires consideration of various aspects of life of PhP, namely: social, economic, political, technological, information, environmental aspects, etc.

Nowadays, one of the problematic issues is that Ukraine under current conditions cannot provide social services (SS), including SS for PhP, at such high level as EU countries can. Social orientation of PhP's activity requires reforms of the structure of PhP's social protection and implementation of effective system of SS provision. Today a process of rethinking of new approaches to SS provision and their inclusion to the system of SPPhP proceeds not only at national level but also at the branch level. The evidence of the abovementioned we can find in the provisions of the following legislative documents: "National Security Concept", "The Doctrine of Information Security", "On Social Services", etc. ^[1, 6, 8].

Historically, only social protection has developed in Ukraine, but sector-specific protection and SPPhP are neglected. Only in 2001 SPPhP was under focus by proposing the draft law "On Social Protection of Pharmacy Professionals", which was not adopted. Such disregard of SPPhP affected the social situation in the pharmaceutical sector of health industry, causing an increase of disregard to the profession of PhP ^[6]. Nowadays the situation is improving, as evidenced by, for example, increased interest from scientists and legislators to SPPhP; scientific debates on theoretical and practical aspects of SPPhP are being carried on.

At present a model of social security of Ukraine is being formed; the priorities are being changed gradually into harmonious security of individuals, society and workers of a particular sector. An important role in this model takes creation of the system of SPPhP with European human rights standards. Complexity and various outstanding problems of SPPhP, expansion of the range of threats and needs in SS require solving of a number of pressing problems, such as finding of scientific and reasonable options and models to provide SPPhP, determining the role of social security in it, development of forms, methods and measures of protection from threats and emergencies of social nature, as well as training of qualified personnel who have up-to-date knowledge of mentioned problems.

This article aims to make a contribution to the development of the theory and practice of provision of PhP's safety from dangerous and emergency situations of social origin and to improve the status and training of specialists in the field of SPPhP by introducing of APSI to LC of pharmacies as a main element of SPPhP ^[6, 9, 11, 12].

Unfortunately, today there is no constructive dialogue and interaction between PhP and the employer that causes social tension in the pharmaceutical institution. Therefore, to solve the abovementioned and other issues and to resolve possible conflicts we propose introducing of the authorized person for social issues to LC of pharmaceutical institutions of all forms of ownership. Depending on the staff of the pharmaceutical institution and its number it is possible to introduce a certain position of APSI or to entrust one of LC representatives with particular responsibilities; this representative shall be elected

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at labour meeting. After that the relationship will be as follows: "labour collective – employer – APSI – non-

governmental organizations – executive branch". Let's consider the basic relationship in this chain (Figure 2) [2, 10-12].

