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BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY
DEPARTMENT OF CONSUMER AFFAIRS
GOVERNOR EDMUND G. BROWN JR.

# SENATE BILL 493 IMPLEMENTATION COMMITTEE

For the Meeting of October 30, 2015

Stan Weisser, RPh, Committee Chair
Amy Gutierrez, Pharm D, Board President
Debbie Veale, RPh, Vice President
Victor Law, RPh, Board Treasurer
Allen Schaad, RPh
Ricardo Sanchez, Public Member

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**a. Development of Additional Qualifying Methods for Advanced Practice Pharmacists as Authorized by SB 493**

1. Presentation by the American Pharmacists Association on a Community-Based Care Model for Pharmacists

**Attachment 1**

The American Pharmacists Association will be presenting information on the *ADAPT Patient Care Skills Development Program*. **Attachment 1** contains a copy of the ADAPT program overview which will be presented during this meeting.

2. Ralphs Pharmacy-Training of Pharmacists in the American Pharmacists Association Model

Rebecca Cupp from Ralphs will report to the committee on their experience using the community pharmacist training program offered by the American Pharmacists Association.

**b. Proposal by the California Pharmacists Association and the National Association of Chain Drug Stores on Elements of an Advanced Practice Pharmacist Certification Program for Community Pharmacists**

**Attachment 2**

Representatives from the California Pharmacists Association (CPhA) and the National Association of Chain Drug Stores (NACDS) will present their proposal to establish a program which would allow a pharmacist, upon completion of the proposed program, to qualify as fulfilling Business and Professions Code section 4210(a)(2)(A), as one of the three requirements to achieve APP licensure.

**Attachment 2** contains the proposal from CPhA and NACDS as well as a copy of Business and Professions Code section 4210 and 4052.6.

**c. Discussion on Advanced Practice Pharmacist Qualifications**

**Attachment 3**

Over the past 18 months, the committee has focused on multiple elements to implement provisions in SB 493, including regulations to identify criteria of acceptable certification programs. The board currently has a regulation pending to clarify one pathway for certification programs. The board has planned to look at alternative pathways for qualification under the certification provision.

During the June 2015 Board Meeting, the board heard a presentation from CPhA and NACDS requesting consideration of an alternative pathway for certification programs that more closely aligns with community pharmacy practice.

During this meeting, the committee will hear presentations involving two proposed certification programs. The committee will be able to discuss these proposals and an encompassing proposal developed by staff that would permit creation of alternative programs that perhaps could encompass elements of the two proposals presented earlier at this meeting. **Attachment 3** contains a copy of the draft regulation.

As part of its discussion, staff recommends that the committee review the framework of the proposal as well as provide guidance on several policy areas. The questions posed below will With this additional discussion, board staff can continue its work to refine the proposal.

**<u>Section 1730.2(a)(1)</u>**

1. Does the committee agree with the five education modules detailed in proposed section 1730.2 (a)(1)?
2. Does the committee wish to establish a minimum number of instructional hours for each module? If so, what should the minimum number of hours be for each module?

**<u>Section 1730.2(a)(2)</u>**

1. Does the committee have a preference about the assessment method used, or is the proposal's flexibility in that regard appropriate?
2. Does the committee wish to require additional education in a specific module if the individual does not pass an assessment? If so, is there a preferred number of hours?

**<u>Section 1730.2(a)(3)</u>**

Is the committee comfortable with the criteria for who can perform the instruction and assessments of the modules?

**<u>Section 1730.2(a)(4)</u>**

Does the committee wish to specify a specific form of the final overall assessment (e.g. examination versus OSCE) or does it prefer the proposal's current flexibility?

**Section 1730.2(a)(5)**
Does the committee believe that one year is sufficient time to complete a certification program?
**Section 1730.2(a)(7)**
Does the committee agree that continuing education should be required to maintain certification? If so does the committee agree with the 10 hours as proposed?

