

## **Review and Discussion of Policy Ranking Exercise (3.31.22 Meeting)**

### **For each policy listed below:**

1. In what pharmacy settings should this policy apply?

- Independent
- Small Chain (More than 1, but less than 12 locations)
- Large Chain (Grocer/Big Box/Standalone)
- Long-Term Care
- Hospital
- Mail Order
- Other (clinic, nuclear, etc.)

2. What are some considerations/modifications/details that are needed to make this policy feasible to implement?

3. How does this policy address the underlying issues raised in the survey?

4. Can this policy be enforced?

5. How will this policy improve overall workload conditions for pharmacy personnel?

## PWAC Policy Ranking Results (11 total responses)

Number	Title	Type of Change	Description	Rank
18	Expand Technician Scope of Practice – Immunizations	Legislative Change	Make permanent the administration of immunizations and vaccines by Pharmacy Technicians that includes all approved ACIP-recommended vaccines for adults and children.	5.82
8	Mandatory Breaks/Rest Periods	Administrative Rule	Require pharmacies to provide appropriate opportunities for uninterrupted rest periods and meal breaks to all staff. (See breakdown of requirements from other states in <a href="#">Appendix I</a> )	6.09
1	Improve Resources to Promote Technician Onboarding	Board Initiative	Board shall develop onboarding educational videos and other materials to facilitate onboarding of new technicians.	6.27
3	License Transferability	Administrative Rule	Board shall develop and implement a process for technician reciprocity.	6.36
2	Improve Technician Training Resources	Administrative Rule	Requiring pharmacies to have a dedicated staff member to train all new technicians. Staff person should be at the pharmacy or district level.	7.64
6	Staffing Plan	Administrative Rule	<p>Require each pharmacy’s responsible person to develop a staffing plan that establishes the appropriate number of pharmacy technicians and interns to pharmacist(s) on duty. The staffing plan shall ensure that the number of pharmacy technicians and interns on duty can be satisfactorily supervised by the pharmacist(s) on duty.</p> <p>In developing a staffing plan, the responsible person shall consider all the following:</p> <ul style="list-style-type: none"> <li>a. The volume of workload and the services provided by the pharmacy (MTM, vaccines, etc.).</li> <li>b. The volume of prescriptions handled by staff to include: <ul style="list-style-type: none"> <li>i. Prescriptions filled, dispensed, and sold;</li> <li>ii. Prescriptions placed on hold;</li> <li>iii. Prescriptions returned to stock;</li> <li>iv. Any other prescriptions metrics developed by the responsible person.</li> </ul> </li> <li>c. Security needs of the pharmacy and pharmacy staff.</li> </ul>	7.91

			<p>d. Required closing of certain touchpoints (drive-thru, vaccines, etc.) if understaffed. Provide autonomy to the on-duty pharmacist as part of the rule to close touchpoints.</p> <p>The responsible person shall be able to increase staffing to operate a pharmacy in a safe and effective manner.</p>	
<b>15</b>	Tech-Check-Tech	Legislative Change	Implementation of Tech-Check-Tech. This would allow for enhanced pharmacy technician certification, increased payment tiers for additional education/training required, and would also reduce work burden on the pharmacist.	<b>8.00</b>
<b>17</b>	Expand Technician Scope of Practice – Order and Administration of Diagnostics Tests	Legislative Change	Change in the required current law/rule(s) regarding the authority to order and administer diagnostic tests. This should include diagnostic tests for COVID-19 and tests for COVID-19 antibodies. In addition, other FDA approved tests should be included in the amended law/rule(s). Also, the updated law/rule(s) should allow under the supervision of a pharmacist two additional work groups to the already allowed pharmacy intern and certified pharmacy technician. These additions are registered pharmacy technicians and pharmacy technician trainees.	<b>8.73</b>
<b>16</b>	Expand Technician Scope of Practice – Drug Administration	Legislative Change	Develop permanent law/rule(s) to allow for pharmacy technicians to administer drugs in the state of Ohio. This would include at a minimum immunization, antipsychotic drugs, Hydroxyprogesterone caproate, Medroxyprogesterone acetate, and Cobalamin at least. This is currently allowed by law/rule for pharmacists in the state.	<b>9.45</b>
<b>11</b>	Managing Touchpoints	Administrative Rule	Provide autonomy to the pharmacist on duty to shut down touchpoints and non-essential services if understaffed.	<b>9.73</b>
<b>4</b>	Working Conditions / Security	Administrative Rule	<p>Require any “open-door” pharmacy must operate with at least one technician and one pharmacist (or two pharmacists). Include exception for documented absence.</p> <p><i>California rules have a similar provision (two individuals required to work in a pharmacy). [See Appendix 3 of this document for California Laws impacting pharmacist workload]</i></p> <p><i>A community pharmacy shall not require a pharmacist employee to engage in the practice of pharmacy at any time the pharmacy is open to the public, unless either another employee of the pharmacy or, if the pharmacy is located within another establishment, an employee of the establishment within which the pharmacy is located, is made available to assist the pharmacist at all times.</i></p> <p><i>Includes the following exceptions:</i></p>	<b>9.82</b>

