

# TECHtalk

SEPTEMBER 2021

## COMPOUNDING INTEREST SPURS PHARMACY TECH IN VARIOUS PURSUITS

### YOU MIGHT CALL PHARMACY TECHNICIAN

Brittany Larmand a champion of change. Over the past 12 years, she has worked in a variety of practice settings in both Saskatchewan and Alberta as she honed her expertise in compounding.

Larmand joined the profession after graduating in 2009 from a journalism program where she says she “experienced a lot of growth” but didn’t find her true calling. In the meantime, she had worked at a community pharmacy throughout high school and col-

lege. When a pharmacist tipped her off to the imminent introduction of the pharmacy technician designation, she landed a job at a retail pharmacy in Regina and enrolled in the pharmacy technician program at Red Deer College. She graduated in 2012 and became registered in 2017 when Saskatchewan regulated its pharmacy techs.

Her passion for compounding took root back in 2012 when Jarron Yee, owner of Northgate Medicine Shoppe Pharmacy in Regina, approached her with the opportunity to set up a sterile compounding lab and sent her to courses at PCCA Canada to advance her knowledge and skills. A stint at the Cancer Centre in Regina “is where I gained a lot of my hazardous compounding experience because that’s a different type of compounding altogether,” she says. “I’ve worked at many different pharmacies to gain different experiences.”

In 2017, she moved to Calgary as compounding supervisor at SRx Pharmacy, a dispenser of specialty medications. The pharmacy had a brand-new sterile lab that wasn’t yet operating. “I had to outfit the room with all the supplies needed, implement policies and procedures, and develop protocols and formulas,” she says. When the pharmacy added a non-sterile lab, she assumed responsibility for that as well.

When the pandemic hit, Larmand was working as lab manager for Cambrian Pharmacy in Calgary. Like many pharmacy professionals, she faced ongoing challenges to procure PPE and implement new staffing protocols.

Her compounding expertise also led to work as a contracted sterile compounding assessor for the Alberta College of Pharmacy (ACP). “I loved that job,” she enthuses. “It was something different but still related to my passion of compounding.” Working with ACP’s practice consultants, she travelled to sterile compounding sites around the province to help them achieve compliance with the National Association of Pharmacy Regulatory



Authorities’ (NAPRA) model standards for compounding. She was also proud to work with ACP as part of a NAPRA sterile compounding working group. “It was with pharmacy professionals from the [regulatory] colleges across Canada,” she explains. “Being able to participate and contribute was an amazing collaborative experience.”

The birth of Larmand’s first child triggered yet another change, with the pharmacy tech moving back to her hometown of Petawawa, Ont., this spring to be closer to family. Now registered in Ontario, she is exploring a number of career options.

In the new chapter of her career, Larmand plans to pursue opportunities that will keep her in the field she loves while giving her some work/life balance as a new parent. One such project is developing webinars on risk assessment and Standard Operating Procedures in compounding. “I’ve done these things so many times, but I find when I’m doing research for the webinar, I’m gaining more knowledge,” she says.

She has also started working at a local hospital on a casual basis and has expressed interest in serving on the board of NAPRA.

Not surprisingly, Larmand’s advice to new pharmacy technicians is “to be comfortable with change.” As she puts it: “Pharmacy is always evolving, always changing. And I think we need to be willing to adapt, to be able to provide the best care for our patients.”

### BY THE NUMBERS

#### CCCEP EDUCATION AIMED AT PHARMACY TECHNICIANS

- 2012-2013: **5%**
- 2017-2018: **13%**
- 2018-2019: **18%**
- 2019-2020: **18%**
- 2020-2021: **20%**

Source: Canadian Council on Continuing Education in Pharmacy (CCCEP), AGM Report 2021.

