

CONFERENCE ABSTRACTS

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Pharmacy technicians

Interprofessional education and collaboration between pharmacy technician students and university college Copenhagen students

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Introduction: Since 2019, the Danish College of Pharmacy Technicians (CPT) has collaborated with University College Copenhagen (UCC) on a course where the students cooperate interprofessionally. In the course, the University College Copenhagen students were presented with a challenge concerning a specific patient group at the community pharmacy and they should develop an idea for an interprofessional intervention to solve the challenge. The UCC students received feedback on their ideas from students and teachers from the CPT.

Objectives: The purpose of this study is to identify the kind of learning the students from various health-related educations acquire when they engage in an interprofessional course to discuss and solve healthcare challenges

Methods: Electronic questionnaires were sent to UCC students and pharmacy technician students. Data from the questionnaires was analysed quantitatively in Excel and qualitatively in NVivo version 13. The data was presented and discussed at a workshop where researchers and teachers from the CPT and the UCC can share their reflections about the students' learning from the course.

Results: Five (38%) UCC students and 27 pharmacy technician students (63%) answered the questionnaires. The pharmacy

technician students scored 5.4 and the UCC students scored 6.0 on average on a scale from 0-10, where 10 is the highest, on the question: "How much did the course contribute to your learning about interprofessional collaboration?".

The following themes were found in the qualitative data from the questionnaires: a) The contribution of the pharmacy technician students to idea generation varied; b) Certain things facilitated the dialogue between the students; c) Feedback from pharmacy technician students and teachers was useful; d) Developing holistic solutions to the presented challenge was complex; e) The pharmacy technician students found it useful to see their role and practice from another perspective; f) It is important to know each other's strengths and competencies; g) Additional interprofessional collaborations is useful; h) A collaboration across sectors can be beneficial for patients in transition in health care; i) Some of the pharmacy technician students have not acquired enough knowledge about the professional competencies of the UCC students; j) There is a difference as to how much and in which areas the pharmacy technician students can use the acquired knowledge; k) Some of the pharmacy technician students gave feedback during idea generation but wanted to be more involved in solving the challenge; l) The course should be organized to be relevant for everybody involved.

Conclusions: The results were discussed with researchers and teachers from the two educational institutions and their input was compiled with the results from the questionnaires. The conclusion was presented at FIP Seville.

Pharmacy technician workforce development in primary care roles

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Introduction: The pharmacy technician role in the United Kingdom (UK) has traditionally focused on the safe supply of medicines within community and hospital pharmacies. The recognition of pharmacy technicians in the UK as an independent profession in 2011 provided significant impetus for role expansion. In 2019, the UK government funded both pharmacists and pharmacy technicians to be employed in primary care organisations, alongside physicians, to improve the use and safety of medicines in this environment. A national training programme, the Primary Care Pharmacy Education Pathway (PCPEP), was developed to provide requisite knowledge and skills, with learners supported in the workplace by a clinical supervisor. Delivered intra-professionally, the PCPEP involved both professions attending the same study days and undergoing similar workplace assessments.

Objectives: To describe the range of responsibilities of pharmacy technicians in primary care, identify the potential benefits associated with role expansion, and explore the effectiveness of the training pathway.

Methods: Two online surveys, for pharmacy technicians and clinical supervisors respectively, were created and distributed to potential participants via a gatekeeper. The pharmacy technician survey focused on the pharmacy technician's responsibilities, their role within the team, and their development. The clinical supervisor survey focused on the enablers and barriers to supervision, pharmacy technician training requirements, and the effect of the pharmacy technician role on patients and the healthcare team. Quantitative data were analysed using descriptive statistics and qualitative data were thematically analysed and summarised. Ethical approval was obtained from the University of East Anglia (ref: 2020/21-158).

Results: There were 224 respondents to the pharmacy technician survey and 72 respondents to the clinical supervisor survey. Responsibilities held by pharmacy technicians included: medicines reconciliation post-hospital discharge (85.5%), conducting medicines reviews (44.1%), and supporting antimicrobial stewardship (43.5%). Primary care colleagues did not always understand the role of the pharmacy technician (29.9%), which was a barrier to their development.

Clinical supervisors (97.3%) recommended employing a pharmacy technician to other primary care organisations. Reasons for this included: enhancing the patient experience, possessing a skillset essential to primary care, and improving medication safety. Lack of time was the main barrier to providing adequate clinical supervision. Economic benefits of employing pharmacy technicians were identified by supervisors "they save £2 for every £1 it costs to employ them".

Pharmacy technicians and clinical supervisors identified that the PCPEP was supporting pharmacy technicians to learn, develop and expand their role in primary care. However, teaching pharmacists and pharmacy technicians together did not appear to be the optimum learning environment due to the different knowledge and skill requirements for each of the different professions.

Conclusions: Pharmacy technicians in primary care report a varied and clinically complex range of responsibilities. Clinical supervisors identified these responsibilities as effective, safe, and represented good value for money. A better understanding of the primary care pharmacy technician role is required by healthcare professionals to support its development and a training programme that caters to the needs of each profession is required to realise the full potential of pharmacy technician roles in primary care.

