

# TECHtalk

FEBRUARY 2022

## TECH GIVES BACK TO PROFESSION

### PHARMACY TECHNICIAN JILLIAN THORNE

is a valued member, not only of her team at Lawtons Drugs in Gander, NL, but also as an elected member of the Newfoundland and Labrador Pharmacy Board (NLPB), and as a committee chair at an educational institution.

Inspired by her colleague Colleen Squires, who was the first pharmacy technician to serve on the NLPB board in 2016 and later went on to become chair of the executive committee, Thorne replaced Squires as the

Zone 6 pharmacy technician in 2020. Previously, she had served on the NLPB's Professional Development Review Committee, which makes recommendations regarding the current continuing education and professional development programs for pharmacists and pharmacy techs. Running for the board seemed a natural progression.

"By serving with the board, Jillian hopes to help advance the role of registered pharmacy technicians to support and work together with pharmacists to advance pharmacy care for a more safe and healthy community," said the NLPB in announcing her appointment. As a board member, Thorne sits on the Complaints Authorization Committee, which she describes as "a bit nerve-wracking at first, but also very interesting." She also continues to serve on the Professional Development Review Committee.

A registered pharmacy tech since January 2016—the sixth in the province—she graduated in 2012 from what was then an unaccredited pharmacy technician program at Keyin College and got a job in her current workplace. With the advent of registered techs in the province, she completed bridging courses through Selkirk College. Thorne says she entered the pharmacy assistant program simply because "I wanted to help people. Now I can do more for patients than what I could do as an assistant, like transfer their prescriptions, call the doctor for them, show them how to use their prescriptions, and check their prescriptions." While authorization for techs to administer injections doesn't appear to be imminent in NL, Thorne says she "definitely would do it if people needed it," adding that "pharmacists would like to see it happen because they're overwhelmed with all the vaccines."

As she marks her 10-year anniversary at Lawtons Drugs Gander, Thorne is now the supervisor of long-term care. In that capacity, she oversees the preparation of medications for 13 personal care homes and one correctional facility. She also accompanies the pharmacist in charge to the care homes every six months to conduct a medication safety audit.



Prior to the pandemic, she was the only pharmacy technician, but the staff has since grown to three techs—one of whom Thorne was a preceptor for.

In addition to her board work, Thorne is chair of the program advisory committee at the now-accredited Keyin College. The committee reviews the curriculum and seeks student opinions on the courses. Although Thorne has been asked many times to be an instructor at the College, it is too far from her workplace.

Accustomed to working in a bustling, ever-evolving environment, Thorne advises students entering the profession to "be ready for change, be patient and understanding, and always stay up to date" with the newest technologies, medications and devices.

Pre-pandemic, she attended in-person seminars and conferences to keep up to date, but now she takes many online courses. She also says she learns a lot from the students she precepts, "because sometimes they have the newest things on the go."

Finally, Thorne cites the importance of teamwork and communication. "There are many different people to meet and to work with," she says. "Being able to develop relationships with patients and getting to work with all these different people is one of the greatest rewards of my job as a pharmacy technician."

### International group for pharmacy technicians

#### PHARMACY TECHNICIANS INTERNATIONAL (PTI)

is a private Facebook group whose mission is "to create a pharmacy technician global community of practice to share, innovate and collaborate on research."

The group was formed in 2021 to raise awareness of the existing and evolving roles of pharmacy technicians around the world, and develop international best practices across the profession. PTI plans to eventually host an international online conference aimed at pharmacy technicians worldwide.

At last count, the group had nearly 800 members. For more information, visit Pharmacy Technicians International via Facebook.

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## LEADing the way to achieving career goals

**THE ONTARIO PHARMACISTS ASSOCIATION** (OPA) has introduced OPA LEAD, an initiative to help early-career pharmacy professionals achieve their career goals. Through coaching, resources, networking and education, LEAD prepares participants to develop the confidence to meet their professional needs.

The program kicks off with a series of webinars, including Preparing for the PEBCs, Managing Your Student Debt, Financing Your First Pharmacy, Networking Your Way to a New Job, Tips for De-escalating an Irrate Patient, and Stories from Pharmacists Who Took a Different Route.

LEAD is complimentary and available only to OPA members.

## Tech recognition: awarded, elected

**JENNIFER TUCK IS THE RECIPIENT OF THE** 2021 Professionalism Award from the Pharmacy Technician Society of Alberta (PTSA).

Tuck is the compounding lab manager at Cambrian Pharmacy in Calgary, and has trained and mentored five technicians and three assistants in the last six years. According to the PTSA, she was an essential part of the pilot program when the National Association of Pharmacy Regulatory Authorities (NAPRA) introduced its regulatory standards, and was in the forefront when the Alberta College of Pharmacy followed suit and introduced new standards for compounding.

