CHAPTER 29

PHARMACY TECHNICIANS
1. Proper Identification as "Pharmacy Technician"

2. Registration of pharmacy technicians required
   - Minimum 17 years old
   - Biennial renewal requiring 20 hours CE approved by Board or ACPE
   - Board of Pharmacy disciplinary oversight for violation of F.S. 456 and 465
   - Competency effective 1/1/11 – Board Approved Training Program

3. Must develop Policy and Procedure Manual regulating duties of technician and scope of responsibility
   - Establish and maintain documentation that is signed by the registered pharmacy technician acknowledging they have reviewed the Policy and Procedures Manual(s). Each registered pharmacy technician shall have 90 days from the effective date of this rule, [January 7, 2015], to comply with this provision and all registered pharmacy technicians hired subsequent to this rule’s effective date shall have ninety (90) days from the date of hire.

4. Pharmacy Technician – Delegable and Non-Delegable Tasks (64B16-27.420)

5. Pharmacy Technician Supervision – Delegated tasks must be performed under the direct supervision of a pharmacist and pursuant to the following definitions and requirements (64B16-27.4001):
   - Direct Supervision: means supervision by a pharmacist who is on the premises at all times the delegated tasks are being performed; who is aware of delegated tasks being performed; and who is readily available to provide personal assistance, direction and approval throughout the time the delegated tasks are being performed.
   - Use of Technology: A pharmacist, as an adjunct to assist in the direct supervision of the pharmacy technician, may employ technological means to communicate with or observe the pharmacy technician. A pharmacist shall make certain all applicable state and federal laws, including, but not limited to confidentiality, are fully observed when employing technological means of communication and observation.
6. Pharmacy Technician to Pharmacist ratios (64B16-27.410)

- A pharmacist shall not supervise greater than one (1) registered pharmacy technician nor shall a pharmacy allow a supervision ratio of greater than one (1) registered pharmacy technician to one (1) pharmacist (1:1), unless specifically authorized to do so pursuant to the provisions of this rule. [“in writing” no longer required by the BOP]
- 3:1 ratio: tasks involving sterile compounding
- 4:1 ratio: tasks do not involve sterile compounding
- 6:1 ratio: pharmacy does not dispense medicinal drugs or compound sterile products

64B16-27.410 Registered Pharmacy Technician to Pharmacist Ratio.
When the pharmacist delegates tasks to a registered pharmacy technician, such delegation must enhance the ability of the pharmacist to practice pharmacy to serve the patient population. A pharmacist shall not supervise greater than one (1) registered pharmacy technician nor shall a pharmacy allow a supervision ratio of greater than one (1) registered pharmacy technician to one (1) pharmacist (1:1), unless specifically authorized to do so pursuant to the provisions of this rule.

(1) General Conditions: Regardless of the technician ratio, every pharmacy, pharmacist, Prescription Department Manager (PDM) or Consultant Pharmacist (CP) that employs or utilizes registered pharmacy technicians must comply with the following conditions:

(a) Establish and maintain a written Policy and Procedures Manual regarding the number of registered pharmacy technician positions and their utilization that includes the specific scope of delegable tasks of the technicians, job descriptions, and task protocols. The Policy and Procedures Manual or Manuals must include policies and the procedures for implementing the policies for each category enumerated below:

1. Supervision by a pharmacist;
2. Minimum qualifications of the registered pharmacy technician as established by statute and rule;
3. In-service education or on-going training and demonstration of competency specific to the practice site and job function;
4. General duties and responsibilities of the registered pharmacy technicians;
5. All functions related to prescription processing;
6. All functions related to prescription legend drug and controlled substance ordering and inventory control, including procedures for documentation and recordkeeping;
7. All functions related to retrieval of prescription files, patient files, patient profile information and other records pertaining to the practice of pharmacy;
8. All delegable tasks and non-delegable tasks as enumerated in Rule 64B16-27.420, F.A.C.;
9. Confidentially and privacy laws and rules;
10. Prescription refill and renewal authorization;
11. Registered pharmacy technician functions related to automated pharmacy systems; and
12. Continuous Quality Improvement Program.

(b) Establish and maintain documentation that is signed by the registered pharmacy technician acknowledging they have reviewed the Policy and Procedures Manual(s). Each registered pharmacy technician shall have 90 days from the effective date of this rule, [January 7, 2015], to comply with this provision and all registered pharmacy technicians hired subsequent to this rule’s effective date shall have ninety (90) days from the date of hire.
(c) Establish and maintain documentation that demonstrates the registered pharmacy technician is knowledgeable in the established job description, delegable tasks, task protocols, and policy and procedures in the specific pharmacy setting where the delegable tasks will be performed.

