

PRINCE EDWARD ISLAND
PHARMACY BOARD

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Member Organization of the National Association of Pharmacy Regulatory Authorities (NAPRA)

**Responsibilities of the Pharmacist – in-Charge,
Pharmacist & Permit Holder**

Approved by PEIPB

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Responsibilities of the Pharmacist-in-Charge (PIC)

This document is intended solely for general informational purposes and should not be construed as, or used as a substitute for, legal advice with respect to specific issues or transactions, since such advice requires an evaluation of precise factual circumstances. Legal counsel should be consulted as to all questions that arise with respect to the laws, rules, regulations and other legal requirements discussed herein.

This document is a tool for prospective managers to assess their knowledge, skills, and abilities in order to identify deficiencies and develop an action plan to address identified deficiencies before accepting a Pharmacist-in-Charge position.

The pharmacist-in-charge (PIC) is a pharmacist licensed in Prince Edward Island, who accepts responsibility, legally and professionally, for the operation of the pharmacy licensed under their supervision, in conformance with all laws and regulations pertinent to the practice of pharmacy and the distribution of prescription drugs. The PIC jointly bears responsibility with the Permit Holder for compliance with these laws and regulations.

The PIC may delegate some of these responsibilities to other licensed pharmacists. These pharmacists must have an effective reporting mechanism with a clear understanding of all pertinent objectives, expectations, policies and procedures.

The PIC is responsible for, but not limited to, the following:

1. Actively participates in the day to day management of the pharmacy and supervises the professional and non-professional staff;
2. Responds to any questions from the Registrar, or designate, respecting the practice of pharmacy in the pharmacy;
3. Cooperates fully with any inspector appointed by the Board pursuant to the *Pharmacy Act*. The PIC, and Permit Holder if not the same person, will respond to any deficiencies noted in an inspection by submitting in writing to the Registrar the steps taken, or proposed, to eliminate or address any noted deficiencies within 30 days. Failure to submit such a report, or to eliminate noted deficiencies, shall be grounds for the institution of disciplinary action;
4. Ensures the development, maintenance and enforcement of policies and procedures to comply with the standards of practice of pharmacy as set out in an enactment or a professional standard adopted by the Board, or otherwise required to ensure optimal patient care;
5. Ensures the development of error reporting and response to customer complaint systems, maintenance and enforcement of a quality management program, to improve departmental procedures, minimize medication related errors and increase patient safety.

- Sample procedure and form shown in *Appendix B and C*. The PIC from identifying trends, works with staff to implement corrective action to minimize future errors.
6. Notifies the Registrar in writing of professional practice problems or conduct that could affect the health or safety of patients by any pharmacist, registered student, or certified dispenser employed in the pharmacy that are unable to be addressed in-house;
 7. Is knowledgeable of the requirements related to delivery of pharmacy services to clientele, whether local, national, or international;
 8. Ensures that confidentiality is maintained with respect to all patient records, especially when sharing information to improve patient care;
 9. Ensures counselling and other interventions in providing pharmaceutical care are documented to have occurred for each encounter. The documentation may be as simple as a check list incorporated into each prescription transaction record, or detailed notes entered in the patients' profile. Documentation by exception may also be acceptable.
 10. Ensures that all professional staff (pharmacists, certified dispensers, students) who are working, or enrolled in practice experience rotations, in the pharmacy maintain current licensure with the Prince Edward Island Pharmacy Board;
 11. Ensures that all professional licenses are current and on public display;
 12. Ensures that information directed to the pharmacy pertaining to drugs, devices, diversion tactics and the practice of pharmacy is accessible to all staff and that any pharmacist, registered student, or certified dispenser is informed of its location in the pharmacy;
 13. Ensures the adoption of policies, to the extent possible, that the pharmacy has an adequate stock of drugs and devices to meet the needs of its patients;
 14. Ensures mechanisms for the procurement, storage, security, and disposition of drugs and the provision of pharmacy services are present. Also, establish mechanisms for, and supervise, the record keeping system for the purchase, sale, possession, storage, safekeeping, recall, and return of drugs are appropriately;
 15. Establishes and maintains effective controls against the theft or diversion of prescription drugs and records for such drugs;
 16. If the pharmacy contracts with, or contracts to, another pharmacy to provide pharmacy services to its patients, the PIC ensures that standards of practice are met by both parties and that the patient is adequately and appropriately served;
 17. Ensures that the pharmacy employs an adequate number of qualified personnel commensurate with the size and scope of services provided by the pharmacy;

