



New Brunswick College of Pharmacists  
Ordre des pharmaciens du Nouveau-Brunswick

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# Pharmacy Technician Structured Practical Evaluation Manual

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Pharmacy Technician Student: \_\_\_\_\_

Preceptor Name(s): \_\_\_\_\_  
\_\_\_\_\_

Date started: \_\_\_\_\_ Date completed: \_\_\_\_\_

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This manual is adapted from the work of:

- Nova Scotia College of Pharmacists
- British Columbia College of Pharmacists
- Alberta College of Pharmacists

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## ACRONYMS AND WEBSITES

CDSA	Controlled Drugs and Substances Act	<a href="http://laws.justice.gc.ca/en/C-38.8/index.html">laws.justice.gc.ca/en/C-38.8/index.html</a>
CPhA	Canadian Pharmacists Association	<a href="http://www.pharmacists.ca">www.pharmacists.ca</a>
CPSNB	College of Physicians and Surgeons of New Brunswick	<a href="http://www.cpsnb.org">www.cpsnb.org</a>
CSHP	Canadian Society of Hospital Pharmacists	<a href="http://www.cshp.ca">www.cshp.ca</a>
F & D Act	Food and Drugs Act	<a href="http://www.hc-sc.gc.ca/fn-an/legislation/acts-lois/fda-lad/index_e.html">www.hc-sc.gc.ca/fn-an/legislation/acts-lois/fda-lad/index_e.html</a>
NABP	National Association of Boards of Pharmacy	<a href="http://www.nabp.net">www.nabp.net</a>
NAPRA	National Association of Pharmacy Regulatory Authorities	<a href="http://www.napra.org">www.napra.org</a>
NBCP	New Brunswick College of Pharmacists	<a href="http://www.nbpharmacists.ca">www.nbpharmacists.ca</a> <a href="http://www.pharmtech-nb.ca">www.pharmtech-nb.ca</a>
NBPDP	New Brunswick Prescription Drug Program	<a href="http://www.gnb.ca/0051/0212/index-e.asp">www.gnb.ca/0051/0212/index-e.asp</a>
NBPA	New Brunswick Pharmacists' Association	<a href="http://www.nbpharma.ca">www.nbpharma.ca</a>
PIPEDA	Personal Information Protection and Electronic Documents Act	<a href="http://www.privcom.gc.ca/legislation/02_06_01_e.asp">www.privcom.gc.ca/legislation/02_06_01_e.asp</a>
RIPPA	NB Bill 89 Right to Information and Protection of Privacy Act	<a href="http://www.gnb.ca/legis/bill/FILE/56/3/Bill-89-e.htm">www.gnb.ca/legis/bill/FILE/56/3/Bill-89-e.htm</a>
PHIPAA	NB Bill 9 Personal Health Information Privacy and Access Act	<a href="http://www.gnb.ca/legis/bill/file/56/4/bill-9-e.htm">www.gnb.ca/legis/bill/file/56/4/bill-9-e.htm</a>

## INTRODUCTION

The New Brunswick College of Pharmacists' (the College) mandate is to, *"Govern the practice of pharmacy for a healthier New Brunswick."* Registration and licensure is one way of assuring professionals are competent to provide safe and effective care to the public of New Brunswick.

As such, this manual provides the pharmacy technician student and the preceptor (pharmacy technician or pharmacist) a framework for assessing the competencies required at entry-to-practice as a pharmacy technician in New Brunswick. The assessment is conducted in a direct client-care practice.

Explanation, repetitive practice and constructive criticism allows learners to develop the required competency to practice. During the Structured Practical Evaluation (SPE), the learner is immersed in a practice setting. The SPE provides a transition between formal academic education and practice. This ensures students have the opportunity to apply knowledge, skills and attitudes acquired through academic curriculum to actual pharmacy practice.

The pharmacy technician student must perform his or her activities under preceptor or delegate supervision to ensure safe and effective practice. Preceptors should undertake continuing professional development that prepares them and their practice for effectively hosting learners.

Preceptors must consider the SPE is geared to a pharmacy technician student who has had minimal practical experience. Pharmacy technician students with previous experience may proceed faster but must still undergo assessment as described within this manual.

Preceptors are required to forward the final evaluation once the manual items have been reviewed, discussed with the student and documented. The preceptor's signed statement, indicating successful completion of the training program, is necessary for the College to consider this component of the application for registration and licensure complete.

One of the requirements for registration and licensure as a pharmacy technician with the New Brunswick College of Pharmacists is defined in Regulation 12.19(3)(c):

*"Successful completion of a Structured Practical Evaluation (SPE) as part of the six-week postgraduate training period, one component of which requires the pharmacy technician student to accurately apply an independent double check to 500 prescription/orders/products for final release with 100% accuracy, an activity which allows for a maximum of 50 items per day."*

The pharmacy technician student must be familiar with the activities that fall within the licensed pharmacy technician's scope of practice in New Brunswick and are based on competencies set forth in the National Association of Pharmacy Regulatory Authorities' (NAPRA) [\*Professional Competencies for Canadian Pharmacy Technicians at Entry to Practice \(2014\)\*](#). The pharmacy technician student is required to demonstrate competence to the satisfaction of the preceptor, regardless of the practice setting where completion of the assessment is taking place.

We trust the training period will be educational, enjoyable and contribute to quality patient care by the future professional.

## **OBJECTIVES OF THE STRUCTURED PRACTICAL EVALUATION**

The primary goal of the Structured Practical Evaluation (SPE) is to establish the competency of the registrant so the public can be assured of effective and safe practice. Formal educational programs coupled with experiential education provide knowledge, skills and attitudes necessary for competent practice. The SPE learning objectives are based on general pharmacy practice and the nine [overarching practice concepts](#) in the NAPRA Professional Competencies for Canadian Pharmacy technicians at Entry to Practice.

By the conclusion of the SPE, students will:

1. Maintain the client medication profile, evaluate therapy (e.g., duplication, adherence), evaluate new prescriptions, and resolve potential and existing problems.
2. Accurately dispense medication according to the prescription.
3. Assist clients who need to use medical devices.
4. Communicate with clients and/or health professionals regarding drug and health information.
5. Comply with all legal requirements associated with the distribution of drugs and the operation of a pharmacy.
6. Provide information and/or referral services in emergencies and upon request.
7. Develop and exercise appropriate professional judgment.
8. Be knowledgeable of, and maintain, ethical and professional standards of practice.

Completing activities described in this manual will enable the student to develop knowledge, skills and attitudes necessary for the provision of quality pharmacy care to clients.

## STRUCTURED PRACTICAL EVALUATION DOCUMENTATION

The student must submit the following to the College no later than two weeks after completing the Structured Practical Evaluation (SPE):

Item	Preceptor Sign off Required
Performance assessment (Pre, Mid-point & End) form	Yes
Personal learning plan	Yes
Appendix 1 – Student evaluation of the training period and preceptor	No
Appendix 2 - Preceptor evaluation	Yes
Appendix 3 – Statement of completion of postgraduate student training	Yes
Appendix 4 – Workbook: Documentation of performance	Yes
Evidence of Time Service – Complete online through online College profile	Yes

*Note: Appendix 5 – Daily tracking log of your 500 checks: do not send with other documents; retain for your records. It may be requested by the College at a later time.*

**It is ultimately the student's responsibility to ensure the required documentation is submitted to the College via:**

- **Delivered in person or sent by mail to:** 686 St. George Blvd., Suite 200, Moncton, NB, E1E 2C6
- **Fax:** 506-857-8838
- **E-mail:** [registrations@nbpharmacists.ca](mailto:registrations@nbpharmacists.ca)

## REQUIREMENTS

### Student requirements

Students must review [Section 12.19 of the Regulations to the Pharmacy Act](#). These Regulations set out legal requirements for students engaging in learning in practice environments.

**Prior to starting** the New Brunswick College of Pharmacists Structured Practical Evaluation (SPE), the student must:

- A. Be registered with the New Brunswick College of Pharmacists as a pharmacy technician student.
- B. Have graduated from a CCAPP-accredited pharmacy technician education program.
- C. Submit an Apprenticeship Agreement form (online) **and** receive confirmation the preceptor has been approved.

**During** the SPE, the student must:

- D. Be supervised throughout the training period by a pharmacist or pharmacy technician. The pharmacist or pharmacy technician will ensure that any pharmacy technician student engaged in practice experience has the level of supervision that, in the professional judgment of the preceptor, is required to ensure safe and effective client care given the pharmacy technician student's knowledge, skills and attitude. The student may have a maximum of two preceptors for the training period.
- E. Fulfil the time service requirement within a normal work week (minimum of 15 hours and a maximum of 40 hours per week). A **maximum of six months** is allowed to complete the SPE program requirements.

**Upon concluding** the SPE, the student must:

- F. Complete, and submit, all required documentation.
  - A. Skills Assessment (Pre, Mid-point, End) documentation form
  - B. Personal Learning Plan
  - C. Appendix 1
  - D. Appendix 2
  - E. Appendix 3
  - F. Appendix 4\*

**\*NOTE: Documentation within Appendix 4 is assessed in detail by the College and deemed to either pass or fail. Candidates must ensure their documentation includes content that:**

- Is complete (addresses **every** item question or prompt within the activity).
- Displays evidence that the candidate has consulted the appropriate references that guide professionals in their practice.
- Indicates the candidate is able to identify situations in practice that are governed by legislation, policy and guidance of the College.
- Demonstrates application of legislation and guidance to these situations.
- Is legible, coherent and organized.

- G. Plan and engage in remediation if either the preceptor or the College assessment of the candidate's performance or documentation of learning is below expectations (i.e., failing assessment). Remediation may take the form of further time in practice and or

revising the documentation of achievement of the expected learning. Candidate's should submit their manual well in advance of deadlines in case remediation is required to achieve a passing assessment. See "College requirements" on the next page for more information pertaining to the assessment of the manual.

