It has been more than a year since pharmacy technicians have become recognized as regulated health professionals in Ontario. To date, the College has registered more than 500 individuals as technicians, and there are up to 5,000 individuals who are on the road to regulation. Technicians play a vital role in the pharmacy setting, supporting the pharmacist in providing more comprehensive patient care services. By taking responsibility for the technical components of dispensing within the pharmacy, technicians allow pharmacists to expand their services and scope of practice to improve patient care.

With changes to pharmacists’ scope of practice on the horizon, the role of the technician in the pharmacy setting is becoming more vital. And while there still may be some barriers to full and effective integration of technicians in the pharmacy, there are some great examples where this new model of professional collaboration is working well – where technicians can practice within their scope allowing the pharmacist to take on more duties related to direct patient care.

In this article, we showcase three of these practice settings. Each of these pharmacies took part in a pilot program organized by their parent company, Loblaw. The aim of the pilot was to fully integrate the registered technician in the pharmacy, measuring success as when the following takes place:

- The registered technician spends most of the day performing their duties, which include accepting responsibility and accountability for the technical aspects of both new and refill prescriptions.
- The pharmacist spends most of the
day evaluating the therapeutic relevance of each prescription and talking to patients, providing professional services and other medication management functions (i.e. pharmaceutical opinions and MedsChecks).

- The prescription-filling process does not slow down.

Each of these pharmacies reflect on the pilot and how they have been able to work in a model that maximizes each professional’s work. These individuals also shed light on some of the challenges of integrating technicians—and how best to meet them.

**Philip Chiu, R.Ph., and Stacy O’Neill, R.Ph.T**
Zehrs Pharmacy, Keswick ON

Philip is standing in the store of the Keswick, ON Pharmacy where he has worked for more than a decade. But he’s not in his usual spot—behind the counter. Rather, he is walking around the store’s pharmacy area, approaching patients who look like they may need some assistance in making health-related choices. “This is something that I’ve only been able to do because I have a technician on staff—and it really is the biggest benefit,” he says. “The technician frees up our time so that we can spend it with our patients. Since we are not tied down to the counter as much, we can float around a lot more, going out to the floor, to approach patients, to provide them counseling. There’s a lot more time to be proactive with the patients.”

Philip works with Stacy O’Neill, a registered pharmacy technician. They have worked together for more than ten years in this store, where Philip is the designated manager. When Stacy became regulated last year, they integrated

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**Loblaw Initiative to Integrate Technicians**

The three stores profiled in this article were all part of a pilot program through Loblaw, which recognizes and supports the expanded role of the pharmacist and thus the expanded role of the technician in pharmacy practice. Loblaw recognized that integrating technicians would require a shift in the way every pharmacy employee would think and behave and set out to provide support to pharmacies shifting to this new model. The three pharmacies were chosen for the pilot based on the following:

- They are busy pharmacies with overlapping pharmacists
- They had pharmacist staff who were demonstrating a good level of support for delivering professional services to their client base
- They employed pharmacists who were willing to support the integration into the new roles

Since February 2011, the pilot has involved regular conference calls with the pharmacies to discuss the integration of the technicians. In April, a four hour live training session for pharmacy managers and technicians was presented. It sought to help staff understand the changes in the pharmacy industry that necessitated the integration of technicians and provided training on maximizing opportunities for delivering professional services. Lynn Halliday, an in-house pharmacist for Loblaw (and non-Council committee member for OCP), developed and presented training strategies aimed at excelling in professional services delivery.

Another live training session in June focused on assessing learning to date and further strategizing on best ways to deliver professional services. Further meetings took place last fall to continue to prepare pharmacy teams on how to best adapt to new changes in scope with the technician playing a prominent role in the process.

Since the pilot program began, Loblaw reports that it more than tripled its prior year results with respect to the delivery of professional services, including MedsChecks.
her into the workflow in such a way that she, as the technician, takes care of the technical portion of the prescription and the pharmacist checks the prescription for therapeutic accuracy at the end of the process.

It’s a process that pharmacies in the Loblaw pilot have implemented and to date it is proving effective.

“Sometimes, the flow gets interrupted when, for example, a patient may approach me with their prescription in hand,” says Phillip, who explains that this requires him to take care of the therapeutic portion of the prescription at the front-end. In reality, the therapeutic check can take place at any point in the process, but Phillip prefers it take place at the end. “There is some advantage to doing the therapeutics at the beginning of the process, but we were finding that we couldn’t spend as much time with patients as we need to at the end because we were simultaneously entering information into the computer.” So Phillip is at the end of the counter, or floating in the store to best optimize his role.

