# New Zealand Pharmacy Accuracy Checking Technicians (PACT)

# Governance, Operational and Training Frameworks

December 2022



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# New Zealand Pharmacy Accuracy Checking Technicians (PACT)

**Governance Framework** 

December 2022



PHARMACEUTICAL SOCIETY of New Zealand Incorporated This document describes the Governance Framework required for Pharmacy Accuracy Checking Technicians (PACT) in New Zealand.

# 1. Definition of a Pharmacy Accuracy Checking Technician

A PACT is a pharmacy technician who has successfully completed the PACT Training Programme<sup>1</sup>, to undertake the final accuracy check on a dispensed item that has been clinically approved by a registered practicing pharmacist holding an APC with no conditions, and who continues to meet annual requirements for maintaining certification.

# 2. Legislative oversight

The Pharmacy Council of NZ determined in 2020 that regulation in New Zealand was not warranted for technicians. All technicians regardless of their role, must work under the direct supervision of a pharmacist, who is regulated by the Pharmacy Council.

All pharmacy related activities undertaken in a pharmacy are regulated by the Medicines Act 1981.

Every pharmacy must comply with the requirements of the Health and Disability Service Standards Pharmacy Services Standard NZS 8134.7:2010.3.

Medsafe issues a Licence to Operate Pharmacy with an additional condition to enable a certified PACT to independently conduct accuracy checks. A Schedule is provided with the Licence that lists the Standards (with any limitations) that may be completed by a PACT operating within that pharmacy.

<u>Regulation 42(1A)</u> and <u>Regulation 63(2)</u> of the Medicines Regulations 1984 requires all pharmacy technicians to be under the direct personal supervision of a pharmacist. This means that a pharmacist holding a current APC with no conditions must be present and able to intervene in the dispensing process as required.

# 3. Governance responsibility

The Pharmaceutical Society of New Zealand is the membership organisation for all pharmacy professionals in New Zealand (NZ).

The Pharmaceutical Society of New Zealand National Executive are fully responsible for the PACT Governance Framework and processes. Governance for the organisation is provided by a seven member elected National Executive of Society members.

The National Executive will receive a PACT operational report as a standing item for each of their meetings. This will include any identified operational issues and concerns for resolution at the governance level, in accordance with the organisational responsibilities listed below.

<sup>&</sup>lt;sup>1</sup> New Zealand Training Framework for Pharmacy Accuracy Checking Technicians (May 2022)

The Society is responsible for:

- Providing and maintaining the Governance, Operational and Training Frameworks
- Maintaining a Risk Register that identifies and mitigates risk to the public from an unregulated workforce<sup>2</sup>
- Maintaining a register of PACTs in the New Zealand pharmacy workforce
- PACT annual recertification process
- Compliance by licenced pharmacies and pharmacists (including preceptor pharmacists) with the respective PACT frameworks and procedures
- Approval and review of all PACT training providers, certification programmes, including organisational validity and consistency of training outcomes
- Management of any Conflict of Interest if the Society holds both governance and training roles. This is managed in accordance with the PSNZ PACT Policy for managing conflicts of interest.<sup>3</sup>

The Society will notify the Pharmacy Council if there is a concern about an individual pharmacists' competence.

# 4. Sector Accountability

The Society and Medsafe have key interests within the Governance Framework.

The Frameworks will be reviewed and revised on an annual basis by the Society in collaboration with Medsafe.

The Society will seek opinion and advice from the Pharmacy Council of New Zealand, as the Responsible Authority for pharmacists, when reviewing and updating the PACT Governance and Operational Frameworks.

This will allow for changes that may occur as a result of any amendments to any relevant regulations or standards identified by the key organisations. Reviews will also occur on an "as required" basis, to allow a timelier response to changes in the pharmacy practice environment.

Whilst Medsafe enables PACT activities through the pharmacy licensing framework, this does not override the governance framework.

<sup>&</sup>lt;sup>2</sup> PACT Risk Management Policy, Plan and Risk Register (Public Risk) PSNZ (Sept 2021)

<sup>&</sup>lt;sup>3</sup> PSNZ PACT Policy for Managing Conflicts of Interest (Sept 2021)

# New Zealand Pharmacy Accuracy Checking Technicians (PACT)

**Operational Framework** 

December 2022



# 1. Legislative framework

# 1.1 PACT Legislation/Standards

In accordance with the Licence to Operate Pharmacy, every pharmacy must comply with the requirements of the Health and Disability Service Standards Pharmacy Services Standard NZS 8134.7:2010.3. As the role of the PACT is not defined within the Standards, Medsafe has enabled the following activities within the pharmacy licensing framework:

- final accuracy check of a dispensed prescription (excluding class A and B controlled drugs)
- accuracy check of a repackaged medicine (excluding class A and B controlled drugs)
- accuracy check of a de-blistered medicine (excluding class A and B controlled drugs)
- accuracy check of each ingredient (excluding class A and B controlled drugs) for a nonaseptically compounded medicine.

## 1.2 Licence to Operate Pharmacy Conditions

Medsafe issues a Licence to Operate Pharmacy with an additional condition which enables a PACT holding current PACT Certification from the training provider to conduct the activities defined by the Schedule in accordance with the pharmacy's SOPs.