## Preceptor requirements

[Regulations 12.23\(1\)](#) and [\(2\)](#) contain the requirements for a member wishing to serve as a preceptor. Students and preceptors must review this regulation.

**In addition, the preceptor (and any delegate) shall:**

- Have a minimum of three months experience at the practice site to provide the student adequate familiarity with systems and clients.
- Provide close supervision at the practice site where the student is undertaking training activities.

## College Requirements

**The College will:**

- Provide an electronic version of the SPE manual to the candidate.
- Review Apprenticeship Agreements to ensure the preceptor is qualified for the role.
- Respond to questions related to the manual.
- Receive completed manuals.
- Assess completed manuals for submission quality within a standard time frame for the College. Generally, this time frame is two weeks (at time of publishing).
- Award a **pass or fail** grade and communicate the grade to the candidate.
- Review a maximum of three attempts to successfully complete the SPE manual.
- Determine remediation requirements for the student in cases where the third attempt does not result in a passing grade.
- Consider manuals deemed a 'pass' to be valid for up to three years to coincide with the three-year validity of CCAPP-accredited pharmacy technician education (as per Regulation 12.21).

**Activity 3.4.2 has a one-year validity. This activity must be successfully completed within a 12-month period prior to licensure.**

## Practice Site Requirements

**Within the Province of New Brunswick, a training period after graduation must be completed so the student becomes familiar with the laws, regulations and practice requirements of the province.**

**The practice site must:**

- Be a community or institutional pharmacy providing direct client care where dispensing, compounding and product preparation occurs.
- Have sufficient staff and resources to provide appropriate educational opportunities and interaction between the preceptor and student to allow for completion of the required activities.
- Comply with the standards and other requirements as specified by the College.

- Have had acceptable inspection reports.
- Have no outstanding complaints on record.
- Have no restrictions on the pharmacy certificate of operation that would impact the ability to provide a good learning environment.

## LEGISLATION - THE NEW BRUNSWICK COLLEGE OF PHARMACISTS

The student must be familiar with the provisions of the New Brunswick Pharmacy Act, 2014 (Act) and the Regulations of the New Brunswick College of Pharmacists (Regulations), and the various federal and provincial Acts as listed. In reviewing this legislation, particular attention should be given to the following (which can be found on the College website):

Activity	Date Complete
<b>A. Purposes</b>	
<b>B. Membership</b>	
- See Act Part VIII and Regulations Part XI and XII	
<b>C. Meetings (see Act Part VII and Regulations Part IV and IX)</b>	
- Annual	
- Special	
<b>D. Inspections conducted by the College</b>	
<b>E. Council (see Act Part IV and Regulations Part II and III)</b>	
- Districts	
- Elections	
- Terms of Office	
- Officers	
- Duties of the President	
<b>F. Code of Ethics</b>	
<b>G. NAPRA Model Standards of Practice for Canadian Pharmacy Technicians</b>	
<b>H. Continuing Education</b>	
<b>I. National Drug Schedules (see NAPRA website <a href="http://www.NAPRA.org">www.NAPRA.org</a>)</b>	
<b>J. Personal Information and Electronic Documents Act</b>	
<b>K. Right to Information and Protection of Privacy Act</b>	
<b>L. Personal Health Information Privacy and Access Act</b>	
<b>M. Food and Drugs Act and Regulations (Federal)</b>	
<b>N. Controlled Drugs and Substances Act (Federal)</b>	

## ORIENTATION TO THE PRACTICE SITE

The following is a guideline for the student's orientation to the pharmacy at the start of the training period:

### Community Pharmacy

<b>A. Orientation to the pharmacy</b>		<b>Date complete</b>
1	Product areas in the front store	
2	Security devices	
3	Dispensary/counselling area: <ul style="list-style-type: none"> <li>• stock room</li> <li>• equipment and supplies</li> <li>• speciality areas</li> </ul>	
4	Staff roles and responsibilities	
<b>B. Pharmacy policies and procedures</b>		
1	Customer relations	
2	Confidentiality and <i>PIPEDA, PHIPA and RPPA</i>	
3	Dress code	
4	Telephone procedures	
5	Relations with other health-care providers	
6	Handling of damaged stock	
7	Medication error & discrepancy documentation	
8	Intervention documentation	
<b>C. Other information you have learned about:</b>		<b>Date complete</b>
<b>D. Dispensary layout</b>		
The student should be made aware of the physical layout of the dispensary. The student should be encouraged to ask questions as to the logic and necessity of the physical workings of the dispensary. The preceptor should review the following with the student:		
<b>Dispensing area</b>		<b>Date complete</b>
1	Drugs (solid dose, liquid dose, bulk supplies, ear, nose and throat, rectal and vaginal, injectable, topical products)	
2	Drug distribution system (e.g. Company or Alphabetical)	
3	Distilled/demineralized water	
4	Library and reference material	
5	Vials (childproof and plain), prescription labels, auxiliary labels	
6	Equipment for weighing and measuring	
7	Syringes and needles	
8	Prescription files and storage requirements	
9	Controlled/narcotic drug storage	

10	Confidential area for client counselling	
11	Abuse potential products that are sold from the dispensary	
12	Unauthorized access	
13	Storage of prepared prescriptions	
14	Distribution of prepared prescriptions	
15	Client information leaflets	
16	Secure storage areas	
17	Refrigerated products	
18	Schedule 2 and 3 medications	
19	Unscheduled products	
<b>E. Library &amp; Reference sources</b>		
The student should be made aware of the library resources (hard copy & electronic) in the pharmacy:		
1	C.P.S. - Use and correlation of the various sections (hard copy, electronic)	
2	Internet (World Wide Web) access and e-mail	
3	Client counselling handbooks	
4	Drug interaction and toxicology handbooks	
5	Manufacturer's catalogues	
6	Dosage Information (e.g. paediatric, geriatric)	
7	The NBCP guidance documents and website – Information therein and use	
8	Site-specific policy and procedure manual	
9	<i>Confidentiality and PIPEDA, RIPPA and PHIPAA</i> documentation	
10	Harmonized Drug Schedules with specific references to Schedules 2 and 3 and products contained therein	
<b>F. Other pharmacy areas</b>		<b>Date complete</b>
1	Self-medication products	
2	Home care supplies and devices (if applicable)	
3	Client information area	
4	Self-testing products, (e.g. monitors)	
5	Methadone distribution (if service provided)	
6	Sterile compounding (if service provided)	
7	Central fill (if service provided)	
<b>G. Management</b>		
<b>Activity</b>		<b>Date complete</b>
Security procedures. Opening and closing, loss prevention, procedures to follow in the event of hold up, location of alarm buttons, power failure policies, fire protection, computer(s) backup policy, lock and leave procedures (if applicable).		
Inventory control, both manual and computerized techniques. Criteria for decision making when purchasing stock. Records kept with respect		

to narcotic and controlled drugs.	
Advertising and promotion policies as they relate to NB College of Pharmacists Regulation 19 on advertising.	
The pharmacy's policy and procedure manual.	
Manufacturer's representatives and sales agents can provide useful information on the latest products and medications available. However, they should schedule appointments with the pharmacist and should not be allowed into the dispensary for reasons of client confidentiality.	
Privacy concerns and procedures in place (for new employees, for existing employees, for trustees) at the practice site.	

**Preceptor acknowledgement:**

I confirm that \_\_\_\_\_ is knowledgeable of the items listed above.  
*Pharmacy Technician Student*

\_\_\_\_\_  
*Preceptor signature*

\_\_\_\_\_  
*Preceptor name (print)*

## Hospital Pharmacy

<b>A. Orientation to the pharmacy</b>		<b>Date complete</b>
1	Administration area	
2	Drug storage areas in pharmacy and institution	
3	Entrances and exits	
4	Security devices	
5	Dispensary/counselling area: <ul style="list-style-type: none"> <li>• stock room</li> <li>• equipment and supplies</li> <li>• speciality areas</li> </ul>	
6	Staff roles and responsibilities	
<b>C. Departmental policies and procedures</b>		
1	Pharmacy & therapeutics committee	
2	Formulary system	
3	Dress code	
4	Telephone procedures	
5	Relations with other health-care providers	
6	<i>Confidentiality and PIPEDA, RPPA and PHIPAA</i> documentation	
7	Ward stock delivery	
8	Pharmacy opening and closing	
9	Provision of pharmaceutical care	
10	Compounding and repackaging	
11	Medication order processing	
12	Handling of damaged stock	
13	Medication distribution	
14	Sterile compounding	
15	On call (after hours) services	
16	Medication error and discrepancy documentation	
17	Intervention documentation	
18	Collaborative practice agreements	
<b>Other information:</b>		

<b>D. Pharmacy layout</b>		
<p>The student should be made aware of all the physical necessities of the pharmacy and where products and equipment are located. The student should be encouraged to ask questions as to the logic and necessity of the physical workings of the pharmacy. The preceptor should emphasize the following points:</p>		
<b>Dispensing area</b>		<b>Date complete</b>
1	Drugs (solid dose, liquid dose, bulk supplies, ear, nose and throat, rectal and vaginal, injectable, topical products).	
2	Drug stock organization (e.g. company, AHFS or alphabetical).	
3	Library and reading area.	
4	Drug packaging.	
5	Equipment for weighing and measuring.	
6	Syringes and needles.	
7	Prescription files and storage requirements.	
8	Controlled/narcotic drug storage.	
9	Confidential area for client counselling.	
10	Abuse potential products that are sold from the dispensary.	
11	Unauthorized access.	
12	Storage of prepared prescriptions.	
13	Distribution of prepared prescriptions.	
14	Client information leaflets.	
15	Secure storage areas.	
16	Refrigerated products.	
17	Schedule 2 and 3 medications.	
18	Unscheduled products.	
<b>Other areas covered:</b>		

