Pharmacy Technician
Structured Practical Evaluation Manual

Pharmacy Technician Student: _____

Preceptor Name(s): _____

_____

Date started: _____   Date completed: _____

E-mail: registrations@nbpharmacists.ca

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Contents

Acronyms and websites

CDSA	Controlled Drugs and Substances Act	https://laws.justice.gc.ca/eng/acts/c-38.8/index.html
CPhA	Canadian Pharmacists Association	https://www.pharmacists.ca/
CPSNB	College of Physicians and Surgeons of New Brunswick	https://cpsnb.org/en/
CSHP	Canadian Society of Hospital Pharmacists	https://www.cshp.ca/
F & D Act	Food and Drugs Act	https://laws-lois.justice.gc.ca/eng/acts/f-27/
NABP	National Association of Boards of Pharmacy	https://nabp.pharmacy
NAPRA	National Association of Pharmacy Regulatory Authorities	https://www.napra.ca/
NBCP	New Brunswick College of Pharmacists	https://nbpharmacists.ca/
NBPDP	New Brunswick Prescription Drug Program	https://www2.gnb.ca/content/gnb/en/departments/health/DrugPlans/TheNewBrunswickPrescriptionDrugProgram.html
NBPA	New Brunswick Pharmacists' Association	https://www.nbpharma.ca
PIPEDA	Personal Information Protection and Electronic Documents Act	https://laws-lois.justice.gc.ca/ENG/ACTS/P-8.6/index.html https://www.priv.gc.ca/en/privacy-topics/privacy-laws-in-canada/
RIPPA	CHAPTER R-10.6 Right to Information and Protection of Privacy Act	https://laws.gnb.ca/en/document/cs/R-10.6
PHIPAA	CHAPTER P-7.05 Personal Health Information Privacy and Access Act	https://laws.gnb.ca/en/document/cs/P-7.05

Introduction

The New Brunswick College of Pharmacists' (the College) mandate is to promote and protect the health and well-being of the public, in collaboration with other health disciplines, through regulation and development of the pharmacy profession.

Registration and licensure are one way of assuring professionals are competent to provide safe, ethical, and effective care.

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 patient-care practice.

Explanation, practice, and constructive feedback 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 can apply knowledge, skills and attitudes acquired through academic curriculum to actual pharmacy practice.

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

Preceptors must consider that 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 includes 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) *Model Standards of Practice for Pharmacists and Pharmacy Technicians* in Canada. 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.

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 safe and ethical 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, within their scope of practice:

1. Maintain the patient medication profile.

2. Accurately dispense medication according to the prescription.

3. Teach patients how to use their medical devices.

4. Communicate with patients and/or health professionals regarding drug and health information.

5. Comply with all legal requirements associated with the practice of pharmacy.

6. Provide information and/or referral services in emergencies and upon request.

7. Develop and exercise appropriate professional judgment, including referring to the pharmacist when needed.

8. Be knowledgeable of, and maintain, ethical and professional standards of practice.

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

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 date.

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

- **Delivered in person or by mail to:**   686 St. George Blvd., Suite 200, Moncton, NB, E1E 2C6

- **Fax:**   506-857-8838

- **E-mail:**   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:
1. Be registered with the New Brunswick College of Pharmacists as a pharmacy technician student.
2. Have graduated from a CCAPP-accredited pharmacy technician education program or successfully completed a Council approved bridging program and the Pharmacy Technician Evaluating Exam.
3. Submit an Apprenticeship Agreement form (online) **and** receive confirmation the preceptor has been approved.

During the SPE, the student must:
1. 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 patient care given the pharmacy technician student's knowledge, skills and attitude. The student may have a maximum of two preceptors for the training period.
2. 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. A minimum time frame is 6 weeks.

Upon concluding the SPE, the student must:
1. 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 student'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 for achievement of the expected learning. **Candidates 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 patients.
· 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 of about 2 weeks.
· 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).