The Schedule lists the standards (with any limitations) that may be completed by a certified PACT.

#### 1.3 Pharmacy Requirements

Any pharmacy who employs a PACT must:

- have a valid Licence to Operate Pharmacy under the Medicines Act 1981 that does not restrict PACT activities from being conducted on the premises.
- comply with the conditions on the Licence to Operate Pharmacy
- demonstrate compliance through the Medsafe Pharmacy Quality Audit programme. The date of the pharmacy's most recent audit and evidence of a completed audit will be expected. Where a pharmacy has recently relocated, Pharmacy Quality Audits conducted at the previous premises may be considered on a case-by-case basis by the Society. Please note that the initial licensing audits conducted by Medsafe for a new pharmacy premises, or a pharmacy relocation, are not part of the Pharmacy Quality Audit programme.
- have sufficient staff, physical and information resources to support the training and ongoing role of a PACT.<sup>4</sup>
- have internal training programmes in place for staff and/or encourage participation in external training courses.
- have an approved PACT Preceptor who supervises and assesses a maximum of one PACT trainee in the workplace (applies to PACT training sites only).
  - Note: A PACT Preceptor may concurrently supervise a PACT and a trainee pharmacy technician. A PACT Preceptor cannot supervise a PACT trainee and an Intern Pharmacist.
- have an appropriate traceable and auditable system that records the identity of the clinical checker and final checker of prescriptions, including repeat dispensings and electronic prescriptions.
- Have a current PACT SOP in place
- have a training agreement with both the PACT trainee and training provider.

To ensure appropriate compliance, evidence of the site meeting the above criteria must be submitted to the training provider and the Pharmaceutical Society of New Zealand as part of the PACT approval process.

<sup>&</sup>lt;sup>4</sup> PACT Policy- Resource requirements (Sept 2021)

### 1.4 Working as a PACT at multiple pharmacies

Certified PACTs may work as a PACT at more than one pharmacy. Each pharmacy where the PACT works must meet the requirements described above.

## 2. Pharmacy Work Environment

#### 2.1 All technicians work under the direct supervision of a pharmacist

<u>Regulation 42(1A)</u> and <u>Regulation 63(2)</u> of the Medicines Regulations 1984 requires all pharmacy technicians to be under the direct personal supervision of a pharmacist. This means that a pharmacist holding a current Annual Practicing Certificate (APC) with no conditions must be present and able to intervene in the dispensing process as required.

### 2.2 Prescription Clinical Check

All prescriptions must have been clinically assessed by a registered pharmacist before a PACT can complete the final accuracy check. The pharmacist conducting the clinical check must have no conditions on their APC.

All pharmacies with a PACT must develop and implement a robust system for identifying that a clinical assessment has been completed by a pharmacist.

#### 2.3 Workflow

There must be Standard Operating Procedures (SOPs) implemented and used by anyone working in the dispensary to assure the implementation of a safe and appropriate workflow. These must be current and take into account all prescription and orders.

This workflow must be arranged to ensure that all prescriptions are clinically assessed by a pharmacist before a PACT completes the final accuracy check. The required workflow is provided in Appendix 1.

## 2.4 Standard Operating Procedures (SOP) for Final Check

A pharmacy employing a PACT to undertake final accuracy checks must have an SOP(s) that describes the final accuracy checking process for every checking activity undertaken by the PACT:

i.e. a PACT checking SOP should specifically cover both individually dispensed items, compliance packaging and extemporaneously compounded items.

PACTs may not final check any item that they have dispensed. The PACT SOP in the pharmacy must include this requirement and state how this will be managed with other dispensary staff.

The SOP should be developed and maintained in collaboration with the PACT.

#### 2.5 Safe Systems in the Pharmacy

PACTs must undertake final accuracy checking as part of a safe system of work that protects patients from avoidable harm.

To facilitate such safe systems, a pharmacy employing a PACT will:

- where possible, have a designated checking area
- ensure the area where checking is taking place is as far as practicable, removed from disrupting influences such as noise, people movement, patient interaction

- ensure local risk assessments are undertaken, and are updated when conditions change, to
  ensure that the conditions for final accuracy checking are safe (including, risk assessments
  of patient population/complexity, seasonal impact, skill mix, staff health, facilities/equipment
  and policy/process change, for example in prescribing or dispensing)
- have in place systems to minimise the risk of medication errors or near-miss events.

#### 2.6 Risk management and error minimisation strategies

Final accuracy checking of dispensed medicines and products occurs at the end of a process that includes prescribing, procuring/ordering, clinical checking, preparation and dispensing.

To ensure the final checking procedure is accurate and precise, a PACT must:

- have a checking process which is systematic, and supports getting the right medicine, to the right patient, at the right dose, by the right route and at the right time
- be aware how to undertake, document and review risk assessments relevant to the pharmacy and environment in which they are working
- refer back to the pharmacist who performed the clinical check if there is any doubt or concerns about the prescription
- take particular care when final accuracy checking medicines that could be confused with others (i.e. they sound-alike or look-alike). There have been fatal outcomes for patients having received the wrong medicine due to confusion with medicine names or packaging.

