The Apothecary

Spring 2011

Newfoundland and Labrador Pharmacy Board

The Apothecary is the newsletter of the Newfoundland & Labrador Pharmacy Board. It contains information on a wide variety of topics intended to enhance the practice of all pharmacists in the province of Newfoundland & Labrador. Pharmacists are responsible for reviewing any and ALL INFORMATION contained within including documents which are made available on the NLPB website via links throughout the newsletter. The Apothecary is now circulated electronically and is available in hard copy format only upon specific request.

Update on Regulation of Pharmacy Technicians

On March 6, 2010, the NLPB Board endorsed a move to recognize a classification of regulated pharmacy technicians. Since that time, our Professional Practice Sub-Committee on Pharmacy Technician Regulation has been meeting regularly to discuss the issues. As well, we have been meeting with a variety of stakeholders such as other provincial groups (local colleges, etc.), other regulatory bodies going through this process, and national stakeholders such as PEBC and CCAPP. We have also spent a great deal of time researching and reviewing documentation coming from the other regulatory bodies and national stakeholders as it becomes available.

At its recent meeting, the Board approved three new recommendations from the Sub-Committee that we hope will continue to move us forward on this path.

Before discussing these recommendations, we felt it was timely to do a quick review of what exactly it mean to be a Regulated Pharmacy Technician. While our Board has not approved a scope of practice for pharmacy technicians in this province as of yet, in provinces such as British Columbia, where regulations regarding pharmacy technicians have been approved, a regulated pharmacy technician working in a community pharmacy may prepare, process and compound prescriptions, including:

- receiving and transcribing verbal prescriptions from practitioners,
- ensuring that a prescription is complete and authentic,
- transferring prescriptions to and receiving prescriptions from other pharmacies,
- ensuring the accuracy of a prepared prescription,
- performing the final check of a prepared prescription, and
- ensuring the accuracy of drug and personal health information in the PharmaNet patient record [their equivalent of the Pharmacy Network].

Pharmacists in BC continue to be involved in every new and refill prescription as they remain solely responsible for assessing the appropriateness of drug therapy (patient assessment, confirm dose and interval, check PharmaNet profile, and identify any drug related problems) and for providing patient consultation. A prescription cannot be **PEBC**

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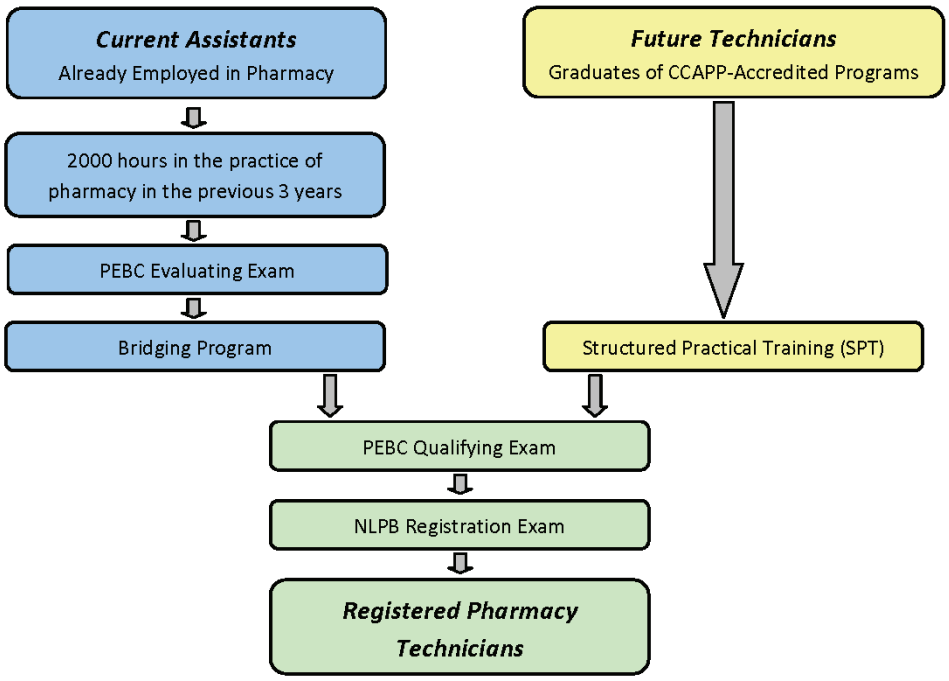
REMINDER TO ALL PHARMACISTS

Pharmacists are reminded that "loaning" medications to patients is not permitted unless you are following the requirements of Section 4(a) of the *Standards of Pharmacy Practice - Medication Management by Community Pharmacists. Failure to comply with this Standard of Practice could be considered professional misconduct.*

released to a patient without a pharmacist having performed these cognitive functions.