Note: 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 patient 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 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 www.nbpharmacists.ca):

Activity	Date Complete
A. Inspections conducted by the College	
B. Council (see Act Part IV and Regulations Part II and III)	
C. Code of Ethics	
D. NAPRA Model Standards of Practice for Canadian Pharmacists and Pharmacy Technicians	
E. Continuing Education Requirements	
F. National Drug Schedules (see NAPRA website **www.NAPRA.org**)	
G. Personal Information and Electronic Documents Act	
H. Right to Information and Protection of Privacy Act	
I. Personal Health Information Privacy and Access Act	
J. Food and Drugs Act and Regulations (Federal)	
K. Controlled Drugs and Substances Act (Federal)	

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

A. Orientation to the pharmacy		Date complete
1.	Product areas	
2.	Security devices	
3.	Dispensary/: • stock room • equipment and supplies • speciality areas	
4.	Counselling area	
5.	Staff roles and responsibilities	
B. Pharmacy policies and procedures		
1.	Customer relations	
2.	Confidentiality and *PIPEDA, PHIPA and RIPPA*	
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	
C. Other information you have learned about:		**Date complete**
1.		
D. Dispensary layout		
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:		
Dispensing area		**Date complete**
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.	Designated compounding area and equipment	
7.	Syringes and needles	
8.	Prescription files and storage requirements	
9.	Controlled/narcotic drug storage	
10.	Confidential area for patient 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.	Patient information leaflets	
16.	Secure storage areas	
17.	Refrigerated products	
18.	Schedule 2 and 3 medications	
19.	Unscheduled products	

	E. Library & Reference sources	
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 access and e-mail	
3.	Compounding Resources	
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.	*Confidentiality and PIPEDA, RIPPA and PHIPAA* documentation	
10.	Harmonized Drug Schedules with specific references to Schedules 2 and 3 and products contained therein	
F. Other pharmacy areas		**Date complete**
1.	Self-medication products	
2.	Home care supplies and devices (if applicable)	
3.	Patient 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)	
G. Management		
	**Activity**	**Date complete**
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 patient 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

A. Orientation to the pharmacy		Date complete
1.	Administration area	
2.	Drug storage areas in pharmacy and institution	
3.	Entrances and exits	
4.	Security devices	
5.	- Pharmacy area stock room - equipment and supplies - speciality areas	
6.	Staff roles and responsibilities	
B. Departmental policies and procedures		
1.	Formulary system	
2.	Dress code	
3.	Telephone procedures	
4.	Relations with other health-care providers	
5.	*Confidentiality and PIPEDA, RIPPA and PHIPAA* documentation	
6.	Ward stock delivery	
7.	Pharmacy opening and closing	
8.	Provision of patient care by pharmacists	
9.	Compounding and repackaging	
10.	Medication order processing	
11.	Handling of damaged stock	
12.	Medication distribution	
13.	Sterile compounding	
14.	On call (after hours) services	
15.	Medication error and discrepancy documentation	
16.	Hazardous medications, delivering medication to units	
17.	Intervention documentation	
18.	Collaborative practice agreements	
19.	Pharmacy & therapeutics committee	
Other information:		

D. Pharmacy layout

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:

Dispensing area		Date complete
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.	Designated compounding area and equipment	
6.	Syringes and needles	
7.	Prescription files and storage requirements	
8.	Controlled/narcotic drug storage	
9.	Abuse potential products	
10.	Unauthorized access	
11.	Storage of prepared prescriptions	
12.	Distribution of prepared prescriptions	
13.	Patient information leaflets	
14.	Secure storage area	
15.	Refrigerated products	
16.	Schedule 2 and 3 medications	
17.	Unscheduled products	
Other areas covered:		

E. Library & Reference Sources		Date Complete
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 access and e-mail	
3.	Sterile and Non-Sterile Compounding Resources	
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	

