

**PHARMACY TECHNICIAN
CERTIFICATION
AND
TRAINING TO PERFORM
MEDICATION HISTORY COLLECTION**



Objectives

At the conclusion of this activity,

Pharmacists will be able to:

- ▣ List topics pharmacy technicians should be trained in to perform medication history collection
- ▣ Evaluate pharmacy technician competency in collecting medication history
- ▣ Identify the advanced credentials available to pharmacy technicians and understand the training required to obtain them.

Pharmacy technicians will be able to:

- ▣ Identify barriers to collecting a best possible medication history
- ▣ Describe how to collect a best possible medication history
- ▣ List the steps to becoming an Advanced Certified Pharmacy Technician (CPhT-Adv).

BACKGROUND

Medication reconciliation committee

- Goal of improving discharge medication reconciliation
- Upon review, many discharge discrepancies caused by inaccurate information entered on admission
 - ▣ Plan to improve admission medication history collection
- Literature search has shown that pharmacy staff collect more accurate medication histories
 - ▣ Trained pharmacy technicians perform as well as pharmacists

Health Workforce Retraining Initiative Grant

- Goals
 - Pharmacy technician certification for uncertified technicians
 - Medication history collection training
- Hired
 - Pharmacist trainer
 - Technician backfill
- Purchased
 - Equipment (workstation on wheels)
 - Reference books
 - Study materials
 - Payment for test

Exclusions

- Some pharmacy technicians were excluded from medication history collection training (supervisor decision)
 - ▣ Language barrier
 - ▣ Specialized job function
 - ▣ Personality

Medication History Collection Training



Preparation



Patient Interview



Emergency Department Layout/Finding Patients



Computer System Training

-separate pharmacy and EMR systems



Didactic Classes on Dosage Forms and Nonformulary
Products



Review follow up questions

Preparation

- Review patient profile
 - Alert and oriented?
 - Arrived to ED alone or with someone?
 - HIPAA
- Review outpatient information
- Previous collection done by nurse or provider
- Review transfer sheets if arriving from outside facility



Patient interview

- Technicians may not be familiar with patient interview process
 - ▣ Simulation during training
- Greeting
- Open ended questions
- BPMH Check list