In other tech news, Eric Sletmoen has been elected to the board of the College of Pharmacists of British Columbia. After graduating from the pharmacy technician program at Vancouver Community College in 2014, he worked at the BC Children's and Women's Hospital pharmacy before assuming his current position at Vancouver General Hospital. He is a frequent speaker at pharmacy technician continuing education events in the Lower Mainland.

## Techs participate in Hospital Pharmacy Conference 2022

**FOLLOWING THE DECISION AT ITS 2021** Annual General Meeting to make pharmacy techs full voting members, the Canadian Society of Hospital Pharmacists (CSHP) featured several educational sessions of particular interest to these delegates at its 2022 Hospital Pharmacy Conference, held online January 31 to February 6.

Pharmacy technician Laura Miskimins spoke on how technicians can demonstrate leadership, accountability and ownership of distribution activities, while Angela Martin-Dallon participated in a panel session on COVID-19 vaccination efforts. Other sessions included inter-professional collaboration between the pharmacy technician and practical nursing programs, with RPhT Sonja Baettig, and pharmacy technicians Christine Scullion and Natalie Horlin shared lessons learned from implementing major changes to the NAPRA standards for compounding.

## ACP updates OAT guidelines for techs and pharmacists

**AFTER RECORDING ITS DEADLIEST YEAR ON RECORD** for opioid overdose deaths in 2020, the Alberta College of Pharmacy (ACP) has updated its Medication-assisted treatment for opioid dependence (ODT) guidelines, published in 2014.

Since that time, treatment of opioid use disorder has changed dramatically from both a clinical and regulatory perspective. Treatment protocols have evolved for methadone and buprenorphine-naloxone, new treatment modalities have emerged, and unscheduled naloxone is now commonly provided as a tool to manage opioid poisoning. The new Opioid Agonist Therapy (OAT) guidelines, which came into effect in July 2021, reflect these changes.

Pharmacy technician Tiana Cunningham, pharmacy operations manager at the Chinook Regional Hospital, assisted in updating the guidelines based on her experience in the emergency room as a member of the healthcare team, notes ACP.

In developing the guidelines, ACP consulted pharmacy technicians, pharmacists, physicians, nurses, harm reduction agencies, and persons and families with lived experience. The guidelines are divided into parts A and B, with B listing those for pharmacy technicians and pharmacists providing care for patients using OAT.

More recently, an amendment was made to clarify how pharmacy teams should positively identify patients who use OAT. To see the guidelines, visit <https://abpharmacy.ca/oat>.

## ISMP offers new primer for community pharmacies

**THE INSTITUTE FOR SAFE MEDICATION PRACTICE CANADA** (ISMP Canada) is offering a new online learning program, "Preventing and Analyzing Medication Errors: A Primer for Community Pharmacies in Ontario."

The introductory program, developed with the Ontario Pharmacists Association, is of interest to pharmacy technicians and assistants, as well as pharmacists. It covers the fundamentals of patient safety, including how human factors impact both the likelihood of error and the success of improvement plans. Case studies are used for illustration.

The program consists of four modules: Before the Incident; Analyzing Incidents; Proactive Risk Assessment Using Failure Mode and Effects Analysis; and Summary.

ISMP Canada has also updated its online learning program, "Medication Safety Considerations for Compliance Packaging." It consists of six modules, each 10 to 20 minutes in length. Those who have completed the previous version may access the updated one for a reduced cost of \$50. For more information, visit eLearning: All courses ([ismp-canada.org](https://ismp-canada.org)).

## ACP releases guidelines for virtual care

**IN ADDITION TO PARTICIPATING IN A COLLABORATIVE** province-wide Virtual Care Working Group, the Alberta College of Pharmacy has introduced its own guidelines for pharmacy technicians and pharmacists providing virtual care to patients.

In general, the guidelines specify that virtual care should be used "only when the regulated member has determined that providing virtual care is in the best interest of the patient and that the benefits to the patient outweigh any potential risks."

Among other requirements, regulated members must ensure that they establish and maintain a professional relationship with each patient for whom they provide virtual care, meaning they must interact directly with the patient, their agent, or their caregiver. They must also confirm that the patient understands and acknowledges the risks and limitations of virtual care and obtain the informed consent of the patient to receive care virtually.

To access the complete guidelines, visit [https://abpharmacy.ca/sites/default/files/Guidelines\\_VirtualCare.pdf](https://abpharmacy.ca/sites/default/files/Guidelines_VirtualCare.pdf).

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## Think before posting: Social media etiquette for pharmacy technicians

**PHARMACY PROFESSIONALS HAVE COME** to rely on social media—including blogs, forums, podcasts, websites such as Facebook, LinkedIn, Twitter, Instagram, YouTube and others—to help them in many aspects of their job. A survey conducted by the Ontario College of Pharmacists, prior to developing a module on social media awareness, revealed pharmacy professionals' top five uses for social media: asking questions or seeking information; networking with other professionals; accessing continuing education

and professional development; creating interest groups; and advertising services.

