

# TECHtalk

JUNE/JULY 2024

## CROSSING CONTINENTS FOR CAREER IN CANADA

### BY THE NUMBERS

**Safety IQ: 2023 Year in Review, College of Pharmacists of Manitoba**

Total number of reports: **2,317**

Medication incidents reported (medication dispensed to a patient): **1,333**

Near-miss events reported (incident caught before medication dispensed to a patient): **984**

Medication incidents that did not cause harm: **1,140**

Medication incidents that caused patient harm: **193**

Approximate overall rate of harm caused by medication incidents in Manitoba community pharmacy: **14.5%**

Top 3 incident types: incorrect dose (500); incorrect drug (394); incorrect strength/concentration: **317**

Number of technicians listed: **224**

Source: CPhM Annual Report 2023

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### GROWING UP IN A SMALL MOUNTAIN

town in Poland, Paulina Humphrey never could have envisioned the journey that would eventually lead her to a position as pharmacy supervisor at McKesson Central Fill in Mississauga, Ont.

She arrived in Canada in 1992 to bring her mother (who was living here) back to Poland. But friends convinced her to stay and take advantage of the opportunities Canada offered. “After many conversations, I decided to apply for a permanent resident card, and that’s how my life in Canada began,” she recalls.

Humphrey enrolled in courses to improve on the limited English she had learned at high school and in working the night-shift at the local donut shop, where customers liked to sit and talk. “That was a lot of learning there!” she laughs.

She soon got a job at a pharmacy as a cashier. The pharmacist urged her to fill in for a vacationing pharmacy assistant, “and I fell in love with that,” she says. “That’s what prompted me to enroll in the pharmacy assistant course at Humber College in 1995.”

With the advent of regulation, she took the required bridging courses, working and attending school while raising three children. She became registered in December 2010—part of the first group to do so—and also served for several years as an assessor for the Pharmacy Examining Board of Canada (PEBC). She moved into the role of pharmacy technician at Main Drug Mart in Toronto, where she had been employed since 2000. In that capacity, she processed and filled an average of 200 prescriptions per day and assisted pharmacists by preparing an average of four MedsChecks daily, among many other responsibilities.

After 17 rewarding years at Main Drug Mart, Humphrey decided to spread her wings beyond community pharmacy and landed a job as pharmacy technician/dispatcher at McKesson Central Fill, which had just launched. “I had an opportunity to grow with Central Fill, so we kind of grew together,” she explains. “It was really interesting.”

At first, she worried she wouldn’t like the new environment given how much she enjoyed community pharmacy. “But little did I



know that I would fall in love with this place because there were just so many new things to learn, starting from robots and ordering and shipping, and then dispatching,” she says. “It was not boring at all.”

Three years later, she was promoted to lead pharmacy technician, where she oversaw a team of staff members and coordinated daily workflow. A fitness enthusiast she implemented weekly exercise breaks, which continue to this day, much to the delight of staff.

In 2023, she applied for her current position as pharmacy supervisor. In this role, she schedules and supervises a team of 11 full-time staff and a large roster of casual pharmacy technicians and pharmacists. She says it is a challenge to manage people from various backgrounds. “There is a lot of adapting and learning to deal with different cultures. But in the end, it’s super rewarding.” In this position, she also conducts performance reviews for the team, a new responsibility. She continues to take leadership training. “I would like to improve on my growth, not only in the supervisor role but also my leadership skills.”

Her advice to new technicians reflects her own journey: “Be open to different pharmacy settings and roles, and explore your options because I think the possibilities are endless,” she says, noting that compared to 20 years ago when she started in the profession there is so much more that techs can do. “I think everyone can find something that they will grow in and enjoy doing.”

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## TECH talk

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Pharmacy Practice+ Business, a division of EnsembleIQ  
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## CPhM modifies patient profiles for inclusivity

**THE COLLEGE OF PHARMACISTS OF MANITOBA** (CPhM) has joined with Rainbow Resource Centre—which has nurtured Manitoba's 2SLGBTQ+ community for 50 years—to introduce patient profile modifications for inclusive care.

Approved by the CPhM Council in December 2023, the changes include new wording and mandatory information, such as the patient's chosen name, pronouns (if provided by the patient) and clinically relevant sex information. The modifications aim to support pharmacy practice and clinical decision-making, aligning with the commitment to fostering an inclusive pharmacy environment.

"The recently approved modifications to the patient profiles practice direction mark a signifi-

cant step towards enhancing inclusivity and better meeting the needs of gender-diverse patients," said Jane Lamont, president of CPhM, in an announcement. "The commitment to inclusivity within our respective organizations has resulted in modifications prioritizing the healthcare needs of the 2SLGBTQ+ community."

