

# TECHtalk

NOVEMBER 2021

## AWARD-WINNING TECH FINDS “WORK HEAVEN” AT ORNGE

### WHEN PHARMACY TECHNICIAN

Catherine Dawes happened upon an ad in 2015 for an in-house pharmacy technician at Ornge, the air and land ambulance provider for the province of Ontario, she jumped at the chance. Although she hadn't even been looking for another position, this was too good an opportunity to pass up.

At the time, she was a supervisor and pharmacy instructor at a private career college in Brantford, Ont., a position she had held for 14 years following a stint in community pharmacy. After initially working part-time at Ornge, she recalls telling her colleagues at the college, “I think I've died and gone to work heaven!” She adds that “it is truly a privilege to be a part of this team and work for a company that is in the business of saving lives.”

As the only pharmacy technician on staff, her responsibilities are wide-ranging and include: filling and shipping daily orders for the 12 Ornge bases for pharmacy and special-order items; monitoring, procuring and maintaining adequate supply levels of all necessary pharmaceutical supplies, including narcotics; investigating and resolving manufacturer supply issues, such as recalls and back orders; and monitoring medication expiry dates. She is also certified to administer COVID-19 vaccines.

Since the only pharmacist at Ornge operates remotely out of Sudbury, Ont., Dawes (who is based in Mississauga) interacts pri-

marily with the doctors, base managers and advanced- and critical-care paramedics, always mindful of her scope of practice.

A recent career highlight for Dawes was flying by helicopter to Bear Island in Lake Temagami, where she participated in a two-day mission as a member of an Operation Remote Immunity (ORI) project to conduct screening and administer COVID-19 vaccinations in Indigenous communities. “I got to meet a whole community of Bear Island residents, and they were incredible,” she says. Dawes also took part in a second ORI on Pelee Island in Lake Erie.

Based on her innovative job at Ornge, the Canadian Association of Pharmacy Technicians (CAPT) selected her as its Pharmacy Technician of the Year, awarded at the virtual Professional Development Conference in May. “CAPT thought it important to highlight a pharmacy technician who is in a role that is expanding the boundaries of where pharmacy technicians can work,” explains CAPT president Robert Solek. “Catherine's inventory management and coordination with the different bases exemplifies an important, yet often overlooked, aspect of the technical aspects of medication delivery to patients.” He notes that pharmacy technicians are often the subject matter experts when it comes to inventory management in hospital settings, in some retail stores, and now even for air ambulance services and medical transport. “CAPT is very proud of all the pharmacy technicians involved in providing frontline and support services during this unprecedented pandemic.” For her part, Dawes says she is “very humbled and honoured knowing full



well that there were many others deserving of the award as well.”

Dawes has been dedicated to the profession ever since she was offered a job in the dispensary of a local pharmacy in the small town of Paris, Ont., shortly after graduating high school. She enjoyed it so much that she began taking night classes at Mohawk College, where she became what was then known as a “certified technician,” and earned her RPhT when the province brought in regulation. “Pharmacy is something I have been passionate about since the start of my career,” she says. “I have been committed to lifelong learning and professional development.”

She encourages new technicians to forge their own future. “Keep an open mind about opportunities,” she advises. “There are so many options for pharmacy techs now. Commit to continuing education and the possibilities will be endless.”

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## ISMP releases updated analysis on vaccine errors

**AS PHARMACY PROFESSIONALS AND OTHER HEALTHCARE** providers administer COVID-19 vaccines to as many Canadians as possible, they continue to refine procedures to maximize safety and efficiency.

A recent Safety Bulletin from the Institute for Safe Medication Practices (ISMP) Canada features incident examples and shared learnings in a number of areas including: clinic/pharmacy set-up and organization; storage and transport; patient screening; vaccine preparation; administration; and documentation.

"The learning from reports of vaccine incidents and near misses contributes to the evolution of evidence-based practices and the prevention of similar errors in the future," the Bulletin concludes. To read more, visit [ISMPPCSB2021-i8-Vaccine-Errors \(ismpp-canada.org\)](https://ismppcsb2021-i8-Vaccine-Errors(ismpp-canada.org)).

Meanwhile, the Complaints team at the

Saskatchewan College of Pharmacy Professionals (SCPP) has addressed a number of issues with the administration of COVID-19 vaccines in retail pharmacies. These include:

- The Pfizer vaccine being administered to a patient under the age of 12 (prior to the Ministry of Health announcement of eligibility to all children born in 2009, regardless of birthday).
- Patient not receiving proper treatment for an anaphylactic reaction.
- Pharmacies not following requirements for fridge temperature monitoring.
- Administering of undiluted Pfizer vaccine to patients and administering of diluent only.
- Administering the second COVID-19 vaccine before the recommended interval.
- Pre-drawn syringes.

For more information, visit [https://saskpharm.ca/document/7910/MicroSCOPe\\_202109001.pdf](https://saskpharm.ca/document/7910/MicroSCOPe_202109001.pdf).

## OCP offers advice on how to avoid patient misidentification

**THE ONTARIO COLLEGE OF PHARMACISTS** (OCP) provides some key recommendations for pharmacy professionals to avoid patient misidentification.