18. Ensures there is a licensed pharmacist on duty during all hours of operation;
19. Establishes policies and procedures detailing orientation of new staff, the duties to be performed by certified dispensers, pharmacy students, pharmacy technicians and support staff;
20. Establishes policies and procedures for orientation and training of students, relationship with preceptor and identify the duties and responsibilities of the preceptor.
21. Ensures, along with the Permit Holder, the correct and consistent use of the operating name of the pharmacy as it appears on the pharmacy permit certificate, for all pharmacy identification on labels, packaging, signage, directory listings, advertising, stationary, and electronic media;.
22. Ensures the availability of any equipment and references necessary for the particular practice of pharmacy;
23. Ensures that each individual working in the pharmacy wears a badge/name tag that clearly identifies him or her as a pharmacist, certified dispenser, student or technician;

These responsibilities may sometimes create conflict between a Permit Holder and a PIC. The PIC is ultimately responsible for maintaining professional standards and practices in pharmacy.

The PIC is responsible for notifying the Registrar immediately of any change in their status as manager, by filing a completed Change-in- Pharmacist in Charge form.

Pharmacist Responsibilities

Responsibilities of the pharmacist include:

Practices in compliance with recognized Standards of Practice¹. These include:

- Practice pharmaceutical care
- Provide drug information
- Educate
- Manage drug distribution
- Apply management principles

Practices in compliance with the Code of Ethics adopted by the Prince Edward Island Pharmacy Board.

Maintains professional competency by assessing practice deficiencies, developing a plan to address these deficiencies, and fulfilling this plan.

Cooperates fully with any inspector appointed by the Board pursuant to the Pharmacy Act.

Maintains current licensure with the Prince Edward Island Pharmacy Board.

Notifies the Registrar, in advance, of any change in employment, or relocation to practice in another jurisdiction.

When serving as preceptor for a student, whether as part of a practice training session or while the student is working on staff, personally supervise and be responsible for the orientation, training and work of the student. A preceptor is expected to²:

Training

- a) Be knowledgeable of the competencies and objectives expected of the student/intern during the Structured Studentship or Structured Internship program, and be aware of the expected level of knowledge and skills required of the student/intern.
- b) Participate in initial and ongoing training programs for preceptors.

Teaching and Practice Activities

- c) Act as a **guide and role model** and impart his/her practical knowledge and experience to the student/intern. The preceptor will create an environment where learning can take place through exposure to and participation in discussion and other experiences.
- d) Be physically present in the practice site and available for consultation. Direct supervision of students is required. During the early part of internship, close

¹ Model Standards of Practice for Canadian Pharmacists, NAPRA document approved April 2003

² Ontario College of Pharmacy, "Expectations of SPT Preceptors", Sept. 1999

supervision may be required, however, autonomy is expected as the rotation progresses.

e) Demonstrate active participation in his/her own professional learning and development.

Supervision

e) Ensure that the student/intern completes the questions and activities in the manual to demonstrate competency and proficiency and spend sufficient time with the student/intern to ensure objectives are met.

f) Provide opportunities for the student/intern to discuss legal and ethical situations, which arise in practice.

g) Encourage the student/intern to participate in his/her own professional learning and development.

Assessment

i) Provide ongoing, effective feedback/assessment with documentation on a regular basis.

j) Solicit regular feedback from the student/intern to assess the value of the training experience, and the effectiveness of the preceptor.

k) Solicit feedback from the student/intern and designate, regarding student/intern experiences in which the preceptor was not directly involved.

l) Complete the required Assessment Forms and submit them to PEIPB within 7 days of the end of the rotation or on termination of the training.

These responsibilities may sometimes conflict with the pharmacist's employer. The pharmacist shall adhere to professional standards and practices in providing service to their patients.

Permit Holder responsibilities

If a pharmacy is not owned by a pharmacist, the owner, while not directly involved in providing patient care, has certain responsibilities to the public and to the designated Pharmacist-in-Charge (PIC).