As these changes take effect, CPhM continues to explore future professional development opportunities and maintain its dedication to collaboration, education, and support for pharmacy professionals, ensuring the delivery of inclusive care. The addition of a terminology appendix in the practice direction helps support pharmacy professionals in delivering inclusive care to gender-diverse patients.

## NAPRA sets out requirements for language proficiency

**THE NATIONAL ASSOCIATION OF PHARMACY REGULATORY AUTHORITIES** (NAPRA) has published "NAPRA Language Proficiency Requirement Policy" to ensure that pharmacy technician and pharmacist applicants possess the necessary language proficiency to comprehend and communicate for safe, effective and ethical practice in either English or French, depending on their practice location.

The document outlines recommendations for a language proficiency requirement across the country, based on the results of a rigorous scientific process. Still NAPRA notes that

regulatory authorities also need to consider the laws and regulations around language proficiency in their province or territory.

Pharmacy regulators across the country are implementing the recommendations in a coordinated effort. Alberta College of Pharmacy (ACP) says that as of September 1, 2024, internationally educated pharmacy technicians and pharmacists will be required to take a language proficiency test and achieve a minimum score in each of the categories for reading, writing, speaking and listening in a single testing session.

## College launches online program for assistants to become techs

**EASTERN COLLEGE IN HALIFAX HAS** introduced an online program tailored to pharmacy assistants seeking to elevate their careers in the field of pharmacy practice. The Pharmacy Technician Bridging program offers a unique pathway for students to acquire hands-on skills essential for employment as registered pharmacy technicians in both community and hospital pharmacies. Designed to accommodate busy schedules, the program allows students to study remotely while receiving practical training in their workplace.

Through a comprehensive curriculum, students will gain proficiency in various technical and clerical aspects of the pharmacy technician profession, including inventory maintenance, record-keeping, pharmacy

equipment operation, compounding and prescription preparation. Upon successful completion of the program, graduates will have fulfilled the academic requirements necessary to pursue licensure as a pharmacy technician. However, additional steps, such as passing exams through the Pharmacy Examining Board of Canada (PEBC), undertaking a postgrad structured practical experience program, and clearing a provincial jurisprudence exam, are required for licensure.

Calling it a "much anticipated program," the Prince Edward Island College of Pharmacy said the Bridging program would be accepted for registration as a pharmacy technician in P.E.I. The first class began on March 25.

## PANS launches kindness campaign to support pharmacy professionals

**IN RESPONSE TO A RECENT PHARMACY** survey showing that more than 50% of pharmacy professionals experienced aggressive behaviour from patients and the public over the past year, the Pharmacy Association of Nova Scotia (PANS) has launched the KindRx campaign.

The campaign includes a Zero-Tolerance Policy for Harassment and a Patient Code of Conduct, as well as posters and stickers to remind patients that “kindness is contagious.” Materials have been sent to pharmacies across the province to display.

“I understand that frustration from patients who are concerned that they are not going to be able to get the help they need, but they need to recognize that we are doing our best,” said pharmacy technician and educator Robyn Oickle in the campaign media release. “A little kindness goes a long way, especially where I work in a very busy community pharmacy.”

“We’re humankind, not humanmean,” said PANS CEO Allison Bodnar. She called the behaviour “unacceptable,” adding that “we need to take a stand against this behaviour. We know a lot has changed over the past few years—prescriptions are not immediately available, patients need to make appointments for pharmacy services, and drug shortages have caused headaches across the healthcare system. Change can be hard, but this is no excuse for harassing the very healthcare providers who are trying to help.”

The campaign graphics can be viewed at KindRx | Pharmacy Association of Nova Scotia ([pans.ns.ca](http://pans.ns.ca)).

## PEBC celebrates 60<sup>th</sup> anniversary

**THE PHARMACY EXAMINING BOARD OF CANADA (PEBC)** is proudly commemorating its 60<sup>th</sup> year of delivering leadership in competency assessment for the pharmacy profession. Today, its mandate—to assess the qualifications and competence of candidates for licensing by provincial pharmacy regulatory authorities—is more important than ever with expanded scopes of practice for pharmacy professionals.

At the inaugural meeting of the PEBC board in 1964, a written exam with compounding and dispensing was introduced.