- In addition to the patient's name, always use at least one additional patient identifier to confirm the patient's identity at computer entry and at the pick-up counter.
- Develop a dependable system to identify and follow through on prescriptions requiring counselling by telephone, such as prescriptions being delivered.
- At pick-up, always confirm the number of medications the patient is expecting to receive and investigate any discrepancy.

OCP cites a case highlighted in its *Pharmacy Connection* publication in which a physician's

office faxed two handwritten prescriptions for two separate patients to a community pharmacy for processing. As both prescriptions looked similar and were faxed and received together as page 1 & 2, the pharmacy assistant assumed they were both for the same patient. The dispensing pharmacist then failed to identify the computer order entry error during the verification process, and failed to conduct a thorough assessment of both prescriptions against the patient's existing medication profile.

"The lack of key patient identifiers on many faxed prescriptions, along with a patient not being present when the prescription is being entered into the computer, can be contributing factors to patient identity errors," notes the article. Read the full text at [Focus on Error Prevention \(Summer 2021\) - Pharmacy Connection](#).

## England's CPhO calls for upgrade of tech &amp; pharmacist skills

**A REVIEW ON OVERPRESCRIBING IN** England calls for an upgrade of skills for pharmacy technicians and pharmacists.

Led by the country's chief pharmaceutical officer, Dr. Keith Ridge, the review aims to address overprescribing by increasing the number of "clinical" pharmacists working in primary care networks and widening the use of Structured Medication Reviews as two existing approaches in the National Health Service's long-term plan.

It recommends that the Department of Health and Social Care and the General Pharmaceutical Council (GPhC) work with stakeholders to expedite the implementation of pharmacists' initial education and training reforms, including allowing for more extensive

clinical placements. The GPhC also recommends developing a similar program for pharmacy technicians.

The review estimates that 10 per cent of items dispensed in primary care are overprescribed and urges "cultural changes to reduce a reliance on medicines."

Many stakeholders in Canada also advocate for deprescribing, particularly when it comes to opioids and antibiotics. Organizations like [Deprescribing.org](http://Deprescribing.org) and Canadian Deprescribing Network offer tools and information to promote the deprescribing of medication that may no longer be beneficial or may be causing harm. In 2017, Health Canada released a new Canadian guideline that provides advice to avoid overprescribing of opioids.

## NSCP establishes position statement on professional responsibilities

**THE NOVA SCOTIA COLLEGE OF PHARMACISTS** (NSCP) has established what it calls a “Position Statement: Professional Responsibilities to Meet Patient Needs Related to Compounding Opioid Agonist Therapy and Prescribing.”

The College notes that pharmacy practitioners should begin to take the necessary steps to ensure that these professional responsibilities are being met by November 1, 2021. “While many pharmacy professionals in Nova Scotia are already meeting or exceeding their professional responsibilities, the position statement acts to further clarify what is expected and required of pharmacy practitioners, managers and owners to meet patient needs, particularly those related to compounding, prescribing and harm reduction,” notes NSCP.

The position statement also reflects the College’s newly established Harm Reduction Policy. The College explains that this policy, effective November 1, 2021, was established in response to the evolving concept of harm reduction and the persisting and worsening opioid crisis in Nova Scotia and across Canada.

To view the Position Statement, visit [Position Statement: Professional Responsibilities to Meet Patient Needs Related to Compounding, Opioid Agonist Therapy and Prescribing \(nspharmacists.ca\)](#). For the Harm Reduction Policy, visit [Pharmacy Practice Policy: Harm Reduction \(nspharmacists.ca\)](#).

## B.C. College of Pharmacists provides PRP support tools for hospital techs

**THE COLLEGE OF PHARMACISTS OF BRITISH COLUMBIA** has developed new Practice Review Program (PRP) support tools specifically for hospital pharmacy technicians and pharmacists.

The tools are designed to help hospital pharmacy technicians prepare for their Pharmacy Professionals Review under the PRP, based on the focus areas that were identified as having the most impact on public safety. For technicians, these include patient identification verification, product distribution, collaboration and documentation. The support tools for each focus area provide strategies and best practices to assist technicians in preparing for an upcoming review.

The tools for hospital pharmacy technicians complement previously released support tools for community practice. The PRP began in 2015 and expanded to hospital pharmacy practice settings in 2017.

For more information, visit [PRP INSIGHTS: New PRP Support Tools Available for Hospital Pharmacy Registrants | College of Pharmacists of British Columbia \(bcpharmacists.org\)](#).

## life effects



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## Techs win support as immunizers

**ALTHOUGH ONLY FOUR PROVINCES** currently permit pharmacy technicians to administer COVID-19 vaccines—and only Nova Scotia and New Brunswick have amended legislation to support the administration of all “pharmacist eligible” vaccines—it is likely just a matter of time before other jurisdictions follow suit, given the benefits for pharmacists, technicians and, ultimately, patients.

