TECHtalk

JULY/AUGUST 2023

# PAS to integrate pharmacy technicians as members

### THE BOARD OF DIRECTORS OF THE

Pharmacy Association of Saskatchewan (PAS) has agreed in principle to add pharmacy technicians as a new class of members.

"What we're doing now is working through the terms of membership—questions like representation on the board of directors and our committees," says Michael Fougere, PAS CEO. "These are all mechanical questions; the decision has already been made [to offer memberships to pharmacy technicians]." He expects memberships to be available by the end of the year.

In an effort to sign up the new class of members, PAS will explain the value-added proposition of joining the Association, "and will ensure that our education programs and seminars reflect the priorities of technicians as well as pharmacists," says Fougere.

Previously, techs in the province had their own association—the Pharmacy Technician Society of Saskatchewan—but it has since been dissolved and PAS plans to provide a strong alternative. "Definitely, our plan is to help them in terms of representation with our college and with education programs, and really advancing the profession."

By integrating pharmacy technicians, PAS is following in the path of other advocacy associations such as the Pharmacy Association of Nova Scotia (PANS) and the Ontario Pharmacists Association (OPA).

### CHECK OUT all our CE lessons for pharmacy technicians at eCortex.ca

All lessons accredited by the Canadian Council on Continuing Education in Pharmacy.



### Answer CEs online for instant results.

Tech Talk is endorsed by:

ANADIAN ASSOCIATION D IARMACISTS PHARMACIENS



# ENTERPRISING TECH PURSUES MANY PATHS

**IN APRIL 2020, AWARE OF THE STAFFING** challenges many colleagues were facing due to the pandemic, Edmonton pharmacy technician Melissa Olson decided to help out.

The result was her own pharmacy relief service, which she aptly registered as "Eat. Sleep. Pharmacy. Repeat."

At the time, she explains, she was working in a specialty pharmacy that didn't have patient foot traffic and where she was isolated from her colleagues. "So, I felt I was safe to go and help other pharmacies." She worked evenings and weekends in relief, spending a few days at one pharmacy and then a few days self-assessing to ensure she remained COVID-free.

Olson had never even heard of a pharmacy technician as a career path until a cousin from the U.S. suggested that it was an emerging field of practice. At that point, she had abandoned studies in psychology and had just applied for nursing when she switched gears to pharmacy technician/ assistant, graduating from Thompson Career College in 2002. Bridging courses through Selkirk College eventually followed as she pursued regulation, all while navigating life as a single parent to two young sons.

With the easing of the pandemic and more staff returning to work, Olson's relief business is mostly on the backburner for now, but she adds that "in a pinch, I would go and help my pharmacy professionals because I know that a lot left the profession because the stress was so great and I was really fortunate not to have been exposed to that where I was working."

In the meantime, Olson has taken on new challenges. Last fall, she was nominated to the board of directors of the Pharmacy Technician Society of Alberta (PTSA) as advocacy director. While she admits that her transition into this role has been "very bumpy," she says she has "recently gained some newfound knowledge and some new



confidence in the direction I can go." She plans to collaborate with technicians in Alberta and across Canada "to bring awareness to our role—how we can benefit our pharmacists and our patients and hopefully expand our scope."

Alberta is one of the few provinces that has not authorized pharmacy technicians to perform injections, a frustrating setback for many. Olson also wants to advocate for technicians to perform point-of-care testing that doesn't involve nasal swabs, as well as for the ability to handle and destroy narcotics and controlled substances. "I think that is something we could take off pharmacists' plates because we really need them on the clinical side."

Meanwhile, she is furthering her own education as she works toward a professional certification in project management. Her current manager, who recommends the certification to some of his pharmacists, thought Olson would be an ideal candidate as well. "I jumped on it," she says. "While it's an opportunity to build on the skills that I often use, such as communication, documentation, organization and leadership, it also helps develop or expand on the four pillars of

>> CONTINUED ON PAGE 4

An educational service for Canadian pharmacy technicians, brought to you by Teva www.tevacanada.com



## TECHtalk

Publisher: Donna Kerry

Editor: Rosalind Stefanac

> Writer: Sally Praskey

Art Director: Lima Kim

Production Manager: Lisette Pronovost

# 

## eCortex.ca

TECH TALK and TECH TALK CE are published by *Pharmacy Practice+* Business, a division of EnsemblelQ Toronto, Ontario.