(2) The Policy and Procedures Manual(s) required by subsection (1) must be maintained on-site where the pharmacy technician will perform the delegable tasks and must be available during a Department inspection or at the request of the Board of Pharmacy. However, any and all documentation required by paragraphs (1)(b) and (c) must be maintained and must be provided to the Board of Pharmacy or a Department inspector within 72 hours of a request.

(3) Three to One (3:1) Ratio: Registered pharmacy technicians assisting with delegable tasks involving sterile compounding shall not exceed a ratio of up to three (3) registered pharmacy technicians to one (1) pharmacist (3:1).

(4) Four to One (4:1) Ratio: Any pharmacist or any pharmacy may allow a supervision ratio up to four (4) registered pharmacy technicians to one (1) pharmacist (4:1), as long as the delegable tasks do not involve sterile compounding.

(5) Six to One (6:1) Ratio: A pharmacy which does not dispense medicinal drugs, and the pharmacist(s) employed by such pharmacy, may allow a supervision ratio up to six (6) registered pharmacy technicians to one (1) pharmacist (6:1), as long as the delegable tasks do not involve sterile compounding.


64B16-27.420 Pharmacy Technician – Delegable and Non-Delegable Tasks.
A pharmacy technician may only assist a pharmacist in executing or carrying out the practice of the profession of pharmacy, but shall never themselves engage in the practice of the profession of pharmacy as defined in Chapter 465, F.S. Therefore, pharmacy technicians may only perform delegable tasks as identified and defined pursuant to this rule.

(1) Definition of Delegable Tasks – Delegable tasks are those tasks that are performed pursuant to a pharmacist’s direction, without the exercise of the pharmacy technician’s own judgment and discretion, and which do not require the pharmacy technician to exercise the independent professional judgment that is the foundation of the practice of the profession of pharmacy.

(2) Delegable Tasks – The following tasks are delegable:
   (a) Data entry;
   (b) Labeling of preparations and prescriptions;
   (c) Retrieval of prescription files, patient files and profiles, and other similar records pertaining to the practice of pharmacy;
   (d) The counting, weighing, measuring, and pouring of prescription medication or stock legend drugs and controlled substances, including the filling of an automated medication system;
   (e) The initiation of communication to confirm the patient’s name, medication, strength, quantity, directions, number of refills, and date of last refill;
   (f) The initiation of communication with a prescribing practitioner or their agents to obtain clarification on missing or illegible dates, prescriber name, brand or generic preference, quantity, license numbers or DEA registration numbers;
   (g) The acceptance of authorization to dispense medications pursuant to a prescribing practitioner’s authorization to fill an existing prescription that has no refills remaining (refill authorization);
   (h) The receiving, in a permitted nuclear pharmacy, of diagnostic orders only;
   (i) Assisting in preparing parenteral and bulk solutions or assisting in any act involving sterile compounding must comply with the requirements of Rule 64B16-27.1001, F.A.C.
(j) Organizing of or participating in continuous quality improvement related events, meetings, or presentations;

(k) Participation in a monitoring program to remove deteriorated pharmaceuticals to a quarantine area; and

(l) While under the direct supervision of the pharmacist, performance of any other mechanical, technical or administrative tasks which do not themselves constitute practice of the profession of pharmacy.

(3) Non-Delegable Tasks – The following tasks may not be delegated and the pharmacy technician shall not:

(a) Receive new non written prescriptions or receive any change in the medication, strength, or directions of an existing prescription;

(b) Interpret a prescription or medication order for therapeutic acceptability and appropriateness;

(c) Conduct final verification of dosage and directions;

(d) Engage in prospective drug review;

(e) Monitor prescription usage;

(f) Override clinical alerts without first notifying the pharmacist;

(g) Transfer a prescription;

(h) Prepare a copy of a prescription or read a prescription to any person for purposes of providing reference concerning treatment of the person or animal for whom the prescription was written;

(i) Engage in patient counseling;

(j) Receive therapy or blood product procedures in a permitted nuclear pharmacy; or

(k) Engage in any other act that requires the exercise of a pharmacist’s professional judgment.


64B16-27.4001 Delegation to and Supervision of Pharmacy Technicians; Responsibility of Supervising Pharmacist.