F. Management		
Awareness of:		Date Complete
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	
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	
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	
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	
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 patient and charged to the cost centre	
2.	Awareness of the central fill process and its role in the drug distribution process	

Familiarity with:		Date Complete
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	
Knowledge of the purpose of workload measurement and the application of information obtained.		
Introduction to principles of personnel management.		
1.	Department policy and procedures	
2.	Communication	
3.	Supervision of employees	
4.	Personnel evaluation	
5.	Collective bargaining process	
The process involved with hospital accreditation.		
1.	Patient care teams	
Hospital Procedures in case of emergency.		
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 patient, and that the preceptor and student bear the responsibility for the accuracy of the finished prescription. The patient is vulnerable in this situation and accurate dispensing is fundamental to all the other value-added professional services provided to the patient. The dispensing procedure may be expressed in a series of steps as follows:

1. Checking for Completeness of Information
   o Prescription must be recent and all statutory information present. A prescription is valid for one year and may not be refilled after that time.
   o Find out patient's age, weight, allergies and type of reaction, other medications taken, any OTC or alternative-medication, recreational substances, dietary restrictions, along with prior and present medical problems. Enter the information into the patient's record.
   o Determine the method of delivery to patient (waiting, call later, delivery, give to patient's agent, sent to nursing unit) and provide an estimated waiting time.
   o Determine any third-party coverage and subscriber's number.
   o 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
   o Is the prescriber licensed to practice in any province in Canada?
   o In hospital practice, is the prescriber a resident or intern with prescribing privileges?
   o Is the prescription within their scope of practice (applicable to dentists, veterinarians, optometrists, podiatrists, midwives nurse practitioners, pharmacists)?
   o 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)
   o Interpreting handwriting and abbreviations; understanding what the prescriber intended.
   o Be capable of recognizing errors or omissions and know what action to take.
   o Check for safe and appropriate dosage and mode of administration.
   o Be prepared to communicate with the prescriber and/or patient.
   o Accept a transfer of a prescription and input all the previous prescribing information from the transfer.
   o Be aware of the 35-day rule in NB and how it is applied.

4. Check Patient Records
   o Contraindications (allergy, contraindicated disease state or medication) and any other factors affecting drug use/abuse.

5. Compounding
   o Know the difference between compounding and manufacturing (Review the compounding versus manufacturing guidelines according to Health Canada. This document is available on the College website, under "Legislation and Standards.")
   o Recognize when a prescription needs to be compounded, when it is commercially available and advise patient if more time is needed in the case of a compound.

6. Selecting Container and Labelling
   o Select appropriate container bearing in mind the child resistant and light-resistant container regulations, physiochemical properties of the medication, the convenience to the patient and the aesthetic appearance of the finished product.
   o Selection of all appropriate auxiliary labels including storage and stability of the medication.

- o Prescription medication container must be labelled with the generic name for all single-entity products and with the trade name for multi-ingredient products.
- o Compliance (monitored dose) packaging standards are to be reviewed.

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

8. Releasing the Medication to the Patient
   - o Ensure the right patient is receiving the right medication.
   - o Ensure appropriate counselling is provided by the pharmacist when required. Document any refusal for counselling.

9. Refilling a Prescription
   - o Be knowledgeable of the legal requirements for refill and part-fill prescriptions, (e.g.: narcotics).
   - o Understand acceptable refill records (hard copy, logs, etc.)
   - o 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.
   - o Check for over and under-utilization and notify the pharmacist if utilization is not appropriate.
   - o Know how to record refill information on the prescription order and the patient's record.
   - o Know how to request a transfer of a prescription from another pharmacy.
   - o Know how to obtain authorization from a prescriber and fill it as a new order.
   - o Know how to transfer a prescription to another pharmacy.

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

11. Stale Dating of Prescriptions
    - o 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.
    - o NBCP Regulation (17.2) prohibits filling or refilling a prescription more than one year after the date of issue.
    - o Be aware of other incidences where a significant amount of time has passed since the prescription has been written and is wanting to be filled (antibiotics, painkillers) and bring this to the attention of the pharmacist.