			<p><i>(1) A hospital pharmacy.</i></p> <p><i>(2) A pharmacy located in a hospital facility, including, but not limited to, a building where outpatient services are provided in accordance with the hospital's license.</i></p> <p><i>(3) A pharmacy owned or operated by a federal, state, local, or tribal government entity, including, but not limited to, a correctional pharmacy, a University of California pharmacy, or a pharmacy operated by the State Department of State Hospitals.</i></p> <p><i>(4) A pharmacy owned by a person or persons who, collectively, control the majority of the beneficial interest in no more than four pharmacies in California.</i></p> <p><i>(5) A pharmacy entirely owned and operated by a health care service plan that exclusively contracts with no more than two medical groups in the state to provide, or arrange for the provision of, professional medical services to the enrollees of the plan.</i></p> <p><i>(6) A pharmacy that permits patients to receive medications at a drive-through window when both of the following conditions are met:</i></p> <p><i>(i) A pharmacist is working during the times when patients may receive medication only at the drive-through window.</i></p> <p><i>(ii) The pharmacist's employer does not require the pharmacist to retrieve items for sale to patients if the items are located outside the pharmacy. These items include, but are not limited to, items for which a prescription is not required.</i></p> <p><i>(7) Any other pharmacy from which controlled substances, dangerous drugs, or dangerous devices are not furnished, sold, or dispensed at retail.</i></p> <p><i>The board shall not take action against a pharmacy for a violation of this section if both of the following apply:</i></p> <p><i>(1) Another employee is unavailable to assist the pharmacist due to reasonably unanticipated circumstances, including, but not limited to, illness, injury, family emergency, or the employee's termination or resignation.</i></p> <p><i>(2) The pharmacy takes all reasonable action to make another employee available to assist the pharmacist.</i></p>	
--	--	--	--	--

5	Staffing Requirements	Administrative Rule	Ancillary staffing (support personnel and technicians) must allow for each point of contact to be covered at all hours the pharmacy is open. This must include drive-thru, drop-off, register, vaccinations, and a person dedicated to phones.	<b>11.00</b>
14	Technician Career Pathways	Administrative Rule	We are adding more and more clinical services and responsibilities to the pharmacy technician position. Some employers are compensating accordingly while others are not. Since we cannot implement any rules or regulations involving pay, I feel it would help to somehow recognize our pharmacy technicians' additional certifications including immunizations, MTM, etc.	<b>11.64</b>
7	Report of Understaffing	Administrative Rule	<p>(A) Adequate staffing to safely dispense prescriptions is the responsibility of the pharmacy and the pharmacy's responsible person. If conditions exist that could cause prescriptions to be dispensed in an unsafe manner the pharmacy and the pharmacy's responsible person shall take action to correct the problem.</p> <p>(B) In order to ensure adequate staffing levels a staffing report form shall be available in each pharmacy. A copy of this form, when executed, will be given to the immediate supervisor and a copy must remain in the pharmacy for Board inspection. Such form shall include, but not be limited to the following:</p> <ul style="list-style-type: none"> <li>(1) Date and time the inadequate staffing occurred;</li> <li>(2) Number of prescriptions filled during this time frame;</li> <li>(3) Summary of events; and</li> <li>(4) Any comments or suggestions.</li> </ul> <p>(C) A pharmacist shall complete the staffing report form when:</p> <ul style="list-style-type: none"> <li>(1) A pharmacist is concerned regarding staffing due to: <ul style="list-style-type: none"> <li>(a) inadequate number of support persons (cashiers, technicians, auxiliary supportive personnel, etc.); or,</li> <li>(b) excessive workload;</li> </ul> </li> <li>(2) Filling out the form may enable management to make a better decision concerning staffing.</li> <li>(3) Any errors that occurred to the result of inadequate staffing.</li> </ul>	<b>11.64</b>