Another area worth review is "How does one become a Regulated Pharmacy Technician?" We have been proceeding with our planning using the graphic below as a guide:



Evaluating Exam

To be eligible to write this exam, the applicant must meet the criteria of having worked at least 2000 hours in the field of pharmacy in the past 36 months. There has been some flexibility on the part of PEBC here but it is given on a case-by-case basis.

The first NL sitting of this exam was held in September of 2010 with 25 of 32 candidates passing the exam. The next sitting is scheduled for April 17, 2011.

Bridging Program

Once the PEBC Evaluating Exam is successfully completed, the next step is the completion of a bridging program. This program consists of four courses that may be completed in any order on an individual basis. These include: Pharmacology, Product Preparation, Professional Practice and Management of Drug Distribution Systems. Following the Management of Drug Distribution Systems course, a Structured Practical Evaluation of the "Independent Double Check", usually performed in the practice setting, must be completed.

These courses are currently being delivered online and in person at a number of colleges in Ontario, Alberta and British Columbia. The registration for these courses is not restricted geographically so anyone from across the country can register for and complete these courses online.

In addition, all of these courses **except** for Professional Practice can be "challenged" via completion of a "Prior Learning Assessment and Recognition" (PLAR) exam. However, these PLAR exams cannot be completed online – they are delivered in person only.

Along with several other regulatory bodies, we are currently exploring what it would take to convert the current program into a common national program. This would allow for expansion of the program to include those provinces who cannot currently avail of it and would also allow for national access to the PLAR exams.

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Canadian Council for the Accreditation of Pharmacy Programs (CCAPP)

This group, also responsible for accrediting pharmacy programs across the country, has been accrediting pharmacy technician training programs based on a similar model to that used for pharmacy faculties.

To date, approximately 38 schools in a number of provinces have been given accreditation award status. At this time, no school offering a pharmacy technician program in this province has applied for CCAPP Accreditation status.

PEBC Qualifying Exam

The PEBC Qualifying Exam is a national entry-to-practice exam for the assessment and certification of the competence of Pharmacy Technicians for purposes of registration. It also has specific eligibility criteria, primarily graduation from a CCAPP-accredited pharmacy technician program or successful completion of the PEBC Evaluating Examination. Like the pharmacist's exam, it consists of two components: a written multiple choice component and an Objective Structured Practical Exam "OSPE" component.

At this time, there is no indication of a sitting of the PEBC Qualifying Exam in this province.

Final Steps to being Regulated

Once a person has successfully completed the PEBC Qualifying Exam, there are several final steps similar to those for registration as a pharmacist such as completing a registration exam, demonstrating language proficiency, obtaining professional liability insurance and paying all required registration fees. In addition, once regulated pharmacy technicians will also be responsible for continuing professional development and be professionally accountable for their actions within their scope of practice.

Decisions of the Board

At its February 18, 2011 meeting, the NLPB Board considered three recommendations made to it by the Professional Practice Sub-Committee on Pharmacy Technician Regulation. All three recommendations were approved:

The Professional Practice Sub-Committee on Pharmacy Technician Regulation recommends that the Newfoundland and Labrador Pharmacy Board:

1. accept bridging program courses from any school already recognized by another province as acceptable for meeting the requirement for "completion of a bridging program"
2. appoint a Pharmacy Assistant as an observer at Board meetings
3. endorse the preparation of a white paper to send to government to start discussions on next steps

Next Steps

There are several items on the NLPB's "to-do" list in this area. First of all, we intend to follow through on the above Board decisions. This includes determining the best approach for selecting an appropriate pharmacy assistant to fill the new observer position at Board meetings. It is hoped this process can be developed in a timely manner so that this observer can be in place for the summer or fall Board meeting. We will also begin preparation of a white paper on Pharmacy Technician Regulation to send to the Department of Health and Community Services. The sub-committee hopes to have a draft ready for the summer board meeting with the intention of having an approved document ready to submit to government by the fall.