**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:



An educational service for Canadian pharmacy technicians, brought to you by Teva [www.tevacanada.com](http://www.tevacanada.com)



## TECH talk

Publisher:  
Donna Kerry

Editor:  
Rosalind Stefanac

Writer:  
Sally Praskey

Art Director:  
Lima Kim

Production Manager:  
Lisette Pronovost

pharmacy  
PRACTICE + BUSINESS

eCortex.ca

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

No part of these can be reproduced without  
the written permission of the publisher.  
For more information, contact Vicki Wood  
vwood@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  
[www.tevacanada.com](http://www.tevacanada.com)

teva

Visit us online at  
[www.CanadianHealthcareNetwork.ca](http://www.CanadianHealthcareNetwork.ca)  
[www.tevacanada.com](http://www.tevacanada.com)

## CSHP moves closer to full membership for techs

### AT ITS ANNUAL GENERAL MEETING IN

October of this year, members of the Canadian Society of Hospital Pharmacists (CSHP) will be asked to approve amendments that would provide full member status to pharmacy technicians.

At its meetings in October 2020 and June 2021, CSHP's board passed two motions recommended by the pharmacy technician task force. CSHP established the task force in 2020 to align its intention to provide full membership to pharmacy technicians.

Historically, pharmacy technicians have been supporters of CSHP, rather than full members. "The responses to our membership survey made

clear that most respondents felt the need for technicians to become full members," notes CSHP in its 2020 Annual Report. The association is working to offer more benefits to pharmacy technicians, as a step towards greater inclusivity and consistency with trends in pharmacy. This year, CSHP implemented new eligibility status for technicians to be recognized in a national award and welcomed a pharmacy technician board member to the Hospital Pharmacy in Canada Survey Board.

Full member status for pharmacy technicians is identified as a priority in CSHP's 2020-2023 Strategic Plan.

## Study: Tech-conducted BMPHs show promising results

### BEST POSSIBLE MEDICATION HISTORIES

(BPMHs) conducted by registered pharmacy technicians (RPhTs) can improve compliance with BPMH practices within ambulatory care.

That was the conclusion of a project described in "Best Possible Medication Histories by Registered Pharmacy Technicians in Ambulatory Care," published in the Spring 2021 issue of the *Canadian Journal of Hospital Pharmacy*.

The program was developed at Toronto-based Women's College Hospital, Canada's only academic ambulatory hospital, and implemented in the preadmission clinic of the institution's surgical services department from May 2017 through April 2018.

A pharmacist trained four RPhTs to obtain BPMHs. They completed a BPMH workshop and a two- to seven-week training program. To

be certified as BPMH-trained, the technician had to complete 75 consecutive BPMHs without the pharmacist finding any inaccuracies.

After obtaining the BPMH and completing the documentation, the technician used the information to identify patients who would benefit from medication reconciliation upon discharge.

Prior studies had explored RPhT-conducted BPMHs as part of the medication reconciliation process, but this project was the first to describe the application in an academic ambulatory setting.

"RPhTs are in a unique position to perform BPMHs because they are knowledgeable about medication names, formulations, strengths and dosing schedules," notes the article. "The use of RPhTs to conduct BPMHs therefore complements pharmacists' roles in reconciling and providing medication management."

## Alberta tech plays key role in COVID-19 vaccination clinics

### PHARMACY TECHNICIAN NICOLE

JOHNSTON, a technical practice leader with Alberta Health Services, has been heavily involved in COVID-19 vaccine-related work.

According to an article from the Alberta College of Pharmacy, she has assumed a variety of responsibilities, including creating compounding worksheets for each brand of vaccine to document advanced preparation and checks, conducting virtual meetings for pharmacy staff to improve understanding of processes, and preparing prefilled syringes of COVID vaccine.

She believes the pharmacy technician scope of practice has prepared her well for these tasks. "My experience in sterile compounding and familiarity with regulatory standards have been extremely valuable in determining reasonable parameters for high-volume batched

preparation occurring in a non-sterile environment," notes Johnston. "Having pharmacy staff contribute to vaccination efforts through the implementation of preparation stations in a clinic setting is unprecedented territory, so we've had to be flexible in our approach."

Johnston has also been charged with observing the workflow at clinics in the Edmonton area to identify areas of improvement and suggest changes. "I encourage everyone who has the opportunity to work in vaccine clinics to do so, as it is a unique experience for pharmacy technicians," she says.

Meanwhile, the Pharmacy Technician Society of Alberta continues to advocate for pharmacy technicians in the province to be granted authorization to inject, in line with their counterparts in Nova Scotia, New Brunswick, Ontario, and Saskatchewan.

