Pharmacy Manager
Requirements

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Disclosure:

There are no conflicts to disclose.
Introduction

- University of Manitoba  1995

- Staff pharmacist → Pharmacy Manager → Pharmacy District Manager

- 6 years Complaints Committee
What does it mean to be a Pharmacy Manager?
From the Pharmaceutical Act, section 99

99. Every owner and every pharmacy manager is liable for

a) every offence against this Act; and

b) every matter referred to the complaints committee under section 32 committed by or arising out of the conduct of an employee, or any person under the supervision of the owner or manager, if the owner or manager directed, authorized, permitted or acquiesced in the commission of the offence or in the matter.
From the Pharmaceutical Act

53  Safe use of Automation

The pharmacy manager must take reasonable steps to ensure that any automated or computerized system used in prescription filing processes in the pharmacy, or any component of the pharmacy, are in good working order and perform their intended tasks in a safe, secure and appropriate manner.
From the Pharmaceutical Act

56(1) Standards of Practice

12. Records and Information

An owner must not request or require a member to use, disclose or otherwise deal with a record containing the personal health information of a patient in a way that is not consistent with the obligations that a member has under the Act, this regulation, the Personal Health Information Act or under any other law.
56(1) Standards of Practice


A pharmacy manager must establish, implement and maintain written policies and procedures to:

(a) Identify, mitigate and avoid situations that expose patients and staff to inappropriate risk;

(b) ensure safe and effective pharmacy practice; and

(c) set out the role of staff in the pharmacy with respect to the matters set out in clauses (a) and (b).
From the Pharmaceutical Act

56 (1) Standards of Practice

14. Pharmacist to staff ratio

A member and an owner must ensure that a pharmacy is operated with a ratio of members to pharmacy technicians, interns, students and other staff or workers that ensures safe and effective pharmacy practice.
From the Pharmaceutical Act

Pharmacy manager’s responsibilities re: supervision

65 (1) A pharmacy manager must take reasonable steps to ensure:

   (a) that the pharmacy under his or her management has developed policies about the tasks that interns, pharmacy technicians, students and other persons may perform in the pharmacy having regard to their skill level and professional development; and

   (b) that those policies are complied with.
From the Pharmaceutical Act

65 (2) A pharmacy manager must take reasonable steps to ensure that supervision is provided to interns, pharmacy technicians, students and other persons in accordance with this Part, the standards of practice and practice directions.

65 (3) A pharmacy manager must take reasonable steps to ensure that members under his or her supervision

   (a) are competent in the practice of pharmacy being performed; and

   (b) do not permit or require a person to do a task, unless that person has the requisite knowledge, skill and judgment to engage in the specified task under supervision.
1.1. As drugs are received for the pharmacy or pharmacy department, they shall be handled in the following manner:

1.1.1. All products regulated by the Controlled Drugs and Substances Act (e.g. narcotic, controlled, and targeted substances etc.) shall be delivered to the dispensary directly or, where applicable, to the receiving area and subsequently delivered to the dispensary forthwith;

1.1.2. The pharmacist manager shall be responsible to ensure established policy and procedures provide for the security of all medication received during the time elapsed from the actual receiving until the medication is stored properly by dispensary staff.
Practice Direction

Standards of Practice #6: Drug Distribution and Storage

1.0 Scope and Objective:
   1.1 Expected Outcome

   This document is a practice direction by Council concerning drug distribution through the authority of The Pharmaceutical Regulations to The Pharmaceutical Act and The Pharmaceutical Act.

   1.2 Document Jurisdiction (Area of Practice)

   Compliance is expected from all pharmacies in Manitoba.

   1.3 Regulatory Authority Reference

   Sections 56(1) and 56(2) of The Pharmaceutical Regulations to the Pharmaceutical Act empowers the Council to create a practice direction for drug distribution.
From Hospital Standards of Practice

Standard #1: Drug Distribution

2. Receiving/Storage of Drugs

(b) The pharmacist manager shall be responsible to ensure established policy and procedures provide for the proper storage of received drugs when storage within the pharmacy department is not possible.