As for Stacy’s role, along with checking prescriptions, she is also responsible for checking compliance packs and taking telephone prescriptions from physicians and other prescribers. “As the technician, Stacy has become this incredibly great filter for me. It frees up my time to counsel patients,” says Phillip.

While Phillip and Stacy have worked together for some time, they both have learned a great deal interacting within this new model.

“We didn’t know what to expect once I became regulated,” says Stacy. “We realized quickly though that everyone on the team, not just the two of us had to be ready for day to day changes to our roles.” She admits that adapting to the new model took some time. “There was definitely a steep learning curve in getting the whole team on board – to have all staff in the dispensary understand their roles,” she says. Stacy estimates that it took a good two to three months for all staff in the pharmacy to get on board with the new model, to understand Stacy’s role and how it would affect them.

For Phillip, the end result couldn’t have been better. Having a technician, in Phillip’s words has been a source of true professional satisfaction. “The new model has allowed me and the other pharmacists working in the store, to expand the amount of time we have to engage and interact with patients, going more in-depth to their health situation than ever before.”

Both Phillip and Stacy agree that the biggest challenge has been changing old habits and creating new ones. Says Phillip, “I know for myself, that when Stacy first became regulated, I couldn’t help but check for technical accuracy while I was doing the therapeutics. I was so used to checking that part of the prescription. But the more
we work within this new model, the more comfortable we are with the technician’s ability.”

For Stacy, there were challenges inherent in learning a new skill and applying it to real-life situations as well as the challenges in helping staff to understand the new role of the technician. “The other clerks had to understand what I was doing – what my role was, and at times there were some challenges in making those clarifications. But overall the acceptance level with them has been very good. Other staff have certainly showed interest in my role and in understanding the duties that I took over from the pharmacist. Overall, I think everyone in our pharmacy would agree that it’s been a very positive situation.”

Do they have any advice for other pharmacy practitioners that may want to integrate technicians into the workflow and don’t know where to start?

Philip says it’s all about having an open mind. “Technicians can really help you in your practice,” he says. “And the results are really gratifying – you can see them in terms of the number of patients that you can help counsel and to whom you can provide extra care. It’s great to have another professional on the team that can help take away some of the workload.”

Stacy adds that having support from other stores involved in the pilot has helped as has the support from the management team. “It’s certainly made the transition easier,” she says. As for any advice for other technicians who are integrating into a new role, she says “Just go for it. There’s no reason to be reluctant. It’s a great profession and many more opportunities to develop. We’re just getting started.”

In Brantford, confidence is the name of the game as technician Andrea Ball works alongside pharmacist and manager Santosh Manjunath in a truly coordinated effort. Having Andrea, a technician on the team, according to Santosh has made a significant difference.

“I can say definitively that there is a major benefit in having a registered technician on the team,” says Santosh. Like his counterparts in Keswick, Santosh points to the fact that having the technician handling the technical portion of the prescription allows him and the other three pharmacists on his team to take on more of the medication management issues facing patients. “Having the technician on the team gives us more free time which has resulted in us spending more time with our patients,” he says.

That free time is spent, Santosh says, performing MedsChecks, and counselling on a variety of issues such as smoking cessation, weight control and cholesterol monitoring.

“Previously, patients always had to make appointments for this type of counselling,” he says. “And while appointments make it easier for us to schedule seeing patients, they
can now walk in and often find me and my other pharmacist colleagues, available to do these important procedures and checks. It helps the patients, and the public at large in monitoring their health issues.”

Santosh says his role has changed dramatically with the technician on board. “I feel like an advisor/mentor who has directly helped my patients towards achieving healthy outcomes. It’s very satisfying.”

Andrea, a regulated technician who also volunteers as a non-council committee member with OCP has worked in pharmacy with Loblaw for 16 years—the past 10 with Santosh. She says that having her take on more responsibility in the pharmacy has contributed to a growing bond between patients and the pharmacists. “I see a definite increase in the confidence level our patients have with the pharmacist,” she says. “In our pharmacy it’s great because everyone is ready to change and accept the different roles and responsibilities.”

Like their Keswick colleagues, in this setting, the workflow is one that puts the pharmacist at the end of the process. “The technician or assistant is responsible for inputting information into the system to start the production required to fill a prescription. The technician performs the technical aspect—making sure the right medication and dose is dispensed for the right patient. The pharmacist comes in at the end of that process to provide the therapeutic check and to counsel.”