Responsibilities of the pharmacy owner include the following:

1. Ensures the PIC is knowledgeable and trained in pharmacy operations
2. Ensures the PIC is aware of, and adheres to, the responsibilities noted above
3. Ensures the PIC provides safe, efficient services to its clientele
4. Maintains systems to ensure patient information remains confidential and only released to approved individuals
5. In the event there is no pharmacist available to provide services, immediately notifies the Registrar, and arranges for immediate, safe transfer of patient records to another pharmacy where patients may receive pharmaceutical care. In this situation, the owner is responsible for the safe storage, security and disposal of all scheduled drugs
6. The Permit Holder shall notify the Registrar in writing by completing Change in Pharmacist-in-Charge form if the PIC will be absent for more than six (6) consecutive weeks, and who will be in charge during their absence; the temporary PIC must also indicate in writing their acceptance of the position and acknowledgement of the responsibilities they are accepting
7. The Permit Holder notifies the Registrar in writing of any changes in the professional pharmacy staff as they occur
8. Advise the Registrar in writing of professional practice problems or conduct that could affect the health or safety of patients by the manager of the pharmacy
9. Cooperates fully with any inspector appointed by the Board pursuant to the *Pharmacy Act*. The PIC, and Permit Holder if not the same person, will respond to any deficiencies noted in an inspection by submitting in writing to the Registrar the steps taken, or proposed, to eliminate or address any noted deficiencies within 30 days. Failure to submit such a report, or to eliminate noted deficiencies, shall be grounds for the institution of disciplinary action;
10. The Permit Holder reports to the Registrar within 7 days in writing, by completing a new Permit Application and Pharmacy Closing/Opening forms, any change in the ownership of the pharmacy, and, where the owner is a body corporate, any change in the names of the officers and directors of the body corporate.

11. The Permit Holder notifies the Registrar of any new construction or renovations and submits to the Registrar for approval, a diagram of the design, or reconfiguration, of the premises before commencing construction or other related activities;

24. If the pharmacy is relocating, or closing, the Permit Holder
 - a. Notifies the Registrar at least thirty (30) days in advance
 - b. Provides for the safe transfer, disposal and appropriate storage of all Schedule I, II, III, Narcotic and Controlled drugs
 - c. Advises the Registrar in writing of the disposition of all drugs, prescription records at the time of closure
 - d. Arranges for the safe transfer, and continuing availability, of patient records at another pharmacy
 - e. Removes all signs and advertisements from the closed premises
 - f. Returns the pharmacy license to the Board office within 7 days of closing

Primary References:

The Nova Scotia College of Pharmacists Practice Regulations
The New Brunswick Pharmaceutical Society
Prince Edward Island Pharmacy Board
College of Pharmacists of British Columbia
Saskatchewan Pharmaceutical Association
Ontario College of Pharmacy

Iowa State Board of Pharmacy
Kentucky Board of Pharmacy
Minnesota Board of Pharmacy

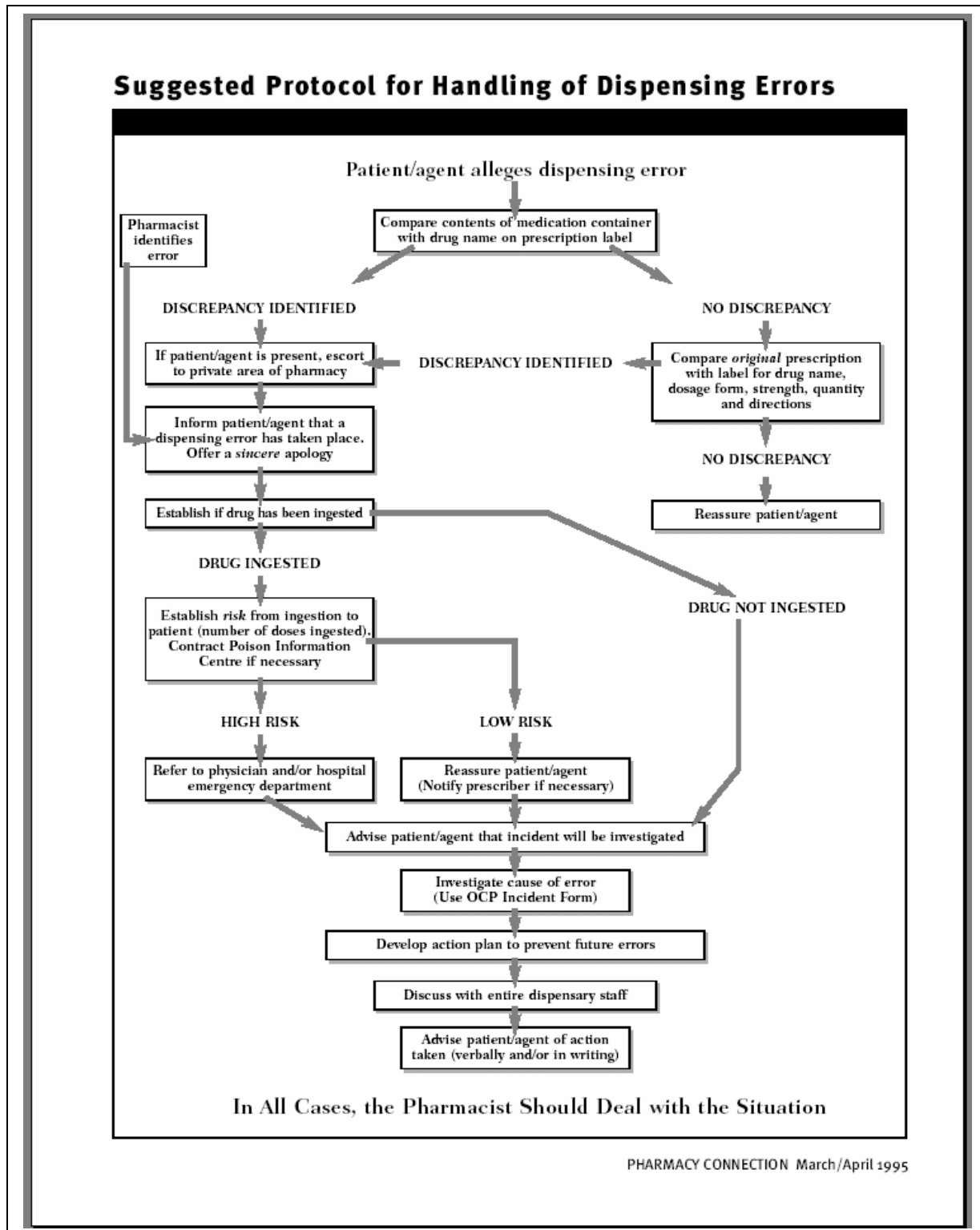
Appendix A Checklist of Pharmacist-in-Charge Qualifications