Stay engaged! The pharmacy technicians' workgroup in a paediatric hospital

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Introduction: The Ministry of Health (MOH) Chief Pharmacist-Pharmacy Technicians Leader's (CP-PTL) Group was formed in October 2019 with representatives from various public health institutions to address the following: a) Challenges faced due to high attrition rate and burnout; b) National Pharmacy Strategy (NPS) initiatives; c) Pharmacy Technicians Entry-To-Practice (ETP) assessment framework; d) SWOT analysis on evolving roles of pharmacy technicians (PT). KK Women's and Children's Hospital's pharmacy department is made up of outpatient, inpatient, automation Services, and laboratory pharmacies. With 120 PTs, there was a need to have a communication channel between PTs and CP's office.

Objectives: A PT workgroup was set up in April 2021 to engage PTs on MOH initiatives, and create a robust and democratic communication channel between MOH and PTs. PT champions from each section were appointed and the

terms of reference for this workgroup were shared with all members to hold regular meetings to collate feedback and disseminate information.

The goals of this workgroup are: a) To ensure that viewpoints and concerns brought up at the national level are reflective of our PTs and are holistic; b) To implement workable action plans either at a national, institutional, or sectional level; c) To help our PTs adapt to the changes of the pharmacy landscape (e.g., Medication reconciliation and automation) and to grow professionally.

Methods: First, the authors conducted surveys to better understand the issues that were concerning to their peers. They received feedback regarding employee benefits, continuing education, career development, work-life balance, and how the respondents felt empowered. The authors referenced Maslach's Burnout Inventory as a guide and contextualised the questions to understand other struggles that were faced. Next, another survey regarding the current in-house continuing education for PTs was conducted. The participants voiced out topics that they would like to see and how they felt regarding the outline of the self-reflection structure.

Results: The overall results reflected the need for more manpower, the need for work-life balance, and the need to see more variety in continuing education topics. With regards to the improvements of the current in-house continuing education, a list of suggested topics has been approved and will be rolled out this year for them to participate. Other processes have also been streamlined.

Conclusions: The goal of this workgroup is to create a space where PTs have access to resources to national initiatives to aid in their career development and a space for them to voice out their concerns or offer feedback. Through this platform, the authors hope to encourage cohesiveness among the PTs. It is also hoped that through these actions others can know that there are advocates amongst them and that their voices will be heard. Another issue that was noted by management was the silo mindset that is present in the different pharmacy sections, despite being in the same department. Other plans for the use of this platform can be used to develop pharmacy technician leaders. This would be in service to the greater picture where everyone is involved in the success of the organisation.

A shot in the arm: The evidence and gaps regarding the role of pharmacy technicians in vaccination services

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Introduction: At no time has the role of pharmacy in vaccine administration been more important. Yet, busy pharmacy workloads and competing clinical priorities limit a pharmacist's ability to meet the needs of vaccine-willing patients and contribute to missed opportunities with vaccine-hesitant individuals. The past few years have seen an increased interest in pharmacy technicians supporting vaccination services and addressing increasing patient vaccination interests and needs. No systematic literature review has been done to identify the evidence and gaps regarding pharmacy technician roles in areas such as patient screening and vaccine administration.

Objectives: This structured scoping review aims to review the published research on the role of pharmacy technicians in vaccination services.

Methods: In compliance with Preferred Reporting Items for Systematic Reviews and Meta-Analyses protocols, systematic searches were performed in PubMed, Embase, International Pharmaceutical Abstracts, Scopus, and CINAHL. Articles published through June 2020, in French, English, and Spanish, were screened for eligibility. Two independent reviewers screened titles and abstracts for inclusion. Data extraction of included study methodologies and results was performed by one reviewer and verified by a second reviewer. A summary of evidence and gaps regarding pharmacy technician's traditional and emerging roles, pharmacist and pharmacy technician perspectives, and impact on workflow and patient outcomes was created.

Results: A total of 483 unique records were identified through the published and grey literature. Full-text screening of 145 relevant records identified 14 articles for inclusion. Most articles evaluated emerging pharmacy technician roles in patient screening (n = 8, 53%) and vaccine administration (n = 5, 36%). Pharmacy technician vaccine screening roles included identifying eligible patients using electronic medical records, vaccine registries, or paper-based systems. The training was found to increase vaccine-related knowledge and confidence. Screening activities were considered complex and had the potential to increase the overall time required for vaccination services. Vaccine administration roles included vaccine handling and storage, choosing the correct needle and syringe, drawing up vaccines, vaccine administration, responding to emergency situations, and completing required documentation. Pharmacy technicians

felt most comfortable selecting supplies, administering vaccines, documenting, and emergency response. Pharmacists experienced increased comfort and trust after observing pharmacy technicians administer the vaccine. They felt that pharmacy technicians were capable, properly trained, and empowered by the emerging role. Pharmacy technicians felt more comfortable administering vaccines than conducting the more complex vaccine screening. Implementation of emerging roles demonstrated positive patient outcomes (n = 10, 72%). Research gaps included no or limited research on the impact of pharmacy technicians' involvement on vaccination workflow, pharmacy efficiency, patient and technician adverse events (including needle stick injuries), and cost-effectiveness. Pharmacists and technicians advocated for accredited vaccine administration training owing to consistent benefits in pharmacy workflow efficiency, pharmacist clinical time, and pharmacy technician job satisfaction.

Conclusions: This review supports the deployment of pharmacy technicians in delivering vaccination services with demonstrated evidence of their role in vaccine screening and administration and analysis of relevant pharmacist and pharmacy technician perspectives. Further research in areas such as cost-effectiveness and workflow optimisation will be important for advocacy work with policymakers, pharmacy owners/managers, and pharmacy staff.