Greeting

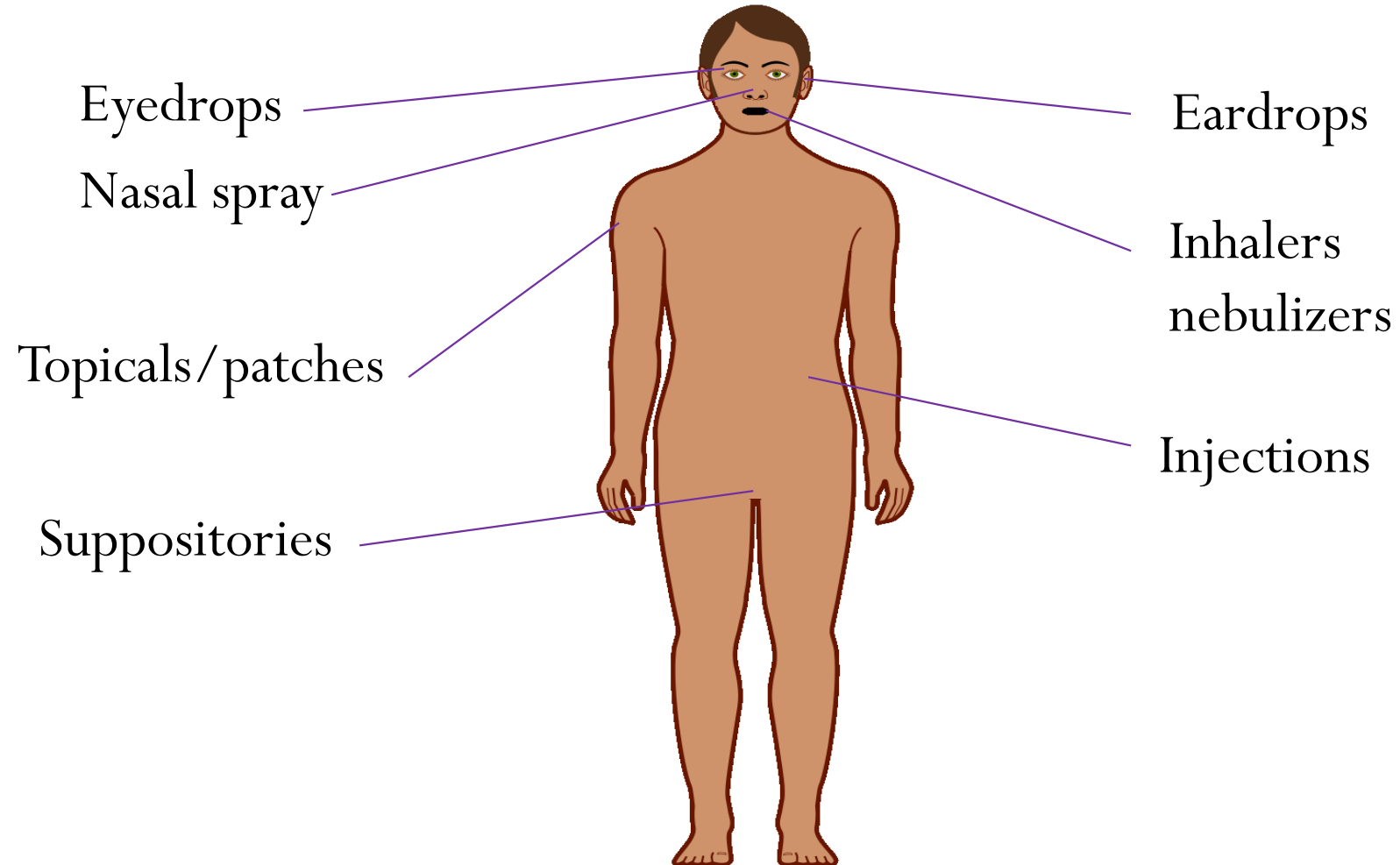
- Introduction
 - ▣ Technician name
 - ▣ Title
- Purpose
 - ▣ Collect medication list
 - ▣ Ask questions about medications
- Is now a good time?
 - ▣ Especially if someone is with the patient
- Double identifier
 - ▣ Patient name
 - ▣ Date of birth

Examples of open ended questions

- Who takes care of your medications at home?
- What medications are you taking?
- What dose, strength, frequency?
- What do you take this medication for?
- When is the last time you took this medication?

- How do you take this medication?

Non-oral medications



BPMH checklist

BPMH High-Performance Behaviors Checklist:

Asks the patient open-ended questions about what medications she or he is taking (i.e., doesn't read the list and ask if it is correct)	<input type="checkbox"/>
Uses probing questions to elicit additional information: non-oral meds, non-daily meds, PRN medications, non-prescription meds, samples	<input type="checkbox"/>
Uses other probes to elicit additional medications: common reasons for PRNs, meds for problems in the problem list, meds prescribed by specialists	<input type="checkbox"/>
Asks about adherence	<input type="checkbox"/>
Uses at least two sources of medications, ideally one provided by the patient and one from another "objective" source (e.g., patient's own list and ambulatory EMR med list)	<input type="checkbox"/>
Knows when to stop getting additional sources (e.g., if patient has a list or pill bottles and seems completely reliable and data are not that dissimilar from the other sources, and/or the differences can be explained)	<input type="checkbox"/>
Knows when to get additional sources if available (e.g., if patient is not sure, relying on memory only or cannot resolve discrepancies among the various sources of medication information)	<input type="checkbox"/>
When additional sources are needed, uses available sources first (e.g., pill bottles if present). Then obtains pharmacy data. If the medication history is still not clear: obtains outpatient provider lists, pill bottles from home and/or other sources.	<input type="checkbox"/>
Uses resources like Lexicomp to identify loose medications (i.e., for a bag of medications, not in their bottles, provided by a patient)	<input type="checkbox"/>
Returns to patient to review new information, resolve all remaining discrepancies	<input type="checkbox"/>
Gets help from other team members when needed	<input type="checkbox"/>
Educates the patient and/or caregiver of the importance of carrying an accurate and up to date medication list with them	<input type="checkbox"/>

Assessment question

Which of the following is a correct step to take when collecting a BPMH?