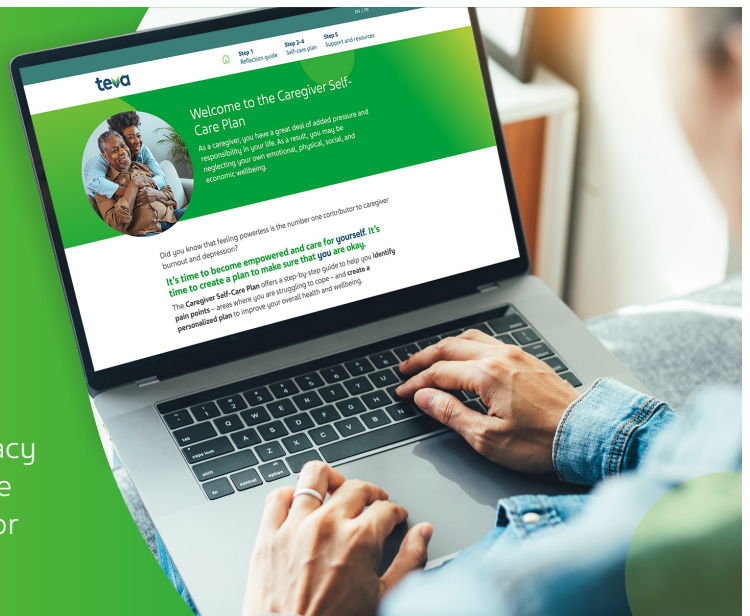
Fast-forward to 2006, when the Pharmacy Technician Steering Committee for the National Pilot Entry-to-Practice Examination for the Assessment and Certification of the Competence of Pharmacy Technicians was formed to oversee the development and research of a certification process for pharmacy technicians. In 2009, the pilot and first administration of the Pharmacy Technician Qualifying Examination (Part I and II) was initiated for the purposes of licensure.

In 2010, the Pharmacy Technician Qualifying Examination (Part I and II) was administered in Ontario, Alberta and British Columbia. Three positions to represent technicians were added to the PEBC board. In 2017, PEBC launched its first Computer-based Test with the Pharmacist Qualifying Examination – Part I (MCQ), fulfilling a key objective of incorporating technology into PEBC’s certification processes. Most recently, in 2023, PEBC administered its first-time use of Linear-on-the-Fly (LOFT) to enhance exam security by delivering unique exam forms to each candidate.



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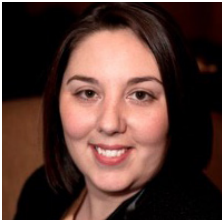
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## PTSA reps explore solutions to workforce challenges

**GIVEN THE GROWING SHORTAGE OF** pharmacy technicians and pharmacists,



Teresa Hennessey, administrator, and Carlynn Bullock, president, of the Pharmacy Technician Society of Alberta (PTSA), welcomed the opportunity to

attend a Human Resource Forum hosted by the Alberta College of Pharmacy (ACP).

Hennessey provided some statistics on the current state of the workforce in a PTSA blog:

- About 55% of Alberta pharmacy technicians practice in institutional settings;
- Less than 30% of community pharmacy teams include a pharmacy technician;
- About 13% of community pharmacy teams include more than one pharmacy technician;
- The number of pharmacy technicians has been increasing but at a very slow pace;
- It is estimated that over 50% of individuals working in a pharmacy are unregulated.

Facilitator Don Winn asked participants to suggest improvements in three areas: attracting and building workforce; hiring and retaining workforce; and building capacity with a static workforce.

“We delved into discussions focused on innovative strategies to attract and recruit new talent into the pharmacy professions, exploring issues like job satisfaction, work-life balance, and professional development opportunities, as well as optimizing workflows and leveraging technology to enhance efficiency in pharmacy practices,” said Hennessey. “It was quickly apparent that there are similarities between issues affecting pharmacy technicians and pharmacists. Despite some alignment, the pharmacy technician profession faces unique challenges too, and solutions for both professions are needed.”

The leading organizations, including PTSA, ACP, the Alberta Pharmacists Association (RxA) and University of Alberta are now tasked with deciding how to develop coalitions to prioritize and work on achieving the proposed solutions, said Hennessey.

## PAS welcomes pharmacy technicians as members

**AS OF MAY 1, 2024, THE PHARMACY** Association of Saskatchewan (PAS) has invited pharmacy technicians to join as members.

PAS offers free webinars, discounts on Annual PAS Conference fees, opportunities to sit on committees and the PAS board of directors, access to timely information through a variety of platforms, ongoing advocacy with decision-makers, and much more. In 2024, the pharmacy technician membership fee will be discounted to \$100 from the regular rate of \$150.

The 2024 Annual PAS Conference will take place September 14-15 in Regina. Registration is now open at PAS Conference 2024—Pharmacy Association of Saskatchewan ([skpharmacists.ca](http://skpharmacists.ca)).

The decision to add pharmacy technicians as a new class of members had been made some time ago (see “PAS to integrate pharmacy technicians as members,” Canadian Healthcare Network), but the Association needed to work through the terms of membership and other “mechanical questions,” said CEO Michael Fougere in 2023.

By integrating pharmacy technicians, PAS is following in the path of other advocacy associations such as the Pharmacy Association of Nova Scotia, the Ontario Pharmacists Association, and the PEI Pharmacists Association. Pharmacy technicians in Alberta and British Columbia have their own advocacy association.