12. Prescription Records
    - o 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 for filing these records.

13.   Drug Schedules
   o 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.
   o 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 patient self-selection.
   o 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 patient in making an appropriate self-medication selection.
   o Unscheduled drugs can be sold without professional supervision. Adequate information is available for the patient 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.

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 on 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 endpoint. **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 <u>each</u> 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 <u>all</u> 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.** **If an actual situation does not arise, the preceptor and student must discuss a hypothetical scenario for learning purposes**

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	Pre	Mid	End
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.	Pre	Mid	End
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.	Pre	Mid	End
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.	Pre	Mid	End
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	Gather the patient's physical parameters such as height, weight, and blood pressure. (If applicable))			
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 (including verbal transfers). (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.	Pre	Mid	End
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.	Pre	Mid	End
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.	Pre	Mid	End
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.			
4.2	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.			
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 (if there is one_			
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.	Pre	Mid	End
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 (such as administering the flu vaccine).			
5.3	Contribute to the maintenance of a healthy environment for the public.	Pre	Mid	End
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.	Pre	Mid	End
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.	Pre	Mid	End
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.

Learning goals:	Action plan:	Resources:	Learning outcome:
What areas do I need to gain more experience in?	What exercises or activities would help me?	What resources could I use?	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. If you have more than one preceptor, conduct a separate evaluation for each preceptor.

1	Agree strongly		5	Disagree moderately
2	Agree moderately		6	Disagree strongly
3	Agree slightly		NA	Not applicable
4	Disagree slightly			

	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 patient care and/or practice related issues an average of:

	less than 0.5 hour per day		2 to 3 hours per day
	0.5 to 1 hour per day		3 to 4 hours per day
	1 to 2 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 <u>TWO WEEKS</u> 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 <u>TWO WEEKS</u> following its completion.

Appendix 3 – Statement of completion of postgraduate Student training

Preceptors: Please complete one of the following declarations:

1. I hereby declare that _____ **has successfully** completed the
    Pharmacy technician student
    requirements of the New Brunswick College of Pharmacists Pharmacy Technician Structured Practical Experience Program and is hereby recommended to be registered and licensed as a Pharmacy Technician in New Brunswick.

    _____   _____
    PRECEPTOR   DATE

<div align="center">

OR

</div>

2. I hereby declare that _____ **has NOT successfully** completed
    Pharmacy technician student
    the requirements of the New Brunswick College of Pharmacists Pharmacy Technician Structured Practical Experience Program and I do not recommend that the student be registered and licensed as a Pharmacy Technician in New Brunswick.

    _____   _____
    PRECEPTOR   DATE

<div align="center">

OR

</div>

3. I hereby request that _____ be reviewed by another preceptor
    Pharmacy technician student
    approved by the New Brunswick College of Pharmacists, for a period of at least 40 hours and, upon completion, I will be available to consult with the other preceptor and decide which "statement of completion" is appropriate for this candidate.

    _____   _____
    PRECEPTOR   DATE

<div align="center">

Mail, e-mail or fax Appendix 3 to NBCP no later than <u>TWO WEEKS</u> following its completion.

</div>

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 **<u>acceptable</u>** 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.

<p style="text-align: center; color: darkred;">**Mail, e-mail or fax Appendix 4 to NBCP no later than <u>TWO WEEKS</u> following its completion.**</p>

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.

Activity:

Identify the specific corresponding Acts and Regulations relevant to **each** of the stages of the dispensing process that you are involved in at your practice site.

Stages include:
- Receipt of prescription.
- Assessment of appropriateness of therapy.
- Order entry.
- Prescription preparation.
- Check on technical accuracy of completed prescription.
- Release of product to patient.

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.

Activity:
- 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?

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.