			<p>(D) The responsible person shall submit that form in a manner determined by the board.</p> <p>(E) Each pharmacy shall review completed staffing reports and address any issues listed as well as document any corrective action taken or justification for inaction to assure continual self-improvement. If the issue is not staffing related, measures taken to address the issue should be described.</p> <p>(F) Each pharmacy shall retain completed staffing reports on-site in a readily retrievable manner for at least three years from the date of creation.</p>	
<b>9</b>	Limits on Hours Worked	Administrative Rule	<p>A pharmacy shall not require a pharmacist or pharmacy technician to work longer than twelve (12) hours per twenty-four (24) hour period. A pharmacist/technician working longer than six (6) continuous hours per 24-hour period must be permitted a thirty-minute meal break. Signage indicating the pharmacy hours of operation, including the meal break, must be displayed in a location readily visible to the public.</p> <p>(See breakdown of requirements from other states in <a href="#">Appendix I</a>)</p>	<b>11.91</b>
<b>10</b>	Mandatory Dark Hours	Administrative Rule	<p>Require "open door" pharmacies to operate dark hours that allow for staff to prepare and catchup on their work without any interruptions. This will allow pharmacies to operate more efficiently and safely and help minimize distractions when engaged in activities requiring greater concentration.</p>	<b>12.55</b>
<b>12</b>	Metrics	Administrative Rule	<p>Eliminate Job impacting metrics that compromise safety and integrity of the profession. Pharmacists and technicians should not be financially impacted, or job performance impacted to meet corporate metrics around speed and time to fulfillment. Accuracy should be allowed as a metric. Prohibit metrics related to the volume of services provided. <b><i>[See Appendix 3 of this document for California Laws impacting pharmacist workload]</i></b></p>	<b>12.91</b>
<b>13</b>	Elimination of Cold Call Lists	Administrative Rule	<p>Eliminate required cold call lists.</p>	<b>13.55</b>

## **Appendix 1 – State Laws/Rules on Pharmacy Personnel Rest/Meal Breaks/Shift Limits**

### Alabama:

*Every pharmacy when opened for business shall be under the personal supervision of a duly licensed pharmacist who shall have personal supervision of not more than one pharmacy at the same time. During temporary absences of the licensed pharmacist, not to exceed three hours daily or more than one and one-half hours at any one time, nor more than one week for temporary illness, the prescription department shall be closed, and no prescriptions are to be filled. During the temporary absence of a pharmacist, a sign shall be placed on the prescription counter in a prominent location easily seen by the public stating, "Prescription Department Closed, No Pharmacist on Duty."*

### Florida:

*A pharmacist may take a meal break, **not to exceed thirty minutes in length**, during which the pharmacy department of a permittee shall not be considered closed, under the following conditions:*

- (a) The pharmacist shall be considered present and on duty during any such meal break if a sign has been prominently posted in the pharmacy indicating the specific hours of the day during which meal breaks may be taken by the pharmacist and assuring patients that a pharmacist is available on premises for consultation upon request during a meal break;*
- (b) The pharmacist shall be considered directly and immediately available to patients during such meal breaks if patients to whom medications are delivered during the meal break are verbally informed that they may request that a pharmacist contact them at the pharmacist's earliest convenience after the meal break, and if a pharmacist is available on premises during the meal break for consultation regarding emergency matters; only prescriptions with final certification by the pharmacist may be delivered;*
- (c) The activities of pharmacy technicians during such a meal break shall be considered to be under the direct and immediate personal supervision of a pharmacist if the pharmacist is available on premises during the meal break to respond to questions by the technicians, and if at the end of the meal break the pharmacist certifies all prescriptions prepared by pharmacy technicians during the meal break.*

### Minnesota:

*A pharmacist, pharmacist-intern, or pharmacy technician working longer than six continuous hours per day shall be allowed during that time period to take a 30-minute, uninterrupted break.*