## Sask. Minister of Health approves extended intern category for techs

**THE SASKATCHEWAN MINISTER OF HEALTH HAS APPROVED** regulatory bylaw amendments to authorize an extended intern category for pharmacy technicians. This allows pharmacy techs who have graduated but not yet completed the Saskatchewan Polytechnic Structured Practical Training and Assessment (SPTA) program (or an equivalent program approved by Council) or passed their Pharmacy Examining Board of Canada (PEBC) exams, to continue to be registered with the Saskatchewan College of Pharmacy Professionals (SCPP) as interns.

Pharmacy technician interns may work in the province (under the immediate supervision and in the presence of a licensed pharmacy techs or pharmacist) for up to 12 months after graduation. The registrar may extend the one-year time frame under extenuating circumstances.

These amendments align pharmacy technician registration categories and time frames with those of pharmacists.

The Ministry of Health also recently amended *The Disease Control (COVID-19) Amendment Regulations (2021)* under *The Public Health Act, 1994* to authorize formerly licensed pharmacy technicians, pharmacists, pharmacist extended interns, and pharmacist interns to inject COVID-19 vaccines. SCPP Council has approved pharmacy technicians to complete any CCCEP-accredited (two-staged) competency mapped training program for injection training.

## NAPRA publishes standards for CQI and medication incident reporting

**THE NATIONAL ASSOCIATION OF PHARMACY REGULATORY AUTHORITIES (NAPRA)** recently published a new document, titled *Model Standards of Practice for Continuous Quality Improvement and Medication Incident Reporting by Pharmacy Professionals*.

NAPRA developed the document as a supplement to the model standards of practice for Canadian pharmacists and pharmacy technicians. As with other model standards, they can be adopted or adapted for implementation as the pharmacy regulatory authority (PRA) in each province or territory sees fit, based on the needs in that jurisdiction.

Medication incident reporting has long been a recommended part of the practice of pharmacy in Canada to protect patients' health and wellbeing, notes NAPRA. In recent years, it has been a priority of provincial/territorial PRAs to move towards implementing mandatory reporting programs. These programs improve the ability to analyze and learn from medication incidents and near misses, so that pharmacy professionals may continuously improve the quality of pharmacy practice to prevent and mitigate risks to patients.

The document can be accessed at [NAPRA\\_Model\\_Standards\\_CQI\\_MIR\\_July2021.pdf](#).

## life effects



## Living with a chronic condition?

Real-life perspectives from people with similar challenges can help you on your journey.



▶ Watch Video

## OCP publishes FAQs on Virtual Care policy

**WITH THE PANDEMIC DRIVING THE ADOPTION OF VIRTUAL CARE IN PHARMACY**, the Ontario College of Pharmacists (OCP) has developed a Virtual Care policy, as well as Frequently Asked Questions to clarify it.

The FAQs note that, while the policy outlines requirements for pharmacy professionals to fulfill when providing virtual care, the decision to provide this care must be made in conjunction with, and with the consent of the patient, and when the benefits to the patient outweigh any risk.

The policy defines virtual care as “a professional interaction between a registrant and a patient that occurs remotely using secure enabling technology that facilitates registrant–patient interaction, for example, videoconferencing.” Therefore, care provided over the telephone would constitute virtual care, if in accordance with the definition, but routine phone calls that are administrative or clerical in nature would not.

Educating a patient on the use of a medical device, for example, could be a virtual care interaction.

To view the Virtual Care policy, visit [Virtual Care Policy – OCPInfo.com](#). For the Frequently Asked Questions, visit [Virtual Care Policy: Frequently Asked Questions – OCPInfo.com](#).

## B.C. reports on tech results of Practice Review Program

**COMPLIANCE OFFICERS IN THE** College of Pharmacists of British Columbia’s Practice Review Program (PRP) report that documentation—and specifically failure to sign off on steps performed (e.g., for verification of patient identification, allergies, etc.)—was the top area of non-compliance for pharmacy technicians in both hospital and community pharmacy during the 2019/2020 fiscal year. Often, these steps are performed correctly but are not documented, notes the *PRP Annual Report 2019/2020*.

“Documentation provides a picture of all the steps taken along the way in filling a prescription from start to finish,” says the Report. “It is important to regularly document what has been completed, and by whom, so if anyone looks at the prescription in the future, it’s clear what steps a registrant was responsible for.”