But not all postings are appropriate and, in some cases, may even result in civil liability or prosecution. As regulated healthcare professionals, pharmacy technicians are held to high standards of personal, professional, ethical and moral conduct. As such, they have a responsibility to use social media appropriately.

That was the message that pharmacy technician Rahila Ovais delivered at Pharmacy U for Technicians, held last September. "Postings on social media should employ the same professional standards and ethical considerations as other personal or public interactions," noted Ovais, who is reimbursement specialist at Alio Health Services Inc., and director of social

media and communications at the Canadian Association of Pharmacy Technicians.

She suggests having separate social media accounts that are locked or private, and not subject to public viewing for personal (family) posts. "Private accounts are available on popular social media networks, including Instagram, Snapchat, Facebook and Twitter."

While personal health information pertaining to a patient must be kept strictly confidential, "this includes but is not limited to care scenario examples, references to health impairments, commenting on complaints, issues of dispute or the injury or death of a patient," says Ovais. Omitting the patient's name is not enough to ensure health information privacy and confi-

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### Information-sharing dos and don'ts

#### DO SHARE:

- Trending healthcare news
- Medical information
- Pharmacy promotions
- Health information
- Matters of public health
- Availability of services

#### DON'T SHARE:

- Clinical advice
- Medical direction
- Opinion on healthcare issues
- Medical products
- Any information that compromises patient confidentiality and privacy

Source: Rahila Ovais

### Key principles of social media

#### GENERAL RULES

- Understand personal versus professional use
- Treat personal and business use separately
- Be mindful of regulatory and legal obligations
- Do not share confidential information

#### RESPECTING OTHERS

- Be respectful of the privacy of others
- Respect others' opinions, values, religions and cultures

#### BE RESPONSIBLE

- Take care when speaking about competitors
- Links and shares can be endorsements
- Do NOT give medical advice or answer questions from patients/caregivers

#### BE AUTHENTIC

- In case of any miscommunication, admit the mistake and apologize

Source: Rahila Ovais

## life effects



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dentiality. “If the patient can recognize and identify their interaction with you (or your organization) through the social media post shared, you have breached their right to confidentiality.”

We’ve all seen our share of rude and misleading postings too. “Maintain the highest level of ethical standards in language and content that is shared on social media,” says Ovais. “Do not participate in argumentative conversations with a patient, colleague, former colleague or organization on social media.”

### POLICY REVIEW

Most regulatory colleges have a Social Media Policy that pharmacy technicians can review to ensure they are adhering to the guidelines. For example:

- **The College of Pharmacists of Manitoba:** Pause before you post: Social media awareness (available only to College registrants) <https://cphm.ca/uncategorized/social-media-pd/>
- **The Ontario College of Pharmacists:** Social media awareness for regulated healthcare professionals [https://www.ocpinfo.com/education\\_resource/social-media-elearning-module/?hilite=social+media](https://www.ocpinfo.com/education_resource/social-media-elearning-module/?hilite=social+media)
- **Alberta College of Pharmacy:** Privacy, Pharmacy and Social Media [https://abpharmacy.ca/sites/default/files/Social\\_Tips.pdf](https://abpharmacy.ca/sites/default/files/Social_Tips.pdf)
- **Newfoundland and Labrador Pharmacy Board:** Registrant use of Social Media [NEWFOUNDLAND & LABRADOR PHARMACY BOARD \(nlpb.ca\)](http://NEWFOUNDLAND & LABRADOR PHARMACY BOARD (nlpb.ca))
- **Saskatchewan College of Pharmacy Professionals:** Social Media Policy [REF\\_Social\\_Media\\_Policy\\_20141110.pdf](http://REF_Social_Media_Policy_20141110.pdf) (saskpharm.ca)

## BY THE NUMBERS

### MEDICATION INCIDENTS IN MB AND SK

#### MANITOBA COMMUNITY PHARMACIES, APRIL 1, 2017, TO SEPTEMBER 30, 2021

- Total reports received: 2,050
- Top five types of incidents (including near misses):
  - Incorrect dose/frequency: 294
  - Incorrect drug: 293
  - Incorrect quantity: 191
  - Incorrect strength/concentration: 151
  - Incorrect patient: 109

Source: National Incident Data Repository Safety Brief, Manitoba Data

#### SASKATCHEWAN COMMUNITY PHARMACIES, SEPTEMBER 1, 2013, TO OCTOBER 31, 2021

- Total incidents reported: 34,999
- Top three types of incidents:
  - Incorrect dose/frequency: 8,186
  - Incorrect quantity: 5,892
  - Incorrect drug: 5,887

Source: Community Pharmacy Incident Reporting (CPIR) database

## Notes