- A. Use open ended questions
- B. Use at least 2 sources of information
- C. Ask about non-oral, non-daily, and non-prescription medications
- D. Return to the patient to clarify and resolve discrepancies
- E. All of the above

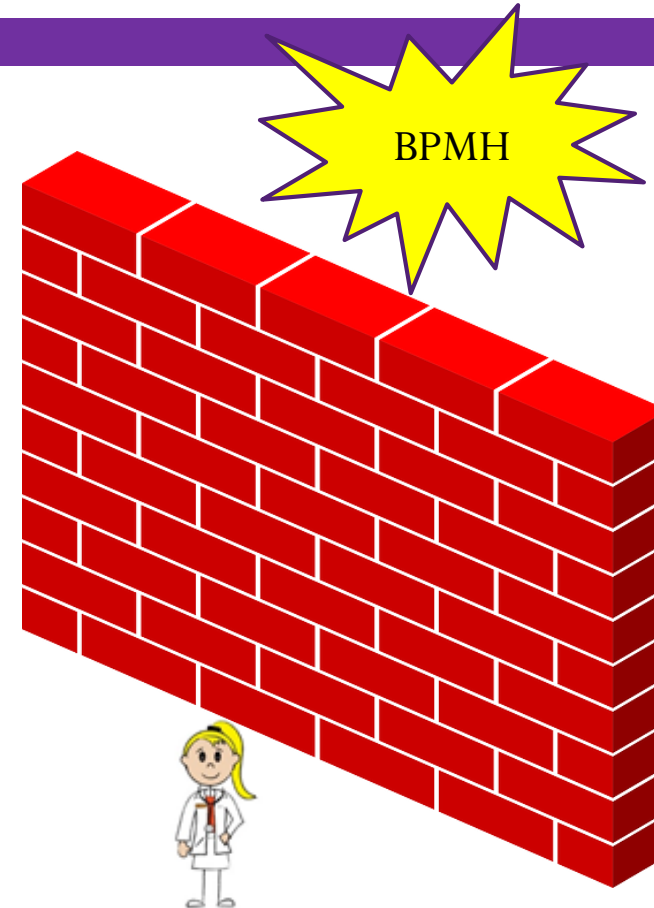
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- D. Return to the patient to clarify and resolve discrepancies
- E. All of the above**

Examples of barriers to collecting a BPMH

- Language
- Dementia/ Altered mental status
- Illness
- Patient unfamiliar with medications
 - Patient does not have a medication list
- Patient upset/refusing
 - History already collected by other staff
- Patient not available
 - Transfer
 - Tests
 - Seen by other staff
- Computer systems do not communicate
- Outpatient providers have inaccurate lists
- Lack of time



Assessment question

Which of the following is NOT a barrier to collecting a BPMH?

- A. Lack of time
- B. Cost of medications
- C. Dementia
- D. Computer system do not communicate
- E. Outpatient providers have inaccurate lists

Assessment question

Which of the following is NOT a barrier to collecting a BPMH?