#### 2.7 Error reporting

PACTs must record/document any final accuracy checking errors made according to their workplace error recording policy. The Society must be notified using of the PACT error reporting form as part of the application for annual recertification.

#### 2.8 Error reflection

PACTs must follow pharmacy policies and procedures for any error. They must also formally reflect on their errors using the error reflection document and upload this to the Recertification programme platform.

This ensures that errors are actively learnt from and reviewed, to ensure that lessons are learned, and positive changes implemented.

# 3. Pharmacy Workforce

### 3.1 Staffing levels

PACTs may not final check any item that they have dispensed. It is therefore necessary to have sufficient and appropriate staff available in the dispensary to maximise the advantages of having a checking technician.<sup>4</sup>

#### 3.2 Employer Requirements

When employing a PACT, the employer must ensure that:

- they read, understand and comply with the New Zealand Framework for Certified Pharmacy Accuracy Checking Technicians
- at least one senior pharmacist (manager or owner) employed in the pharmacy completes the Pharmaceutical Society of New Zealand Course for New Employers of PACT (if pharmacy has not previously employed a PACT)
- dispensary workflow meets the requirements for using a PACT (see Appendix 1)
- an adequate period of orientation and induction is allowed for the PACT to become familiar with local policies and procedures
- adequate time and support is provided for the PACT to develop a standard operating procedure for their accuracy checking role in the new workplace
- appropriate time and support is provided for the PACT to complete an accuracy checking log (minimum of 200 items) which is second checked by a pharmacist to reflect local practice
- the PACT annual recertification declaration is signed and completed by both the PACT and the Pharmacist.

#### 3.3 Staff understanding of the PACT role

All pharmacies that employ a PACT, must have at least one pharmacist employed at the pharmacy complete the approved course for employers of PACTs.<sup>5</sup> This ensures that there is someone, in addition to the PACT, that understands and can advise the wider pharmacy team about the PACT role and the required workflow adjustments when a PACT is incorporated into the dispensing process. Ideally, as many staff as possible, both pharmacists and technicians, should complete the course as this will enhance overall understanding of the PACT role and support optimal implementation and utilisation.

<sup>&</sup>lt;sup>5</sup> PACT New Employers course – available online via PSNZ My Learning platform

#### 3.4 Minimum hours of employment as a PACT

A certified PACT must work in a PACT capacity for a minimum of 150 hours in each recertification year (approximately three hours each week) to maintain their certification.

- If these minimum hours are not met each year, the PACT must complete a 'Minimum hours not met' form which is uploaded the Recertification Platform and use this to explain the contributing reason(s).
- If the minimum hours of work as a PACT are not maintained for at least a consecutive period of six months or more, the PACT will be required to complete the logs as outlined in the 'Periods of absence or expired certificates' below.

### 3.5 Periods of absence or expired certificates

If a certified PACT has not met the minimum required hours of work as a PACT for a period of six months or more, or their certificate has expired, they must contact the Society for advice. Possible courses of action would be:

- 6 to 12 months without final accuracy checking re-familiarise with and update SOPs and successful completion of a 200 item accuracy checking log. This must be confirmed by a pharmacist check.
- 12 to 24 months without final accuracy checking re-familiarise with and update SOPs and completion of a 500 item accuracy checking log, confirmed by a pharmacist. An appraisal from a nominated supervising pharmacist is also required.
- More than 24 months without final accuracy checking will be dealt with by the governance body.

#### 3.6 PACT Change of Employment

PACT Certification represents a transferable skill across the NZ pharmacy sector. However, when moving to new place of employment, dispensing systems, processes, and medicines dispensed may vary.

To ensure a safe transition, the PACT must complete the PACT Transfer course.<sup>6</sup> When a PACT has accepted employment at a new pharmacy, they must:

- Inform the Society of their change of employment
- The Society will ensure the new pharmacy meets the requirements of the Medsafe Pharmacy Quality Audit programme
- Develop a PACT SOP as necessary for the new pharmacy if they are being employed in a PACT role, which will be endorsed and approved by the licence holder.
- Complete an accuracy checking log of a suitable number of final accuracy checked items to reflect local practice (a minimum of 200 items, to be confirmed by the Society). Submit the accuracy checking log to the Society for review.

#### 3.7 Change of pharmacy ownership

When a pharmacy is sold, the new owner/employer (if they are retaining a PACT) must complete the PACT Employers course.

The new owner must fully understand their responsibilities as a PACT employer and the pharmacy must meet the requirements as specified in section 1.3.

<sup>&</sup>lt;sup>6</sup> PACT Transfer Course – available online via PSNZ My Learning platform

## 4. Ongoing Recertification and Competence Requirements

PACTs must maintain and use the knowledge and skills gained in their training to carry out the final accuracy check.

To maintain their certification, a PACT must meet the following requirements:

• Undertake the appropriate recertification (see section 4.1)

The licence holder is responsible for:

- Having in place a standard operating procedure for their PACT role
- Ensuring dispensary workflow is appropriate for utilising a PACT (see Appendix 2).

