

# TECH talk

MAY 2013

## BY THE NUMBERS REGULATED TECHNICIANS

### ALBERTA

(as of April 22, 2013)

**Total: 165**

**Breakdown by gender:**

157 women, 8 men

**Breakdown by employment:**

Community: 98

Hospital: 40

Unknown: 27

### BRITISH COLUMBIA

(as of April 18, 2013)

**Total: 332**

**Breakdown by gender:**

304 women, 28 men

**Breakdown by employment:**

Community: 119

Hospital: 180

Other (head office): 1

Unknown: 32

### ONTARIO

(as of January 1, 2013)

**Total: 1,023**

**Breakdown by gender:**

975 women, 48 men

**Breakdown by employment:**

Community: 551

Hospital: 380

Association/Academia/Government: 19

Industry/Other: 7

Pharmacy Corp./Prof. Practice/Clinic: 1

Unemployed/retired: 65

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## FINDING FULFILLMENT IN HOSPITAL PHARMACY

### PERSISTENCE PAYS OFF AS TECH PURSUES HER PASSION

#### JUST FIVE YEARS INTO HER CAREER

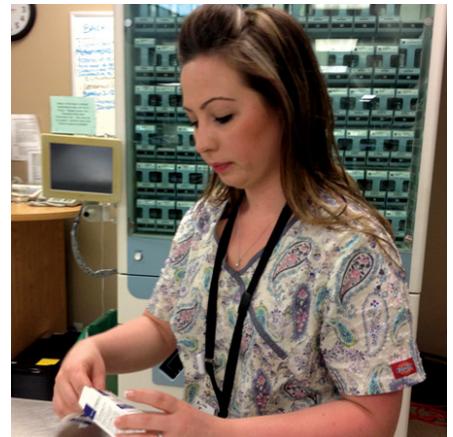
as a pharmacy technician, Ashley Corra has landed what she calls her “dream job” on the pharmacy team at Hôtel-Dieu Grace Hospital in Windsor, Ontario.

Having graduated in 2008 from the pharmacy technician program at the newly accredited St. Clair College in Windsor, Corra was exempted from taking bridging courses en route to becoming a regulated technician in December 2010. “I lucked out,” she says good-naturedly. Upon graduation, Corra joined a Walmart pharmacy where she was fortunate enough to work to her full scope of practice. Once the pharmacist had checked a prescription for the therapeutics, she performed the final check—“it could leave with my signature.”

As one of Canada’s early regulated techs, Corra spoke at last year’s “Breaking Barriers” pharmacy technician conference in a session on optimizing the use of regulated pharmacy technicians. She also worked for a day at several other Walmart pharmacies, so pharmacists could experience the effect of a pharmacy technician on their workflow.

Corra is enthusiastic about regulation as a way for pharmacy assistants to advance their career. “It’s awesome that we have that opportunity, and I feel so grateful for it. But regulation is not for everyone,” she concedes. “Some people don’t want that responsibility, which I can fully understand.” She admits that she was “terrified” when she had to check her first prescription, but soon overcame her anxiety and relished her new responsibilities. As the only regulated tech in her pharmacy, she freed up the pharmacist to perform more counselling services. Otherwise, “the pharmacist would have a really hard time stepping away from the workflow to do a MedsCheck for a patient,” says Corra, “and that’s not fair. Everyone deserves to have proper counselling. Without a regulated tech or multiple pharmacists, sometimes it’s not possible.”

Although Corra enjoyed her stint in community pharmacy, she has always coveted a



position in a hospital. “Working in retail has been a good experience, but the hospital has always been my dream job,” she explains. “When I had an opportunity to go, I took it.”

Retail and hospital are “totally different,” she notes. “In hospital, your customers are the nurses and doctors. There are many more things to do and learn.” Whereas in the retail pharmacy, she could be taking orders over the telephone, all orders in the hospital must be written. And there is no contact with the patients, except when she is working in the pre-admission clinic, where she reviews the medications of patients who are scheduled for surgery. As the hospital is all unit dose, she also learned to use the PACMED packager during her six weeks of training. Other tech duties include refilling the Pyxis medication machines on the hospital floors, working in the IV room, and doing order entry.