<b>E. Library &amp; Reference Sources</b>		<b>Date Complete</b>
The student should be made aware of the library resources (hard copy & electronic) in the pharmacy with emphasis on:		
1	C.P.S. - Use and Correlation of the Various Sections (hard copy, electronic).	
2	Internet (World Wide Web) access and e-mail.	
3	Client counselling handbooks.	
4	Drug Interaction and toxicology handbooks.	
5	Manufacturer's catalogues.	
6	Dosage Information (e.g. paediatric, geriatric).	
7	NBCP guidance documents and website - Information and Use.	
8	Site specific Policy and Procedure Manual.	
9	Confidentiality and privacy.	
10	Harmonized Drug Schedules with specific references to Schedules 2 and 3 and products contained therein.	
<b>F. Management</b>		
1. Awareness of:		<b>Date Complete</b>
1	The role played by the Department of Pharmacy in the provision of health care services in the hospital.	
2	Position of the Department in the organizational chart of the institution.	
3	The role and responsibility of the governing Regional Health Authority (RHA).	
4	Satellite and decentralized service.	
2. Knowledge of:		
1	The functions of the pharmacy and therapeutics committee.	
2	The purpose of the hospital formulary.	
3	Procedure for handling non-formulary requests.	
4	Therapeutic substitutions.	
3. Familiarity with:		
1	The policy and procedures manual of the Pharmacy Department.	
2	The benefits of having written policies and procedures.	
3	The concept of quality assurance and the quality assurance program of the Department.	
4. Understanding of the basic differences among drug distribution systems:		
1	Traditional.	
2	Total ward stock.	

3	Unit-dose - centralized/decentralized/mobile.	
4	Automated dispensing systems.	
5. Understanding of the existing drug distribution system:		
1	Knowledge of drug distribution process from the time the order is written until the medication is administered to the client and charged to the cost centre.	
6. Familiarity with:		<b>Date Complete</b>
1	Rationale for ward stock drugs.	
2	Process for addition/deletion to ward stock.	
3	Ward stock check.	
4	Role and responsibility of pharmacy assistants and technicians in the distribution system.	
7. Knowledge of the purpose of workload measurement and the application of information obtained.		
8. Introduction to principles of personnel management.		
1	Department policy and procedures	
2	Communication	
3	Supervision of employees	
4	Personnel evaluation	
5	Collective bargaining process	
9. The process involved with hospital accreditation.		
1	Client care teams	
10. Hospital Procedures in case of emergency.		
11. Sterile Products		
1	Knowledge of established policies and procedures.	
2	Knowledge of:	
	a) Required product research and calculations.	
	b) Aseptic technique.	
	c) Record keeping procedures.	
	d) Appropriate disposal of materials.	
3	Familiarity with use and maintenance of equipment.	
4	Role and responsibilities of the pharmacy technician and pharmacist.	

**Preceptor acknowledgement:**

I confirm that \_\_\_\_\_ is knowledgeable of the items listed above.  
*Pharmacy Technician Student*

\_\_\_\_\_  
*Preceptor signature*

\_\_\_\_\_  
*Preceptor name (print)*

## DISPENSING PROCESS

The dispensing procedure may appear to be relatively simple. What is not immediately apparent are the dozens of decisions to be made during the process.

The preceptor must impress upon the student that the prescription be safe and effective when it is released to the client, and that the preceptor and student bear the responsibility for the accuracy of the finished prescription. The client is vulnerable in this situation and accurate dispensing is fundamental to all the other value-added professional services provided to the client. The dispensing procedure may be expressed in a series of steps as follows:

1. Checking for Completeness of Information
  - Prescription must be recent and all statutory information present. A prescription is valid for one year and may not be refilled after that time.
  - Find out client's age, weight, allergies and type of reaction, any self-medication, dietary restrictions, prior and present medical problems and enter the information into the client's record.
  - Determine the method of delivery to client (waiting, call later, delivery, give to client's agent, sent to nursing unit) and provide an estimated waiting time.
  - Determine any third-party coverage and subscriber's number.
  - What to do if the order is not legally complete.
  - The preceptor should impress on the student that the onus is on the pharmacist to determine that a prescription is legitimate.
2. Checking the Prescriber information
  - Is the prescriber licensed to practice in any province in Canada?
  - In hospital practice, is the prescriber a resident or intern with prescribing privileges?
  - Is the prescription within their scope of practice (applicable to dentists, veterinarians, optometrists, nurse practitioners, pharmacists)?
  - What takes place if the prescriber recently moved from the province or is now deceased?
3. Interpreting the Prescription (Be aware of look-alike, sound-alike drugs)
  - Interpreting handwriting and abbreviations; understanding what the prescriber intended.
  - Be capable of recognizing errors or omissions and know what action to take.
  - Check for safe and appropriate dosage and mode of administration.
  - Be prepared to communicate with the prescriber and/or client.
4. Check Client Records
  - Contraindications (allergy, contraindicated disease state or medication) and any other factors affecting drug use/abuse.

## 5. Compounding

- Know the difference between compounding and manufacturing (Review the compounding versus manufacturing guidelines according to Health Canada. This document is available on the NBCP website, under “Legislation” in the drop-down menu.)
- Recognize when a prescription needs to be compounded, when it is commercially available and advise client if more time is needed in the case of a compound.

## 6. Selecting Container and Labelling

- Select appropriate container bearing in mind the child resistant and light-resistant container regulations, physiochemical properties of the medication, the convenience to the client and the aesthetic appearance of the finished product.
- Selection of all appropriate auxiliary labels including storage and stability of the medication.
- Prescription medication container must be labelled with the generic name for all single-entity products and with the trade name for multi-ingredient products.
- Compliance (monitored dose) packaging standards are to be reviewed.

## 7. Selecting the Medication and Transferring to Container

- Selecting correct drug product from pharmacy's inventory.
- Ensure drug has not expired or deteriorated.
- Know what to do when drug is not stocked or there is not enough of the drug to completely fill the prescription order.
- Note product name, manufacturer, strength, dosage form and quantity dispensed on the prescription order and client's medication record.
- Know the proper procedure for "Do Not Substitute" prescriptions.
- Check finished prescription for accuracy.
- Return the stock bottle to the dispensary shelf and note if it needs to be re-ordered.

## 8. Releasing the Medication to the Client

- Ensure appropriate counselling is provided when required. Document any refusal for counselling.

## 9. Refilling a Prescription

- Be knowledgeable of the legal requirements for refill and part-fill prescriptions, (e.g. narcotics).
- Understand acceptable refill records (hard copy, logs, etc.)
- Know what steps to take to obtain authorization to renew a prescription including procedures for physicians who will not accept verbal or fax renewal requests from a pharmacy.
- Check for over and under-utilization and notify the pharmacist if utilization is not appropriate.
- Know how to record refill information on the prescription order and the client's record.
- Know how to request a transfer of a prescription from another pharmacy or how to obtain authorization from a prescriber and fill it as a new order.
- Know how to transfer a prescription to another pharmacy.

## 10. Medication Incidents

- A pharmacy technician must know how to handle a medication error and assist the pharmacist in correcting the problem immediately. (See document: NBCP Practice Directive: Mandatory Medication Incident Reporting on the College website.)

## 11. Stale Dating of Prescriptions

- Under federal and provincial legislation, there is no mention of stale dating prescriptions, except for the targeted substances. Stale date refers to a date when a prescription could not be honoured due to the passage of time from when it was originally ordered. Under the regulations for the targeted substances, a prescription for a product covered under the regulations cannot be filled or refilled one year after the date on the original prescription.
- NBCP Regulation (17.2) prohibits filling or refilling a prescription more than one year after the date of issue.

## 12. Prescription Records

- Prescription records are required to be kept a minimum of two years from the last date of refill if written on paper and for 15 years written or electronically thereafter. Check with the preceptor or pharmacy manager to discuss the pharmacy's policy.

## 13. Drug Schedules

Schedule 1 drugs require a prescription for sale and are provided to the public by the pharmacist following the diagnosis and professional intervention of a practitioner. The sale is controlled in a regulated environment as defined by provincial pharmacy legislation.

Schedule 2 drugs, while less strictly regulated, do require professional intervention from the pharmacist at the point of sale and possibly a referral to a practitioner. While a prescription is not required, the drugs are available only from the pharmacist and must be retained within an area of the pharmacy where there is no public access and no opportunity for client self-selection.

Schedule 3 drugs may present risks to certain populations in self-selection. Although available without a prescription, these drugs are to be sold from the self-selection area of the pharmacy which is immediately adjacent to the dispensary. The pharmacist is available, accessible and approachable to assist the client in making an appropriate self-medication selection.

Unscheduled drugs can be sold without professional supervision. Adequate information is available for the client to make a safe and effective choice and labelling is deemed sufficient to ensure the appropriate use of the drug. These drugs are not included in Schedules 1, 2 or 3 and may be sold from any retail outlet.

NAPRA has developed and published national standards of practise for pharmacists, corresponding to the level of professional intervention and advice necessary for the safe and

effective use of drugs by the Canadian consumer. The latest listing of the drug schedules is available through the NAPRA website a [www.napra.org](http://www.napra.org)

**Preceptor acknowledgement:**

I confirm that \_\_\_\_\_ is knowledgeable of the items listed above.  
*Pharmacy Technician Student*

\_\_\_\_\_  
*Preceptor signature*

\_\_\_\_\_  
*Preceptor name (print)*

## PERFORMANCE ASSESSMENT (PRE, MID-POINT, END)

Demonstration competency is accomplished through the completion of program activities developed for each of the nine competency categories within in the *Professional Competencies for Canadian Pharmacy Technicians at Entry to Practice*, developed by the National Association of Pharmacy Regulatory Authorities (NAPRA).