If a PACT has concerns that any of the above requirements are not being met, the PACT should raise the issue with their employer or manager in the first instance.

#### 4.1 Recertification

A certified PACT must participate in the Pharmaceutical Society of New Zealand's recertification programme.

A certified PACT must:

- keep a record to demonstrate their ongoing eligibility for recertification
- be able to produce their current PACT certification for Medsafe for audit purposes.

Additionally, a pharmacist listed as a responsible person on the Licence to Operate Pharmacy) must complete the appropriate declaration form every 12 months that the PACT has:

- worked in a PACT role within their pharmacy
- met the minimum required hours of work in a PACT role.

If the Responsible Person does not work in the pharmacy, then the Pharmacy Manager should sign the declaration.

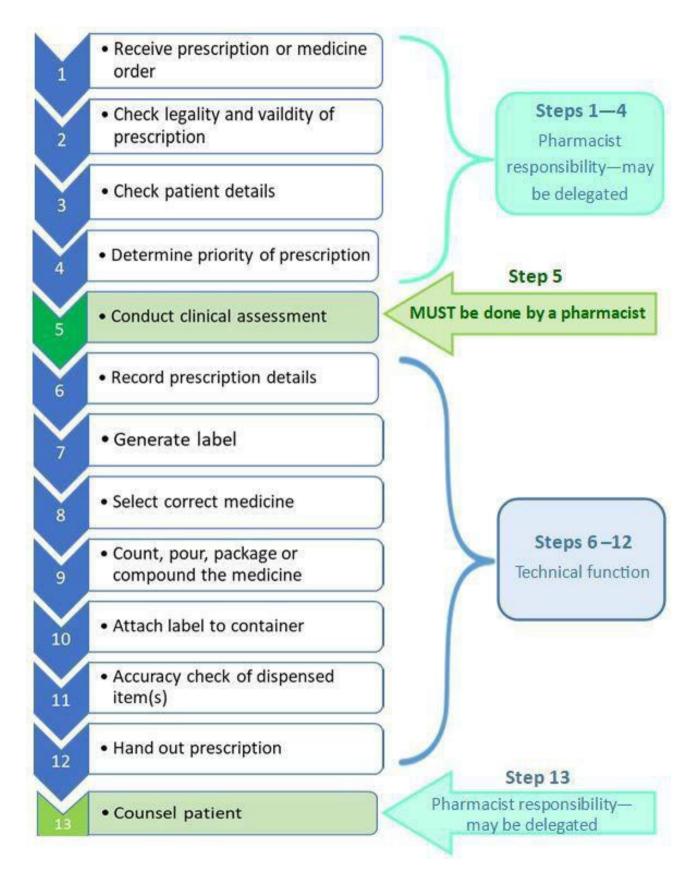
Practicing without current certification will result in the PACT and their employer being in breach of their responsibilities. This may lead to PACT certification being suspended.

#### 4.2 Professional development expectation

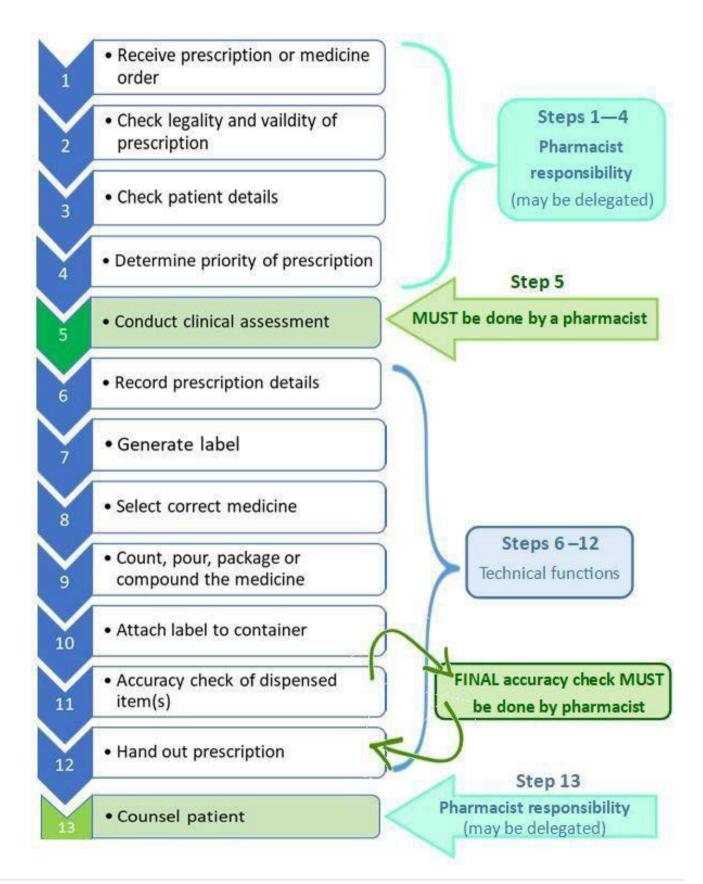
PACTs are encouraged to continue the learning journey throughout their career. It is recommended that learning activities relevant to their PACT role are undertaken regularly e.g. learning about a new medicine, strengths, doses and indications.