(1) Delegation: A pharmacist shall not delegate more tasks than he or she can personally supervise and ensure compliance with this rule. A pharmacist may delegate those non-discretionary delegable tasks enumerated in Rule 64B16-27.420, F.A.C., to the following types of pharmacy technicians:

(a) Registered Pharmacy Technicians (RPT): are those technicians who are duly registered with the board pursuant to Section 465.014(2), F.S.;

(b) Pharmacy Technicians in Training (PTT): are those technicians who are receiving practical (non-didactic) training in delegable tasks as part of employer-based or non-employer based board-approved pharmacy technician training programs who are not required to be duly registered with the board as pharmacy technicians.

(2) Supervision: Delegated tasks must be performed under the direct supervision of a pharmacist and pursuant to the following definitions and requirements:

(a) Direct Supervision: means supervision by a pharmacist who is on the premises at all times the delegated tasks are being performed; who is aware of delegated tasks being performed; and who is readily available to provide personal assistance, direction and approval throughout the time the delegated tasks are being performed.

(b) Use of Technology: A pharmacist, as an adjunct to assist in the direct supervision of the pharmacy technician, may employ technological means to communicate with or observe the pharmacy technician. A pharmacist shall make certain all applicable state and federal laws, including, but not limited to confidentiality, are fully observed when employing technological means of communication and observation.


29.5
PHARMACY TECHNICIAN AND INTERN RESPONSIBILITIES, COMPETENCE, AND SUPERVISION

POLICY: Pharmacy technicians and interns will function under the supervision of a pharmacist. Pharmacist supervision will be in accordance with Florida Board of Pharmacy Rules (64B16-27.410 and 64B16-27.420). Technicians will work within their scope as defined by this and other Department of Pharmacy policies.

PROCEDURE:
1. Pharmacy technicians and interns must present proof of licensure with the Florida Board of Pharmacy prior to employment (refer to pharmacy policy 05-15).
2. The delegation of any duties, tasks or functions to registered pharmacy interns and registered pharmacy technicians must be performed subject to a continuing review and ultimate supervision of the pharmacist who initiated the specific task, so that a continuity of supervised activity is present between 1 pharmacist and 1 registered pharmacy technician.
3. The licensed pharmacist shall retain the professional and personal responsibility for any delegated act performed by registered pharmacy interns and registered pharmacy technicians under the pharmacist’s supervision.
4. A pharmacist shall not supervise greater than one registered pharmacy technician nor shall a pharmacy allow a supervision of greater than one registered pharmacy technician to one pharmacist, unless specifically authorized to do so pursuant to the provisions of the rule.
   - 3:1 – Registered technician assisting with delegable tasks involving sterile compounding
   - 4:1 – Any pharmacist or any pharmacy may allow as long as delegable tasks do not include sterile compounding
   - 6:1 – A pharmacy which does not dispense medicinal drug as long as delegable tasks do not include sterile compounding
   - Any ratios outside the 3:1, 4:1, or 6:1 require Board of Pharmacy approval.
5. The total number of pharmacy technicians will fluctuate based on departmental needs and workload. Technician staffing levels are continually evaluated to ensure safe medication practices and consistent quality of care.
6. Specific qualifications, duties, and responsibilities of pharmacy technicians and interns are outlined in individual job descriptions. The supervisor responsible for performance evaluation will review responsibilities and confirm qualifications and competence for each individual at least annually. Technicians and interns will receive a copy of their updated evaluation/job description annually. Technicians and interns may request a copy of their job description from their manager at any time.
7. Technicians and interns are required to review and sign the UF Health Security and Confidentiality Agreement annually as part of the performance review process. Additional information about confidentiality is available in pharmacy policies 03-01 and 11-06 and core policy 03.053.
8. Technician training manuals are available in each work area to outline processes and procedures for which technicians are responsible. These manuals are to be used for training and general reference. Departmental policies and Standard Operating Procedures are available on the UF Health Bridge Pharmacy page. Organizational Core Policies are available on the main UF Health Bridge page.