These nine competency categories include:

- |                                                   |                                       |                                               |
|---------------------------------------------------|---------------------------------------|-----------------------------------------------|
| 1. Ethical, legal and professional responsibility | 4. Practice setting                   | 7. Communication and education                |
| 2. Patient care                                   | 5. Health promotion                   | 8. Intra and inter-professional collaboration |
| 3. Product distribution                           | 6. Knowledge and research application | 9. Quality and safety                         |

### METHOD:

The student must complete the Self-Assessment (Pre, Mid-point, End) documentation form to assess their knowledge, skills and attitudes at these intervals. This form must be reviewed with the preceptor.

The initial and mid-point assessment is used as a tool to focus learning in a way that will provide the student with opportunities to demonstrate the competency required to successfully complete the SPE. **This assessment must be sent to the NBCP office with the other required submissions.**

The preceptor must complete their own assessment at mid-point and at end-point. **The preceptor must sign off on the Self-Assessment (Pre, Mid-point, End) documentation form and discuss it with the student.**

Regardless of the number of hours completed in the program, the student must demonstrate **each** required competency with confidence and a limited amount of support. If the preceptor does not feel the competencies have been demonstrated at an **acceptable level (3 or 4 on the scale)**, additional time and learning should be planned.

**Students must adequately demonstrate all competencies to complete the training period.**

Use the following rating scale as your guide:

Needs improvement	1	Can demonstrate, but only with support.
	2	Can demonstrate, but frequently requires support.
Acceptable	3	Can demonstrate with confidence but sometimes needs support.
	4	Can demonstrate, rarely needs support.
No opportunity	n/o	Unable to demonstrate due to lack of opportunity. Note: this rating is only to be used at Pre and Mid point. Every competency needs to be rated 1-4 on the End evaluation. N/O will not be accepted on the End evaluation, as all competencies need to be completed successfully.

## Performance Assessment Form

1.0	Ethical, legal and professional responsibility			
1.1	Practice within legal requirements	Pre	Mid	End
1.1.1	Apply legal requirements to practice, including federal and provincial/territorial legislation, policies, by-laws, and standards.			
1.1.2	Apply federal and provincial/territorial workplace, occupational health and safety and other related legislation to the practice setting.			
1.1.3	Apply federal and provincial/territorial privacy legislation to the collection, use, storage, disclosure and destruction of personal health information.			
1.2	Uphold ethical principles			
1.2.1	Apply the principles of professional codes of ethics.			
1.2.2	Apply ethical principles in the decision-making process.			
1.3	Manage actual and potential illegal, unethical, or unprofessional actions or situations in practice.			
1.3.1	Identify illegal, unethical or unprofessional actions or situations.			
1.3.2	Undertake appropriate intervention to address illegal, unethical or unprofessional actions or situations.			

1.4	Apply principles of professionalism.			
1.4.1	Apply principles of self-regulation.			
1.4.2	Accept responsibility and accountability for own actions and decisions.			
1.4.3	Seek guidance when uncertain about own knowledge, skills, abilities and scope of practice.			
1.4.4	Apply principles of continuing professional development, including assessing own learning needs and developing a plan to meet these needs.			
1.4.5	Maintain appropriate professional boundaries.			
1.4.6	Protect the privacy and confidentiality of the patient.			
1.4.7	Manage situations of actual and perceived conflict of interest.			
1.4.8	Describe the Canadian health-care system and the role of health professionals within it.			
1.5	Document activities of practice in compliance with federal and provincial/territorial legislation, standards and policies.			
1.5.1	Maintain complete, accurate and secure patient records.			
1.5.2	Identify situations in which documentation should and should not be shared with other health professionals or third parties.			
1.5.3	Select appropriate methods to share documentation within the circle of care and facilitate patient care.			

2.0	Patient care			
2.1	Develop a professional relationship with the patient.	Pre	Mid	End
2.1.1	Establish and maintain rapport by using effective communication skills.			
2.1.2	Demonstrate a caring, empathetic and professional attitude.			
2.1.3	Determine and acknowledge the patient's needs, values and desired level of care.			
2.1.4	Identify and respect the roles and responsibilities of each party in the relationship.			
2.2	Obtain patient information for pharmacist review.	Pre	Mid	End
2.2.1	Gather information from the patient using appropriate interview techniques, including active listening.			
2.2.2	Identify factors such as culture, language, demographic and physical characteristics that may impact the patient's care.			
2.2.3	Gather information from the patient's health records.			
2.2.4	Gather information required for medication reconciliation.			
2.2.5	Measure the patient's physical parameters such as height, weight and blood pressure.			
2.2.6	Organize, reconcile and record the patient's information.			
2.3	Obtain patient information for pharmacist review.	Pre	Mid	End
2.3.1	Identify patient needs related to issues such as dosage forms, special packaging or labelling.			

2.3.2	Assist the patient in making informed decisions regarding the selection and use of drug administration devices, monitoring devices and health aids.			
2.3.3	Gather monitoring parameter information for pharmacist review, including adherence information and lab-test results.			
2.3.4	Communicate relevant information and identified concerns to the pharmacist in a clear, concise and timely manner.			

3.0	Product distribution			
3.1	Receive, interpret and process a prescription.	Pre	Mid	End
3.1.1	Determine the validity, clarity, completeness and authenticity of the prescription and resolve concerns in collaboration with the pharmacist.			
3.1.2	Transcribe verbal orders and ensure their accuracy.			
3.1.3	Transfer a prescription and receive a transferred prescription. (Not applicable in institutional practice).			
3.1.4	Interpret numerals, symbols, measurement systems and Latin abbreviations.			
3.1.5	Perform pharmaceutical calculations.			
3.1.6	Identify patterns of unusual drug prescribing and usage, including possible diversion or drug misuse and report relevant findings to the pharmacist or appropriate authority.			
3.1.7	Process the adjudication for payment of prescriptions and other pharmacy services using knowledge of third-party payer policies and formularies. (Not applicable in institutional practice).			
3.2	Prepare products for dispensing.			
3.2.1	Select appropriate products by applying knowledge of brand and generic names, dosages and dosage forms.			
3.2.2	Apply drug interchangeability principles in accordance with applicable formularies, policies or legislation.			
3.2.3	Verify the integrity of a product by considering stability and, where applicable, sterility, including checking expiry dates, physical appearance and odor.			
3.2.4	Measure products by counting, pouring or weighing using the appropriate equipment and technology.			
3.2.5	Package products in a suitable container to maintain product integrity, stability and, where applicable, sterility.			
3.2.6	Use packaging that is safe and appropriate for the patient, including pre-packaging, multi-dose or unit-dose packaging and child-resistant vials.			
3.2.7	Label products according to legislative requirements, best safety practices, established protocols and patient-specific needs.			
3.3	Prepare and compound non-sterile and sterile products according to the: Model Standards for Pharmacy Compounding of Sterile Preparations. Model Standards for Pharmacy Compounding of Non-hazardous Sterile Preparations. Model Standards for Pharmacy Compounding of Non-sterile Preparations.			

3.3.1	Perform compounding calculations.			
3.3.2	Prepare and compound non-sterile and/or sterile products according to recognized guidelines and standards of practice.			
3.4	Verify the technical aspects of the prescription to ensure accuracy and quality of products.			
3.4.1	Identify when an independent double check should be performed.			
3.4.2	Check the product and its prescription label against the prescription using a systematic approach.			
3.5	Collaborate with the pharmacist in the release of the product.			
3.5.1	Determine whether the legal and professional requirements for a product to be released to the patient have been met.			
3.5.2	Identify when the patient requires further consultation or education from the pharmacist.			

4.0	Practice setting			
4.1	Optimize the safety, efficacy and efficiency of operations in the practice setting.	Pre	Mid	End
4.1.1	Demonstrate the organizational and time management skills necessary to effectively prioritize, organize and manage product distribution workflow.			
4.1.2	Supervise pharmacy support personnel so that accepted standards are met.			
4.1.3	Use and maintain automation and other technology to enhance safety, efficacy and efficiency in the practice setting.			
4.2	Contribute to the management of pharmacy inventory to ensure safe, effective and efficient product distribution.	Pre	Mid	End
4.2.1	Apply inventory and formulary management systems and strategies that incorporate best practices, including new technologies.			
4.2.2	Prepare and place orders for stock and supplies, using appropriate technology, from licensed and legitimate sources.			
4.2.3	Identify issues with the drug supply chain, including drug shortages and drug recalls, and collaborate with the pharmacist to resolve these issues.			
4.2.4	Return or properly dispose of recalled, expired and unusable products.			
4.2.5	Reconcile inventory for controlled substances, or any other substances selected.			
4.2.6	Investigate inventory discrepancies and communicate findings to the pharmacist and/or other appropriate authority.			
4.3	Contribute to the management of record-keeping activities within the practice setting.	Pre	Mid	End
4.3.1	Use appropriate information technology to organize, maintain and retrieve pharmacy records.			

4.3.2	Use information technology and record-keeping procedures that maintain the integrity, security and permanence of pharmacy records.			
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5.0	Health promotion			
5.1	Support patient-specific health promotion activities in collaboration with the pharmacist.	Pre	Mid	End
5.1.1	Identify and inform the pharmacist of socio-economic, cultural, environmental and other factors that are barriers to, or facilitators of, health and wellness for the patient.			
5.1.2	Gather health promotion information relevant to the patient.			
5.1.3	Participate in health promotion activities in collaboration with the pharmacist.			
5.1.4	Facilitate the patient's access to and interaction with support agencies and health services within the healthcare system.			
5.2	Support public health activities in collaboration with the pharmacist.			
5.2.1	Identify factors that are barriers to, or facilitators of, public health and wellness.			
5.2.2	Participate in public health initiatives in collaboration with the pharmacist.			
5.2.3	Participate in organized initiatives for disaster, pandemic and emergency preparedness.			
5.3	Contribute to the maintenance of a healthy environment for the public.			
5.3.1	Promote the proper handling and disposal of drugs and hazardous materials with the patient, self and others.			
5.3.2	Identify and minimize the risk of disease transmission from the pharmacy environment.			