# Appendix 1 – Workflow

A. Required workflow for pharmacy employing a certified PACT



# B. Required workflow for pharmacy employing a trainee PACT



# New Zealand Pharmacy Accuracy Checking Technicians (PACT)

**Training Framework** 

December 2022



PHARMACEUTICAL SOCIETY of New Zealand Incorporated

# 1. Introduction

This section describes the training requirements for PACT certification and the factors that enable optimal outcomes for training and employing a PACT. It has been developed by PSNZ Education, Professional Development & Training, Pharmaceutical Society of New Zealand.

It aims to ensure the PACT trainee has the knowledge and competence to undertake final accuracy checking of clinically approved dispensed medicines and products.

It is intended that this section of the framework will replace any previous frameworks for PACT and will be the training framework going forward.

The PACT trainee must work within the parameters of these documents and must have no input into the dispensing process for any medicine or product involved in their training activity.

Any in-training activities involving a final accuracy check of a dispensed item or product must be re-checked by a pharmacy professional with appropriate experience in final accuracy checking to ensure patient safety.

# 2. Timeline

The PACT trainee who meets the criteria and is accepted into the PACT Training Programme must complete the training within 12 months from the date of attendance of the training workshop. If it is not completed within this timeframe, the PACT trainee may be given the opportunity to re-enrol and re-start the training programme, including attending a workshop. This will be done in consultation with the training provider and re-enrolment will be approved on a case-by-case basis.

# 3. PACT Training Programme

The PACT Training Programme has been designed to:

- provide PACT trainees with the skills and knowledge necessary to demonstrate a safe system of accurately checking products dispensed/prepared against a prescription or medicine chart that has been clinically assessed by a pharmacist
- develop the PACT trainee's professional awareness of pharmacy practice
- encourage the further development of effective communication skills
- develop a professional interaction between pharmacy technicians, pharmacists, patients, colleagues, and other health care professionals
- support appropriate skill-mix within pharmacy dispensaries.

## 3.1 Learning outcomes

### Learning Outcomes for PACT Trainee

After successfully completing the training programme a certified PACT will be able to:

- apply the legislation, standards and guidance relating to the dispensing of medicines and medicinal products
- discuss the legal and ethical implications of the PACT role
- describe the consequences of dispensing/checking errors
- demonstrate communication skills required in the process of final checking
- perform the final accuracy check of dispensed items which have been clinically assessed by a pharmacist and annotated according to local procedure
- recognise own limitations in the checking process and make appropriate referrals
- work within the scope of the New Zealand Framework for Pharmacy Accuracy Checking Technicians
- work within SOPs
- describe the importance of adhering to the SOPs
- discuss and apply the causes and consequences of dispensing errors and of methods that can be used to prevent errors and improve patient safety
- identify, rectify and report near misses and dispensing / checking errors.

### Learning Outcomes for PACT Preceptor

After attending the PACT workshop, the PACT preceptor will be able to:

- describe the principles of the PACT Framework documents
- recognise the legal and ethical obligations of the PACT Preceptor
- describe the role of the PACT Preceptor
- discuss the importance and the development, review and audit of Standard Operating Procedures for the dispensing/checking process
- describe the completion criteria for the PACT training programme
- describe the recertification requirements
- discuss and define the term "clinical assessment"
- discuss the use of PACT documents
- facilitate the use of the programme documentation and accuracy checking logs in the workplace prior to and during the assessment period
- describe principles of change management within the workplace.

## 3.2 PACT Training Programme Structure

PACT trainees must complete all training set by the training provider. The training programme consists of:

- 1. attendance at a one-day workshop
- 2. completion of online theory modules
- 3. compilation of a work-based practical portfolio
- 4. final summative assessment activities, including a practical assessment and an oral interview
- 5. probationary period.

The steps that must be completed to become a certified PACT by meeting the PACT training programme requirements are detailed in Appendix 1.

### 3.3 PACT Training Providers

Currently, PSNZ Education, Professional Development Education and Training is the only training provider for PACTs.

There are no restrictions on who could provide PACT training, but any new training organisation would have to be approved by the Pharmaceutical Society of New Zealand as the Governance organisation. Any conflicts will be managed through utilising the PACT Policy for Managing Conflicts of Interest.<sup>3</sup>

### 4. Eligibility

#### 4.1 Technician Requirements

To be eligible to enter the PACT Training Programme, the PACT trainee must:

- have the NZ Level 5 Pharmacy Technician qualification
- have a minimum of 2 years post-qualification work experience. This period may be waived for:
  - \* NZ technicians who originally trained and qualified as a dispensary or pharmacy technician (non-Level 5) who have recently obtained the NZ level 5 qualification
  - \* UK technicians who have recently obtained the NZ level 5 qualification.
- have a minimum of six months dispensing experience in their current dispensary within the 12 months prior to commencing their PACT training
- have an allocated work-based PACT Preceptor who has/will attend the PACT Preceptor training workshop
- have the recommendation and support to become a PACT from the PACT Preceptor
- have documented evidence to demonstrate their ability to dispense accurately over the range of prescription types within their scope of practice by completing a 200-item dispensing log at their current workplace
- demonstrate a good working knowledge of local SOPs to the PACT Preceptor.