> No part of these can be reproduced without the written permission of the publisher. For more information, contact Vicki Wood wwood@ensembleiq.com

Is there something you would like to read about in *Tech Talk*? Send your ideas and feedback to vwood@ensembleiq.com

> An educational service for Canadian pharmacy technicians, brought to you by Teva



Visit us online at www.CanadianHealthcareNetwork.ca www.tevacanada.com

## PTCB launches new tech credential

NEWS

**THE U.S.-BASED PHARMACY TECHNICIAN CERTIFICATION BOARD** (PTCB) has launched a Nonsterile Compounding Certificate for technicians. The new specialized credential recognizes pharmacy technicians in community settings who are creating customized formulations for patients requiring medications or dosage forms that are not commercially available.

"We are pleased to offer technicians this new opportunity to advance their careers," says PTCB executive director and CEO William Schimmel. "Not only will this certificate benefit technicians, but it also expands the ability of community pharmacies to safely provide medication formulations tailored to each patient's unique needs."

Technicians who pursue this specialty will gain the critical knowledge and skills required to address the risks involved with compounded medications, ensuring the quality of the product and protecting their patients. The certificate complements PTCB's Certified Compounded Sterile Preparation Technician (CSPT) program, which assesses technicians' knowledge and skills to prepare medications in sterile environments such as hospitals, home infusion centres, and other compounding facilities to prevent contamination.

PTCB also announced new appointments to the committee of subject matter experts who are responsible for the establishment and administration of PTCB's credential programs. The new appointees include pharmacy technicians Tara McNulty and Stephanie Rice-Erienbusch, who join fellow technician Tiffany Kofroth, who is now vice-president of the 14-member committee.

PTCB currently offers three certifications: Certified Pharmacy Technician (CPhT), Compounded Sterile Preparation Technician (CSPT), and Advanced Certified Pharmacy Technician (CPhT-Adv), as well as 11 certificates.

## CSHP Foundation appoints inaugural Pharmacy Technician Trustee

**PHARMACY TECHNICIAN BAL DHILLON** has been appointed the Canadian Society of Hospital Pharmacists (CSHP) Foundation's inaugural Pharmacy Technician Trustee. The position was added to the Foundation board to represent the perspectives of the growing number of CSHP pharmacy technician members.

Dhillon, director, inventory & order management with Provincial Health Services Authority, has more than 25 years of experience in the pharmacy profession. After earning a BSc. at Simon Fraser University, she pursued her RPhT training, completed her Provincial Instructor diploma from the province of British Columbia, completed her Master of Business Administration focusing on process and project management, and recently earned her Project Management designation from the Project Management Institute.

She also designs, develops, and delivers pharmaceutical compounding education for healthcare professionals on the topics of sterile and non-sterile compounding. She was instrumental in the formation of the Pharmacy Technician Society of BC (PTSBC) in 2011, and is currently its director of education.

# Pharmacy assistants can immigrate to Canada through Express Entry

**PHARMACY ASSISTANTS CAN NOW APPLY** for permanent residence in Canada under the Express Entry system's Federal Skilled Worker (FSW) program as part of an initiative to help ease the labour shortage in the healthcare system.

"Pharmacy technical assistants" and "pharmacy assistants" are one of 16 newly added jobs on the list of eligible occupations under the FSW.

"We are using all of the tools at our disposal to tackle labour shortages, particularly in key sectors like healthcare, construction, and transportation" says Immigration Minister Sean Fraser in announcing the newly eligible occupations in November 2022. "These changes will support Canadians in need of these services, and they will support employers by providing them with a more robust workforce whom we can depend on to drive our economy forward into a prosperous future. I'm thrilled to announce expanded pathways to permanent residence in Canada for these in-demand workers."

The federal government's job-hunting website, Jobbank, ranks the job prospects of pharmacy assistants over the next three years as "good" in Alberta, Manitoba, New Brunswick, Ontario and Saskatchewan, and as "moderate" in Newfoundland and Labrador, Nova Scotia, Prince Edward Island and Quebec.

# ACP requests feedback on revised version of SPPPT

THE PHARMACY TECHNICIAN ASSOCIATION OF ALBERTA (PTSA) is encouraging all pharmacy technicians to review the Alberta College of Pharmacy's (ACP) Draft Standards of Practice for Pharmacists and Pharmacy Technicians (SPPPT) and provide feedback directly to the College.

The SPPPT were introduced in 2007 and have remained relatively unchanged since, even though pharmacy practice has evolved immensely during those 16 years. "The Draft Standards reflect our changing healthcare environment and public expectations, while at the same time retain important content that exists in the current Standards," says Jeff Whissell, ACP's deputy registrar.

