

TECHtalk

JUNE 2015

TECHNOLOGY SETS TECHNICIAN ON REWARDING CAREER PATH

BY THE NUMBERS

The recently released Ontario College of Pharmacists' 2014 Annual Report reveals the demographics of pharmacy technicians in that province. Of the total 4,349 regulated technicians in Canada as of the same date, Ontario accounts for over two-thirds.

TECHS IN ONTARIO*

Total: 2,927 (60% increase since 2013)

Gender: 94% are female

Average age: 40

Path to registration:

83% took the bridging program

Practice type:

52% work in hospitals or other healthcare facilities; 45% in community pharmacy; 2% in association, academia, or government; 1% in industry or other

*As of December 31, 2014
Source: Ontario College of Pharmacists 2014 Annual Report

WHEN "TECH TALK" INITIALLY PROFILED

Colleen Norris back in 2005, she was dispensary operations manager at Glebe Pharmsave Apothecary in Ottawa, and the recipient, with pharmacist and owner Claudia McKeen, of the 2004 Commitment to Care award for Best Pharmacist-Technician Team.

Wanting to expand her horizons, several years later she moved on to a long-term-care (LTC) pharmacy in Burlington, Ont., as technician consultant. Among her wide-ranging responsibilities in that role was training staff on the eMAR (electronic Medication Administration Record) software. "That's where I became interested in the electronic health record," she recalls.

Fast forward to present day, and the enterprising Norris has assumed yet another challenge, as project manager for pharmacy services at PointClickCare, a Mississauga-based company that develops software to integrate LTC facilities with the electronic health record. In this capacity, she liaises with the pharmacy partner, providing a plan for every phase of the approximately 30 projects she currently has on the go. "My previous role as technician consultant with a long-term-care pharmacy allowed me to learn the eMAR software and to understand the workflow in this type of pharmacy," she explains.

Not that she did not face challenges. There was still a steep learning curve for the information technology involved in the delivery of pharmacy integration projects. Because the majority of the company's clients are based in the United States, she also had to familiarize herself with pharmacy legislation in that country, and learn the messaging protocol used for communicating between healthcare applications. But her perseverance has paid off: her greatest reward came when she helped land one of the biggest contracts PointClickCare has ever received, "based on the success of three pilot facilities going live with pharmacy integration."

Norris did not originally aspire to be a pharmacy technician. She first earned a Bachelor of Arts degree from Concordia University in



her native city of Montreal. Upon moving to New Brunswick with her husband, she got a job in a small local pharmacy. Two years later, the couple moved to Ottawa. At that point, she joined the independent compounding pharmacy where she was to spend the next two decades, and her pharmacy career took off.

She recently became registered, and believes regulation will "draw attention to the very important work that technicians provide in delivering quality patient healthcare as part of the pharmacy team." The biggest benefit for her, personally, she adds, "is the recognition that I have worked towards this goal for a long time and accomplished this after being in the industry for over 27 years."

Norris, who describes herself as "driven," is also the new President of the Canadian Association of Pharmacy Technicians (CAPT). She has a long history with CAPT, having served in several capacities, most recently as Vice President. Her goal as President is to provide members with more opportunities for continuing education, as well as "develop timely communication through social media." CAPT recently unveiled a new website (www.capt.ca) that offers online membership renewal and other interactive features.

In addition to her extensive volunteer work, both in the industry and beyond, Norris intends to pursue her Project Management

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News in brief

- STARTING THIS YEAR, THE ALBERTA** College of Pharmacists will award an annual prize of \$1,000 to the pharmacy technician registered with the College who has achieved the highest mark on the Pharmacy Examining Board of Canada's Qualifying Examination in the past calendar year.
- THE ONTARIO COLLEGE OF** Pharmacists (OCP) has a YouTube channel at www.youtube.com/ocpinfo where visitors can watch videos covering barriers to practice changes, the role of the OCP, and much more. Those who subscribe will receive a notification each time the College posts a new video.
- THE BOARD OF THE NATIONAL** Association of Pharmacy Regulatory Authorities (NAPRA) has established as a priority for this year to undertake a comprehensive review of one or two courses from the National Pharmacy Technician Bridging Education Program. Factors to be considered in the review include the new entry-to-practice competencies and the new model standards for sterile pharmacy compounding. NAPRA is currently finalizing the development of the model standards for pharmacy compounding of sterile hazardous and non-hazardous preparations.
- THE BLUEPRINT FOR PHARMACY HAS** published the latest issue of "Blueprint in Motion" (volume 6, issue 2, April 2015). The online newsletter features pharmacy-related news from across the country, as well as updates on some of the projects that are under way. Visit www.blueprintforpharmacy.ca.
- THE PHARMACY EXAMINING BOARD** of Canada (PEBC) is conducting a practice analysis study to validate the competencies required of pharmacy technicians and pharmacists at entry-to-practice, reports

the Alberta College of Pharmacists in its latest annual report. The validated competencies will form the basis of testing for the Pharmacy Technician and the Pharmacist Qualifying Examinations, and the results of the study will be used to revise the blueprints for both examinations. It is anticipated that the blueprint will be implemented in 2016.