6.0	Knowledge and research application			
6.1	Respond to questions that do not require pharmacist referral using appropriate strategies.	Pre	Mid	End
6.1.1	Clarify requests for information to identify questions that require pharmacist referral.			
6.1.2	Use a variety of retrieval techniques to access reliable and appropriate information, including evidence-based information when possible.			
6.1.3	Organize and provide information using strategies appropriate to the target audience.			
6.2	Apply relevant information to practice.			
6.2.1	Gather new information, including evidence-based information when possible, that may be applicable to practice.			
6.2.2	Evaluate the information and use current, relevant and reliable information to improve practice.			

7.0	Communication and education			
7.1	Establish and maintain effective communication skills	Pre	Mid	End
7.1.1	Demonstrate proficiency in English or French, both written and verbal.			
7.1.2	Demonstrate appropriate verbal and non-verbal communication skills, including listening skills.			
7.1.3	Demonstrate appropriate interview techniques.			
7.1.4	Select appropriate communication and education techniques for use with the patient and other health professionals.			
7.1.5	Conduct interpersonal interactions, including conflict management, in a professional manner.			
7.1.6	Communicate with sensitivity, respect and empathy.			
7.2	Use safe, effective and consistent communication systems.			
7.2.1	Use communication techniques that maximize safety and understanding, including repeating back verbal orders, using recognized terminology and avoiding unnecessary or unsafe abbreviations.			
7.2.2	Record and store information in a consistent manner for efficient access and retrieval by relevant personnel.			
7.2.3	Select appropriate technology to facilitate communication.			

8.0	Intra and inter-professional collaboration			
8.1	Create and maintain collaborative professional relationships.	Pre	Mid	End
8.1.1	Identify potential collaborators with whom to initiate ongoing professional relationships.			
8.1.2	Collaborate with other parties in the relationship to define the roles and responsibilities of each party.			
8.2	Contribute to the effectiveness of working relationships in collaborative teams.	Pre	Mid	End
8.2.1	Interact respectfully with other members of the team by accepting accountability for themselves and managing disagreements and conflict.			
8.2.2	Share decision-making activities with other members of the team.			
8.3	Participate in the delivery of collaborative health services in collaboration with the pharmacist.	Pre	Mid	End
8.3.1	Collaborate with team members to ensure appropriate utilization of resources.			
8.3.2	Collaborate with team members to determine and achieve team goals and objectives.			
8.3.3	Facilitate continuity of care.			
8.4	Accept referrals from and make referrals to the pharmacist.	Pre	Mid	End
8.4.1	Recognize situations that fall beyond the scope of practice of pharmacy technicians and refer these situations to the pharmacist.			
8.4.2	Accept responsibility for referrals from the pharmacist.			

9.0	Quality and safety			
9.1	Contribute to a culture of patient safety.	Pre	Mid	End
9.1.1	Apply principles of patient safety to improve practice.			
9.1.2	Employ best practices when informing the patient of the occurrence of a medication incident.			
9.1.3	Share information about problems, resolutions, system changes and lessons learned with the workplace team.			
9.2	Contribute to continuous quality improvement and risk management activities related to the drug distribution system.	Pre	Mid	End
9.2.1	Apply principles of continuous quality improvement to practice.			
9.2.2	Apply principles of risk management to practice by anticipating, recognizing and managing situations that place the patient at risk.			
9.2.3	Identify the occurrence of a medication incident or close call and respond effectively to mitigate harm and prevent reoccurrence.			
9.2.4	Identify high-alert drugs and high-risk processes in order to respond effectively.			
9.3	Ensure the quality, safety and integrity of products.	Pre	Mid	End
9.3.1	Maintain the cleanliness, functionality and integrity of compounding, packaging, dispensing and storage equipment.			
9.3.2	Ensure products are stored and transported under the conditions required to maintain product quality, safety and integrity, including cold chain management.			
9.3.3	Evaluate the quality of supplies and products using recognized quality assurance techniques including visual inspection, verification of the legitimacy of the supplier and use of manufacturers' quality markers.			
9.4	Create and maintain a working environment that promotes safety.	Pre	Mid	End
9.4.1	Minimize and manage distractions in the work environment.			
9.4.2	Manage factors that affect personal wellness including work-life balance, sleep deprivation and physical and emotional health.			
9.4.3	Identify factors that impact the safety of the working environment, including resource allocation, procedural consistency and ergonomics.			
9.4.4	Handle hazardous products safely by minimizing personal exposure and reducing environmental contamination.			

Additional comments:

*Preceptor initials*      *Student initials*

**Discussed with preceptor (start of week 1):**

\_\_\_\_\_

**Discussed with preceptor (Midpoint):**

\_\_\_\_\_

**Discussed with preceptor (end of SPE):**

\_\_\_\_\_

## PERSONAL LEARNING PLAN

Pharmacy technicians are obligated to maintain competency. Professionals must self-identify aspects of their knowledge, skills and attitudes that require further remediation and development. One method for identifying ongoing learning needs is to use the final performance assessment and preceptor comments to author goals for your continuing education plan. Please consult the College website for further detail on continuing professional development.

<b>Learning goals:</b>  What areas do I need to gain more experience in?	<b>Action plan:</b>  What exercises or activities would help me?	<b>Resources:</b>  What resources could I use?	<b>Learning outcome:</b>  Am I confident in my ability? Do I need more experience?

### Preceptor acknowledgement:

\_\_\_\_\_

*Preceptor signature*

\_\_\_\_\_

*Preceptor name (print)*

## **APPENDICES**

1. Student evaluation of preceptor, training period and manual.
2. Preceptor evaluation of student.
3. Statement of completion.
4. Structured practical evaluation competencies workbook.
5. Prescription daily tracking log sheet.

## Appendix 1 – Student evaluation of the training period and preceptor

A. Using the following rating scale, please evaluate your training site and preceptor.

1
2
3
4

Agree strongly  
 Agree moderately  
 Agree slightly  
 Disagree slightly

5
6
NA

Disagree moderately  
 Disagree strongly  
 Not applicable

1	The goals and objectives of my training period were discussed and planned at the beginning of the rotation.
2	The preceptor was effective in instructing me in pharmacy practice.
3	The preceptor treated me as an individual.
5	The preceptor encouraged me to actively participate in discussions and problem-solving exercises
6	I was made aware of available resources and encouraged to use them.
7	The preceptor was sufficiently prepared and knowledgeable about the program and expectations.
8	The preceptor was readily available to answer questions and concerns.
9	I was given good direction and feedback was provided to me.
10	The preceptor provided the appropriate level of oversight, support and feedback through the program.
11	Staff members were receptive and willing to interact with me.
12	My verbal communication skills were enhanced.
13	My written communication skills or documentation skills were enhanced.
14	I was able to apply my knowledge and develop my skills.
15	The preceptor evaluated me at the end of the rotation in a manner that was helpful to me.
16	The practice site provided an environment that facilitated my learning.

B. My preceptor and I discussed client care and/or practice related issues an average of:


less than 0.5 hour per day  
 0.5 to 1 hour per day  
 1 to 2 hours per day


2 to 3 hours per day  
 3 to 4 hours per day  
 more than 4 hours per day

C. I think I am now competent to work in pharmacy practice.

YES  NO

The following are additional training or skills improvement I think I need to further develop over the next year:

D. Overall, I would rate my training experience as:

Excellent  Good  Fair  Poor

Please elaborate and give examples:

E. Training period and manual

a) Was the training period of appropriate length, or was it too short or too long?

b) How would you suggest this training manual be improved?

F. Other comments:

---

**Student name**

---

**Date**

**Mail, e-mail or fax Appendix 1 to NBCP no later than TWO WEEKS following its completion.**

## Appendix 2 - Preceptor Evaluation

In addition to your assessment of the student indicated in the “Skills Assessment” portion of this document, please provide your comments on the following:

1. Do you feel this pharmacy technician student has the academic background and skills, along with the ability to integrate their knowledge and skills, to function as a pharmacy technician in pharmacy practice?
2. What areas of practice, knowledge or skills require additional training or development?
3. Do you feel the pharmacy technician student adequately adapted to his or her role and responsibilities in the pharmacy?
4. Did the pharmacy technician student readily accept your instruction or suggestions and understand the rationale provided?
5. Was the pharmacy technician student accepted by other health-care providers?

6. Do you believe the pharmacy technician student has the necessary knowledge and skills to become a competent pharmacy technician who can contribute significantly to the delivery of pharmacy services to the public?

7. Do you feel that the pharmacy technician student displayed a level of professionalism one would expect from a person soon to be licensed as a health-care professional?

8. Please rate your satisfaction with your involvement as a preceptor in terms of its value in your development as a preceptor or licensed pharmacist/pharmacy technician.

1	2	3	4	5	6	7	8	9	10
Unsatisfied				Satisfied			Highly Satisfied		

9. Other comments and suggestions

---

Preceptor signature

**Mail, e-mail or fax Appendix 2 to NBCP no later than 2 weeks following its completion.**



## Appendix 4 - Workbook: Documentation of performance

The workbook details selected representative competencies and requires the student to review and reflect on the exercise, discuss that review and reflection with their preceptor and document their discussion, learning and understanding of the competency element.

The preceptor provides their comments on the student's grasp and understanding of the competency element.

Students are required to demonstrate or have demonstrated **all** competencies at the **acceptable** level.