A. Lack of time

B. Cost of medications

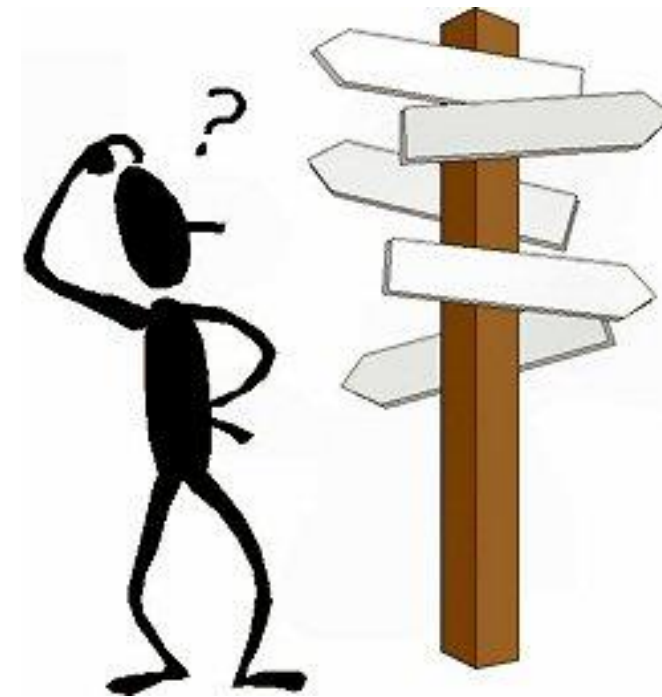
C. Dementia

D. Computer system do not communicate

E. Outpatient providers have inaccurate lists

Emergency department orientation

- General layout
 - ▣ Waiting room/triage
 - ▣ Beds
 - ▣ Stretchers
 - ▣ Chairs
 - ▣ Isolation rooms
- Pharmacy area/work space
- Contact precautions
- Hand hygiene



Computer system training

- Navigation
- ED tracking board/patient list
- Outpatient information
- Outpatient pharmacy/provider contact information
 - ▣ Call pharmacy or doctor's office for more information
- Medication history documentation
- Update default pharmacy
- Tips and tricks
 - ▣ Duoneb → ipratropium/albuterol



Medication education

- Nonformulary/ outpatient medications
 - ▣ Inhalers
 - ▣ Insulins
 - ▣ Noninsulin injectables
 - ▣ Oral diabetic medications
 - ▣ Combination products
- Dosage forms (extended/immediate release)



Examples of follow up questions

- Rescue inhalers if on maintenance inhalers
- Vitamin D if on calcium
- Not taking medication: prescriber aware or stopped by self
- Indication for as needed medication
- Topical medication application site
- Date started/day of therapy for short term medications
 - Antibiotics
 - Steroid taper
- Specific location of pharmacy (town/street)



Hands on in the emergency room

- Pharmacist hired by grant
- Backfill technicians while training technician was in the ED
- A week with pharmacist supervision
- Competency review at the end of the week



Competency Form

COMPETENCY EVALUATION

Employee Name: _____ ID#: _____

Position: Pharmacy Technician Department: Pharmacy

Initial ____ Ongoing ____ **Home Medication Collection**

The above staff member must be able to demonstrate the knowledge and skills necessary to perform their job to comply with CMS meaningful use. The skills and knowledge needed to perform such job must be gained through education, training or experience.

Validation Codes: (Note 1, 2, 3, 4)

1. Direct observation
2. Test
3. Review of Records
4. Return Demonstration

	Validation	Evaluator's Signature	Date
CORE			
Can select and prioritize patients based on updated training	1,4		
Can perform proper hand hygiene before and after seeing a patient	1		
Can greet patients in the Emergency Department in a professional and welcoming manner	1,4		
Collect a complete and accurate list of patient Rx medications, OTC, herbal products and supplements	3		
Obtain additional medication information from outside sources when necessary (including Pharmacies, Retail and mail-order, MD offices, extended care facilities or other care takers)	1,4		
Set default pharmacy in Soarian Clinicals for patients needing this service	1,4		
Communicate with other healthcare professionals to maintain adequate workflow and identify patient specific needs (ie language barriers)	1,4		
Complies with HIPAA privacy policies	1		
Can navigate Soarian Clinicals	1,4		
Can accurately enter the medication list into hospital information system in a timely manner	1,4		
Direct any unresolved issues and discrepancies to the Pharmacist	1,4		
Required SABA training has been completed	2		

Employee Signature: _____ Date: _____

Assessment Question

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Which of the following is NOT a topic pharmacy technicians should be trained in to work in the emergency department and collect medication history?

- A. Emergency department layout
- B. Patient interview process/BPMH
- C. Pharmacokinetics
- D. Outpatient medications
- E. Computer system

Assessment Question

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Which of the following is NOT a topic pharmacy technicians should be trained in to work in the emergency department and collect medication history?

- A. Emergency department layout
- B. Patient interview process/BPMH
- C. Pharmacokinetics**
- D. Outpatient medications
- E. Computer system

References

- Johnston R, Saulnier L, Gould O. Best possible medication history in the emergency department: comparing pharmacy technicians and pharmacists. *Can J Hosp Pharm*. 2010 Sep;63(5):359-65.
- Johnson A, Gulrguls E, Grace Y. Preventing medication errors in transitions of care: A patient case approach. *J Am Pharm Assoc*. 2015 Mar-Apr;55(2):e264-74.
- “Medication Reconciliation: Clinical Topics.” *Medication Reconciliation | Clinical Topics | Society of Hospital Medicine*, www.hospitalmedicine.org/clinical-topics/medication-reconciliation.

