

## An Empirical study on the importance of Task Shifting in current Health Care System

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### ABSTRACT

Many developing countries are facing a crisis in human health resources due to a critical shortage of health workers. Despite of many trained health care professionals our health care system is struggling to provide optimum services to the patients. Gaps still exist with respect to patient care, which are unevenly delivered. The data collected from 228 subjects reveals that only 7.01% of the subjects have received counseling always, 59.65% think that counseling should be given and only 41.66% are satisfied with current health care system while 56.57% are not satisfied. Our study shows that there is a huge burden on health care professionals due to a high number of the patient load which leads to the hindrance in optimum patient care and finally leads to the degradation in the quality of health care services. Now time has approached when the term task shifting should be taken seriously especially in the health care sectors. Pharmacists, an ignored profession in the health care sector have a crucial role for optimum patient care. It is the demand of the scenario that pharmacist should be taken as a key role player between the patient and prescriber. A proper communication between the patient and prescriber can be established only if all health care professionals will start working to assist each other not to compete with each other.

**Keywords:** Task shifting, Healthcare system, Patient care, Role of pharmacists in health care.

### 1. INTRODUCTION :

Many developing countries are facing a crisis in human health resources due to a critical shortage of healthcare workers. This shortage is compounded by a high burden of infectious diseases, emigration of trained professionals, difficult working conditions, and low motivation by country governments. Consequently, for example, the burden of chronic diseases like HIV/AIDS has led to the concept of task shifting between healthcare workers and being increasingly promoted as a way of rapidly expanding human resource capability. Such process refers to the delegation of health and medical service responsibilities from higher to lower cadres of health staff, and in some

cases even to non-professionals [1-2]. The delegation of tasks from one cadre to another, previously often called substitution [3], is not a new concept. It has been used in many countries and for many decades, either as requirements to emergency needs or as a method to provide adequate healthcare service at primary and secondary levels, especially in rural and urban health centres with understaffed facilities, and also to enhance quality and reduce costs [4]. However, rapidly increasing the need of healthcare generated by the HIV/AIDS epidemic, accelerating trained human resource crises, and unrest in many African countries, which contribute to the collapse or near-collapse of public health systems