During the fiscal year, compliance officers reviewed 77 community pharmacy and 200 hospital pharmacy technicians. Techs in both practice settings are evaluated on four areas of focus: patient identification verification; product distribution; collaboration; and documentation.

## Notes

## Helping patients get their “Zzzs”

### INCREASING NUMBERS OF CANADIANS

are lying awake at night, willing the sleep that so often eludes them. According to the Public Health Agency of Canada, one in two adults have trouble going to sleep or staying asleep, and one in three have difficulty staying awake during waking hours.

The implications are far-reaching. Persistent insomnia can have an adverse effect on physical and mental health and poses a greater risk of fatal traffic and workplace accidents. The economic burden of insomnia in Canada is estimated at \$5,010 per person per year due to work absenteeism and reduced productivity, says a Statistics Canada Health Report.

“Despite its high prevalence and burden, insomnia is often unrecognized and untreated because of barriers to its assessment and management,” says the Report. “There is a clear need to develop more cost-effective, efficient and accessible therapies for insomnia.”

Enter Dr. Fred Rémillard and his colleague, Karen Jensen, who have developed an online program that provides the tools for community pharmacists—ideally supported by pharmacy technicians—to help patients improve their sleep and stop or reduce the use of addictive hypnotic medications.

PharmaZzz uses non-medication therapy for insomnia (NMTi), which focuses on identifying and changing habits and thoughts that are contributing to sleep problems. Evidence suggests that NMTi is as effective, or even more so, than sleep medication for managing long-term sleep problems.

### Techs take lead

Pharmacy technicians can play a key role in the PharmaZzz program, first by identifying prospective patients. This could entail something as simple as engaging in a chat with a patient who is yawning at the counter. “Just probe a bit to see if this is a one-off or something on a more regular basis,” says Rémillard, professor emeritus at the University of Saskatchewan College of Pharmacy and Nutrition and a retired psychiatric pharmacist. Another red flag could be patients taking over-the-counter sleep medications, or repeated prescriptions that are being billed for hypnotic medications. “These patients may not know there are programs that could help them come off hypnotics and make their life better,” he says.

As the initial point of contact, the technician can briefly describe the program and facilitate an initial interview with the pharmacist if the patient is interested, says Jensen, retired manager of University of Saskatchewan’s medSask.

The program provides brochures and flyers that technicians could distribute to potential

candidates to help them decide if the program is of interest to them. Posters are also available for promoting the program in the pharmacy, and shelf talkers for placement in the OTC section.

Rémillard says technicians could also help with screening, as there is an assessment tool to determine if the patient could benefit from the program, as well as simple forms to complete to ensure the patient doesn’t need to be referred to a physician. Generally, patients take the program over six to eight weeks in weekly or bi-weekly sessions, so technicians could also help in scheduling appointments.

“I think if there’s a more coordinated effort between the technicians and the pharmacist, we could recruit more patients, rather than the

pharmacist alone trying to flag somebody and do the preliminary stuff,” says Rémillard. “Time is a big problem, and I think if they had a coordinated effort, it would be amazing.”

For more information and to register: <https://pharmacy-nutrition.usask.ca/cpdpp/continuing-education-/courses.php#PharmaZzzNonMedicationTherapyforInsomnia>.

### SLEEP RESOURCES

- [SaferMedsNL and SaferMedsNL Resources](#) — SaferMedsNL: a deprescribing project launched in NL to bring public awareness to the benefits and harms of sedative-hypnotics
- [www.mysleepwell.ca](http://www.mysleepwell.ca): NMTi therapies to improve sleep
- [www.deprescribingnetwork.ca](http://www.deprescribingnetwork.ca): Canadian Deprescribing Network; features a section on “Sleep Well without Medication”
- [www.sleepfoundation.org](http://www.sleepfoundation.org): National Sleep Foundation

## life effects



**Barbara Moore**  
Living with COPD

## Real people, real stories

“Sometimes people are careless with their words. They may not realize that what they say can hurt you.”

Read Barbara’s story, and many more, at [TevaCanada.com/LifeEffects](http://TevaCanada.com/LifeEffects)



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

teva