We also intend to continue our relationship with other regulatory bodies across the country who are in various stages of regulation as well as with all national stakeholders. We intend to continue to pursue more formal access to all areas of the bridging program and to encourage PEBC to continue to offer NL sites of the Evaluating Exam and, eventually, the Qualifying Exam. Finally, we are considering holding a series of sessions on the issue for both pharmacists and pharmacy assistants to take place later this spring. More details will be circulated as they become available.

To keep up on this issue, we encourage you to visit the Pharmacy Technician Regulation page of the NLPB website regularly.

Guidelines for Addressing Pharmacy Robbery

Recently, the BC Pharmacy Association and the College of Pharmacists of BC published extensive guidelines for addressing pharmacy robberies. An overview of these recommendations, based on research and common sense principles, given below. The complete document can be found on the College's **website**.

What to do *Before* a Robbery

Manipulating the Risk, Reward, and Effort

- Ensure lighting levels are sufficient, both inside and outside the premises.
- Ensure adequate staffing levels are onsite at all times.
- Explore the possibility of installing a *silent* panic alarm. Audible alarms are not favoured for robbery offences, as they can induce panic which leads to increased risk from the situation.
- Limit the wearing of disguising clothing from being worn inside the shop. This could include store requirements that customers should remove articles of clothing such as hats, sunglasses, helmets, etc.
- Place an emphasis on staff training, both from a preventative perspective and also in the event of a robbery should one occur. This should incorporate formal training and ongoing maintenance of skills for the staff group.
- Develop a positive working relationship with the local police service.

Specific to Narcotics

- Make conscious decisions regarding the volume of narcotics that are kept onsite. This becomes a matter of balancing the demand created by the legitimate health needs associated with these products with the risk associated to the illegitimate demand and value of the drugs.
- Design the lay-out of the pharmacy to reduce the isolation of points of sale and the points at which the narcotics are stored.
- Consider the use of safes and/or secure locked locations for storing narcotics. There is a range of opinion as to the effectiveness and suitability of these facilities, as there is a risk that any mechanism that inhibits the employee's ability to meet the perpetrator's demands may increase the volatility of the situation.
- Have a standard policy for dealing with new prescriptions for narcotics, 'fishing' calls regarding onsite stock levels, etc. This type of policy could direct staff members to ask for a standardized body of information from potential new patients including their name, MCP number, their prescribing MDs contact details, etc.
- Ensure you are meeting the count and reconciliation requirements of the Board's *Standards of Pharmacy Practice - Security and Accountability Procedures for Narcotics and Controlled Drugs in Community Pharmacies* (*The Apothecary Winter 2010*) which can be found on the **Standards, Policies & Guidelines** page of the NLPB website.

Maximizing the Chance of an Apprehension

There are a range of strategies that could be implemented to maximize the likelihood of the police being able to apprehend a perpetrator in the event of a robbery occurring. These include:

- Implementation of closed-circuit television (CCTV) systems.
- Installation of height markers on exit doors to assist with identification at a later date. It is worth noting here that it is possible to have a CCTV camera embedded in exit door height markers that capture excellent close-up, eye-height images of everyone who departs the store.

What to do *During* a Robbery

Should a robbery occur the fundamental objectives should be to minimize dangers and maximize safety for staff and patrons. The best practice approach to achieving these aims is to be methodical, try to remain calm, and to follow these rules:

- *Do not* be a hero.
- Comply: do as you are told – nothing more and nothing less.

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- Utilize non-threatening body language: maintain personal space as much as possible and limit eye contact if you are able.
- Attempt to remember as much as possible about the offender(s): e.g., voice, language, clothing, mannerisms, physical description, and distinguishing features.
- Stay out of danger if you are not directly involved. If a *silent* alarm is available and can be activated without detection, make a judgement about this. Audible alarms are not favoured during robberies and the sound can make offenders panic, increasing the risk and volatility of the situation.
- Ensure that the offender's escape route remains clear.