**g. Public Comment for Items Not on the Agenda, Matters for Future Meetings***

**(Note: the committee may not discuss or take action on any matter raised during the public comment section that is not included on this agenda, except to decide to place the matter on the agenda of a future meeting. Government Code Sections 11125 and 11125.7(a))*

# Attachment 1

2015

# ADAPT Patient Care Skills Development Program

CANADIAN PHARMACISTS ASSOCIATION
ASSOCIATION DES PHARMACIENS DU CANADA

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# About the Course

## Description and Objectives

Participants will enhance foundational skills and the confidence to use these skills to maximize their effectiveness in providing medication therapy management through collaborative patient-centered care. These skill areas include:

- conducting medication assessments,
- collaborating with health care providers,
- interviewing and assessing patients (incorporating patient interviewing, physical assessment and laboratory data),
- making evidence-based clinical decisions,
- documenting care, and
- developing and implementing care plans

# Module 1

In this module, you will review the overall structure of ADAPT, learn how to navigate through the online learning environment, learn to use the basic features required to complete activities, and communicate with the moderator and members of your cohort.

## Objectives

By the end of this module, participants will be able to:

- Navigate the online learning environment using basic online features to complete the activities and communicate with other students and course moderators.
- Explain the underlying philosophy and the learning approach of ADAPT.
- Review the course structure and identify how each module contributes to the overall course goals.
- Describe the role and expectations of the learner.
- Discuss how patient centered care is acknowledged in daily practice and its influence on medication management.

## Guidelines

These guidelines are intended to help you manage your time effectively. They provide you with an estimated amount of time required to complete the lectures and activities. Activities should ideally be completed in the suggested order.



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## Week 1:

**A: Welcome to ADAPT** (1 Presentation + 1 Optional Presentation) *15 to 45 minutes*

**B: ADAPT for Pharmacists - The Learning Approach** (2 Presentations) 4*0 minutes*

**C: Using the ADAPT On-line System** (Activity 1) *1 to 2 hours*

**D: Discussion Board and Creating Community** (Activity 2) *30 minutes*

## Week 2:

**E: Exploring Patient Centeredness in Pharmacy Practice** (Activity 3) *1 to 2 hours*

**F: ADAPT Action Plan Practice Activity** (Activity 4) *30 minutes*

**G: Time Tracking** (Recording time spent on module completion) *5 minutes*

# Module 2

In this module, you will practice using comprehensive and focused medication assessment approaches and learn how to follow up on a patient with multiple medications and chronic conditions in order to prevent and solve drug therapy problems.

## Objectives

## GOAL:

Participants will be able to practice using a comprehensive medication assessment approach for a patient with multiple medications and conditions in order to prevent/solve medication-related problems.

By the end of this module, participants will be able to:

- List the essential information to elicit for a medication assessment.
- Detect drug therapy problems by applying the appropriate problem-solving framework and tools.
- Identify the components of a care plan.
- Generate the components of a medication assessment: a medication history, a drug-therapy problem list, and a follow-up/monitoring plan.
- Identify steps for further learning to complete medication assessments efficiently and effectively and develop a plan to address those learning needs.



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## Guidelines

## WEEK 3:

**A: Introduction** (Presentation) - *5 minutes*

**B: The Assessment** (Presentations + Activity 1) - *2 hours*

**C: The Systematic Process and Discussion of Exercise** (2 Presentations + Activity 2) - *2 hours*

## WEEK 4:

**D: Developing Care Plans** (Presentation + Activity 3) - *30 minutes*

**E: Follow-up Evaluation** (Presentation) – *10 minutes*

**F: Completion of Betty's Work-Up** (Activity 4) – *3 hours*

**G: Medication Assessment Tips** (Presentation) – *10 minutes*

**H: Module 2 ADAPT Action Plan** (Activity 5) - *30 minutes*

**I: Time Tracking** (Recording time spent on module completion) - *5 minutes*

# Module 3

In this module, you will learn how to work in collaboration with all members of the health care team to improve patient care. You will also develop a plan and take practical steps to move from one stage of a collaborative working relationship to the next with one or more physicians.