### Recording activities

**The pharmacy technician student is required to complete all activities/demonstrate all competencies regardless of practice setting they currently work in or plan to work in.** A license to practice is not specific to any particular practice setting.

This workbook is used to document completion of these activities through the preceptor (or delegate) sign off on completion.

If there is not adequate room on the page to document or summarize the activity, students should make a note in the logbook and insert additional documentation, labeled with the activity number, into the package in the appropriate section.

**Students are required to submit Appendix 4 to the NBCP no later than two weeks following its completion.**

1.0 Legal, ethical and professional responsibilities	
1.1 Meet legal requirements	
1.1.1	Apply legal requirements to practice, including federal and provincial/territorial legislation, policies, by-laws and standards.
<p>Activity:</p> <p>Identify the specific corresponding Acts and Regulations relevant to <b>each</b> of the stages of the dispensing process that you are involved in at your practice site.</p> <p>Stages include:</p> <ul style="list-style-type: none"> <li>• Receipt of prescription.</li> <li>• Assessment of appropriateness of therapy.</li> <li>• Order entry.</li> <li>• Prescription preparation.</li> <li>• Check on technical accuracy of completed prescription.</li> <li>• Release of product to patient.</li> </ul>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

1.0 Legal, ethical and professional responsibilities	
1.1 Meet legal requirements	
1.1.2	Apply federal and provincial/territorial workplace, occupational health and safety, and other related legislation to the practice setting.
<p>Activity:</p> <p>Describe two or three measures and initiatives that are in place at your practice site to ensure workplace safety. Where can you find information and standards regarding workplace safety at your practice site and online?</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

1.0 Ethical, legal and professional responsibilities	
1.1 Practice within legal requirements	
1.1.3	Apply federal and provincial/territorial privacy legislation to the collection, use, storage, disclosure and destruction of personal health information.
<p>Activity:</p> <p>Describe two situations you encountered in your rotation that demonstrate the importance of the pharmacy technician's role in the adherence to patient confidentiality regulations. Identify the specific corresponding parts in these regulations, Code of Ethics, and privacy legislation (PHIA, PIPEDA, PHIPAA) relevant to these two situations. Example of situations include - routine disposal of patient labels and profiles, accessing patient records.</p> <p>References: :NB Pharmacy Act, 2014 and Regulations, NBCP Code of Ethics, PHIA, PIPEDA</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

1.0 Legal, ethical and professional responsibilities	
1.2 Uphold ethical principles	
1.2.2	Apply ethical principles in the decision-making process.
<p>Activity:</p> <p>Review the New Brunswick College of Pharmacists Code of Ethics (CoE). Then,</p> <ol style="list-style-type: none"> <li>1. Identify two situations in the practice that present ethical concerns.</li> <li>2. Apply the CoE to these two scenarios and document this application.</li> <li>3. For each bioethical principle, provide one example of how a pharmacy technician's activities uphold the principle.</li> </ol> <p>References:</p> <p>NBCP Code of Ethics  Regulations of the NBCP 6.2 to 6.5  <a href="#">Model for Ethical Decision Making</a> (BC College of Pharmacists)</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

1.0 Legal, ethical and professional responsibilities	
1.3 Manage actual and potential illegal, unethical, or unprofessional actions or situations in practice.	
1.3.1	Identify illegal, unethical or unprofessional actions or situations.
1.3.2	Identify patterns of unusual drug prescribing and usage including possible diversion or drug misuse and report relevant findings to the pharmacist or appropriate authority.
3.1.6	Identify patterns of unusual drug prescribing and usage including possible diversion or drug misuse and report relevant findings to the pharmacist or appropriate authority.
<p>Activity:</p> <p>Identify three drugs such as narcotics, controlled drugs, benzodiazepines or targeted substances that may have potential for dependence or misuse. For each of these drugs, consider why they may be targets for misuse and reasons to suspect misuse/diversion. Discuss with your preceptor how various situations that actually (or may have potentially) occurred were detected and handled during his/her practice (such as prescription forgery in community practice, or ward/stock diversion in hospitals). Summarize and document that discussion. What are legal requirements for reporting loss, theft or forgery? Also discuss how a pharmacy technician should manage the referral of these issues to the pharmacist.</p> <p>References:</p> <p>Health Canada Website :  Controlled Drugs and Substances Act (<a href="#">S.C. 1996, c. 19</a>)  Benzodiazepines and Other Targeted Substances <a href="#">Regulations</a> (SOR/2000-217)  <a href="#">Frequently asked questions</a> on the Benzodiazepines and Other Targeted Substances Regulations  Benzodiazepines and Other Targeted Substances Regulations - <a href="#">Guidance Document for Hospitals</a>  <a href="#">NBCP Regulations 27.2 and 27.3</a></p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

1.0 Legal, ethical and professional responsibilities	
1.4 Apply principles of professionalism	
1.4.2	Accept responsibility and accountability for own actions and decisions.
<p>Activity:</p> <p>Identify two situations and the specific corresponding legislation when pharmacy technicians have the responsibility to notify the N.B. College of Pharmacists in the interest of protecting the public. How should these situations be handled?  Examples of situations include, but are not limited to, change in preceptor or practice site, and unprofessional conduct of a NBCP registrant (e.g. inappropriate patient relations, mental illness that affects one's ability to perform the work).  What is the NBCP Discipline &amp; Fitness to Practice Committee? Identify a situation to discuss with your preceptor regarding how errors are handled at the practice site, both those that have reached the patient and those that are identified before reaching the patient. What is the intent of Apology legislation (Act 79(1) - 79(3)? What does it mean?  .</p> <p>References:</p> <ul style="list-style-type: none"> <li>• NBCP Code of Ethics</li> <li>• NB Pharmacy Act, 2014 and Regulations of the NBCP</li> <li>• NAPRA Model Standards of Practice for Canadian Pharmacy Technicians</li> </ul>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

1.0 Legal, ethical and professional responsibilities	
1.5 Document activities of practice in compliance with federal and provincial/territorial legislation, standards and policies.	
1.5.1	Maintain complete, accurate and secure patient records.
<p>Describe two situations where your clear, accurate and timely documentation contributed to quality patient care. What information must be documented under these two circumstances? Why is accurate and timely documentation important? What information might you put in the notes field of the pharmacy software program? What is considered to be part of the patient record and what are the requirements for storage and retention of records?</p> <p><b>You are expected to perform this competency element throughout the course of your SPE program.</b></p> <p>Examples of scenarios: Destruction of narcotics, shift change over, faxing refill requests for physicians, specific patient requests, etc. Record your summary.</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

1.0 Legal, ethical and professional responsibilities	
1.5 Document activities of practice in compliance with federal and provincial/territorial legislation, standards and policies.	
1.5.2	Identify situations in which documentation should and should not be shared with other health professionals or third parties.
Identify 2 situations where you were requested to provide confidential client information and whether it was appropriate to do so or not.	
Reference: Regulations of the NBCP 17.25 & 17.26 <a href="#">Personal Health Information</a> Privacy and Access Act	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

2.0 Patient care	
2.1 Develop a professional relationship with the patient.	
2.1.1	Establish and maintain rapport by using effective communication skills.
<p>Activity:</p> <p>Reflect on a positive situation that occurred during your rotation when the relationship between you and a client was collaborative. What effective communication skills did you demonstrate? Also, reflect on a situation where the interaction was not ideal between you and a client. What issues do you need to address under this circumstance and what improvements do you need to make?</p> <p><b>You are expected to perform this competency element throughout the course of your SPE program.</b></p> <p>Record your summary.</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

2.0 Patient care	
2.2 Obtain patient information for pharmacist review.	
2.2.1	Gather information from the patient using appropriate interview techniques, including active listening.
<p>Activity:</p> <p>Community practice sites: Practice receiving prescriptions and updating patient records under supervision. What questions should you ask patients during this process? Identify challenges encountered in creating and maintaining the record and describe how these are resolved.</p> <p><b>You are expected to perform this competency throughout the course of your SPE program.</b></p> <p>Hospital practice sites: Observe how incoming orders are reviewed and what to watch for. How do hospital pharmacists and pharmacy technicians contribute to the updating or maintenance of patient records?</p> <p><b>You are expected to perform this competency throughout the course of your SPE program.</b></p> <p>Summarize your findings.</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

2.0 Patient care	
2.2 Obtain patient information for pharmacist review.	
2.3.2	Assist the patient in making informed decisions regarding the selection and use of drug administration devices, monitoring devices and health aids.
<p>Activity:</p> <p>Demonstrate the use of at least two devices (to be determined by your preceptor) to patients or staff. What special advice or precautions specific to each device should be mentioned during these demonstrations? (aerochamber, home blood pressure monitor, glucose meter, home health-care device, eye drops, nasal spray, MDI, etc.).</p> <p>Record a list of devices demonstrated.</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

3.0 Product distribution	
3.1 Receive, interpret and process a prescription.	
3.1.1	Determine the validity, clarity, completeness and authenticity of the prescription and resolve concerns in collaboration with the pharmacist.
<p>Activity</p> <p>During your training period, cite at least two situations when prescriptions do not meet legislative requirements and need further clarification. What are the issues and how are these issues resolved? Where can you find information on the legal and regulatory requirements for prescriptions for <b>each</b> of the following: a narcotic drug, a controlled drug, a targeted substance, a prescription received via fax, a prescription written outside New Brunswick and for Methadone? What are the requirements of a verbal order that is received? What type of products may a pharmacist and a pharmacy technician take a verbal prescription for from a prescriber?</p> <p><b>You are expected to perform this competence element throughout the course of your SPE program.</b></p> <p>Reference:  Regulations of the NBCP  Various Federal Legislation – Food &amp; Drugs Act, Controlled Drugs and Substances Act  NAPRA Drug Schedule Regulations  Regulations of the NBCP (Faxing and verbal orders)  NBCP Methadone Practice Directive</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