What to do *After* a Robbery

Immediately following a robbery the following strategies should be implemented:

- Make a note of how the perpetrator exits the area. Consider factors such as movement direction and use of a vehicle (including license plate information, make, model, colour, etc.).
- Immediately close the business: stop store operations, secure the premise and lock all entrances.
- If the police have not already been alerted by a silent alarm, call the police **as soon as it is safe to do so**. Follow police instructions, which will likely be to keep the phone line open until officers arrive at the scene.
- Remember that, after a robbery, the pharmacy has become a crime scene. Do everything you can to maintain the integrity of the crime scene to maximize the likelihood of apprehending the perpetrator. This could include: (a) avoid touching anything that the offender came into contact with, as this may be able to provide forensic evidence, (b) ask witnesses to remain at the scene until the police can interview them – collect contact details where possible, and (c) ask all witnesses to independently complete a description.
- Once police arrive, give full statements and comply with their requests.
- Federal Narcotic Control Regulations state that a pharmacist must report to Health Canada any loss or theft of narcotics within 10 days of discovery. Health Canada's *Loss or Theft Report Form for Controlled Substances and Precursors* can be found on the **Miscellaneous Forms** page of the NLPB website. Be sure to send a copy of this form to the NLPB and also retain a copy in the pharmacy.

From a longer-term perspective, following a robbery incident at a pharmacy it is important to:

- Attempt to prevent repeat victimization: if you have been robbed once, do everything you can to make your pharmacy a harder target and manipulate the perceived risk through implementation of the recommendations listed previously.
- Ensure that all the victims take advantage of any victim support services that are available.

As always, safety should remain the focus and priority at all times: never place yourself in danger. In the event of a robbery do everything you can to preserve safety.

"Talk to Your Pharmacist About the Dangers of Misusing Prescription and Over-the-Counter Medicines" (Brochure) available on the PANL website

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"For the Public" page of NLPB website

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Clinical Guidelines page of Canadian Healthcare Network website

Report from February 18, 2011 Board Meeting

Revisions to NLPB Bylaws

The NLPB bylaws and Schedule of Fees were revised slightly. Changes include:

- References to pharmacy students and interns were added in Bylaw 73 and 103.
- Bylaws 101 and 102 were changed to officially move the deadline for Renewal Applications and payment to November 30th from December 31st each year. This is in keeping with the *Policy - Deadline for Registration & Licensing Renewal*, approved previously in October 2009.
- The Schedule of Fees was changed to increase the Late Payment Fee for Annual Renewal to $100 and to add a new fee for Pharmacy Renovation to accompany the *Policy - Renovation of an Existing Pharmacy / Dispensary*, approved in November 2010.

The complete updated bylaws as well as a document showing the changes can be found on the **Legislation** page of the NLPB website.

Revisions to Standards of Pharmacy Practice - Continuing Professional Development

Several changes to these Standards were approved by the Board at this meeting including:

- Limiting the number of CEUs that may be claimed for the *Pharmacist's Letter "CE-in-the-Letter"* to 5 CEUs per year. (section 4.1 ii))
- Redefining post-graduate studies to give a better description of the expectations of the committee regarding these forms of continuing education as well as to add limits to the number of CEUs that can be claimed for these activities. (sections 4.1 vi) and vii))
- Clarifying the rules regarding claiming CEUs for acting as a preceptor to a pharmacy student or intern from schools in provinces other than Newfoundland and Labrador. (section 4.2 i))
- Re-writing the section on "miscellaneous activities" under "Self-Directed Learning" to add more description, to include all forms of presentation / publication / expert-review, and also to add limits on the number of CEUs that can be claimed for these activities. (section 4.2 iv))

The revised Standards can be found on the **Standards, Policies & Guidelines** page of the NLPB website.

Revisions to NLPB Policy - Professional Liability Insurance

The Board approved several changes to this policy which had not been updated since being first developed five years ago. The main changes include:

- Allowing for either "claims made" or "occurrence" types of policies
- Increasing the minimum coverage amount to $2 million per claim or per occurrence and $4 million annual aggregate

The Board is also investigating whether or not it is feasible for students and interns to purchase their own personal liability coverage.

The changes made to this policy will come into effect July 1, 2011. The revised policy can be found on the **Standards, Policies & Guidelines** page of the NLPB website.