9. Pharmacy technicians will work within their scope of practice by conforming to the Board of Pharmacy rules on delegable and non-delegable tasks.
   a. Delegable tasks are those tasks that are performed pursuant to a pharmacist’s direction, without the exercise of the pharmacy technician’s own judgment and discretion, and which do not require the pharmacy technician to exercise the independent professional judgment that is the foundation of the practice of the profession of pharmacy.
   b. Delegable Tasks – The following tasks are delegable:
      i. Data entry;
      ii. Labeling of preparations and prescriptions;
      iii. Retrieval of prescription files, patient files and profiles, and other similar records pertaining to the practice of pharmacy;
      iv. The counting, weighing, measuring, and pouring of prescription medication or stock legend drugs and controlled substances, including the filling of an automated medication system;
      v. The initiation of communication to confirm the patient’s name, medication, strength, quantity, directions, number of refills, and date of last refill;
      vi. The initiation of communication with a prescribing practitioner or their agents to obtain clarification on missing or illegible dates, prescriber name, brand or generic preference, quantity, license numbers or DEA registration numbers;
      vii. The acceptance of authorization to dispense medications pursuant to a prescribing practitioner’s authorization to fill an existing prescription that has no refills remaining (refill authorization);
      viii. The receiving, in a permitted nuclear pharmacy, of diagnostic orders only;
      ix. Assisting in preparing parenteral and bulk solutions or assisting in any act involving sterile compounding must comply with the requirements of Rule 64B16-27.1001, F.A.C.
      x. Organizing or participating in continuous quality improvement related events, meetings, or presentations;
      xi. Participation in a monitoring program to remove deteriorated pharmaceuticals to a quarantine area; and
      xii. While under the direct supervision of the pharmacist, performance of any other mechanical, technical or administrative tasks which do not themselves constitute practice of the profession of pharmacy.
   c. Non-Delegable Tasks – The following tasks may not be delegated and the pharmacy technician shall not:
      i. Receive new non written prescriptions or receive any change in the medication, strength, or directions of an existing prescription;
      ii. Interpret a prescription or medication order for therapeutic acceptability and appropriateness;
      iii. Conduct final verification of dosage and directions;
      iv. Engage in prospective drug review;
      v. Monitor prescription usage;
      vi. Override clinical alerts without first notifying the pharmacist;
      vii. Transfer a prescription;
viii. Prepare a copy of a prescription or read a prescription to any person for purposes of providing reference concerning treatment of the person or animal for whom the prescription was written;
ix. Engage in patient counseling;
x. Receive therapy or blood product procedures in a permitted nuclear pharmacy; or
xi. Engage in any other act that requires the exercise of a pharmacist’s professional judgment.

10. Technicians and interns access inpatient and outpatient encounter and medication order information through EPIC, the electronic medical record system. EPIC security access for technicians and interns is limited to tasks assigned to the “RX Technician UF” template. Functions are limited to the following tasks:

<table>
<thead>
<tr>
<th>Task</th>
<th>Task</th>
</tr>
</thead>
<tbody>
<tr>
<td>Order History</td>
<td>Open/Close Pharmacy</td>
</tr>
<tr>
<td>Return Dispense</td>
<td>Schedule Dispense</td>
</tr>
<tr>
<td>Drop Charge</td>
<td>Return Orders</td>
</tr>
<tr>
<td>Print Label</td>
<td>Search Medication Orders</td>
</tr>
<tr>
<td>Dispense Order</td>
<td>Label Paper rerouting</td>
</tr>
<tr>
<td>Cart Management</td>
<td>Reprint Labels</td>
</tr>
<tr>
<td>Bulk Charge</td>
<td>Compounding and Repackaging</td>
</tr>
<tr>
<td>Custom Label Editor</td>
<td>Medication list admin</td>
</tr>
<tr>
<td>Triggered Fills</td>
<td>Validate barcodes</td>
</tr>
<tr>
<td>Remove orders from Triggered Fills</td>
<td>Read-only access to Admin Activities</td>
</tr>
<tr>
<td>Mediations transfer on medication list</td>
<td></td>
</tr>
<tr>
<td>update</td>
<td></td>
</tr>
</tbody>
</table>

11. Technician and intern functions related to processing prescriptions in the ambulatory pharmacies are outlined in pharmacy policies 11-05, 11-04, 11-19, and 11-23. QS1 security access for outpatient pharmacy technicians and pharmacy interns is limited to tasks identified below:

<table>
<thead>
<tr>
<th>Task</th>
<th>Task</th>
</tr>
</thead>
<tbody>
<tr>
<td>Processing New Prescriptions</td>
<td>Processing Prescriptions from the IVR Queue</td>
</tr>
<tr>
<td>Processing Refill Prescriptions</td>
<td>Processing Prescription from the New E Queue</td>
</tr>
<tr>
<td>Re-Billing Current Prescriptions</td>
<td>Processing Billing Rejected Prescriptions from the Queue</td>
</tr>
<tr>
<td>Filling Prescriptions (Label and Dispense)</td>
<td>Processing Return to Stock non Control Prescriptions</td>
</tr>
<tr>
<td>Checking Out Completed Prescription in the POS</td>
<td>Processing Prior Authorization Request</td>
</tr>
<tr>
<td>Transferring Prescriptions from Shands Pharmacy</td>
<td>Processing Refill Request</td>
</tr>
</tbody>
</table>

