TECHtalk

FEBRUARY/MARCH 2010

2010 Conference Calendar

FEBRUARY 20 28th Annual Pharmacy Technicians Conference

Humber College, North Campus, Toronto

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Telephone: 416-675-6622, Ext. 77151 E-mail: leah.barclay@humber.ca Website: www.pharmacy.humber.ca

APRIL 9-11 (TECHNICIAN PORTION APRIL 10)

Annual Manitoba Pharmacy Conference

Winnipeg Convention Centre Contact: CAPT Manitoba

Website: www.mbpharmacyconference.com

(techs must register online)

MAY 14-16 PDC 2010, CAPT's Annual National Professional Development Conference

Delta Meadowvale Resort, Mississauga, Ont. Contact: Canadian Association of

Pharmacy Technicians Telephone: 416-410-1142 E-mail: pdc@capt.ca

 $\textbf{Website:} \ www.capt.ca/Capt_PDC.aspx$

SEPTEMBER 17-19 20th Annual Alberta Pharmacy Technician Conference

Hyatt Regency, Calgary, Alta.

Contact: Pharmacy Technician Society of

Alberta

E-mail: info@pharmacytechnicians.ab.ca **Website:** www.pharmacytechnicians.ab.ca

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Taking the initiative

Tech goes above and beyond the call of duty — and has the award to prove it!

t floored me," says Tiffany White, describing her reaction to winning the Pharmacy Technician Initiatives category at the 2009 Commitment to Care & Service Awards, hosted by *Pharmacy Practice* and *Drugstore Canada*.

She needn't have been so surprised. As a pharmacy technician at Classic Care Pharmacy in Ottawa, she has taken on a number of projects that not only demonstrate initiative, but have earned her accolades as a key member of the healthcare team. In acknowledgement of her many contributions, pharmacy manager Wendy Buchanan submitted her nomination to the awards committee, which the modest White declared "incredibly flattering."

Classic Care Pharmacy, headquartered in Burlington, Ont., exclusively serves longterm-care (LTC) homes and retirement residences-24 facilities from the Ottawa location. With no retail setting, the pharmacy focuses on filling residents' prescriptions on a daily basis and communicating with the nurses, physicians and healthcare staff. White, one of 15 technicians and nine pharmacists, visits the nursing homes with the pharmacists, and assists them with medication audits, the destruction of expired and discontinued medications and filling the medication carts. When the pharmacy takes on a new client, White gathers the required information and sets up the facility's supplies.

She also maintains relationships with Classic Care's satellite pharmacies—neighbouring pharmacies that are partnered with each LTC facility to assist after hours—and handles all the related billings. One of White's favourite activities is organizing the annual charity golf tournament—"that's my baby," she says proudly.

But where she has really distinguished herself over her six years at the pharmacy is in the preparation of educational materials to help the nurses at the facilities follow safe medication practices. "The very first one I did, which is still used, my manager asked me to prepare tools to help the nurses when administering



morphine," she explains. She drew a syringe with lines indicating the correct, government-approved dosages, accompanied by a chart with conversion tables.

Since then she has produced a module on hazardous medications, has prepared a "do not crush" list to inform nurses of medications that lose their effectiveness when crushed for patients who have difficulty swallowing, and compiled a list of look-alike and sound-alike drugs to prevent mix-ups.

White relies on a variety of resources to gather information, including the pharmacists themselves, the Internet, the CPS, the Drug Information and Research Centre and the pharmaceutical companies. "I'll get the information and then I'll have it proofed by the pharmacist to make sure it's correct," she says.

In addition to preparing learning materials, she organizes educational evenings for the nurses and other healthcare partners of the pharmacy.

White, who is a 2001 graduate of the now defunct pharmacy technician program at Algonquin College in Ottawa, took her first step towards regulation in January, embarking on the bridging programs that recently became available in the Ottawa area. "I've been very eager to start this," she says.

Back in high school, White had contemplated going into pharmacy, but wasn't sure if she would like it or not. So she decided to take the pharmacy technician course "to get a feel for the industry. What I found out is that I love being a tech."

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> ONTARIO NEWS

OCP pilots PLAR challenge exams

Ith the four bridging education courses now in place at all the colleges accredited by the Canadian Council for Accreditation of Pharmacy Programs (CCAPP), the Ontario College of Pharmacists (OCP) is introducing the Prior Learning Assessment and Recognition (PLAR) challenge examinations. The PLAR exams, which will be offered for all of the bridging programs except Professional Practice, allow candidates to bypass these courses by demonstrating that they already have the knowledge and skills needed to meet the learning outcomes.

As of January, the Pharmacology challenge exam is being piloted at all the CCAPP-accredited locations, says Susan James, manager, registration programs, OCP. "We are establishing a process that will allow individuals to sit the PLAR exams at any community college site in the province," she says. "We are piloting the exam first at the core pharmacy technician colleges, and will then open it for exams to be held throughout the province." Candidates may attempt the PLAR challenge only once for each of the eligible courses.

The challenge exam for the Drug Distribution course is expected to be available in February, and Product Preparation by the summer. Each challenge exam will take three hours, and consist of multiple-choice and short-answer questions, says James. The Product Preparation exam will also require some practical evaluation.