### 4.2 Preceptor Requirements

To be able to be eligible to become a PACT Preceptor, the applicant must be a pharmacist who:

- holds a current Annual Practicing Certificate (APC) with no conditions
- has at least three years' experience post registration as a pharmacist.
   Pharmacists who originally registered overseas are required to have a minimum of one year of NZ pharmacy experience immediately prior to application.
- has the ability and commitment to meet on a fortnightly basis, as a minimum, with the PACT trainee
- is able to work with the dispensary team to ensure maximum support
- has not been under review for competence, health or conduct within the last five years
- attends a PACT Preceptor workshop every 3 years. The Preceptor training is valid for 3 years. A refresher may be required if a pharmacist has been a preceptor for a continuous three year period
- is NOT concurrently an Intern Preceptor
- has a working knowledge of the current New Zealand Framework for Pharmacy Accuracy Checking Technicians.

#### 4.3 Role of the PACT Preceptor

The PACT Preceptor provides support, guidance and feedback to the PACT trainee throughout the training period and facilitates the local implementation of the Framework for Training PACTs including conducting formative appraisals in the workplace.

It is expected that the PACT Preceptor is given time within work to support their PACT trainee.

The PACT Preceptor must:

- ensure that current SOPs are in place relating to dispensing and accuracy checking
- ensure the PACT trainee is familiar with and works competently within the SOPs
- complete the PACT appraisals and support the PACT trainee in completing their portfolio documentation. These appraisals may also be based on comments from other colleagues who have worked closely with the PACT trainee during the completion of the accuracy checking log.

#### 4.4 Restrictions on applications

In general, only one PACT trainee per site will be accepted into the PACT Training Programme per intake.

If it is intended that a second PACT trainee enters the training programme in the same intake (there is a maximum of two per intake), then sufficient information detailing how the pharmacy will manage training two PACT trainees must be included with the application forms. Applications to train multiple PACTs will be considered on a case by case basis.

If a current PACT trainee has successfully completed the 1000 item checking portfolio, the pharmacy may apply for another PACT trainee to enrol in an upcoming intake.

# 5. PACT Assessment Strategy

The summative assessment is intended to measure achievement of the Learning Outcomes<sup>4</sup>. The competency-based summative assessment consists of:

- portfolio review by the training provider<sup>5</sup>
- a practical checking assessment of 20 dispensed items containing a standard range of errors
- an oral interview
- PACT trainees who have successfully completed all online theory modules and portfolio are then eligible to sit the practical checking assessment after they have been nominated by their PACT Preceptor.

## 5.1 Portfolio

Compilation of the work-based checking portfolio will consist of an itemised log of a minimum of 1000 accurately checked dispensed medicines or products ensuring:

- A breadth of prescription and specialty types to reflect current practice at their pharmacy
- The itemised log is documented using the training provider's approved checking log form
- The itemised log is completed under normal working conditions
- A record of dispensing errors identified by the PACT trainee during their accuracy check, including how the error was fed back and rectified
- A record of any errors identified during the item's second accuracy check. The record should include a description of how the error was fed back and rectified.

#### 5.2 Errors

If 1 Group A error or 3 Group B errors are made (see Appendix 2 for error classifications), the PACT trainee must undergo a period of reflection and then check an additional 250 items. If any subsequent error occurs, then the PACT trainee is to undergo a further two week period of reflection and then restart the 1000 item checking log.

The trainee must complete a reflective writing template each time an error occurs and discuss this with their preceptor.

A PACT trainee may have a total maximum of two attempts to complete the 1000 item accuracy checking log. If the log is not completed satisfactorily, then their participation in the training must cease. If any PACT trainee fails to complete their accuracy checking log on their second full attempt (following a complete restart) then their preceptor who must inform the training provider as soon as possible.

The Training Provider will work with the trainee and their preceptor to identify areas for improvement and whether re- enrolment into the programme is appropriate.

<sup>&</sup>lt;sup>4</sup> PACT Policy - Programme Assessment and Reassessment Policy (Dec22)

<sup>&</sup>lt;sup>5</sup> PACT Policy - PACT Trainee's Checking Portfolio Assessment Management

## 5.3 Portfolio Review

The portfolio is reviewed by the training provider. The portfolio must contain (Portfolio Assessment Criteria):

- PACT Trainee details (name, pharmacy)
- satisfactory evidence of a minimum of 1000 accurately final checked items
- documentation of all dispensing errors detected and checking errors missed
- documentation of reflection of errors
- PACT Preceptor's review of performance (appraisals) on a minimum of two occasions and after a Group A error
- Final checker's (pharmacist or certified PACT) signature log
- PACT Preceptor's nomination for PACT Trainee to proceed to practical checking assessment (part of final appraisal)

#### 5.4 Reflective Practice

Whenever a PACT trainee is required to reflect on an error they have failed to identify, the following points should be considered, documented and reviewed by the PACT Preceptor:

- description of error
- corrective actions taken
- root cause of the dispensing error
- root cause of the PACT trainee missing the error
- potential outcome and impact of the error to the patient
- PACT trainees must be supported after any checking error has occurred and guided through their period of reflection. PACT trainees must document this reflection and include this, along with details of the error, within their portfolio.