Even in those provinces where pharmacy technicians are not authorized to administer vaccines, with training they can fulfill traditional vaccine support roles such as collecting information, billing, promotion and marketing, record-keeping, managing drug inventory, documentation, and calling patients to book appointments. With pharmacists administering an increasing number of doses of vaccines — and with flu season on the horizon — pharmacy technicians can significantly ease the burden on pharmacists.

Speaking at the recent Pharmacy U for Pharmacy Technicians, Dr. Mathew DeMarco from the School of Pharmacy at the University of Waterloo discussed a recent scoping review that he and his colleagues have conducted of the role of pharmacy technicians in vaccination services.

DeMarco cited five studies that define the pharmacy technician vaccine administration role:

- Vaccine handling, storage and disposal using sharps containers
- Choosing the correct needle and syringe
- Drawing up the vaccine for injection
- Finding injection sites, aseptic technique and vaccine administration
- Required documentation and reporting for immunizations
- Monitoring for adverse events and addressing emergency situations

DeMarco noted that of the steps involved in administering a vaccine, authorized pharmacy technicians are permitted to perform infection prevention, vaccine preparation and vaccine administration. However, the pharmacist must perform the roles of assessment, education and obtaining informed consent, ensuring the patient understands the information presented, and documenting the consent. Technicians may conduct post-vaccination counselling and observation but must immediately consult with the pharmacist if an adverse event occurs. “The entire process of injecting COVID-19 vaccine is a collaborative process between the pharmacist and pharmacy technician,” said DeMarco.

### Pharmacist support for techs

In a case of “seeing is believing,” studies showed that pharmacists who have had experience with supervising an immunization-trained pharmacy technician said they would recommend the role to others. “Pharmacist support

was an important success factor and was established shortly after observation of the pharmacy technician administering vaccines,” noted DeMarco.

The studies also found that trained pharmacy technicians were empowered by the role and this had a positive impact on pharmacy morale.

In the future, there may be a greater role for technicians to play in the screening process. Several studies from the U.S. and one from Canada characterized pharmacy technicians’ involvement in screening patients for eligibility. The techs collected information using electronic medical records as they pertained to patient age as well as chronic health conditions that would make patients eligible for one of several types of vaccines.

“Pharmacies may wish to consider enacting pharmacy technician screening activities in jurisdictions where the pharmacy technician can also take on a role in vaccine administration to provide workflow balance while still providing benefits to the patient,” said DeMarco.

The scoping review “supports pharmacy technician roles for vaccine screening, administration and traditional support roles for vaccination services,” said DeMarco. “It is both urgent and important to utilize all pharmacy staff in the most leverageable community pharmacy model in efforts of meeting current patient vaccine-related needs.”

The studies “provided evidence for benefit related to the effective deployment of pharmacy

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## life effects



**Bryce Evans**  
Living with depression

## Real people, real stories

“It’s taken a lot of work to wade through the haziness of mental health challenges. Compared to how I was feeling previously, though, all the effort is well worth it.”

Read Bryce’s story, and many more, at [TevaCanada.com/LifeEffects](https://www.TevaCanada.com/LifeEffects)



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



## AHS creates resources to help treat long COVID symptoms

**WHILE MOST PEOPLE WITH COVID-19 RECOVER WITHIN TWO** weeks of their illness, some experience symptoms for much longer. These conditions are also known as long or long-haul COVID.

To help both pharmacy teams and their patients in treating long COVID symptoms, Alberta Health Services (AHS) has created an extensive list of links to resources.

The provider resources—Recovery & Rehabilitation After COVID-19: Resources for Health Professionals—include such topics as COVID-19 safe discharge home list, information for referring patients for long COVID care and rehabilitation, FAQ for providers, and much more. Visit <https://albertahealthservices.ca/topics/Page17540.aspx>.

Patient resources—Getting Healthy after COVID-19—include mental health resources, how to manage symptoms, and information on support groups for COVID long haulers, to name a few. Visit <https://albertahealthservices.ca/topics/Page17397.aspx>.

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services,” DeMarco concluded. “Pharmacists and technicians both advocated for technician vaccine administration roles due to the potential benefits of pharmacy workflow efficiencies, pharmacist clinical time, and technician job satisfaction.”

In response to a question from the audience about whether vaccine administration should be part of the entry-level competencies, DeMarco said, “We’re not quite there in Canada yet and it will likely take some time to diffuse across the profession in terms of comfort.” Nonetheless, he added, “I do think that will be where we end up.”

## BY THE NUMBERS

### HIGH DEMAND FOR FLU SHOTS

- 56% of Canadians say they will definitely/probably get the flu shot this year, compared to 47% last year.
- One-third of Canadians say they are more likely to get the flu shot because of COVID-19 and the fourth wave.
- 56% of Canadians who intend to get a flu shot this year say they will get it at a pharmacy, up from 54% who said they got it at a pharmacy last year.
- 93% who got the shot at a pharmacy last time intend to go back to a pharmacy this year.
- Top three considerations when deciding where to get the flu shot: ease of booking (73%); proximity to home (68%); ability to access other services, such as picking up prescriptions and health products, etc. (53%).

Source: Canadian Pharmacists Association, September 2021.

## Notes