A REPORT ON GOOD PHARMACY PRACTICE OUTREACH PROJECT OF FIP IN THAILAND

Introduction

The International Pharmaceutical Federation first adopted the guidelines for Good Pharmaceutical Practice in 1993. These guidelines were developed as a reference to be used by national pharmaceutical organisations, governments, and international pharmaceutical organizations to set up nationally accepted standards of Good Pharmacy Practice. The revised version of this document was endorsed by WHO in 1997 and subsequently approved by the FIP Council in 1997.

The GPP Guidelines are based on the pharmaceutical care given by pharmacists. The guidelines recommend for national standards to be set:

- The promotion of health;
- The supply of medicines, medical devices, patient self-care;
- Improving (prescribing and) medicine use by pharmacists’ activities.

These guidelines have been subsequently adapted and adopted in a wide number of developed countries; in broader terms, within the European Union, through the activity of the Pharmaceutical Group of the European Union. In certain cases, the national professional bodies have strived to adapt the guidelines and developed the same, sometimes in collaboration with the government, specific regulation/legislation on this matter.

Conscious of the need to help developing countries achieve GPP, the FIP Community Pharmacy Section Executive Committee established a working group to produce guidelines in this area in 1992. The paper, entitled “GPP in Developing Countries – Guidelines for Implementation”, was endorsed by the FIP CPS ExCo in September 1998.

Having realized the importance of continuing to increase awareness of GPP and stimulating its implementation, the FIP Bureau decided to request the Board of Pharmacy Practice (BPP) to focus on the theme and to develop a specific activity. Limited funding, to give it a start, was allocated. The BPP activities comprehended then the selection and identification of potential “host” countries. Indonesia was identified at that time and foreseen as an appropriate choice, since it gathered the necessary conditions. Discussions were then started with interested parties, to enquire on the activity’s potential. It then was fundamental to the BPP to suggest an adequate approach to tackle the issue.

The Task Force involved in this activity consisted of Nippe Strandqvist, Prafull Sheth, Dick Tromp, supported by Teresa Alves.

Many activities have been pursued, but now, it appears that they were not successful.
This situation was discussed and it was suggested to describe a set of terms of reference, in order to restart the project, but also to request the Regional Forums to advice, with a proviso that if the outcome with the regional forums appears to be positive a project should be defined, including a project leader and a budget.

Subsequently, the SEARPharm Forum in the ExCo meeting held in Bangkok on November 30, 2004 nominated Thailand for this project as Thailand has come farthest in GPP in the Region. FIP Bureau liked the Forum’s suggestion and asked to prepare the ToRs by Pharmaceutical Association of Thailand under Royal Patronage.

**Status of Community pharmacy in Thailand**

Community pharmacy in Thailand is basically regulated by the Drug Act 1967. However, the recent effort is to promote additional professional standards through the “Quality Accredited Pharmacy Program” under the Pharmacy Council accreditation system. The program runs on a voluntary basis, with supports from the Thai Food and Drug Administration, the Community Pharmacy Association, Schools of Pharmacy and other local pharmacy organizations. However, this movement has triggered the need to revise community pharmacy practice elements mandated by the Drug Act 1967.

The revision is aimed to implement a wider concept of the WHO/FIP Good Pharmacy Practice guidelines. The current regulations of limiting role of pharmacists to medical supply are not in accordance with the higher acceptance of community pharmacy contribution to the society. The expanding roles of community pharmacy for enhanced recognition would require more studies need to be conducted to find out relevant roles and practices. One ambitious goal is to integrate the accredited pharmacy into the governmental insurance scheme and perform the whole range of pharmaceutical care. This could be a radical development of community pharmacy services in Thailand.

With easy access, community pharmacists seem to be one of the best candidates to provide comprehensive health promotion services. These services include, for example, general health advice, smoking cessation, stress management, immunisation, weight management, dietary and dietary supplement consultation, reproductive health consultation, adherence to medication regimen, oral health consultation, and receiving screening for early detections. Yet the appropriate and efficient roles relevant to the Thai context need to be established and integrated for the recognition of pharmacists in the Thai health care system.

The FIP-BPP outreach project on GPP in Thailand proposed “The implementation of the WHO/FIP GPP Guidelines to Thai standards project” with three complimentary sub-projects running parallel to one another.

**Sub-project 1** “Transferring the WHO/FIP GPP guidelines into the Thai regulatory standards”. This sub-project is to brainstorm main stakeholders concerned with the ideas to be input for revising the current standards in relation to the WHO/FIP GPP elements. The results are to propose the new standards to the Thai Food and Drug Administration and the Pharmacy Council for further official procedures.
**Sub-project 2** “Health promotion pharmacy project”. The main objective is to develop general practice guidelines for providing health promotion in community pharmacy and to integrate the concept into every day practice. The project also includes developing specific guidelines for relevant health promotion issues.

**Sub-project 3** “Establishment of career path for community pharmacists”. This sub-project is to set out possible and sound career path for community pharmacists as a means to encourage standards adherence and promote better practices beyond the standards.

**The implementation of the WHO/ FIP GPP Guidelines**

The GPP implementation is one of the main objectives of the SEARPharm Forum. The SEARPharm Forum nominated Thailand for the WHO/FIP outreach project on GPP.

The overall goal of this project is to contribute to the health and well-being of the populations in Thailand through improved standards and practice of drug distribution and drug utilization. The main approach of this project is to provide technical assistance to member associations and to establish close collaboration with the national health authorities, the national offices of the World Health Organization (WHO) and the regional forum of collaboration between WHO, FIP, and SEARPharm Forum.

This report contains:

1. **Terms of Reference of GPP Outreach project of WHO/ FIP**  
   Please see Annex - I

2. **Project outline for the Technical assistance to the Implementation of WHO/ FIP Guideline on Good Pharmacy Practice in Thailand**  
   Please see Annex - II

3. **Progress report on the WHO/ FIP GPP in Thailand**  
   Please see Annex - III

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