One of about 30 pharmacy techs at the hospital—all of whom are either regulated or in the process of regulation—Corra aims to turn what is currently a temporary part-time position into a permanent full-time one, however long it takes. Time permitting, she may also do some work in community pharmacy, to keep up those skills. Whatever the future holds, though, Corra has found her calling. “I have been very blessed,” she says. “I’m very young and I’ve done a lot so far, but my end goal was to be at the hospital.”

Mission accomplished.

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### Techs awaiting approval to transfer scripts

#### WHEN PROPOSED CHANGES TO THE

Food and Drug Regulations take effect, likely later this year, pharmacy technicians will be permitted to transfer prescriptions from one pharmacy to another, and to complete the associated paperwork. Currently, only pharmacists are authorized to perform prescription transfers.

The changes are expected to save pharmacies an estimated \$8.7 million a year in administrative costs, while helping pharmacy technicians practice to their full scope. "This change will enable pharmacists to spend more time providing advice to and serving customers, while running their businesses," said the Honourable Tony Clement, President of the Treasury Board, upon unveiling the proposed measures.

The Proposal was published for public

consultation in *Canada Gazette*, Part 1 on December 22, 2012. Comments and feedback gathered during the consultation will be incorporated into a final version of the amendment. "There is no fixed timeline but the Proposal would have an initial effect after the publication in *Canada Gazette*, Part II, which is anticipated in 2013," says Blossom Leung, media relations officer, communications and public affairs branch, Health Canada.

The amendment will apply in Ontario, Alberta, and British Columbia, as those provinces already have regulations for pharmacy technicians in place. Other provinces and territories would have to create new regulations for technicians in order to benefit from this regulatory change, says Leung.

### Tech students participate in Pharmacist Awareness Month

#### PHARMACY TECHNICIAN STUDENTS

at Fleming College in Peterborough, Ontario, played an important role in Pharmacist Awareness Month in March by organizing information displays and free health checks for the public. It's the first time a pharmacy technician program has participated in this event.

The students set up five different booths for three days at its Sutherland campus. Working with a registered healthcare professional at each booth, students demonstrated correct use of asthma inhalers, proper sun protection, smoking cessation therapy, massage therapy,

and specialty compounding. They also provided information on heart attack risk factors, holistic health, allergies, compliance packaging, infection control, veterinary compounding and treatments, and more. Visitors could even receive a medication review.

"The Fleming College pharmacy technician students worked diligently to plan an event that allowed them to work in partnership with registered healthcare professionals to deliver beneficial demonstrations and education to the community," said Amanda Mushynski, coordinator of the College's pharmacy technician program.

### Deadlines loom in some provinces, extended in others

#### PHARMACY ASSISTANTS WORKING

toward registration in Ontario have only until January 1, 2015, to complete their bridging courses, warns the Ontario College of Pharmacists (OCP). The College says the last offering of either classroom or online courses will be fall 2014, while Prior Learning Assessment (available for all courses except Professional Practice) will be offered only until summer 2014.

Those who miss the deadline will have to obtain the required education by graduating from one of the accredited pharmacy technician programs offered at community and career colleges.

To help aspiring technicians plan their timeline, the OCP has a tracking tool on its website at [www.ocpinfo.com](http://www.ocpinfo.com).

Similarly, the Alberta College of Pharmacists notes that, as of January 1, 2014, only individuals who have graduated from an accredited training program or who have completed the Evaluating Exam will qualify to be on the provisional phar-

macy technician register. The October 2013 sitting of the Evaluating Exam will be the last opportunity to complete this requirement.