(c) The pharmacist manager shall be responsible to ensure established policy and procedures provide for the security of all medication received during the time elapsed from the actual receiving until it is stored properly by the pharmacy.
From Hospital Standards of Practice

Standard #1: Drug Distribution

14. Patient’s Own Medication

If the drugs the patient brought to the hospital are not to be used during hospitalization, they shall be stored securely and, if appropriate, returned to the patient at time of discharge. Drugs which are not returned to the patient shall be destroyed by the pharmacy department in accordance with hospital and legal requirements.
From Hospital Standards of Practice

- Standard #1: Drug Distribution

10. Ward Stock Medications

The supply, distribution and control of ward stock medications shall be the responsibility of the pharmacy department.

Narcotic and Controlled drugs may be provided as a special form of ward stock and shall be stored in a secured area in accordance with legal requirements. Other specified drugs shall be stored in a like manner.
From Community Standards of Practice

Standard #5: Hours of Pharmacy Service

A pharmacy manager shall ensure that the pharmacy hours meet the needs of the community, hospital and institution on a 24-hour basis where it is practical and necessary to do so.

5.1 The maximum possible hours of on-site pharmacist service shall be provided by the pharmacy based on needs of the institution or community and the availability of pharmacist staff.

5.2 The principle entrance must have hours of operation posted along with call-back information where available.
Standard #7: Legal and Ethical

The pharmacist/pharmacy manager/pharmacy owner shall abide by the laws and ethical principles governing the profession of pharmacy to ensure a high level of patient care and safety.

7.2 The pharmacist shall exercise appropriate professional judgment in the application of the legal and ethical requirements.
From Community Standards of Practice

Standard #9: Medication Incidents and Discrepancies

A pharmacist shall expeditiously correct and properly document all medication incidents and follow up all discrepancies.

9.2 All medication incidents are to be documented at the first available time. Discrepancies may be documented at the pharmacist’s discretion.
From Community Standards of Practice

Standard #9: Medication Incidents and Discrepancies

9.2.1 All medication incidents shall be documented on a numbered pharmacy incident report form and in an incident/discrepancy pharmacy logbook. The logbook shall include at a minimum the date, prescription identity number, incident identity number and brief summary of the incident.

9.2.2 Medication discrepancies may be documented in a pharmacy logbook at the pharmacist’s discretion.
Standard #9: Medication Incidents and Discrepancies

9.2.3 The pharmacy manager shall review the incident/discrepancy log on a regular basis. The review shall be documented in the log and any corrective measures noted.

9.8 All medication incidents or discrepancies are to be reported to the pharmacy manager.
Common issues

- Medication Incident Reporting
- PHIA
- Patient Counselling
Medication incidents

- Who should fill out the medication incident once an error is discovered?
- When in doubt, fill it out.
- Documentation
- Analysis
PHIA

- Pharmacy manager responsible for compliance with PHIA.
- Appropriate voice level
- Protection of patients private information
The practice direction for patient counselling states:

Circumstances in which a dialogue is required:

2.2 A licensed pharmacist, an academic registrant or an intern must enter into a dialogue with a patient:

1. 2.2.1 when a Schedule 1 drug is dispensed to a patient, or the patient’s agent

2.2.2 when a Schedule II drug is sold to a patient, or the patient’s agent
3.0 Documentation

1. 3.1 Patient counselling must be documented and the information contained in the record would be dependent upon the judgment of the pharmacist performing the counselling. Any follow-up required should be noted.

1. 3.2 If the patient refuses to participate or fails to respond under section 2.6 in patient counselling, the licensed pharmacist, academic registrant, or intern must ensure that the refusal or failure to respond is documented in the record.
Patient Counselling

- Confirm identity of patient
- Identify name and strength of drug dispensed
- Directions for use (frequency, duration, route)
- Importance of Compliance
- Common Adverse Effects
- Activities to Avoid
Patient Counselling

- Storage Requirements
- Refill information
- Information on how to monitor response to therapy
- Expected therapeutic outcomes
- When to seek medical attention
- Other unique information
Patient Counselling

- Pharmacy manager’s role
- Documentation
- Staff awareness