

Optimizing Patient Care with Technician Product Verification

Implementation Checklist for a Community Pharmacy

Action Step #1: *Consider the Change*

Date due: _____
(8-12 months before implementation)

- ☐ Review literature and available resources on technician product verification
Examples available at www.nacds.org/optimizing-care/
- ☐ Engage pharmacy leadership and counsel to help evaluate a potential program in light of operational and legal considerations
- ☐ Review relevant Board of Pharmacy regulations to implement TPV in your state (e.g., pilot project, waiver/variance request, application process, etc.)
- ☐ Leadership and on-site champions have completed an introductory training on advancing technician roles.
Examples available at www.nacds.org/optimizing-care/
- ☐ Complete “Readiness Assessment”
 - Conduct internal analysis and develop plan for necessary changes to be ready for implementation with a focus on technology, service development, and staff education/ perception adjustments. Secure any budgetary needs to implement such changes.
 - Evaluate opportunities for patient care service expansion within national or state initiatives (e.g., statewide protocols, collaborative practice arrangements, value-based pharmacy programs/networks, etc.)
- ☐ Review current professional liability coverage
- ☐ Collect baseline data on dispensing errors and patient care provision, if needed by regulation or so that your TPV process may later be evaluated, and improvement goals can be set

Action Step #2: *Prepare for the Change*

Date due: _____
(6-8 months before implementation)

- ☐ Review “Readiness Assessment”
 - Have necessary improvements been made to succeed in implementing technician product verification?
- ☐ All pharmacy staff have completed an introductory training on advancing technician roles.
Examples available at www.nacds.org/optimizing-care/
- ☐ Analyze and determine any TPV workflow design changes necessary for your pharmacy.
Questions to consider as part of this step, include:
 - Where will workstations be located?
 - Who will be at each workstation? What will their tasks be?
 - Where in the pharmacy will TPV be implemented?

- If select filled prescription products must be “pharmacist-checked,” how will this be handled (e.g. where will they be placed to ensure optimal workflow)?
- What tasks can be delegated from pharmacy technicians to other technicians or to clerks to allow the checking technician to have time for TPV?
- Does anything need to be moved to make the new workflow more efficient (e.g., printers, shred bins, etc.)?
- What needs to be changed within your pharmacy software for workflow re-design (e.g., authority changes for checking technicians, pre-verification step)?
- Who is responsible for any special quality improvement/assurance efforts related to TPV and Board reporting – who will be responsible for data collection/auditing that may be required by the Board of Pharmacy?
- Cross-train pharmacy team members in tasks that will be redistributed once TPV is implemented (e.g., who will conduct inventory management when primary checking technician used to do this task)
- Update pharmacy’s policies and procedures, including job descriptions
 - Identify which pharmacy team members are eligible to serve as checking technicians – this should be a collaborative decision with leadership and pharmacists to ensure comfortability and confidence with those deemed eligible and competent
 - Will pharmacy team members sign acknowledgement form after reviewing updated policy and procedures and agree to the change(s)?
 - If quality assurance/safety issues arise, how will remediation be handled?
- Complete necessary Board of Pharmacy application to implement TPV in your state (e.g., pilot project, waiver/variance request, application process, etc.)

Action Step #3: *Staff Training*

Date due: _____
(3-6 months before implementation)

- All pharmacy technician staff have completed education according to each pharmacy team member’s role and practice setting.
Examples available at www.nacds.org/optimizing-care/
- Checking technician(s) has completed necessary education.
Examples available at www.nacds.org/optimizing-care/
- All pharmacist staff have completed any additional training or professional development for provision of patient care services
- Review pharmacy’s specific continuous quality improvement (CQI) process and how to report an error within TPV workflow

Action Step #4: *Implementation of Change*

Date due: _____
(1-3 months before implementation)

- ☐ Begin site-specific training on TPV workflow
- ☐ Implement all aspects of workflow redesign EXCEPT actual performance of TPV
- ☐ Conduct audit period of checking technician filled medications

Action Step #5: *Assessment of Change*

Date due: _____
(1-3 months after implementation)

- ☐ Hold recurring pharmacy team meetings during at least the first month post-implementation or evaluate these questions on an ongoing basis:
 - How is TPV workflow going?
 - What needs to be adjusted or changed?
 - Have enough tasks been delegated away from the checking technician?
 - How are the pharmacists spending their free time?
 - What additional support does the pharmacy team need?
 - Review CQI process, and discuss any errors that may have occurred
- ☐ Review data collection procedures
- ☐ Complete and submit initial report for the Board of Pharmacy if required

Action Step #6: *Ongoing Review of Change*

Date due: _____
(3+ months after implementation)

- ☐ Hold at least quarterly pharmacy meetings. Ask the same questions from initial meeting as pharmacy team members settle into their new roles
- ☐ Review quarterly data for both patient safety and patient care service delivery and compare to baseline
- ☐ Review progress and goals with supervisor or owner
- ☐ Set new goals as a pharmacy team. Discuss what needs to be done as a team to achieve set goals



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