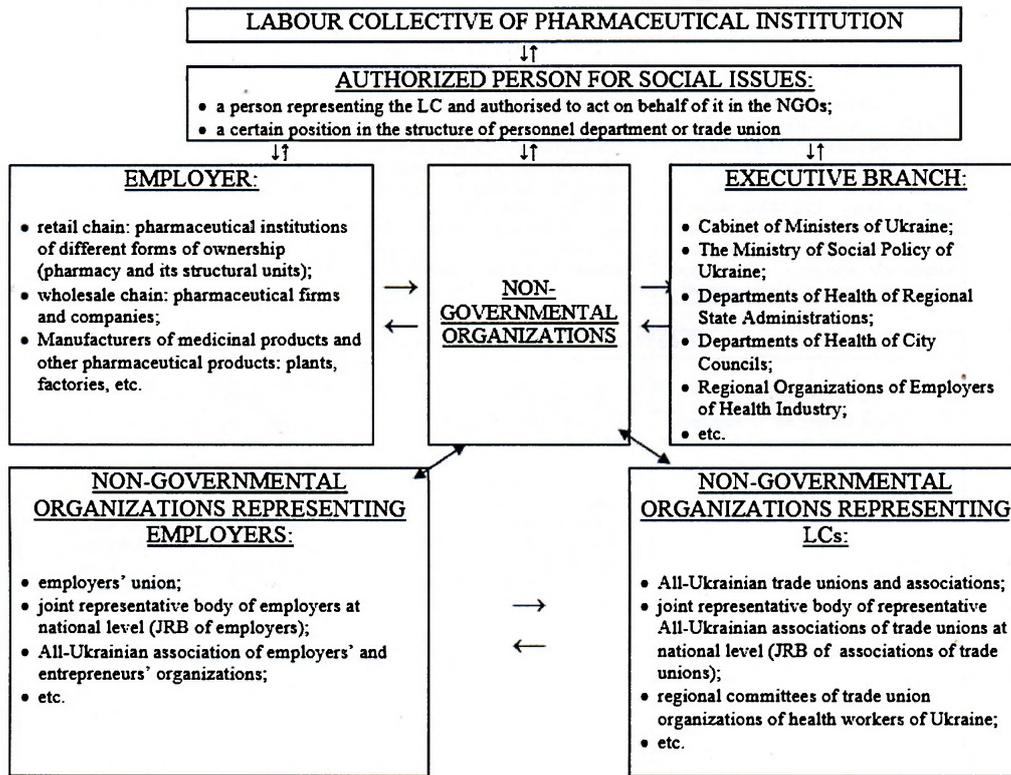


Fig 2: Link in the chain "Labour Collective – Employer – APSI – Non-Governmental Organizations – Executive Branch"

According to Figure 2, APSI is a timely buffer between the LC of pharmacies and the environment. With the help of APSI it is possible to solve a lot of issues, including the harmonization of relations between LC and the employer, establishment of an ongoing dialogue regarding the issues of SPPHP and improvement of labour discipline, occupational safety, etc. With regard to cooperation of APSI with non-governmental organizations, first of all, it will increase the

effectiveness of NGOs and their reputation among the PhPs. Organized cooperation with the executive branch will help to resolve most issues regarding SPPHP and will enable PhP to obtain more access to the social programmes. We think that it will be possible to solve the following problems by introducing the APSI (Figure 3) [3, 9-13]. For convenience in further research, pharmacies were divided into three groups, depending on the number of LC (Table 1) [12].

Table 1: Classification of pharmaceutical institutions depending on the number of LC

Group	Characteristics	Number of PhPs	Proposed provision of SPPHP
1	2	3	4
I	Large pharmaceutical institutions (large network pharmacies and their structural units)	50 and more	Trade union of PhPs and a certain position of APSI
II	Average pharmaceutical institutions (network pharmacies and their structural units)	5 to 50	Trade union of PhPs or a certain person of APSI
III	Small pharmaceutical institutions (isolated pharmacies and their structural units)	1 to 5	APSI without a certain position (additional responsibilities entrusted to PhP)

According to Table 1 we can find out that, depending on the classification group of pharmaceutical institutions, certain organizational support is provided: from the trade union of PhP to APSI.

Managers of pharmaceutical institution are responsible for the choice of organizational support of social issue. Therefore, certain justification of possible methodological approaches to its implementation is required.