Andrea admits that the process wasn’t always smooth and it took some time for all members of the pharmacy team to be confident in each other and the new roles brought about by regulation. “It was definitely a little hard in the beginning. Everyone’s a bit nervous about taking on a new skill,” she says. “But we have been fortunate to have such a supportive team. From the beginning, the staff has all been very generous and patient with the shifts in responsibilities.” Santosh admits that it took him some time to get used to the idea of Andrea, as the technician, checking the technical aspects of the prescription. “I couldn’t help it at first—I was so used to checking the prescription from a technical basis, that it was just natural to continue to do so. But after a couple of weeks in the new model, that overlap stopped.”

“I’m very fortunate that Andrea is so capable in her work which gives me the added confidence of her performing her role,” he says. Still, Santosh says, there were some bumps along the road as other pharmacy staff became accustomed to Andrea’s new role in the pharmacy. “In the beginning, the assistants would avoid consulting with Andrea as a technician. They were accustomed to coming to me directly with questions,” says Santosh. “I made it clear that Andrea was and will continue to be, as a regulated technician, responsible for doing the technical check and made them go to her directly. It’s a matter of sticking by those rules in order to help everyone’s comfort level. It allowed them to develop their own similar rapport with her and develop their own relationship.”

Andrea’s role in the pharmacy has rubbed off on others: all five of their assistants are pursuing regulation. “I’m so happy for them,” says Andrea. “It’s a really good sign—it shows that in this pharmacy, everyone is on board and supportive of the technician role. I think that my colleagues can definitely learn from me and watch with anticipation on how they are going to work in their new role.”

For Santosh, this is all good news as he continues to build deeper relationships with patients as he counsels them. “When we spend more time with patients they get to know us by name. For me, that means that they walk in and look for me specifically. On a professional level, I feel very satisfied by this.”

Both Santosh and Andrea point to the pilot program as an important catalyst for establishing their workflow and determining the new roles in the pharmacy. “Other pharmacists in town have been asking me how it works and I’ve been speaking with them to share the knowledge we’ve had the good fortune to gain from our head office.”

Hemal Mamtora, R.Ph., Vipul Patel, R.Ph., and Kim Lumsden, R.Ph.T.
Real Canadian Superstore, Strathroy, ON

Hemal Mamtora recalls a recent phone call he received from a patient. “This patient called me to say how grateful he was that I spent so much time with him to help assess his diabetes risk,” says Hemal, the pharmacy manager of the Real Canadian Superstore.
in Strathroy, ON. “He said he was so surprised by the effort I made to help him understand his risk profile, and how much he learned about his own health as a result.” The interaction with this patient, says Hemal, was only possible due to the fact that he had a technician working on his team – that vital health professional who can take responsibility for so many duties in the pharmacy – allowing Hemal to provide one-on-one counselling to patients. “The accessibility that patients now have to me is so valuable,” he says. “I can now spend time with patients and provide counsel to them. It’s important to so many different kinds of patients – for the newly diagnosed diabetic, for example, I can assist with their blood-glucose monitoring, and be available for follow up.”
Kim Lumsden is the registered pharmacy technician in the pharmacy. She has worked there for 13 years. In their pharmacy, Kim is also situated at the point in the process where the technical check of the prescription is completed.

Hemal says that within a couple of months of Kim performing her new role, he felt confident that he didn’t have to double check her work. “We have great confidence in her training and ability – she has really added value to the team.” Kim admits that when she first became a regulated technician, there were some challenges in defining her role among her colleagues. “The main challenge was to have other staff understand my new role.” She says that it took about a month for everyone to understand and be comfortable with who was doing what and who was responsible for what,” she says. Still, Kim recalls times when there have been misunderstandings about her role, particularly, for example, if there is a relief pharmacist on duty, who may not be used to working with a technician. “Like everything, communication is critical. Not all pharmacists may be used to working with a regulated technician, so it is natural that there may be some confusion as to why I’m doing what I’m doing. So it’s important to let everyone know how the process works and educating them on what the technician is responsible for.”

Hemal says that for pharmacies who are thinking about integrating a technician into their practice, he says it’s important to plan. “You have to draw up a plan on how you are going to integrate the technician into the workflow and communicate that with fellow staff members,” he says. “At the same time, the pharmacist/manager should also be able to determine what extended services he or she is planning to provide to patients.”