3.0 Product distribution	
3.1 Receive, interpret and process a prescription.	
3.1.5	Perform pharmaceutical calculations.
<p>Activity</p> <p>Carry out pharmaceutical calculations as part of the drug preparation process at your practice site. What types of pharmaceutical calculations are performed by pharmacy technicians at your practice? What is the best practice for an independent check on calculations? What are the standards for calculating methadone compounds? Perform, document and review at least three different types of calculations with your preceptor.</p> <p><b>You are expected to perform this competency element throughout the course of your SPE program.</b></p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

3.0 Drug distribution	
3.2 Prepare products for dispensing	
3.2.1	Select appropriate products by applying knowledge of brand and generic names, dosages and dosage forms.
<p>Activity:</p> <p>Throughout your participation in drug distribution activities at your practice site, identify five recently marketed drugs, or drugs that you are not too familiar with, and document pertinent information about each drug. Include this information in that documentation for each drug: s classification under NAPRA’s National Drug Schedules, pharmaceutical equivalency status in New Brunswick (for community pharmacy setting), automatic substitution status (for hospital pharmacy), therapeutic class, indications, contraindications, dosage and administration (e.g., take with food) and manufacturer and non-manufacturer references used.</p> <p>References:</p> <p>Regulations of the NBCP  NAPRA Drug Schedules and searchable database  Health Canada National Drug Database  NB Formulary  e-CPS / CPS  Lexicomp</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

3.0 Drug distribution	
3.2 Prepare products for dispensing	
3.2.5	Package products in a suitable container to maintain product integrity, stability and, where applicable, sterility.
<p>Activity</p> <p>Participate in packaging or preparing products for dispensing, including compliance packaging activities at your practice site. Examples of types of packaging for distribution include: unit-dose, blister packs, IV admixture. List at least three items that you have repackaged.</p> <p>What quality assurance process is in place for the various types of packaging that you have done? Why is it necessary to package medications in each of these cases? Discuss potential implications of missing or improper use of auxiliary labels with your preceptor (e.g., take with food, keep refrigerated) and document that discussion, using specific drugs or drug classes as examples.</p> <p><b>You are expected to perform this competency element throughout the course of your SPE program.</b></p> <p>References:</p> <ul style="list-style-type: none"> <li>Regulations of the NBCP</li> <li>Model Standards for Pharmacy Compounding of Sterile Preparations</li> <li>Model Standards for Pharmacy Compounding of Non-hazardous Sterile Preparations</li> <li>Model Standards for Pharmacy Compounding of Non-sterile Preparations</li> </ul>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

3.0 Drug distribution	
3.3 Prepare and compound non-sterile and sterile products according to recognized guidelines and standards of practice.	
3.3.2	Prepare and compound sterile products according to recognized guidelines and standards of practice.
<p>Activity</p> <p>Prepare non-sterile compound and observe the preparation of a sterile compounded products at your practice site (if service provided). List at least two compounds that you have prepared/observed the preparation for.</p> <p>What are the legal labeling requirements for compounded products that you have made? How are expiry dates determined for compounded products? What references are used? What system is in place to standardize documentation for quality assurance (QA) purpose of these compounded products? What standards are used for sterile compounding? What is the difference between compounding and manufacturing?</p> <p><b>You are expected to perform this competency element throughout the course of your SPE program.</b></p> <p>References:</p> <p>Policy on Manufacturing and Compounding Drug Products in Canada (<a href="#">POL-0051</a>)  Model Standards for Pharmacy Compounding of Hazardous Sterile Preparations  Model Standards for Pharmacy Compounding of Non-hazardous Sterile Preparations  Model Standards for Pharmacy Compounding of Non-sterile Preparations</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

3.0 Drug distribution	
3.4 Verify the technical aspects of the prescription to ensure accuracy and quality of products.	
3.4.2	Check the product and its prescription label against the prescription using a systematic approach.
<p>Activity</p> <p>The pharmacy technician student must demonstrate competency in his or her ability to accurately perform a check on the technical accuracy of completed prescriptions/orders prepared for release to clients under normal working conditions. The pharmacy technician student must accurately perform 500 technical checks in a row without making a mistake in order to meet this competency. The candidate must record ALL checked prescriptions (including those where an error is made) on the Prescription Daily Tracking Log (Appendix 5).</p> <ul style="list-style-type: none"> <li>• A maximum of 50 prescription checks will be counted in any one day.</li> <li>• A new tracking log must be used each day to record prescriptions checked and any errors identified.</li> <li>• No errors are permitted during the technical checking process. If an error occurs, the evaluator must inform the participant and discuss the error made. The checking process must then be restarted back at zero, regardless of how far along the candidate had come in reaching the targeted 500 consecutive checks.</li> <li>• All prescriptions checked by the pharmacy technician student must be second checked by the preceptor or delegate (other pharmacist or registered pharmacy technician) for technical accuracy. Remember that no product can be released to the patient until the pharmacist has assessed the appropriateness of therapy.</li> </ul>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

3.0 Drug distribution	
3.5 Collaborate with the pharmacist in the release of the product.	
3.5.1	Determine whether the legal and professional requirements for a product to be released to the patient have been met.
<p>Activity</p> <p>Discuss the following with your preceptor:          What specifically does the legislation state with respect to the responsibility of the pharmacist to:</p> <ul style="list-style-type: none"> <li>• Ensure the appropriateness of therapy?</li> <li>• Counsel the patient?</li> <li>• Monitoring the initial and ongoing appropriateness of a patient’s drug therapy?</li> <li>• What processes are in place at the practice site to confirm the pharmacist has reviewed the prescription and patient record to determine appropriateness of therapy and that the requirements for counselling as set out in the pharmacy practice Regulations have been met?</li> <li>• What processes are in place to ensure that the prescriptions are released to the correct customer or agent?</li> </ul> <p>Summarize your findings.</p> <p>References          Regulations of the NBCP          NAPRA Model <a href="#">Standards of Practice for Canadian Pharmacy Technicians</a>          NAPRA Model <a href="#">Standards of Practice for Canadian Pharmacists</a></p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

4.0 Practice setting	
4.1 Optimize the safety, efficacy and efficiency of operations in the practice setting.	
4.1.1	Demonstrate the organizational and time management skills necessary to effectively prioritize, organize and manage product distribution workflow.
<p>Activity</p> <p>Discuss then record a summary of how incoming prescriptions are prioritized with your preceptor. What are the various considerations?</p> <p>With your preceptor, discuss dispensary activities then record a summary of how they are inter-related and impact on each other.</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

4.0 Practice setting	
4.2 Contribute to the management of pharmacy inventory to ensure safe, effective and efficient product distribution.	
4.2.1	Apply inventory and formulary management systems and strategies that incorporate best practices, including new technologies.
<p>Activity</p> <p>Identify at least two situations pertaining to ordering issues at your practice site (e.g., pharmacy shortage, recalls, manufacturer back-order, and raw ingredient shortage) and communicating to patients regarding these short-supply issues. How were these issues addressed? What options were offered to patients? How does the pharmacy monitor for outdated stock? What is the procedure for dealing with expired drugs found in inventory – including regular Rx drugs and Narcotic and CDSA drugs? What do you do with drugs returned to the pharmacy from patients? How are Narcotic and CDSA patient medications that are returned to the pharmacy for eventual destruction monitored? Prepare an algorithm that can be used by other pharmacy staff regarding ordering issues for different types of suppliers or different types of products.</p> <p><b>You are expected to perform this competency element throughout the course of your training period.</b></p> <p>References:  Regulations of the NBCP  Health Canada Loss and Theft <a href="#">reporting form</a></p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

4.0 Practice setting	
4.2 Contribute to the management of pharmacy inventory to ensure safe, effective and efficient product distribution.	
4.2.2	Reconcile inventory for controlled substances, or any other substances selected.
<p>Activity</p> <p>Perform inventory count for narcotics, controlled drugs and targeted substances. Discuss with your preceptor specific legislation and steps on how narcotic discrepancies should be identified, investigated and reported to the pharmacist. Summarize and document that discussion.</p> <p>Include:</p> <ul style="list-style-type: none"> <li>• How are manual adjustments to the computer or perpetual manual inventory monitored and reviewed?</li> <li>• What are the documentation and reporting requirements for any narcotic discrepancies discovered?</li> </ul> <p>Resources:</p> <p>Controlled Drugs and Substances <a href="#">Act</a> and <a href="#">Regulations</a></p> <p>Narcotic Control Regulations (<a href="#">C.R.C., c. 1041</a>)</p> <p>Regulations of the NBCP</p> <p>Health Canada Loss and Theft <a href="#">reporting form</a></p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

4.0 Practice setting	
4.3 Contribute to the management of record keeping activities within the practice setting	
4.3.1	Use appropriate information technology to organize, maintain and retrieve pharmacy records.
<p><b>Activity</b></p> <p>For accountability purposes, it is important that the various aspects of the drug distribution process are well documented. It must be clear who has taken the responsibility for what aspect of the drug distribution process including: receiving a (verbal) prescription, entering the prescription into the pharmacy computer system, preparing the prescription (including all steps involved in compliance or unit dose packaging), assessing the prescription for therapeutic appropriateness, verification of the technical accuracy of the completed prescription, patient counseling, and any follow up or monitoring activities.</p> <p>Note how documentation at your practice site is auditable and traceable for the various aspects of drug distribution. Could any changes be made to improve the process? Summarize your findings.</p> <p>References:  Regulations of the NBCP  NAPRA Model <a href="#">Standards of Practice for Canadian Pharmacy Technicians</a>  NAPRA Model <a href="#">Standards of Practice for Canadian Pharmacists</a></p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