Pharmacy Technician Credentials

Ryan Burke, PharmD
Director, Professional Affairs
Pharmacy Technician Certification Board

New York State Council of Health-System Pharmacists
November 5, 2019



Disclosures

Ryan Burke is employed by the Pharmacy Technician Certification Board. He declares no other conflicts of interest, real or apparent, and no other financial interests in any company, product, or service mentioned in this program, including grants, employment, gifts, stock holdings, and honoraria.



Learning Objectives

Pharmacists

- ✓ Identify the advanced credentials available to pharmacy technicians and understand the training required to obtain them.

Pharmacy Technicians

- ✓ List the steps to becoming an Advanced Certified Pharmacy Technician (CPhT-Adv).

Mission and Vision



Mission: PTCB advances medication safety by credentialing technicians who are qualified to support pharmacists and patient care teams in all practice settings.



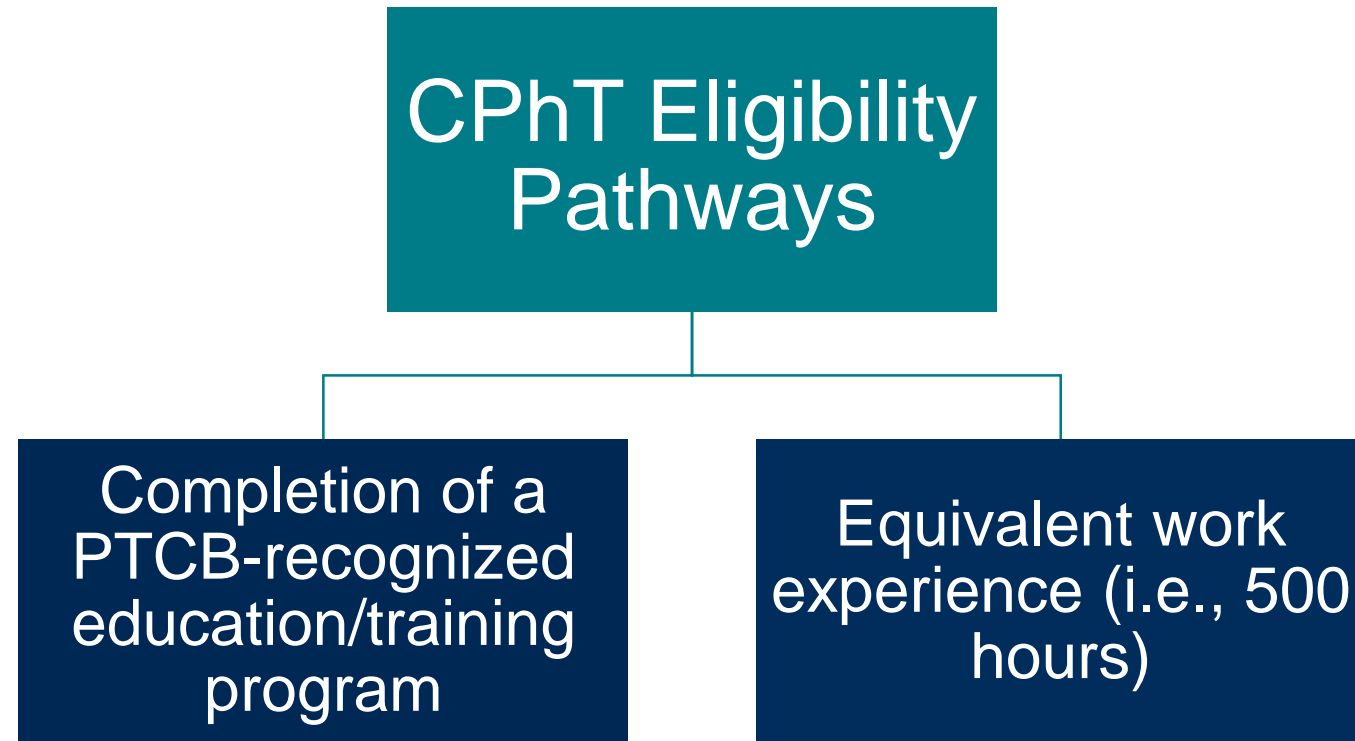
Vision: PTCB sets the standard for credentialing of technicians that improves medication safety and patient care.