12. In addition to Epic security access outlined in #10 above, Investigational Drug Service (IDS) technician functions relative to outpatient prescription processing also include the following:
   a. Receive prescription via Epic Ambulatory entry by physician or faxed prescription
b. Technician creates patient account (for billing purposes only)

c. Technician profiles medication in Epic using pharmacist-generated defined smart-groups

d. Technician labels prescription bottles/packages with Epic-generated labels and performs drug accountability

e. Pharmacist reviews prescription labeling for accuracy

f. Pharmacists verifies prescription in Epic

g. Medication picked up by study coordinator on behalf of patient

13. Technicians and interns may be responsible for inventory control, documentation, and recordkeeping.

a. *Purchasing and Inventory Control* policies can be accessed on the Pharmacy page

b. Ordering and distribution of satellite supplies will follow pharmacy policy 06-01-01 found under *Satellite Operations* policies

c. Guidance for handling of controlled substances can be found in the *Controlled Substance* policies. Pharmacy policy 11-15 outlines additional controlled substance management expectations in the ambulatory pharmacies.

14. Technician and intern access and functionality related to automated pharmacy systems are defined by role.

a. Omnicell automated dispensing cabinet access allows technicians and interns to manage drug inventory at remote locations across the organization. Only Controlled Substance and Automation Technicians have access to controlled substance Omnidispensers in Omnicell.

b. Access to the pharmacy Controlled Substance Manager (vault) is limited to Controlled Substance Technicians, Pharmacy Technician Coordinators, and Automation Technicians.

c. Depending on role, technicians may operate the carousels, tabletop packagers, oral liquid packagers, Baxa compounder, repeater pump, or other automated devices after training and demonstration of competence.

15. Competence will be assessed as outlined below:

a. Initial competence will be assessed within the first 6 months of employment or in a new role. Initial competency documentation will be retained electronically, in a centralized readily retrievable location, or in the personnel file for reference at any time.

b. Annual general technician competence will be assessed and documentation retained electronically, in a centralized readily retrievable location, or in the personnel file for reference at any time.

c. Role or task specific competence will be assessed regularly as determined by the department, organization, regulatory or accrediting bodies, or as recommended by professional organizations.

d. Competence assessment formats may include but are not limited to the following:

   i. Written
   ii. Verbal
   iii. Demonstration

16. Technician and intern participation in continuous quality improvement efforts is ongoing. Details can be found in pharmacy policies 15-05, 11-70-04, and 07-82.

APPROVED BY: [Signature on File]
Pharmacy Technicians in a Nursing Home Pharmacy

1. Policy and Procedures must define:
   a. What the technician will do in the Pharmacy.
   b. How they will do the functions identified.
   c. What they may not do in the Pharmacy.

2. Activities allowed
   a. Entry of information into the computer, unit dose, facility re-supply, return of medications

3. Activities not allowed
   a. May not engage in professional communication with licensed practitioners

4. Ratio/supervision - suggest getting 3:1 ratio approved even if you may not need this many techs at the present time

5. Name badges -- worn clearly visible and identified as a technician or nurse consultant
NOTE: rule 64B-16-27.400 governs the practice of pharmacy with regard to the use of pharmacy technicians. This rule lists certain functions to be personally performed by a pharmacist, or a duly registered intern acting under the direct and immediate personal supervision of a licensed pharmacist. This list of pharmacist functions is not meant to be conclusive and all encompassing, but may be used to help define functions that may not be delegated to a pharmacy technician. Noteworthy from the list of functions that may not be delegated by the pharmacist are:

1. Engage in consultation with a practitioner regarding interpretation of the prescription and data in a patient profile;
2. Engage in professional communication with licensed practitioners, nurses or other health professions, and
3. Advise or consult with a patient, both as to the prescription and the patient profile record.

From the above, it is clear that a pharmacy technician should not make the telephone call to a practitioner’s office to request additional refills for a patient. Also if the patient should be consulted concerning his/her prescription it should be a direct pharmacist-patient exchange and not relayed via the pharmacy technician.

Other points from this section include:

- No licensed pharmacist shall supervise more than one pharmacy technician unless otherwise permitted by the Florida Board of Pharmacy;
- All pharmacy technicians shall wear a type of identification badge that is clearly visible which specifically identifies the employee by stating “pharmacy technician”;
- Any pharmacy utilizing pharmacy technicians shall be required to have written policies and procedures regarding the number of positions and their utilization, including the specific scope of responsibilities of technicians, available for inspection.

These are a few of the issues addressed in the rule. It is suggested a pharmacist utilizing pharmacy technicians completely review Rule 64B-16.400; 27.410, 27.420, 27.430 and 27.440 copies of which are at the end of this chapter.