- _____ Licensed to practice in Prince Edward Island
- _____ Minimum of two (2) years experience as a staff pharmacist in relevant setting
(eg community / hospital)

Knowledgeable, experienced in, and can demonstrate competency in such aspects of management as

- _____ pharmacy operations
- _____ provision of pharmaceutical care
- _____ staff management
- _____ staff performance evaluation
- _____ customer relations
- _____ inventory control
- _____ legal requirements of operation
- _____ 3rd party billing procedures

Appendix B – Procedure for Dealing with a Medication Error



Appendix C - Incident Report Form

Incident Documentation Form (Please print legibly)			
<u>Patient Name</u>	<u>Address</u>	<u>Patient age</u>	<u>Telephone #</u>
<u>Drug name / strength</u>	<u>Physician</u>	<u>Dispensing pharmacist</u>	<u>Prescription #</u>
Incident reported by:	New Rx _____	Repeat Rx _____	Transaction # _____
Nature of Incident:	Incorrect strength _____	Verbal disagreement _____	
Incorrect drug _____	Incorrect brand _____	Drug interaction _____	
Incorrect directions _____	Incorrect quantity _____	Counseling issue _____	
Incorrect dosage form _____	Outdated medication _____	Other (please specify) _____	
Incorrect patient _____			
Factors contributing to Incident: (check all that apply)			
Illegible handwriting _____	Failure to clarify order _____	Rushing _____	
Error in recording verbal order _____	Sound-alike product name _____	Shift change _____	
Order misread/misinterpreted _____	Look-alike product name _____	Noise _____	
Failure to verify patient info _____	DIN check failure _____	Interruptions _____	
Incomplete patient profile (eg allergy not noted) _____	Pharmacist inattention _____	Phones _____	
	Technician inattention _____	Illness _____	
Labelling problem (mfg'er) _____	Calculation error _____	Other: _____	
Additional detail on incident and contributing factors:			
Was drug ingested?	Yes No	If yes, was medical attention required?	Yes No
Patient contacted by: _____		Date/Time: _____	
Prescriber contacted by: _____		Date/Time: _____	Telephone # _____
Prescriber's comments:			
Date incident discovered _____		Date / Time of dispensing _____	
Work activity at the time was: Light Average Heavy			
Was the pharmacist working alone?		Yes No	
Were support staff involved?		Yes No	
How many days in a row had the pharmacist been working?			_____
On the day of the incident, how many hours had the pharmacist been working?			_____
Did the pharmacist have any breaks on that day?			Yes No