Vipul Patel, Pharmacy Director of Operations for the store, agrees. He says it is vital that pharmacists working with technicians are in a unique position to devote more time to patients, and that they must plan on how they are going to best use this time. "As a pharmacist, if you want to move forward and adapt to changes in scope, then this new model is fantastic." Vipul Patel, Pharmacy Director of Operations for the store, agrees. He says it is vital that pharmacists working with technicians are in a unique position to devote more time to patients, and that they must plan on how they are going to best use this time. "As a pharmacist, if you want to move forward and adapt to changes in scope, then this new model is fantastic." Vipul Patel, Pharmacy Director of Operations for the store, agrees. He says it is vital that pharmacists working with technicians are in a unique position to devote more time to patients, and that they must plan on how they are going to best use this time. "As a pharmacist, if you want to move forward and adapt to changes in scope, then this new model is fantastic."
Each visit provided the pharmacy team members with an opportunity to discuss their successes and challenges and also seek clarification and feedback from College staff about their understanding of the technician role. For College staff, the visits have been invaluable, allowing us to share collective learning, correct some misconceptions and encourage others to benefit from the integration of these new team members. Although the process and model for integration of the technician was unique to each workplace, the discussion and issues were consistently related to the new role of the pharmacy technician in the dispensing of a prescription.

RESPONSIBILITY:
Every professional is responsible for meeting the standards of practice of their profession.

Technicians are responsible and accountable for the technical aspects of all prescriptions that they check, both new and refill (e.g. the correct patient, product and prescriber in accordance with the prescription).

Pharmacists remain responsible and accountable for the therapeutic/clinical appropriateness of all prescriptions, both new and refill.

ACCEPTING VERBAL PRESCRIPTIONS:
Pharmacy technicians are able to accept verbal prescriptions, with the exception of narcotics and controlled drug substances.

Once legislative changes to the Food and Drug Act regulations are in place, pharmacy technicians will also be able to independently receive and provide prescription transfers.
**INDEPENDENT DOUBLE CHECK:**

The requirement to have an “independent double check” may have been a barrier to the integration of technicians in some practice settings. Standards of practice for technicians are now in place and allow for more flexibility. Whenever possible, a final check should be performed by a pharmacy technician (or a pharmacist) who did not enter the prescription into the pharmacy software system or who did not select the drug from stock. However, if another member of the team is not available, a final check can be completed by one professional providing there are other systems in place to ensure safe medication practices.

**WORK FLOW AND PROCESSES**

There is no one model that fits all. While the objective is to optimize the role of the technician and pharmacist, workflow will be dependent on physical layout, resources/staffing, patient population/characteristics etc. The pharmacist may best be positioned at the beginning of the workflow process and assess the appropriateness of the prescription even before the data is entered into the computer by the assistant or technician. Alternately the pharmacist may perform this activity at any time during the process or at the end.

Note that the technician cannot release the product to the patient until the pharmacist has performed the therapeutic check. It is important that the pharmacist’s signature is clearly visible on the prescription to allow the team to establish that this has occurred. Some pharmacies use a stamp to mark the place for the pharmacist’s signature.

The pharmacy manager must establish a method of differentiating and preserving the identification of the pharmacist and technician responsible for each prescription. Although signatures are the traditional method of accepting or declining responsibility, pharmacy teams may wish to utilize other mechanisms within clearly defined and understood protocols. Future electronic workflow processes should consider this requirement.

An example of where a protocol could be utilized would be when dispensing within a compliance program. The technician checks the technical aspects of the weekly compliance packaging and signs for this activity. The pharmacist may perform this activity on a regular basis as well as with each new prescription and when changes are made to any existing prescriptions.

The common objective of all pharmacies we visited is to increase opportunities to deliver professional services such as MedsChecks, Pharmaceutical Opinion Program and Smoking Cessation and to improve the quality of such interactions. All of the pharmacy teams agreed that the pharmacist generally had more time to spend with patients and this had a very positive effect on the patient–pharmacist relationship.

**CREATING INTRA–PROFESSIONAL RELATIONSHIPS**

Every site the College visited reported that they began to integrate the technician role slowly and cautiously. Pharmacy technicians acknowledged that they wanted time to gain confidence and adjust to the new level of accountability. They also realized that they needed to demonstrate their ability so that the pharmacist could feel confident in letting go of the technical functions.

Pharmacists told us they had to rethink how to perform their job and learn how to separate the technical and therapeutic functions. For some pharmacists it was difficult to see the added value of making these adjustments, particularly if the pharmacy technician was not being utilized to their full capacity. Both team members described the importance of being able to openly discuss their roles and test out new approaches collaboratively.

The introduction of a pharmacy technician role on the team also resulted in new relationships with pharmacy assistants. The pharmacy technicians acknowledged the challenge of accepting new responsibility for the work of others particularly when managing errors. They also noted how fortunate they were to be in their new role, recognizing that the opportunities for these roles have been limited. This realization added to the technician’s sense of responsibility to represent their profession well and a desire that their success will lead to increased opportunities for other regulated pharmacy technicians.