5.0 Health promotion	
5.1 Support patient-specific health promotion activities in collaboration with the pharmacist	
5.1.3	Participate in health promotion activities in collaboration with the pharmacist.
<p>Activity</p> <p>Assist in the preparation of a health promotion event (e.g., flu vaccine clinic, Pharmacy Awareness Week) or give a 5-10 minute presentation to your preceptor or staff on a health promotion topic as determined by your preceptor (e.g., flu prevention and infection control) or talk about your new profession as a licensed Pharmacy Technician. Include in your documentation details of the health promotion event/presentation you performed and reflect on your learning from this activity.</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

5.0 Health promotion	
5.2 Support public health activities in collaboration with the pharmacist.	
5.2.3	Participate in organized initiatives for disaster, pandemic and emergency preparedness.
<p>Activity</p> <p>Given the ever increasing likelihood of a major pandemic (H1N1, measles, ebola, coronaviruses), identify what the impact would be on your pharmacy operation and what procedures are, or should be, in place to ensure the pharmacy will be able to provide service to its clientele. Does your pharmacy have a plan in place? Discuss with your preceptor and document the key elements of what should be included in a plan (e.g. Staff rotation, masking, inventory replenishment).</p> <p>Resources:          CDC <a href="#">Resources</a> for Pandemic Flu          WHO <a href="#">Pandemic Preparedness</a>          Using a pandemic recovery plan template: A <a href="#">free download and guide</a></p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

5.0 Health promotion	
5.3 Contribute to the maintenance of a healthy environment for the public.	
5.3.1	Promote the proper handling and disposal of drugs and hazardous materials with the patient, self and others.
<p>Activity</p> <p>Discuss with your preceptor the options available for the proper disposal of drug products. Document the appropriate disposal method for different categories of drugs (e.g., regular prescription products, chemotherapy products, vaccines, narcotics). How does your pharmacy dispose of these drug products?</p> <p>Resources:</p> <p>FDA: Disposal of unused medicines: <a href="#">What you should know</a></p> <p>Connecticut: <a href="#">Disposing of Prescription Medicines</a> and Over-the-Counter (OTC) Products</p> <p>WHO <a href="#">Guidelines for Safe Disposal</a> of Unwanted Pharmaceuticals in and after Emergencies</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

6.0 Knowledge and research application	
6.1 Respond to questions that do not require pharmacist referral using appropriate strategies.	
6.1.1	Clarify requests for information to identify questions that require pharmacist referral.
<b>Activity</b> Document two interactions you had with a client or another health-care provider in which you were able to appropriately provide sufficient information in response to their request. Discuss the interactions with your preceptor and summarize those discussions. Identify when it is appropriate for you to answer client questions or provide information.	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

6.0 Knowledge and research application	
6.2 Apply relevant information to practice	
6.2.1	Gather new information, including evidence-based information when possible, that may be applicable to practice.
<b>Activity</b> Identify two current or new technologies that will impact the dispensary operation (e.g., tablet counters, packaging machinery, bar-coding, etc.). Evaluate the literature and discuss these technologies with your preceptor. Summarize and document this discussion. Document the resources you identified and the impact of these technologies on dispensary operations.	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

7.0 Communication and education	
7.1 Establish and maintain effective communication skills	
7.1.6	Communicate with sensitivity, respect and empathy.
<p>Activity</p> <p>Observe interactions between other health-care providers and/or clients. Identify and document 6-8 examples of communication that illustrates these characteristics.</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

8.0 Intra and inter-professional collaboration	
8.1 Create and maintain collaborative professional relationships	
8.1.1	Identify potential collaborators with whom to initiate ongoing professional relationships.
<p>Activity</p> <p>List the types of healthcare professionals that you interacted with during your rotation and describe the nature of these interactions.</p> <p>Reference:</p> <p>Enhancing Interdisciplinary Collaboration in Primary Health Care, Conference Board of Canada</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

8.0 Intra and inter-professional collaboration	
8.3 Participate in the delivery of collaborative health services in collaboration with the pharmacist	
8.3.3	Facilitate continuity of care.
<p>Medication-related safety events frequently occur as patients transition between health-care environments. Recognizing the risk inherent in these transitions, Canadian healthcare agencies have developed statements, guidelines and tools for improving patient safety at these junctures of care.</p> <p>Activities:</p> <ol style="list-style-type: none"> <li>1. List two publications that provide guidance regarding continuity of patient care.</li> <li>2. What major initiatives has your practice implemented that conform with best practice pertaining to safe and effective transitions in care?</li> <li>3. Describe the pharmacy technician's role in these initiatives.</li> <li>4. Provide one example of a situation where you were personally involved in some aspect of transferring a patient's care between health-care environments</li> </ol>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

8.0 Intra and inter-professional collaboration	
8.4 Accept referrals from and make referrals to the pharmacist	
8.4.1	Recognize situations that fall beyond the scope of practice of pharmacy technicians and refer these situations to the pharmacist.
<p>Activity</p> <p>Discuss with your preceptor two situations where you needed to make referrals to pharmacists at your practice site or to other healthcare professionals.          Why were referrals needed for each of these circumstances?          Summarize your discussions.</p> <p>Reference:  <a href="#">Enhancing Interdisciplinary Collaboration in Primary Health Care, Conference Board of Canada</a></p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

9.0 Quality and safety	
9.1 Contribute to a culture of patient safety	
9.1.2	Employ best practices when informing the patient of the occurrence of a medication incident.
<p>Activity</p> <p>With your preceptor, discuss then document the process for communicating with a client when a medication incident has occurred; differentiate your role from that of the pharmacist and the steps that each person is responsible for.</p> <p>Identify and document the steps or responsibilities each health-care professional is responsible for.</p> <p>References:</p> <p>Institute for Healthcare Improvement document: Talking about Harmful Medical Errors with Patients, <a href="#">pp43-49</a></p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

9.0 Quality and safety	
9.2 Contribute to continuous quality improvement and risk management activities related to the drug distribution system	
9.2.3	Identify the occurrence of a medication incident or close call and respond effectively to mitigate harm and prevent reoccurrence.
<p><b>Activity</b></p> <p>Describe two to three 3 situations pertaining to medication errors, near-misses or quality-related events (includes errors that reach the patient as well as those that are intercepted prior to dispensing) that you encountered at your practice site. Document these occurrences using tools available in the practice site (medication error reporting form, etc.) and discuss with your preceptor how the collected information is processed for the purpose of error prevention. Summarize that discussion.</p> <p>Review and discuss with your preceptor the process for investigating, documenting, reporting and follow-up. Again, summarize that discussion.</p> <p><b>References:</b>  NAPRA Model Standards of Practice for Canadian Pharmacy Technicians  NBCP Practice Directive: Mandatory Medication Incident Reporting  Regulations of the NBCP: 14.2: Quality Management</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

9.0 Quality and safety	
9.2 Contribute to continuous quality improvement and risk management activities related to the drug distribution system	
9.2.4	Identify high-alert drugs and high-risk processes in order to respond effectively.
<p>Activity</p> <p>Discuss with your preceptor situations where look-alike, sound-alike drugs led to actual or potential medication errors. Summarize that discussion. Identify what steps can be taken to address mix-ups. Can the pharmacy's processes be further improved to reduce potential for mishap?</p> <p>Reference:</p> <p>Institute for Safe Medication Practices <a href="#">website</a></p> <p>Canadian Patient Safety Institute <a href="#">website</a></p> <p><a href="#">NBCP</a> Practice Directive: Mandatory Medication Incident Reporting</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

9.0 Quality and safety	
9.3 Ensure the quality, safety and integrity of products	
9.3.1	Maintain the cleanliness, functionality and integrity of compounding, packaging, dispensing and storage equipment.
<p>Activity</p> <p>Participate in the regular cleaning and maintenance of various dispensary supplies and equipment. Reflect on two situations where the proper maintenance of equipment or the proper storage condition contributes to product safety. Record your summary.</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

9.0 Quality and safety	
9.4 Create and maintain a working environment that promotes safety	
9.4.4	Handle hazardous products safely by minimizing personal exposure and reducing environmental contamination.
<p>Activity</p> <p>Identify three hazardous products in the pharmacy that require special handling – chemotherapy agents, hormones, etc. Discuss with your preceptor what precautions and procedures are in place to protect staff in handling these products. Summarize your findings.</p>	
Date complete	Time spent (hrs):
Preceptor comments:	
Preceptor signature:	

Student documentation:

## Appendix 5 – Prescription Daily Tracking Log

**You are not required to submit Appendix 5 documentation to the NBCP as evidence of completion.** You and your preceptor sign off on this element (3.4.2) in your workbook. The workbook is submitted to the NBCP.

Retain your daily tracking documentation in the event you may be audited. At that time, you may be required to submit your logs for review when the remainder of your documentation is being assessed.

Appendix 5 - Prescription Daily Tracking Log

Student Name:	Date:	Preceptor Name:
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Type of error identified: 1 - Patient 2 - Drug, Dosage Form, Route 3 - Dose, Quantity 4 - Directions 5 - Doctor 6 - Container/Packaging

Ensure that prescriptions are filled and checked to be in compliance with regulations and policies regarding the dispensing of drugs. Use a new Daily Tracking Log each day to record all items checked by the student - maximum of 50 per day. The student is required to complete a total of 500 checks without making any errors. All checks are to be recorded on this log, along with all details of any errors missed by the student.

**Pharmacy technician student:** (fill in unshaded area): Use a new line for each prescription checked and if applicable, record the type of error identified during your technical check; otherwise, initial the "No error" column. Use a new log sheet for each day's activities.

**Preceptor:** (fill in grey shaded area): Initial either "checked correctly" or "error missed". If an error is missed, record the details and discuss with student.

Student					Preceptor		
Check #	Rx# or type of item checked	No error (initial)	Type of error identified (#)	Check complete (initial)	Checked correctly (initial)	Error missed (initial)	Type of error missed & detail
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