Meanwhile, at its annual board meeting in March, the Pharmacy Examining Board of Canada (PEBC) decided to extend the deadline for the Evaluating Exam by three years to December 31, 2018, in provinces that have not yet implemented pharmacy technician regulation. "The decision to extend the deadline to 2018 was based on the need to accommodate those provinces that are still in progress of moving forward with pharmacy technician regulation," says Renee Kiss, information assistant at the PEBC. "It is important to note that the timelines may be earlier for an individual provincial regulatory authority," she adds, such as in Ontario, where the deadline for the Evaluating Exam has already passed, and Alberta, with a deadline of January 1, 2014.

Assistants working toward regulation should confirm timelines with the college of pharmacy in their jurisdiction.

## Separating technical from clinical duties

### WHILE THE SCOPE OF PRACTICE FOR

registered pharmacy technicians is clearly defined, confusion can arise when pharmacists continue to perform technical duties.

“Many pharmacists aren’t clear in their own mind how to use technicians,” says John Shaske, partner and pharmacist at Howe Sound Pharmacy in Gibsons, BC. “Instead of playing a mentoring role in drug preparation and distribution, they sort of take over ... then slide back to what they’re comfortable with. It just snowballs and perpetuates.” Shaske maintains that pharmacists should not be involved in drug preparation, and that the technicians should be in charge of the workflow.

Technicians should also be gathering information from the patient, a task that pharmacists all too often perform. “That’s the technician’s job,” says Shaske. (Howe Sound Pharmacy currently has four technicians, with a fifth to be added soon.) He plans to have one or two technicians working with a pharmacist on the front lines at all times, preparing prescriptions for patients, leaving the pharmacist free to talk to the patients about their conditions.

While collecting information, pharmacy technicians are not permitted to do anything that involves decision-making. Technicians may ask questions like, “Have you had a flu shot? When? What medications are you taking?” Once the technician has gathered the appropriate information, the pharmacist can discuss the patient’s goals. “The pharmacists are there to solve drug therapy problems,” says Shaske. “They’re not there to be collecting blood glucose levels, taking blood pressure, and all that sort of thing. That’s right in the technician’s court.” Technical information is independent of a patient’s clinical condition.

Pharmacy assistants also play an important role, says Shaske, because “you need all the arms and legs for the technicians. That’s your drug preparation and distribution team.” Pharmacists have previous technical experience, so they can coach the technicians, he adds—but not do their job for them.

Eventually, as pharmacists begin to focus more on clinical care and pharmacy technicians increasingly assume their new responsibilities, pharmacists will lose those technical skills, says Shaske. “In 20 years or so, we won’t have pharmacists experienced in handling drugs anymore.”

And the separation between technical and clinical will be complete.

### WHO DOES WHAT?

Technician	Pharmacist
In general terms, technicians are responsible and accountable for the technical aspects of both new and refill prescriptions (ie, the correct patient, drug dosage form and route, dose, doctor).	Pharmacists are responsible for the therapeutic and clinical appropriateness of all new and refill prescriptions, and all therapeutic consultations.
Examples	
A pharmacy technician can ensure that a bottle contains 100 tablets of drug X, and that the information on the label—name of patient, prescriber, drug, and directions—is correct as per the prescription.	The pharmacist must assess the patient, authorize that drug X is the appropriate medication to take, and counsel the patient on how to take it.
A technician might explain how to use a glucose meter, how to measure the dose of an antibiotic, how to mask the unpleasant taste of the antibiotic, or how to mix Metamucil with cold juice.	A pharmacist handles clinical activities: advising on what symptoms would indicate the need to take a glucose reading, an assessment of whether or not an antibiotic is working, or a recommendation of when Metamucil is appropriate for a patient or whether an alternative product is warranted.
Each completed prescription must contain the signature or some other identifying mechanism of both the technician (for the technical functions) and the pharmacist (for the therapeutic functions).	

Sources: Ontario College of Pharmacists, [www.ocpinfo.com](http://www.ocpinfo.com), Understanding What a Pharmacy Technician Can Do; Prince Edward Island Pharmacy Board, “The Island Capsule Newsletter,” February 2013.

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