### New Hampshire:

*(a) No pharmacist shall work more than 8 hours without a rest break of 30 minutes. Breaks shall be scheduled as close as possible to the same time each day so that patients may become familiar with the approximate break times.*

*(b) Whenever the prescription department is staffed by a single pharmacist, the pharmacist may take a rest break for a period of 30 minutes without closing the pharmacy and removing support personnel from the pharmacy, provided that the pharmacist reasonably believes that the security of the prescription drugs will be maintained in the pharmacist's absence.*

North Carolina:

*A permit holder shall not require a pharmacist to work longer than 12 continuous hours per workday. A pharmacist working longer than 6 continuous hours per workday shall be allowed during that time period to take a 30 minute meal break and one additional 15 minute break.*

Oregon:

*Appropriate opportunities for uninterrupted rest periods and meal breaks.*

Vermont:

*(a) Whenever the prescription department is staffed by a single pharmacist, the pharmacist may take a meal/rest break for a period of up to 30 minutes without closing the pharmacy and removing support personnel from the pharmacy, provided that the pharmacist reasonably believes that the security of the prescription drugs will be maintained in the pharmacist's absence.*

*(b) No pharmacist shall work more than 8 hours without a meal/rest break. Breaks should be scheduled as close as possible to the same time each day, so that patients may become familiar with the approximate time of the breaks*

Virginia:

*Except in an emergency, a permit holder shall not require a pharmacist to work longer than 12 continuous hours in any work day and shall allow at least six hours of off-time between consecutive shifts. A pharmacist working longer than six continuous hours shall be allowed to take a 30-minute break.*

West Virginia:

*No pharmacist may work more than twelve (12) hours within a twenty-four (24) hour period without at least eight (8) hours off duty in that 24 hours, except in a case of emergency when a pharmacist calls off work, the pharmacist on duty may work more than twelve (12) hours in order to keep the pharmacy open. The pharmacists would have to document and date and amount of time worked beyond the twelve (12) hour limit along with the reason for the extended hours of work and make it available to the Board.*



**Appendix 2 – Ranking Response Data (bolded = average for all responses)**

Improve Resources to Promote Technician Onboarding (#1)	Improve Technician Training Resources (#2)	License Transferability (#3)	Working Conditions / Security (#4)	Staffing Requirements (#5)	Staffing Plan (#6)	Report of Understaffing (#7)	Mandatory Breaks/Rest Periods (#8)	Limits on Hours Worked (#9)	Mandatory Dark Hours (#10)	Managing Touchpoints (#11)	Metric (#12)	Elimination of Cold Call Lists (#13)	Technician Career Pathways (#14)	Tech - Check-Tech (#15)	Expand Technician Scope of Practice – Drug Administration (#16)	Expand Technician Scope of Practice – Order and Administration of Diagnostics Tests (#17)	Expand Technician Scope of Practice – Immunizations (#18)
3	10	1	6	11	7	17	2	5	15	8	9	16	18	12	13	14	4
11	10	6	18	16	7	17	1	15	13	8	14	9	12	5	3	4	2
15	16	7	13	12	14	6	2	3	5	4	9	10	17	11	18	8	1
3	5	2	12	13	7	6	14	11	15	16	17	18	4	1	9	8	10
6	9	17	1	3	4	10	5	7	8	2	11	12	18	13	14	16	15
7	4	1	8	9	3	11	2	10	13	12	14	16	15	5	18	17	6
5	9	2	6	10	12	13	15	14	11	16	8	18	17	1	3	7	4
1	2	8	9	13	10	11	12	18	14	5	16	15	4	17	6	3	7
11	10	6	18	16	7	17	1	15	13	8	14	9	12	5	3	4	2
3	4	6	2	8	7	9	1	16	15	10	17	18	5	11	14	13	12
4	5	14	15	10	9	11	12	17	16	18	13	8	6	7	3	2	1
<b>6.27</b>	<b>7.64</b>	<b>6.36</b>	<b>9.82</b>	<b>11.00</b>	<b>7.91</b>	<b>11.64</b>	<b>6.09</b>	<b>11.91</b>	<b>12.55</b>	<b>9.73</b>	<b>12.91</b>	<b>13.55</b>	<b>11.64</b>	<b>8.00</b>	<b>9.45</b>	<b>8.73</b>	<b>5.82</b>