Recent & Upcoming Changes



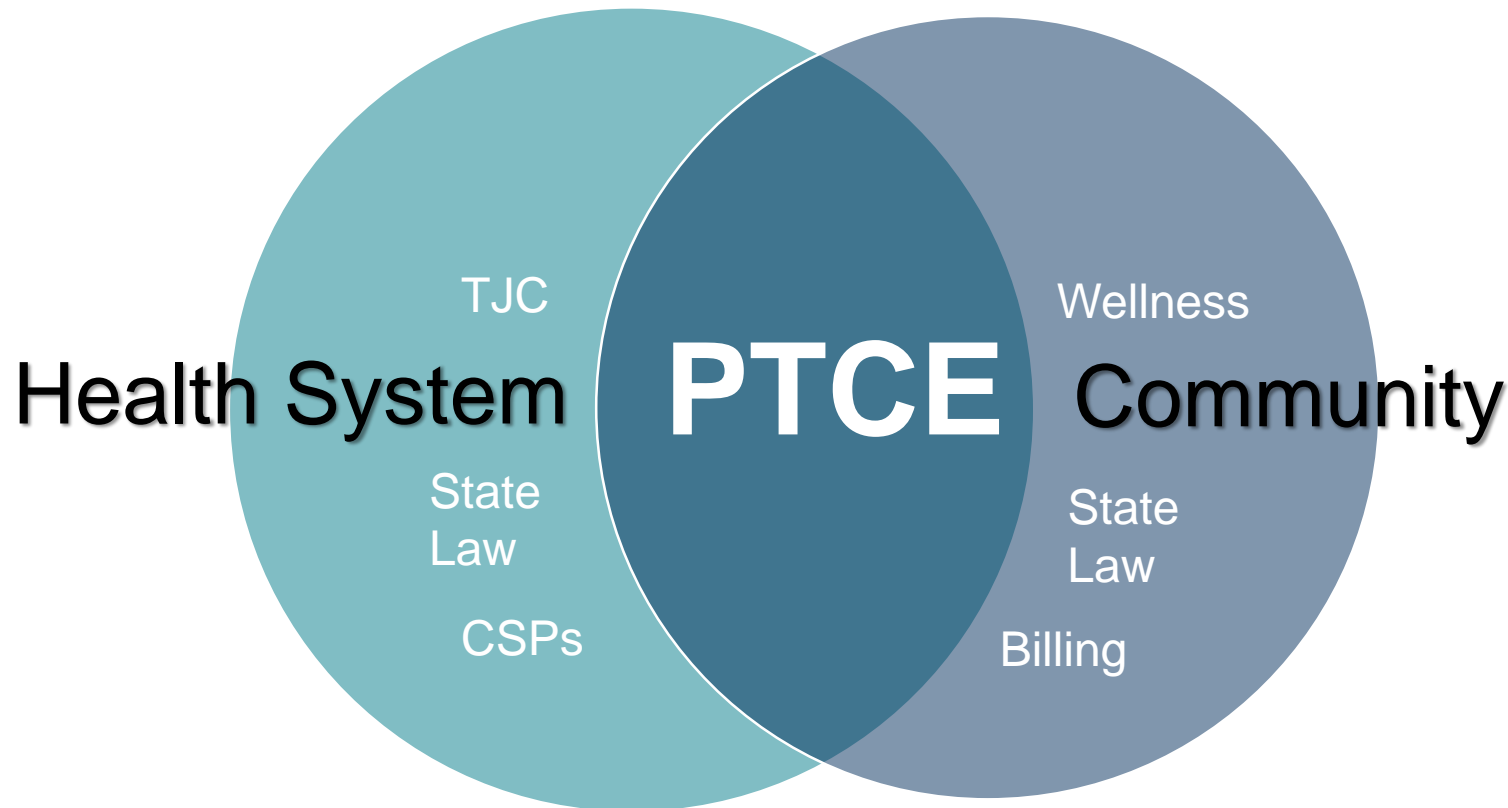
Education/Training Requirement



Required knowledge is the same for both paths.