PTSA reviewed the initial Draft Standards and made several recommendations regarding the application of "direction" compared with "supervision," as well as the opportunity to provide greater clarity surrounding appropriate roles for non-regulated pharmacy employees.

While ACP made changes to the Standards based on this feedback, "we believe further amendments to the practice framework, including Standards of Practice, are still needed to reflect modern pharmacy technician practice and to clarify the roles of unregulated pharmacy assistants," Teresa Hennessey, administrator, PTSA, told Tech Talk. "We look forward to reviewing the next iteration."

The review process has now reached the final step: consultation with regulated members and other interested parties. Once the consultation period ends on July 12, ACP will consider all comments and questions and prepare a revised version of the Draft Standards for Council's consideration before the end of the year.

PTSA's advocacy committee is currently reviewing the Standards in order to provide further feedback to ACP, and invites technicians to join the committee.

The Draft Standards can be reviewed at https://abpharmacy.ca/draft-standardspractice-pharmacists-and-pharmacy-technicians.

# NLPB implements new requirements for document retention and storage

THE IMPLEMENTATION DEADLINE FOR THE NEWFOUNDLAND AND LABRADOR PHARMACY BOARD'S (NLPB) revised Standards of Pharmacy Operation — Community Pharmacy is September 1, 2023. In this revision, approved by the NLPB

in August 2022, standards pertaining to the

storage and retention of patient records were modified, including the removal of minimum retention times for physical records in the presence of an electronic copy.

The updated Standards say that patient records "must be retained in a secure, but readily accessible format (either physical or electronic) for a minimum of 10 years." While there is no requirement to retain physical records in the presence of an electronic copy, processes must be in place to ensure electronic records are complete and secure prior to destroying original documents.

Policies and procedures around how the pharmacy processes, retains, stores and destroys records must be in place, says the Board. Questions to consider when developing these policies and procedures may include: • How frequently are electronic records being backed up? If the pharmacy needed to restore from a backup, how many days worth of physical documents would need to be re-scanned?

- What processes are in place to ensure electronic prescription images are consistently updated in the event of a subsequent modification, such as a verbal order change/ clarification made to the original?
- What processes are in place to ensure electronic records are complete?

Pharmacy professionals should also note that, in addition to written prescriptions and written copies of verbal prescriptions, patient documents include patient assessment records, clinical documentation forms, compounding records, consultation records and packaging records, says the NLPB.

# life effects

# Real people, real stories

"My entire life before cancer was based on 'someday.' Someday I'll take a vacation. Someday I'll work less. Someday I'll spend more time with family."

Read Todd's story, and many more, at TevaCanada.com/LifeEffects

Get information, tips and advice shared by people living with a chronic condition.



Todd Seals

Living with

cancer

## OCP warns about patient privacy in electronic messaging

**THE ONTARIO COLLEGE OF PHARMACISTS** (OCP) reports that it has seen an increase in the use of unsecured electronic methods by pharmacy professionals and other healthcare professionals to communicate with each other and with patients for purposes such as information gathering, provision of care, consultations, education and administrative tasks. These methods can include e-mail, text message, social media, and messaging services such as WhatsApp or Facebook Messenger.

"However, the use of these technologies, instead of systems such as EMRs, clinical viewers, or secured healthcare-focused platforms, can present serious risks to the security of the personal health information of patients and have the potential to lead to a privacy breach," says a recent article in *Pharmacy Connection*. It points out that, as health information custodians, registrants must follow the rules established by the Personal Health Information Protection Act (PHIPA), and are accountable for taking reasonable steps to protect personal health information and keep it secure. That includes the proper use of physical, administrative, and technical safeguards.

Before using electronic messaging with patients and providers, OCP urges registrants to consider:

- Use of electronic safeguards
- Use of encryption
- Need for informed consent
- How to minimize data shared
- Retention and documentation requirements
- Policies, procedures and training

For more information, visit Electronic Messaging: What About Patient Privacy?—*Pharmacy* Connection.

#### >> ENTERPRISING TECH PURSUES MANY PATHS CONTINUED FROM PAGE 1

business acumen that technicians like me were not previously exposed to. I feel that pursuing this certification is helping me build confidence and align my goals and my company's goals and objectives as well." She foresees other potential benefits down the road: "I think it would be preparing me if, by chance, technicians were allowed to become licensees, or I wanted to start a new program that could benefit people in the community that we serve."

