

TECH talk

MAY 2014

BY THE NUMBERS

TECHS IN ONTARIO: THE FIRST FOUR YEARS

By gender

2010*	Male: 5	Female: 109
2011	Male: 18	Female: 407
2012	Male: 48	Female: 975
2013	Male: 100	Female: 1,726

*registration began on December 3

Average age: 39 years

Additions to the register

2010:	114
2011:	318
2012:	600
2013:	803

Where they work

Community pharmacy:	48%
Community pharmacy within a hospital:	8%
Hospital/other healthcare facility:	41%
Association/academia/government:	2%
Industry/other:	1%

(excludes pharmacy technicians who did not record a workplace)

Many more to come: Candidates still enrolled in bridging education program (must be completed by January 1, 2015):

approximately 2,600

Source: Ontario College of Pharmacists, 2013 Annual Report

ACCREDITED CE LESSON INCLUDED:

Osteoporosis: An update for pharmacy technicians

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MAKING THE MOVE TO MANAGEMENT

ONLY SEVEN YEARS AFTER GRADUATING

from Robertson College in Calgary, Nicholas Burns has already gained valuable experience. So far, he's worked in community pharmacy, hospital pharmacy, a medical centre outpatient pharmacy and Alberta Health Services' Central Production Facility drug distribution centre. And most recently, he landed a prize position as operations manager at Calgary's Rockyview General Hospital—his greatest challenge yet.

In this capacity, he is responsible for all the drug distribution processes at the hospital, "ensuring that safe practices are followed and improved." Maintaining the most efficient services possible is a big part of the job, he explains. On any given day, he can be found doing anything from developing a first-aid plan to ordering a dishwasher, conducting interviews to coordinating meetings (he also chairs a regional quality and safety committee). And considerable amount of his time is devoted to human-resources issues, as he supervises approximately 30 technicians and 20 assistants. ("I like to think we're all part of the same team," he's quick to note.)

While he admits it has been a steep learning curve, he relishes the challenge. "This has been the most gratifying job that I have had so far in my career in pharmacy," he enthuses. "I am constantly provided with opportunities to solve problems and improve the way we do business."

As operations manager, Burns uses the Lean Six Sigma organizational tool, which he learned in a special course at Central Production Facility. He credits Dana Lyons, his manager and mentor there, with encouraging him to acquire these new skills. "The training I received has given me a completely different lens on how I see the work environment," he says. "Easily being able to identify waste and areas where improvement is possible is a huge asset to any pharmacy department."

He is gradually implementing some Lean Six Sigma concepts in his current workplace, such as reorganizing the dispensary to improve the flow and reducing the ward stock quotas of certain IV products. "In the future, we will be doing some other process-improvement initia-



tives," he says. "I have one of my employees taking the same course, so we will be able to work together to improve our pharmacy."

Burns also serves as president of the Pharmacy Technician Society of Alberta (PTSA), where he's volunteered since early in his career when he attended some of its education sessions. That led to chairing the continuing education committee, and eventually becoming vice-president and, last fall, president. The PTSA now boasts more than 400 members, and hosts an annual conference (this year's takes place September 19–20 in Calgary). As president, Burns ensures that the Society is following its "vision, mission, and values that it owes to its members." He also facilitates board and stakeholder meetings, and does school presentations.

A strong advocate of regulation, the PTSA assists candidates through a variety of continuing education programs. Although Burns—who has just completed his last exam—concedes that regulation can be onerous in terms of time and money, especially for those candidates with young children, he believes it is a necessary step.

In the short term, Burns plans to continue pushing forward with process-improvement initiatives. "I am still learning as a new manager," he says, "so my immediate goal is to learn more management skills and fine-tune the ones I have learned so far to one day become a great leader in pharmacy."

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B.C. techs brainstorm on integration of role

AT THE ANNUAL CONFERENCE OF the Pharmacy Technician Society of British Columbia (PTSBC), representatives of the College of Pharmacists of B.C. asked pharmacy technicians to brainstorm ways in which pharmacists and technicians could collaborate to improve their practice.

After updating delegates on regulation, scope of practice, and current College initiatives, Bob Nakagawa, registrar; Doreen Leong, director of community pharmacy practice; and Mykle Ludvigsen, director of public accountability and engagement asked them to consider the following: Create opportunities for pharmacists and pharmacy technicians to improve

and enhance their practice by establishing a means in which they can deepen their relationships and understanding of each other's roles. What would such an opportunity look like?

The top three ideas were pharmacists shadowing pharmacy technicians for several days to understand and appreciate the technicians' role; joint pharmacist and pharmacy technician conferences with workshops; and required continuing education on pharmacist and pharmacy technician roles for both parties.

Other suggestions included team-building events, College-hosted social events, fundraisers for charities, public-awareness campaigns, and regular staff meetings.