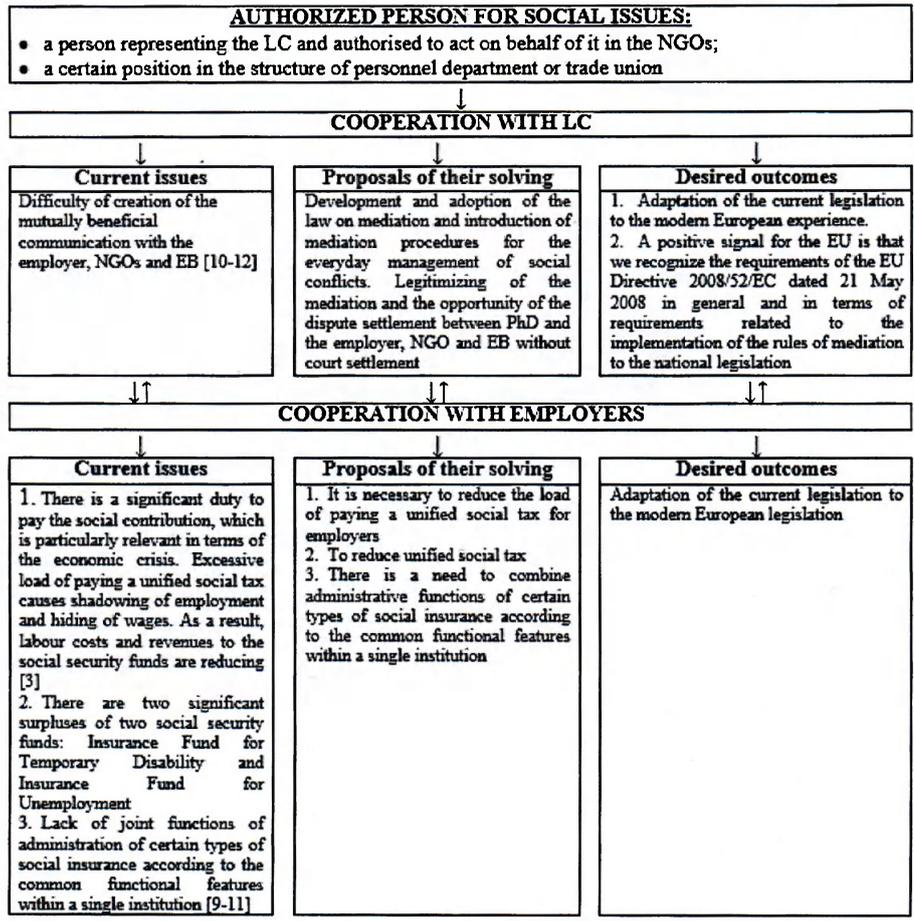


Fig 3: Possibility to solve current issues with the help of APSI

Basing on the conducted grouping of pharmaceutical institutions, they are divided into three groups. Let's consider each group.

Group I. large pharmaceutical institutions. Analysis shows that current pharmaceutical institutions of Group I conduct management of social issues by creating primary trade union organizations. Therefore, a certain position of APSI in a trade union makes sense in every institution.

Group II. Average pharmaceutical institutions. According to the classification they are the pharmaceutical institutions with LC of 5 to 50 PhPs. It is advisable to create a separate position of APSI in pharmaceutical institutions, which have an extensive network of branches.

Group III. Small pharmaceutical institutions. Currently, there are many pharmaceutical institutions with few persons in LC. For these pharmaceutical institutions it would be more effective to entrust PhP with additional responsibilities regarding social protection of employees, who would deal with this issue independently.

Summarizing the abovementioned, we propose the following qualification requirements to APSI, which would create the organizational support in pharmaceutical institutions of all 3 classification groups.

The basis for these proposals is current Ukrainian legislation, namely: the qualification characteristics of positions of professional group "Managers", "Authorized Person", "Pharmacist", which are specific to the parties of the

pharmaceutical industry. We propose the following qualifying characteristics of an employee "authorized person for social issues" and the position description. Thus, in the present context "Authorized Person for Social Issues" should perform the following tasks and have the following duties [5].

Tasks and duties. APSIs should know the following information for professional execution of their duties: current legislation of Ukraine on health, on social protection and its organization in Ukraine; laws, regulations, decrees, orders, decisions and other statutory instruments of state and local authorities, governing the standard operating procedures of pharmaceutical institutions; civil and labour law; rules and regulations of labour; ethics standards; occupational safety and operating procedures of technologies.

Practically, APSI should be able to apply the knowledge, to improve it individually, to analyze situations, which arise during the working practice; be able to evaluate historical and current processes; be of high moral character, be able to make professional decisions, taking into account their social impact. APSIs should know their rights, powers and action in case of illegal influence, when they are forced to cede their professional duties.