#### 5.5 PACT Trainee Appraisals

The PACT trainee's progress must be reviewed at regular intervals. An appraisal form must be completed on a minimum of two occasions (at 500, and 1000/1250 items) whilst completing the accuracy checking log.

These appraisals will form the PACT Preceptor's nomination for PACT Trainee to proceed to practical checking assessment.

#### 5.6 Practical Checking Assessment

The Practical Checking Assessment is externally and independently assessed by a pharmacist holding a current APC with no conditions, appointed by the training provider. The assessor may not be the PACT's preceptor, or any pharmacist who has worked with the PACT. Both the pharmacist and the PACT will complete a declaration that they are not known personally to each other. However, if this is the case through their pharmacy networks but not current employment both the assessor and PACT must declare in writing that they are happy for the assessment to progress. If this does not progress an alternative assessor will be found, with no detriment to the parties involved.

The PACT has 60 minutes to satisfactorily:

- Correctly check 20 dispensed items over multiple prescriptions
- Identify all errors from a set of provided prescriptions containing a standard range of errors.

If all errors are not identified, unsuccessful PACT trainees must complete an additional 100 item accuracy checking log at their workplace. This must contain no errors. Once this second log is satisfactorily completed, the PACT trainee can then reapply for the next available practical checking assessment time.

The Training Provider must be informed if the PACT trainee makes an error while completing the additional checking log and a new 100 item accuracy checking log must be completed before applying for reassessment.

A PACT trainee may have a maximum of TWO attempts to satisfactorily complete the practical assessment. Following two unsuccessful attempts a minimum stand down period of six months is required before a technician can reapply for PACT training. Further training requirements will be set on a case-by-case basis by the Training Provider.

#### 5.7 Oral Interview

The oral interview is designed to assess the PACT trainee's ability to accept the responsibility involved with being a PACT. The interview is conducted by an assessment panel, consisting of 2 independent pharmacists nominated by the training provider. The PACT trainee must meet set assessment criteria for the interview.

If the PACT trainee's interview answers are unsatisfactory, one more attempt will be allowed in 2 weeks' time. Following two unsuccessful attempts a minimum stand-down period of three months is required and completion of a third assessment. An unsuccessful third attempt will result in failure to complete the programme.<sup>7</sup>

### 6. Certification

PACT trainees who successfully complete all assessment requirements are eligible for certification.

Initial certification is dated with the month and year in which it was issued (i.e. training completed). Following this, certified PACTs receive an annual certificate provided they continue to meet the recertification requirements.

#### 6.1 Probationary period

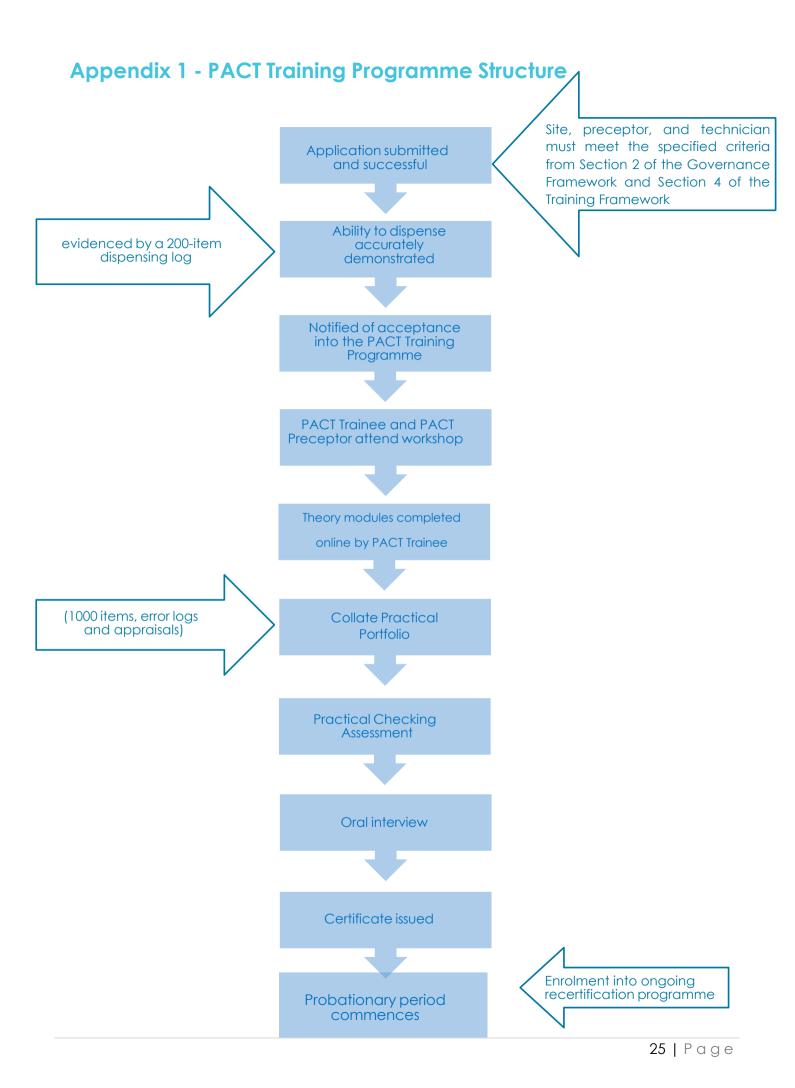
The probationary period must commence at the original training site within one month after the PACT training programme has been completed and the PACT has received their certificate of completion.