- THE ONTARIO COLLEGE OF** Pharmacists has developed a self-assessment tool for pharmacy technicians and pharmacists to identify their learning needs (for both maintaining competency and advancing professionally) and create a plan for learning. While the tool is available to members year-round, the College requires 20 per cent of members each year to use it to complete their self-assessment. This is the first year that pharmacy technicians will be randomly selected to complete the self-assessment tool. Although members are required to complete the self-assessment only once every five years, the College encourages them to voluntarily complete it on a yearly basis. The tool is available online as part of the Continuing Professional Development (CPD) portal.
- PHARMACY TECHNICIANS IN ALBERTA** believe the greatest challenge to their profession in the coming months is changing workflow and processes to match their scope of practice, according to a survey commissioned by the Alberta College of Pharmacists. They identified as the second-greatest challenge building awareness among pharmacists about technicians' scope of practice. Few technicians said they were performing tasks that they did not feel competent to do, but one in 10 technicians reported not feeling competent at inventory ordering, final checking, and transferring prescriptions.

>> CONTINUED FROM PAGE 1

Professional (PMP) certificate to further her learning in that discipline, and work part-time in community pharmacy. Having recently completed her Structured Practical Evaluation, she realized how much she missed that environment. And so she will continue to work at the same small community pharmacy, which focuses on diabetes care and where this knowledge-hungry tech will have "lots more opportunities to learn."

While Norris proclaims she is "absolutely ecstatic" about becoming a regulated pharmacy technician, she warns candidates not to assume that their workplace will allow them to practise to their full scope. "Ensure that you do your homework," she urges. "Be the advocate for pharmacy technicians and join your professional association to get your voice heard."

When the name is (almost) the same

A THREE-YEAR-OLD GIRL HAD HER tonsils removed. After the operation, she received a prescription for 6 mg of morphine. The pharmacy accidentally prepared the prescription with hydromorphone – another drug used to treat pain, but much stronger. Fortunately, the pharmacist noticed the error when the parents took their child to the hospital for an assessment the next morning.

This is just one example of many errors reported to the Institute for Safe Medication Practices Canada (ISMP Canada) due to look-alike sound-alike medication names—one of the most common causes of medication error.

Despite the efforts of healthcare practitioners to prevent these kinds of mistakes, they can still occur at any step in the prescribing and dispensing process. That is why “preventing medication errors is everyone’s responsibility – not just the pharmacist or the technician, but also the physician and the patient,” says Carol Lee, informatics analyst at ISMP Canada and a registered pharmacy technician.

In community pharmacy, technicians and assistants, who usually collect the prescription at the counter, have a “vital role” to play in error prevention, by gathering information related to the prescription, says Lee. For example, asking the patient what the medication is being used for, what the doctor has told him or her, and how often it is to be used. “It’s very important to explain to the patient that you are asking all these questions to make sure the accuracy is there when the medication is dispensed,” notes Lee, so he or she will not perceive it as prying. It is also necessary to clarify if the medication is for the person at the counter or for someone else, “to have an overall picture and background of the patient,” says Lee. “If it’s a child, the pharmacy technician or assistant should gather information such as the weight and age. That way, you can ascertain if the medication is appropriate for a child.”

She adds that it is important to ask open-ended questions to glean more information, and to encourage patients to ask questions too.

When taking prescriptions over the telephone, technicians and assistants should not only repeat back the information, but write it down and read it back as well, advises Julie Greenall, director of projects and education at ISMP Canada, and a pharmacist.

Greenall recommends differentiating look-alike sound-alike pairs by adding an auxiliary label to them. This is particularly important with medications such as insulin, which has many varieties. “The differences between them are substantial, but the names all sound very similar, and the packaging is quite look-alike as well, she notes. She suggests that insulin be stored in three different bins, for short-, intermediate- and long-acting forms,

“so that at least if you get the wrong one, it’s going to be a similar duration of action.

“The other opportunity to prevent errors is independent double checks,” says Greenall. “As a pharmacist, I always feel much more comfortable when there are two people involved in processing every order, working fully independently.”

“Every time someone dispenses insulin, they need to do a double-check,” Lee confirms. She notes that drugs that have combination ingredients are also a potential minefield for error, because the names sound similar. For example, Oxycocet (oxycodone plus acetaminophen), the short-acting oxycodone (Oxy-IR), and long-acting oxycodone (formerly

OxyContin but since replaced by OxyNEO). “There’s a lot of confusion around those oxycodone products,” adds Greenall.

Both Lee and Greenall emphasize that, while preventing medication errors is everyone’s responsibility, pharmacy technicians and assistants can play a stronger role as part of the pharmacy team, by asking those preliminary screening questions. “That’s totally within their scope of practice,” says Greenall.

FOR MORE INFORMATION

- www.SafeMedicationUse.ca
ISMP Canada consumer-focused website and newsletter features several articles on similar drug names
- www.ismp-canada.org
A variety of safety bulletins, videos, and articles on look-alike sound-alike drug names
- www.ismp.org/tools/confuseddrugnames.pdf
A listing of problematic drug pairs



TEVA

ARE PHYSICIANS AND PATIENTS ASKING ABOUT GENERIC DRUGS?

We’ve introduced a new, informative website to answer their questions about safety and efficacy. Visit **TevaMakesMedicines.ca**.

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Teva Canada's half-day workshop "*The Role of the Pharmacy Technician in the Team Approach to Immunization/Injection*,"* accredited for 3.0 CEUs, will teach you how you can help your pharmacy's immunization program be more efficient and more effective, from identifying patients who would benefit from injection services to dispelling myths around immunizations.

For more information and a list of upcoming workshops in your area, visit [TevaPharmacySolutions.com/TechImmunization](https://www.TevaPharmacySolutions.com/TechImmunization).

*Currently available in Alberta, British Columbia, Manitoba and Ontario.