The enterprising Olson has set her sights on several areas in which she could support her profession and the patients she serves. She cites teaching, writing, "maybe doing some sort of community work, maybe furthering my education, addiction counsellor perhaps—I work a lot in that field, so I've become pretty attached to it."



## A prescription for helping with minor ailments

WITH PHARMACISTS IN ALL JURISDICTIONS, except the Northwest Territories and Nunavut, now authorized to assess and prescribe for a growing list of publicly funded minor ailments, pharmacy technicians have also taken on an increasingly significant role in support of the pharmacists.

Pharmacists in Ontario received prescribing authority for minor ailments as of January 1, 2023. At Kristen's Pharmacy in Southampton, Ont., pharmacist and owner Kristen Watt says the biggest role her technicians play in this regard is intercepting patients as they call or come in with questions. When patients ask to see the pharmacist, technicians will ask what it's regarding and will then text them an intake link to complete a minor ailments assessment and book a time for a consultation, says Watt. "The techs are great at knowing which [patient responses] to divert in this way. We can get many calls and drop-ins daily, and how we've structured things here is that most pharmacist consults outside of Rx counselling need an appointment, but I count on my techs to know which type of appointment and to set them up properly."

One of those techs is Sheena Deane, who is also vice-president of the Canadian Association of Pharmacy Technicians. "Any time someone asks about any of the minor ailments, or if they request a product for treatment of one of the minor ailments, such as an allergy tablet, or something for bug bites or rashes, a link to the appointment booking system is sent," she says. "Often, people will try to book children or males for UTI assessment, so those patients are referred to their family practitioner." For patients who can't navigate the online system, an assistant will book the appointments on their behalf.

Deane says that since pharmacists have been authorized to prescribe for minor ailments, "we have been seeing a lot of UTI, muscle strains, atopic dermatitis and allergies." She acknowledges that "this could be in part because of the season and the fact that we are a compounding pharmacy." The only two conditions yet to be seen, she says, are impetigo and dysmenorrhea.

### Snapshot of pharmacist prescribing authority\*

**Alberta:** The first jurisdiction to offer pharmacist prescribing in 2007, pharmacists in Alberta continue to have the widest latitude in the country when it comes to prescribing authority. Pharmacists are authorized to prescribe for 49 of 50 conditions listed by the Canadian Pharmacists Association's "Common Ailment Prescribing in Canada."

**British Columbia:** Starting June 1, pharmacists could assess and prescribe for contraception needs and 21 minor ailments, free of charge to patients.

Manitoba: Prescribing authority for 13 conditions.

**New Brunswick:** Authority to assess and treat 34 minor ailments since 2014, but patients had to pay a fee. N.B. Medicare now pays for 11 ailments, but there are still 23 for which pharmacists can prescribe that aren't currently covered.

**Newfoundland & Labrador:** Four ailments were recently added, bringing the total to 33, covered through the NL Prescription Drug Plan.

Nova Scotia: Funding for 35 minor ailments with valid N.S. health card.

**Ontario:** Funding for assessment and prescribing of 13 minor ailments; six more expected to be added in fall 2023.

**P.E.I.:** Through the Pharmacy Plus PEI program, pharmacists can assess and prescribe for 35 common ailments, all covered.

**Saskatchewan:** In February 2012, Saskatchewan became the first government in Canada to pay for minor-ailment prescribing. Pharmacists can assess and prescribe for 27 conditions.

\*As of press time.

### SAFETY BY NUMBERS

**Manitoba –** from June 1, 2021, to June 1, 2022, the one-year anniversary of Safety Improvement in Quality (Safety IQ)

Total number of reported incidents:

3,439 (458 community pharmacies)

### Outcomes of reported incidents:

1,415 near misses (incident caught before medication reached a patient)2,024 (medication dispensed to a patient)

**1,919** (medication incidents that did not cause patient harm)**105** (medication incidents that caused patient harm)

### Top 3 incident types:

675: incorrect dose/frequency597: incorrect drug535: incorrect strength/concentration

Source: College of Pharmacists of Manitoba 2022 Annual Report

Saskatchewan – statistics for incident reporting in the CPhIR system from September 2013 (Phase I) until end of December 2022

Total number of incidents reported: 41,148

Total number of pharmacies that have entered at least one incident: 447

Top five incident types: 9,510: Incorrect dose/frequency 7,062: Incorrect drug 6,694: Incorrect quantity 4,445: Incorrect strength/concentration 4,011: Incorrect patient

Outcomes of reported incidents: No error: 22,870 No harm: 16,962 Harm: 1,293

Source: Saskatchewan College of Pharmacy Professionals Annual Report 2022