Nova Scotia tech candidates await PTA

PHARMACY TECHNICIAN CANDIDATES in Nova Scotia are eagerly awaiting the arrival of the long-delayed Pharmacy Technician Assessment (PTA), the last step toward fulfilling registration requirements in that province.

According to Sue Sampson, project director/lead pharmacy technician regulation at the Nova Scotia College of Pharmacists, the PTA is scheduled to be available in mid-May. "Once enrolled in the PTA, the pharmacy technician candidate can complete it in as little as two weeks, but will have up to 12 weeks to complete the program."

Nova Scotia does have one registered technician. Jeannette MacDonald became registered in Ontario in December 2010. After moving to Nova Scotia in 2011, she wrote the provincial jurisprudence exam last November and became registered in January of this year.

While Sampson could not say how many candidates had completed all the previous



steps, there will undoubtedly be many more licensed pharmacy technicians in Nova Scotia—the fourth province to implement regulation—in the near future.

NAPRA authorizes another college for bridging education

WINNIPEG TECHNICAL COLLEGE IS THE latest educational institution authorized to deliver the National Pharmacy Technician Bridging Education Program, which the National Association of Pharmacy Regulatory Authorities (NAPRA) launched last September.

The Manitoba institution joins 11 colleges currently offering in-class courses: Bow Valley College, Calgary; Collège Boréal (campuses in northern Ontario); Fanshawe College (campuses in southwestern Ontario); Humber College, Toronto; Lambton College, Sarnia, Ont.; la

Cité Collégiale, Ottawa (French only); Mohawk College, Hamilton, Ont.; Niagara College Canada (various campuses in the Niagara Region and off-campus offerings in Ottawa); NorQuest College (campuses throughout Alberta); Sheridan Institute of Technology and Advanced Learning, Brampton, Ont.; and University of British Columbia in Vancouver.

The Program is also offered online at Selkirk College (all students), Bow Valley College (Alberta residents only), and University of British Columbia (B.C. residents only).

Helping allergy patients breathe easier

AFTER ENDURING A LONG, harsh winter, Canadians were only too ready to welcome the arrival of spring. But for seasonal allergy sufferers—about 25% of the population—the warmer weather is a mixed blessing.

Allergy season lasts right up until winter, with tree pollen being the main allergen in the spring, grass pollens in the summer and weed pollens (ragweed) in the fall.

Allergies occur when the immune system becomes unusually sensitive and overreacts to common substances that are normally harmless, such as pollens, molds, dust or food.

When patients enter the pharmacy with symptoms of sneezing, runny or congested nose, watery and itchy eyes, scratchy throat and dry cough, they may be suffering from nasal rhinitis—or hay fever—which is not to be confused with the common cold.

Pharmacy technicians and assistants can act as “gatekeepers” for these patients, suggests Trevor Shewfelt, pharmacist at Dauphin Clinic Pharmacy in Dauphin, Man. If the patient is asking about nose-related problems, for example, “the tech or assistant can gather as much information as possible to pass on to the pharmacist,” he says. Asking questions—What are the symptoms? How long have you had them? What have you taken already to help the symptoms?—can go a long way toward finding the root of the problem. “Try to make them open-ended questions to get as much information as possible,” he advises.

Assistants and technicians should be aware that there are some lookalike products on the shelves, notes Jennifer Horsfall, pharmacist at Tantramar Pharmacy in Sackville, N.B. “Many products will have another product of the same name, with a decongestant added in,” she explains. “If someone has selected that product, a technician could mention to them that it contains a decongestant—they may not be aware that it does. This could also open up dialogue to refer the patient to the pharmacist if needed.”

Techs and assistants should also realize that in some provinces, pharmacists can assess and prescribe for allergic rhinitis under the umbrella of minor ailments, she adds.

Prevention the best cure

One of the best ways to deal with seasonal allergies is by minimizing exposure to allergens, which Horsfall says is one of the main points she emphasizes with patients. “If avoidance isn’t possible, but exposure is predictable, try to treat before exposure—for example, before going into a house with an animal they are allergic to, or starting daily treatment before their allergy season starts. Allergens can be unavoidable in some cases;

in these situations, patients may need to be on therapy every day.”

The Canadian Lung Association (CLA) offers several suggestions for preventing seasonal allergies:

- Close windows to keep out pollen.
- In hot weather, spend more time indoors where there is an air conditioner.
- Check the pollen counts in your area to see when the pollen you’re allergic to is at its worst.
- Wear sunglasses to protect your eyes.
- If you’ve been outside during peak pollen counts, change into new clothes when you come indoors and take a shower to wash the pollen out of your hair and skin.

“No treatment will work as well as simply avoiding the allergen in the first place,” notes the CLA website.

For more information

Although technicians and assistants will not be counselling patients, they can refer to the following trusted sources to inform themselves about different types of allergies and their characteristics:

- Therapeutic Choices, and Therapeutic Choices for Minor Ailments (formerly Patient Self-Care), publications of the Canadian Pharmacists Association
- Canadian Lung Association, www.lung.ca



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