Future CPhT Changes: PTCE 3.0

PTCE will contain only the most important content relevant to both major areas of practice.



Assessment-Based Certificate Programs & Advanced Credentials



Assessment-Based Certificate Programs

- ✓ Technician Product Verification (Tech-Check-Tech)
- ✓ Medication History
- ✓ Hazardous Drug Management
- ✓ Billing and Reimbursement
- ✓ Controlled Substance Diversion Prevention

Eligibility Criteria: Be an active PTCB CPhT and complete a PTCB-recognized education/training program. Some programs will also include an alternative eligibility pathway.



Medication History Certificate Program



Scope of the Program



Medication History

PTCB Medication History certificate holders have demonstrated the necessary training, experience, and knowledge to be entrusted to collect an accurate medication history from patients in any health-care setting.

Medication History Program



*Approximately 50% of time spent in work activities should involve patient-focused communication (e.g., intake of new patients/prescriptions, answering patient questions). The intention of the requirement is that pharmacy technicians with full-time work experience in community pharmacies and/or work experience in ambulatory/hospital roles focused on taking medication histories will meet the spirit of the requirement.



Medication History Exam Content Outline

Concepts/Terminology of Medication History (45%)

Definitions of key terms in the medication history process (e.g., medication allergy vs. medication intolerance, medication adherence)

Translation between patient-friendly terms and medical terminology

Adherence metrics and differences between primary and secondary nonadherence

Common vaccinations and vaccination schedules

Medication History Exam Content Outline

Patient Safety & Quality Assurance Strategies (55%)

Types of prescription/medication errors (e.g., abnormal doses, incorrect quantity, incorrect strength, incorrect drug, incorrect route of administration, incorrect directions, wrong timing, missing dose, misinterpretation of drug concentration)

Potential impact of medication errors, including look-alike/sound-alike medications (e.g., ampicillin/amoxicillin)

Patient factors that influence the ability to report medication information accurately and adhere to prescribed dosing schedules

HIPAA and best practices to maintain patient confidentiality during patient conversations

Techniques or devices to assist with safe and consistent home medication use (e.g., pill boxes, medication calendars, medication alarms)

Procedures to verify patient identity, including appropriate identifiers and knowledge of limitations for different identifiers

Medication History Exam

- ✓ Computer-based exam with 79 multiple-choice questions
- ✓ 2 hours (10-minute tutorial and survey, 1 hour and 50 minute exam)

A note about scoring: Because the Medication History Assessment-Based Certificate Program is new, scoring will be delayed by 3-4 months. PTCB will apply the same rigorous process to determine the passing score for the Medication History Exam after multiple candidates have tested.



Digital Badges



Advanced Certified Pharmacy Technician

Be an active PTCB
CPhT

+

Successfully
complete at least 4
certificate programs*

+

Have at least 3 years
of work experience in
the last 8 years

*One must be either TPV or
Medication History

Individuals who earn the CPhT-Adv credential will be required to earn additional CE hours to maintain their certification.



Self-Assessment Question

Which topic will not be included in the initial release of PTCB's Assessment-Based Certificate Programs?

- A. Technician Product Verification
- B. Medication History
- C. Immunization Delivery
- D. Controlled Substance Diversion Prevention
- E. Hazardous Drug Management



Self-Assessment Question

Which topic will not be included in the initial release of PTCB's Assessment-Based Certificate Programs?

A. Technician Product Verification

B. Medication History

C. Immunization Delivery

D. Controlled Substance Diversion Prevention

E. Hazardous Drug Management



Self-Assessment Question

How many years of work experience must a certified pharmacy technician have in order to be eligible to earn the Advanced Certified Pharmacy Technician Credential (CPhT-Adv)?

- A. 2 years
- B. 3 years
- C. 4 years
- D. 5 years
- E. 6 years



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How many years of work experience must a certified pharmacy technician have in order to be eligible to earn the Advanced Certified Pharmacy Technician Credential (CPhT-Adv)?

- A. 2 years
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- C. 4 years
- D. 5 years
- E. 6 years



Thank you!

Questions?

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