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## Techs ideally suited to conduct BPMHs

By Celia L. Culley, BSP, ACPR, PharmD

**AS PHARMACY TECHNICIANS CONTINUE TO EXPAND THEIR ROLE**, one well-established clinical skill they are ideally suited to perform is Best Possible Medication History (BPMH) interviews and documentation.

A BPMH is a complete and accurate list of a patient's medications, based on information gathered from multiple sources. These include, but are not limited to, community pharmacy dispensing databases (e.g., PharmaNet in B.C.), a patient/caregiver interview, hospital and/or clinic records, communicating with community pharmacies, and medication administration records (MARs) at long-term-care homes.

A BPMH is the first step—and cornerstone—of the medication reconciliation (Med Rec) process, the latter of which is completed by pharmacists and prescribers. BPMHs and Med Rec are performed at transitions in care (such as admission to and discharge from hospital) and in a variety of settings (e.g., emergency room, hospital wards, pre-surgical clinics, ambulatory clinics, primary care clinics, and long-term-care homes). A BPMH may also be performed at a community pharmacy prior to a pharmacist completing a medication review.

Once hired into a BPMH pharmacy technician role, training varies widely but, in general, includes learning modules specific to BPMH—how to conduct an interview, as well as how to document accurately. These modules can be locally made resources or administered through the Institute for Safe Medication Practices (ISMP) Canada. ISMP Canada offers one-day virtual facilitated workshops on BPMH that provide hands-on practice with case scenarios on how to conduct in-person and virtual medication history interviews in a variety of healthcare settings. They also recently published an updated interview guide that walks healthcare providers through the process (see “Training Resources” sidebar).

Following didactic sessions or online learning modules, pharmacy technicians generally hone their skills by shadowing experienced team members, then conducting BPMHs with coaching and feedback, and finally, completing competency checklists and conducting independent interviews with support available.



Studies show pharmacy technicians are effective at conducting BPMHs. In a project at Toronto-based Women's College Hospital, the role of RPhTs conducting BPMHs in the pre-admission clinic of the Hospital's surgical services department was assessed.<sup>1</sup> The study concluded that “RPhTs are in a unique position to perform BPMHs because they are knowledgeable about medication names, formulations, strengths, and dosing schedules.”

Another study compared pharmacy technicians and pharmacists conducting BPMHs in the emergency department in Moncton, N.B.<sup>2</sup> The results showed that “trained pharmacy technicians were able to obtain a BPMH with as much accuracy and completeness as pharmacists.”

In 2022, a pilot project at Mount Sinai Hospital<sup>3</sup> in Toronto aimed to determine the feasibility and value of a clinical pharmacy technician based on an internal medicine acute care ward. Most of their time was spent completing BPMHs. The majority of the ward's pharmacists were strongly satisfied or satisfied with the completion and quality of BPMHs. The pharmacy technician expressed job satisfaction while working in the clinical setting.

Indeed, experience of BPMH pharmacy technicians at Royal Jubilee Hospital, Island Health, in Victoria, B.C., corroborate the find-

### Training resources

- Education - ISMP Canada
- [www.ismpcanada.ca/BPMHInterviewGuide](http://www.ismpcanada.ca/BPMHInterviewGuide)

ing of improved job satisfaction. At Island Health in B.C., BPMH pharmacy technician positions are funded at all hospitals. “[Conducting BPMHs] is an extremely rewarding position, says Jennifer Townsend, BPMH pharmacy technician. “It’s an opportunity to put everything after position you learn in your pharmacy technician program into practice. It exposed me to an area of pharmacy I didn’t know about; had I known about this extension of pharmacy practice sooner, I would have been in this role years ago.”

“Having worked in a variety of settings, I most enjoy this position,” agrees Rose Barley, BPMH pharmacy technician. “I get to use all my knowledge working towards my full scope.” They both agree that the BPMH pharmacy technician position is an opportunity to work in a variety of areas in the hospital and is a great fit for technicians who enjoy working directly with patients and the interdisciplinary care team. “I consistently get feedback from doctors that they are relieved when they see ‘RPhT’ next to a documented BPMH because they know it’s going to be accurate,” adds Townsend. “It reaffirms our positive impact on improving medication safety and supporting patient care.”

Increasingly across the country, pharmacy technicians are being recognized for their valuable contribution to front-line patient care in a clinical role conducting BPMH.

*Dr. Celia L. Culley is the Pharmacy Clinical Coordinator at Royal Jubilee Hospital, Island Health, Victoria, B.C. She thanks Jennifer Townsend, RPhT and Rose Barley, RPhT, for their contributions to this article.*

### References

1. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8042196/>
2. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2999367/>
3. Development and Implementation of a Unit-Based Pharmacy Technician Practice Model: A Pilot Project at Mount Sinai Hospital | TSpace Repository ([utoronto.ca](http://utoronto.ca))