Activity:
- 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.
    - Referring to these two situations, identify the specific corresponding parts of the regulations, Code of Ethics, and privacy legislation (PHIA, PIPEDA, PHIPAA)

Example of situations include - routine disposal of patient labels and profiles, accessing patient records, etc.

References: NB Pharmacy Act, 2014 and Regulations, NBCP Code of Ethics, PHIA, PIPEDA

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.

Activity:

Review the New Brunswick College of Pharmacists Code of Ethics (CoE). Then,

- Identify two situations in the practice that present ethical concerns.
- Apply the CoE to these two scenarios and document this application.
- For each bioethical principle within the CoE, provide one example of how a pharmacy technician's activities uphold the principle.

References:
NBCP Code of Ethics
Regulations of the NBCP 6.2 to 6.5
Model for Ethical Decision Making (BC College of Pharmacists)

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 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.

Activity:

- 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 (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?
- How should a pharmacy technician manage the referral of these issues to the pharmacist.

References:
Health Canada Website:
Controlled Drugs and Substances Act (S.C. 1996, c. 19)
Benzodiazepines and Other Targeted Substances Regulations (SOR/2000-217)
Frequently asked questions on the Benzodiazepines and Other Targeted Substances Regulations
Benzodiazepines and Other Targeted Substances Regulations - Guidance Document for Hospitals
NBCP Regulations 27.2 and 27.3

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.

Activity:
- 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).

References:
- NBCP Code of Ethics
- NB Pharmacy Act, 2014 and Regulations of the NBCP
- NAPRA Model Standards of Practice for Pharmacists and Pharmacy Technicians in Canada

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.

- 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?

You are expected to perform this competency element throughout the course of your SPE program.

Examples of scenarios: Destruction of narcotics, shift change over, faxing refill requests for physicians, specific patient requests, etc.

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 in which it would not be appropriate to provide confidential patient information

Reference:

Regulations of the NBCP 17.25 & 17.26

Personal Health Information 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.

Activity:
- Describe a positive situation that occurred during your rotation when the relationship between you and a patient was collaborative.
- What effective communication skills did you demonstrate?
- Describe a situation where the interaction was not ideal between you and a patient.
- What issues do you need to address under this circumstance and what improvements do you need to make?

You are expected to perform this competency element throughout the course of your SPE program.

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.

Activity:

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.

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?
- What is a best possible medication history (BPMH)? Observe a BPMH by your preceptor.

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.

Activity:
• Demonstrate the use of at least two devices (to be determined by your preceptor) to patients or staff. Record a list of devices demonstrated.
• What special advice or precautions specific to each device should be mentioned during these demonstrations?
Devices could include an aero chamber, home blood pressure monitor, glucose meter, home health-care device, eye drops, nasal spray, MDI, injections, etc..

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.

Activity
- 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 **each** of the following: a narcotic drug, a controlled drug, a targeted substance, a prescription received via fax, and a prescription written outside New Brunswick?
- 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?

You are expected to perform this competence element throughout the course of your SPE program.

Reference:
Regulations of the NBCP
Various Federal Legislation – Food & Drugs Act, Controlled Drugs and Substances Act
NAPRA Drug Schedule Regulations
Regulations of the NBCP (Faxing and verbal orders)
NBCP Opioid Agonist Treatment Practice Directive

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.

Activity
- Perform and document three different types of pharmaceutical calculations done 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?

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.

Activity:
- 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 for each drug:
    a. Classification under NAPRA's National Drug Schedules.
    b. Pharmaceutical equivalency status in New Brunswick (for community pharmacy setting).
    c. Automatic substitution status (for hospital pharmacy).
    d. Therapeutic class.
    e. Indications.
    f. Contraindications.
    g. Dosage and administration (e.g., take with food).
    h. Manufacturer and non-manufacturer references used.