APSI should perform the work rationally, introducing elements of scientific organization of work, using best practices. APSI should comply strictly with sanitary regime, internal labor rules and regulations, fire safety, occupational safety and health.

Taking into account the type of pharmaceutical institution APSI should comply with the current legislation of Ukraine and regulations on SPPHP. APSI cooperates with the regional bodies of state administration regarding social issues, keeps operating and reporting documentation, improves professional skills constantly [7, 12].

4. Conclusion

1. Basing on the conducted analysis of staffing support of pharmaceutical institutions regarding the implementation of social protection, the role of "authorized person for social issues" was justified in the chain of the main parties of social protection of pharmacy professionals in pharmaceutical institution. Pharmacy professionals' attitude towards social protection at their workplace was studied. Relationship was studied in the following chain: labour collective-employer-authorized person for social issues-non-governmental organizations-executive branch. The basic relationship in this chain and problems were considered.
2. Classification of pharmaceutical institutions depending on the number of people in labour collective was justified and divided into three groups. According to certain criteria, organization of social protection of pharmacy professionals was justified within this classification. Staffing support of organizational measures for social protection of pharmacy professionals in Ukrainian pharmaceutical institutions was justified.
3. Social protection professionals established qualification requirements to their staffing support in order to improve the social protection of pharmacy professionals in the pharmaceutical institution. The position description of authorized person for social issues was developed. Assignment of authorized person's activities was justified according to the place and stage of performance. All these measures are aimed at improvement of social protection of pharmacy professionals in pharmaceutical institutions.

5. References

1. Law of Ukraine on Social Services dated 19, 2003, 966-IV. Electronic resource: <http://www.zakon.rada.gov.ua/> Search date 31th January, 2017.
2. Law of Ukraine on Remuneration of Labour dated 24 March, 1995, 108/95-BP. Electronic resource: <http://www.zakon.rada.gov.ua/> Search date 31th January, 2017.
3. Law of Ukraine on Collection and Registration of Unified Contribution for Compulsory State Social Insurance dated 8 July, 2010, 2464-VI. Electronic resource: <http://www.zakon.rada.gov.ua/> Search date 31th January, 2017.
4. Zarichkova MV. The necessity of implementing of social protection of healthcare workers at the level of developed European countries. Materials of VIII National Congress of Pharmacists of Ukraine. Pharmacy of XXI century: trends and prospects. 13-16 September, 2016, 219-220.
5. Zarichkova MV, Solovyov OS, Grygoruk YuM. Reference book of qualifying characteristics of professions of workers (amendments). Publication 78. Health care. Information Sheet, 2015, 7.
6. Zarichkova MV, Tolochko VM, Muzyka TF. Study of legislative and regulatory control of social protection of the workers of pharmaceutical industry of Ukraine.

Guideline, 2015, 32.

7. Zarichkova MV, Solovyov OS, Grygoruk Yu M. Standard position description of authorized person of pharmacy (pharmacies) for social issues. Information Sheet, 2015, 11.
8. Zarichkova MV. Improvement of organization of social services provision for pharmacy professionals. Pharmaceutical journal. 2015, 48-57.
9. The Labour Code of Ukraine dated 10 December 1971, 322-VIII. Electronic resource: <http://www.zakon.rada.gov.ua/> Search date 31th January, 2017.
10. On collective agreements, amended: Law of Ukraine dated 01 July, 1993, 3356-XII. Electronic resource: [zakon.rada.gov.ua/](http://www.zakon.rada.gov.ua/) Search date 31th January, 2017.
11. On Labour Protection: Law of Ukraine dated 14 October, 1992, 2694-XII. Electronic resource: <http://www.zakon.rada.gov.ua/> Search date 31th January, 2017.
12. Tolochko VM, Zarichkova MV. Staffing support of social protection in pharmacies. Guideline, 2015, 20.
13. Zarichkova MV. Analysis of the attitude of pharmacy specialists towards the current social protection system and directions for its reformation. News of pharmacy. 2015, 5559.