Prior to the commencement of the probationary period, all accuracy checks carried out by the PACT trainee have been subject to a further and final check by a pharmacist. When starting the probationary period, the PACT trainee's final accuracy checking should continue to be second checked by a pharmacist. Over a two-week period, the extent of the re-checking should decrease until such time that the PACT assumes full responsibility for the final accuracy checking of dispensed items. The probationary period should last a minimum of two weeks, however, to meet specific circumstances the PACT Preceptor may extend this time period.

If an error occurs during the probationary period, the error must be documented in an error log and reported to the Society. Any other action should be taken in accordance with local error monitoring procedures. The PACT Preceptor should provide appropriate support for the PACT trainee during this time.

Upon completion of the probationary period, a probationary period declaration form must be completed by the PACT and the PACT preceptor and returned to the Society.

<sup>&</sup>lt;sup>7</sup> PACT Policy - Programme Assessment and Reassessment Policy (Dec22)



# **Appendix 2 - Classification of Errors**

# Group A

#### Incorrect Label:

- wrong drug name
- wrong drug form
- wrong drug strength
- incorrect patient's name
- wrong directions
- missing or inappropriate warnings
- incorrect quantity

### Incorrect Contents:

- wrong drug
- wrong drug form
- wrong drug strength
- incorrect quantity
- expired contents

#### Other:

- missing or incorrect CAL
- missing medication
- missing clinical assessment
- missing item sundry

# Group B

#### Incorrect Label:

- incorrect cost code
- incorrect expiry date
- incorrect batch number
- incorrect spelling/grammar
- missing or incorrect additional warnings

#### Other:

- incorrect container/closure
- missing necessary device (e.g. syringe)
- missing checking signature
- missing owing information
- incorrect prescriber or patient address

# **Appendix 3- Definitions Used in these Frameworks**

These terms relate solely to the body of this document.

#### **APPROPRIATE PERSONS**

Staff who have been identified as suitably trained and qualified to give guidance and make decisions regarding the assessment process

#### ASEPTIC COMPOUNDING

The preparation of a medicine by a method of handling sterile material that employs techniques which minimise the risk of microbial contamination

#### ASSESSMENT PERIOD

The period during which assessments are carried out. This must be preceded by an adequate period of supervised training

#### CLINICAL ASSESSMENT

Clinical assessment of a patient's prescribed medicines for safety, efficacy, and compliance with local and/or national guidelines.

#### COMPETENCY

An ability to perform a task or activity consistently and successfully to an agreed standard

#### DISPENSING

The preparation (including packaging, labelling, and recording) of a medicine for sale to the public

#### PACT PRECEPTOR

A suitably experienced pharmacist responsible for support of the PACT trainee and facilitation of their training

#### PACT TRAINEE

A pharmacy technician who has been accepted into and is undertaking the training provider PACT training programme

#### PHARMACY TECHNICIAN

A person who holds the appropriate and recognised pharmacy technician qualifications in NZ

#### PHARMACIST

A person who holds an appropriate university degree or diploma and who is registered with the Pharmacy Council of NZ and holds a current APC without conditions

#### **RE-CERTIFICATION**

Recognition of revalidation of practice, to demonstrate that required standards of competence continue to be met

#### **REFLECTIVE PRACTICE**

The process of reviewing a specific task or day-to-day practice, identifying successes and weaknesses, and planning and taking action to address areas for development

#### PHARMACY ACCURACY CHECKING TECHNICIAN (PACT)

A PACT is a pharmacy technician who has successfully completed the PACT Training Programme<sup>8</sup>, to undertake the final accuracy check on a dispensed item that has been clinically approved by a registered practicing pharmacist holding an APC with no conditions, and who continues to meet annual requirements for maintaining certification.

#### STANDARD OPERATING PROCEDURES (SOPS)

Approved written step-by step instructions on how a task or process should be carried out

#### TRAINING PROVIDER

An organisation responsible for the programme, including delivery of training, assessment, and certification

# Version Control

Version	Date		Approved by
Version 1	13 November 2015	Draft Document Creation	PACT Project Steering Group
Version2	15 February 2017	Reviewed and updated	PACT Advisory Group
Version 3	24 July 2018	Reviewed and updated	PACT Advisory Group
Version 4	16 May 2022	Reviewed and updated	PSNZ and Medsafe
Version 5	17 December 2022	Updated links to policies	PSNZ

<sup>&</sup>lt;sup>8</sup> New Zealand Training Framework for Pharmacy Accuracy Checking Technicians (Dec22)