In other developments, the Professional Practice course is now available online, through OntarioLearn (www.OntarioLearn.com), a consortium of 22 Ontario community colleges that have partnered to develop and deliver online courses. She advises eligible candidates to check the OCP website (www.ocpinfo.com) for updates.

➤ WEST COAST NEWS

Alberta to adapt Ontario bridging programs

harmacy technicians in Alberta will soon be able to take their first steps towards regulation, thanks to the province's agreement to purchase Ontario's bridging education program, consisting of four courses totalling 165 classroom hours.

Alberta technician educators are currently working with the Alberta College of Pharmacists (ACP) and the Community College Association to incorporate Alberta-specific legislation into the content. "This will be completed as soon as possible and delivery of the programs will begin

as soon as possible after that," says Dale Cooney, deputy registrar, ACP, although the launch date is not yet confirmed.

Under the agreement, Ontario will provide the bridging modules in a format that can be delivered either in person or online in Alberta. "We will work with tech programs to deliver via both (formats)," says Cooney. The deal also includes access to Ontario's Prior Learning Assessment Recognition (PLAR), the challenge examination for three of the four bridging programs (see "Ontario News" for more information). "It, too, will be offered as soon as it can be amended," adds Cooney.

He expects the first sitting for the Pharmacy Examining Board of Canada (PEBC) qualifying exam to take place this fall, but says dates must be confirmed by the PEBC.

> QUEBEC NEWS

Benefits of delegation

he delegation of container content verification has been permitted in Quebec community pharmacies for several years, but according to the Ordre des pharmaciens du Québec (OPQ), too few pharmacists take advantage of the benefits the practice offers.

During a recent conference of the Association québécoise des pharmaciens propriétaires (AQPP), pharmacist Guylaine Bertrand, professional practices coordinator for the OPQ, outlined the results of a pilot project studying how a number of community pharmacies have set up their delegation procedures.

She reported that the rate of error in these

pharmacies after instituting a delegation procedure was 1%, lower than the standard set by the OPQ, and that the rate of certainty was at least 95%.

Bertrand explained that the establishment of the delegation procedures in these pharmacies required a great deal of organization and resources, as well as the appropriate training for pharmacy technicians. As a result, she believes that a policy of delegation should be enforced in stages, paying particular attention to identifying cases where the verification should be carried out by the pharmacist.

Bertrand advised pharmacists instituting a delegation procedure to establish a clear protocol that includes a statement of objectives, a detailed list of the tasks involved and their complexity and a list of quality control measures.

Reporting adverse drug reactions: techs can take action

ll drugs and health products on the market have benefits and risks. Although they are carefully tested before they are licensed in Canada, it is not unusual for an adverse reaction—described as "a harmful and unintended response to a health product"-to become evident only after a product is in use. Reactions may occur within minutes or years after exposure to the product, and may range from minor side effects like a skin rash, to serious and lifethreatening events, such as heart attack or liver damage.

In fact, Health Canada notes that over 50% of newly approved therapeutic health products have serious side effects that are discovered only after the product is on the market.

That's why it is critical for pharmacy technicians and other healthcare professionals to report any suspected adverse reactions to the Canada Vigilance Program, Health Canada's post-market surveillance mechanism. It is not necessary to be certain that a health product caused the reaction in order to report it, nor is reporting limited to healthcare professionals. However, Health Canada recommends that consumers do so in conjunction with a healthcare professional to be sure they have accurate information about their medical history.

Health Canada wants to know about all suspected adverse reactions to drugs or health products on the Canadian marketprescription and non-prescription pharmaceuticals, natural health products, biologics and radiopharmaceuticals—but particularly if they are unexpected, i.e., not consistent with product information or labeling; serious, whether expected or not; or related to a health product that has been on the market less than five years.

If any of your patients complain about an adverse reaction, you should report it as soon as possible, even if you are not certain that the health product was the cause. Reporting can be done online at www.healthcanada.gc.ca/ medeffect, by telephone (toll-free: 1-866-234-2345) or by submitting the Canada Vigilance Reporting Form (available on the website and at the back of the CPS) by fax (1-866-678-6789) or mail (see regional addresses on page two of form). The report should contain relevant information about the patient characteristics, and details about the reaction(s) suspected to be associated with the health product(s), the treatment and final outcome. Information on the identity of the patient and the reporter of the adverse



reaction is kept confidential.

Health Canada analyzes the reports to discover potential health product safety signals that may trigger a need for further investigation. Reports are placed in the Canadian Adverse Drug Reaction Information System (CADRIS), the computerized database that houses Canadian suspected adverse reactions that have been reported. Health Canada also publishes a quarterly newsletter, called "The Canadian Adverse Reaction Newsletter" (CARN), which alerts subscribers to potential signals detected through the

reports. Both these resources are available free of charge on the website.

It has been estimated that for every adverse reaction that gets reported, up to 10 go unreported. Therefore, the reporting of adverse reactions is a significant opportunity for pharmacy technicians to promote medication safety for all Canadians. medication safety for all Canadians.



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