Revisions to NLPB Policy - Registration of Pharmacy Students / Interns

The main intention of revising this policy which had not been updated since its initial approval in October 2007 was to add in reference to pharmacy interns that had not been there previously.

A copy of the revised policy can be found on the **Standards, Policies & Guidelines** page of the NLPB website.

Focus of Professional Practice Sub-Committee on Advanced Practice

On the advice of the Professional Practice Sub-Committee on Advanced Practice, the Board has agreed that the two primary priorities of the

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committee at this time are the development of regulations and standards for pharmacists who engage in Injection/Immunization services and pharmacists working in Collaborative Practice environments. Pharmacists can expect to see more information on these two issues over the coming months.

Strategic Planning

April 8, 2011 has been set for this year's Strategic Planning Meeting. The intention of this session would be to identify the goals and direction of the Board for the next three years.

Complaints and Discipline Resolution

The Complaints Authorization Committee considered an allegation regarding a situation where one patient's prescription had inadvertently been placed in another patient's prescription bag. Upon returning home, the patient ingested a tablet from the vial before realizing that it was not his prescription.

In the letter of response, the pharmacist stated that when he checked the patient's two prescriptions there were two vials and a tube of cream on the counter in close proximity and not in baskets. He stated that he checked the patient's prescriptions and counseled the patient's mother on the medications. He indicated that when he then went back to check the other prescription on the counter, he realized that it had accidentally been placed in the bag with the patient's prescriptions. He attempted to catch the patient's mother in the parking lot but she was already gone. He then left a message on the family's answering service advising her of the extra vial in the bag. When he called again a few minutes later, the patient's mother informed him that her son had already taken one tablet. The pharmacist talked to the patient's mother a number of times following the incident to check on her son and also to inform her of procedural changes such as reinforcing the use of baskets to separate drugs and documentation for each patient that had been put in place.

Decision of the panel:

The panel decided that there were reasonable grounds to believe that conduct deserving of sanction had occurred. The panel directed that the allegation be considered as constituting a complaint and that letters of caution be sent to the Pharmacist-in-Charge and the pharmacist.

The panel directed that specific points that should be noted in the letters of caution are:

- That the use of baskets to separate prescriptions for different patients, as outlined in the policy and procedures developed for the pharmacy, must be reinforced by all pharmacists and staff in the pharmacy.
- That counseling must take place on every new prescription and should take place on refills. Checking the prescription bottle or package at the time of counselling is a very important step that every pharmacist should be doing to help prevent medication errors.
- That a report on this complaint, on a no names basis, be placed in the next edition of the Board's newsletter, *The Apothecary,* so that ALL pharmacists will be reminded by this incident of their responsibilities to review checking procedures, to counsel patients on original and repeat fillings of prescriptions, and to generally review polices and procedures in their pharmacy to ensure error prevention as much as possible.

At the same time, when making this decision and issuing these cautions, the panel recognized that the pharmacist had admitted that the incident had taken place and that he had responded to the patient in an appropriate manner. The panel also recognized that the pharmacist has indicated that that the use of baskets would be reinforced at the pharmacy aimed at reducing the likelihood of medication errors and that all staff have been informed of the policies and procedures and instructed to follow them.

Recent Updates to the NLPB Website

Contact Us (Find A…)

⇒ *Pharmacists & Pharmacies Registers updated*

"The Apothecary" & Other Communications

⇒ *MedEffect advisories added*

⇒ *NAPRA Notes March 2011*

Standards, Policies & Guidelines

⇒ *Standards of Professional Practice - Continuing Professional Development updated*

⇒ *Policy - Professional Liability Insurance for Pharmacists updated*

⇒ *Policy - Registration as a Pharmacy Student / Intern updated*

Legislation

⇒ *NLPB Bylaws updated*

⇒ *NLPB Schedule of Fees updated*

⇒ *NLPB Manual files updated*

CAPT
CANADIAN ASSOCIATION OF PHARMACY TECHNICIANS

The Canadian Association of Pharmacy Technicians is pleased to present the 2011 Professional Development Conference May 13th to 15th at the Delta Bessborough Hotel in Saskatoon.

The CAPT conference is an annual national event which offers pharmacy technicians the opportunity to learn different scopes of practice, new techniques and new ideas in the profession.

For complete details on the conference go to the CAPT website at www.capt.ca and click on the PDC tab.

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