References:
Regulations of the NBCP
NAPRA Drug Schedules and searchable database
Health Canada National Drug Database
NB Formulary
e-CPS / CPS
Lexicomp

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.

Activity

Participate in packaging or preparing products for dispensing, including compliance packaging activities at your practice site.

- List at least three items that you have repackaged. Examples of types of packaging for distribution include unit-dose, blister packs, IV admixture, preparing methadone doses. 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 (e.g., take with food, keep refrigerated) and document that discussion, using 3 specific drugs or drug classes as examples.

References:
Regulations of the NBCP
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

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 non-sterile and/or sterile products according to recognized guidelines and standards of practice (if service is provided).

Activity

Prepare non-sterile compounds and observe the preparation of sterile compounded products at your practice site (if service provided).

- List at least two compounds that you have prepared.
- 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?

References:

Policy on Manufacturing and Compounding Drug Products in Canada (POL-0051)

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

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.

Activity

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 patients 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).

- A maximum of 50 prescription checks will be counted in any one day.
- A new tracking log must be used each day to record prescriptions checked and any errors identified.
- 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.
- 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.

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 later.

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.

Activity

Discuss the following with your preceptor and summarize your findings:

- What specifically does the legislation state with respect to the responsibility of the pharmacist to:
  - Ensure the appropriateness of therapy?
  - Counsel the patient?
  - Monitor the initial and ongoing appropriateness of a patient's drug therapy?
- 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 have been met?
- What processes are in place to ensure that the prescriptions are released to the correct customer or agent?

References
Regulations of the NBCP
NAPRA Model Standards of Practice for Pharmacists and Pharmacy Technicians in Canada

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.

Activity

  Discuss dispensing activities with your preceptor then summarize the following:
- How are incoming prescriptions prioritized at your practice site?
- What are the various considerations?
- How are dispensary activities inter-related and impact on each other?

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.

Activity

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?

References:
Regulations of the NBCP
Health Canada Loss and Theft reporting form

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.

4.2.5	Reconcile inventory for controlled substances, or any other substances selected.

Activity

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.
Include:

- How are manual adjustments to the computer or perpetual manual inventory monitored and reviewed?
- What are the documentation and reporting requirements for any narcotic discrepancies that are discovered?

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Resources:
Controlled Drugs and Substances Act and Regulations
Narcotic Control Regulations (C.R.C., c. 1041)
Regulations of the NBCP
Health Canada Loss and Theft reporting form

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.

Activity

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.

- Summarize your findings.
- 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?

References:
Regulations of the NBCP
NAPRA Model Standards of Practice for Pharmacists and Pharmacy Technicians in Canada

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.

Activity

Prepare or 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 details of the health promotion event/presentation you performed.
- Reflect on your learning from this activity.

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.

Activity

Discuss with your preceptor the options available for the proper disposal of drug products.
- How does your pharmacy dispose of regular prescription products, chemotherapy products, vaccines, and narcotics?

Resources:
FDA: Disposal of unused medicines: What you should know
Connecticut: Disposing of Prescription Medicines and Over-the-Counter (OTC) Products
WHO Guidelines for Safe Disposal of Unwanted Pharmaceuticals in and after Emergencies

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.

Activity

Discuss with your preceptor of two interactions you had with a patient or another health-care provider.

- Summarize the interactions.
- How were you able to appropriately provide sufficient information in response to their request?
- Identify when it is appropriate for you to answer patient 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.

Activity

Identify technologies that are used dispensary operation (e.g., tablet counters, packaging machinery, bar-coding, etc.).

- Summarize your discussion with your preceptor about these technologies.
- What is the impact of these technologies on your 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.

Activity

Observe interactions between other health-care providers and/or patients.

- Identify and document 3examples of communication that illustrate sensitivity, respect, and empathy.

Date complete	Time spent (hrs):

Preceptor comments:

Preceptor signature:

Student documentation:

7.0 Communication and education
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.

Activity:

- Describe how you performed taking a verbal order from a prescriber.
- What steps did you take?
- What tips would you tell a colleague about taking verbal orders?
- List 3 dangerous abbreviations you have come across in your practice.
- For each example, what should be used instead?
- How did you communicate with the prescriber/colleague about the use of these unsafe abbreviations?
- What could be the repercussions of using a dangerous abbreviation (give an example)?

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.

Activity
- List the types of healthcare professionals that you interacted with during your rotation.
- Describe the nature of these interactions.

Reference:
Enhancing Interdisciplinary Collaboration in Primary Health Care, Conference Board of Canada

Date complete	Time spent (hrs):

Preceptor comments:

Preceptor signature:

Student documentation:

8.0 Intra and inter-professional collaboration	
8.2 Contribute to the effectiveness of working relationships in collaborative teams.	
8.2.1	Interact respectfully with other members of the team by accepting accountability for themselves and managing disagreements and conflict

Activity:
Think of a time during your SPE where you were either involved in a conflict or disagreement or observed one between team members of with a patient.
- Describe the situation.
- What techniques did you use to resolve the situation?
- What was the result of your interaction?
- Reflecting on the incident, what could have been done differently?

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.

Medication-related safety events (incidents and near misses) 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.

Activities:
1. List two publications that provide guidance regarding continuity of patient care.
2. What major initiatives has your practice implemented that conform with best practice pertaining to safe and effective transitions in care?
3. Describe the pharmacy technician's role in these initiatives.
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.

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.

Activity
- Summarize your discussion with your preceptor about 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?

Reference:
Enhancing Interdisciplinary Collaboration in Primary Health Care, Conference Board of Canada

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.

Activity

With your preceptor, discuss medication incidents.

- Document the process for communicating with a patient when a medication incident has occurred
- Differentiate your role from that of the pharmacist and list the steps that each person is responsible for.

References:
Institute for Healthcare Improvement document: Talking about Harmful Medical Errors with Patients, pp43-49

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 near miss and respond effectively to mitigate harm and prevent reoccurrence.

Activity
- Describe three situations pertaining to medication errors or near-misses that you encountered at your practice site.
- How are these occurrences documented using tools available on the practice site?
- How is the collected information processed for the purpose of error prevention?
- What is the process for investigating, documenting, reporting, and follow-up?

References:
NBCP Practice Directive: Mandatory Medication Incident Reporting
Regulations of the NBCP: 14.2: Quality Management

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.

Activity
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?

Reference:
Institute for Safe Medication Practices website
Healthcare Excellence Canada website
NBCP Practice Directive: Mandatory Medication Incident Reporting

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.

Activity

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 contributed to product safety.
- Record your summary.

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.	
9.3.2	Ensure products are stored and transported under the conditions required to maintain product quality, safety, and integrity, including cold chain management.

Activity:

In pharmacies, you have many products that require special transportation and storage conditions.

- Name 3 products that require special storage conditions.
- How can you ensure that the product received at your pharmacy was stored or transported under the proper conditions?
- What tasks are done at the pharmacy to ensure that the cold chain management stays intact?
- Prior to dispensing the product to the patient, what is done to ensure the safety and the integrity of the product?
- What is done with these products in the event of a power failure?

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.	

9.4.1	Minimize and manage distractions in the work environment.

Activity:
- List 3 distractions you have noticed in your practice environment.
- What could be done to minimize those distractions?
- List some critical tasks in the pharmacy where distractions need to be kept to a minimum.
- What are the repercussions of distractions while performing critical tasks?

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.

Activity
- Identify three hazardous products in the pharmacy that require special handling.
- What precautions and procedures are in place to protect staff in handling these products?

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:

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. The 500 check would need to be restarted from 0.

	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								

Check#	Rx# or type of item checked	No error (initial)	Type of error identified	complete (initial)	checked correctly (initial)	Error missed (initial)	Type of error missed & detail
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							
31							
32							
33							
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