## Objectives

## GOAL:

To have participants work collaboratively with all members of the primary health care team to improve patient care, as well as, develop a plan and take practical steps to move from one stage of a collaborative working relationship to the next stage with one or more physicians.

By the end of this module, participants will be able to:

- Develop strategies to enhance collaboration and teamwork and manage interpersonal conflict.
- Apply the elements of successful collaboration when working with other health care providers.
- Identify the roles, responsibilities, scope of practice, and expertise of primary health care providers to integrate collaborative care for patients.



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- Evaluate the use of communication skills to facilitate collaborative care and teamwork.
- Identify prescribers and other health care providers to apply new approaches for collaborative strategies.
- Propose steps to integrate the pharmacist with other primary health care providers on the health care team.

# Guidelines

## WEEK 5:

**A: Introduction** (Presentation + Activity 1 and 2) - 1.5 hours

**B: Elements of Successful Collaboration Part 1** (Presentation + Activity 3 and 4) - 3.5 hours

## WEEK 6:

**C: Elements of Successful Collaboration Part 2** (Activity 5) - 1 hour

**D: Communication and Conflict Management** (Presentation + Activity 6) - 2.5 hours

**E: Collaborative Working Relationships** (Presentation + Activity 7) – 1 hour

**F: Module 3 ADAPT Action Plan** (Activity 8) – 30 minutes

**G: Time Tracking** (Recording time spent on module completion) - 5 minutes (Located in the Resource section)

## Resources for Module 3

**Video 1** - *Understanding and Working with Routines in the Family Practice Environment* (5:51 min)

**Video 2** - *Pharmacist and Nurse Practitioner: Scenario A* (1:17 min)

**Video 3** - *Pharmacist and Nurse Practitioner: Scenario B* (1:41 min)

**Note: Video 3 becomes available after posting to the **Module 3, Activity 6 Discussion Board**. See Activity 6 for details.

**Core Principles & Values of Effective Team-Based Health Care**

(Institute of Medicine of the National Academies, PDF)

# Module 4

In this module, you will grow your comfort and ability in conducting focused, comprehensive interviews and assessments with various patient types.



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# Objectives

# GOAL:

To increase participants' comfort and ability in conducting focused and comprehensive interviews/assessments with patients.

By the end of this module, participants will be able to:

- Explain the goals of diverse patient interview encounters within the health care setting.
- Use required communication skills to conduct focused and comprehensive patient interviews.
- Perform physical assessments and interpret relevant findings.
- Evaluate situations to determine when to use a comprehensive or focused interviews.
- Determine appropriate physical assessments to obtain necessary patient data.
- Integrate laboratory data as part of the assessment.
- Apply communication and interviewing approaches to challenging patient situations.
- Describe novel interviewing approaches to involve the patient in self-management.

# Guidelines

# WEEK 7:

**A: Introduction** (Presentation + Activity 1) - *20 minutes*

**B: Interviewing Approaches and Skills and Introduction to the Global Rating Scales Tool Used to Assess Patient Interviewing Skills** (2 Presentations + Activity 2) - *4 hours*

**C: Patient Examination and Assessment Skills and Physical Examination and Assessment: Using the example of Harriet Munklestein** (2 Presentations) - *40 minutes*

# WEEK 8:

**D: Skills Development** (Activities 3, 4, 5) - *5 hours*

# WEEK 9:

**E: Integrating Laboratory Data into the Assessment** (Activity 6) - *5 hours*

# WEEK 10:

**F: Handling Challenging or Complex Interviewing Scenarios** (2 Presentations + Activity 7) - *2 hours*



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**G: Applying Interviewing and Physical Assessment Skills and Integrating Laboratory Data in Practice** (Activity 8) - *1.5 hours*

**H: Module 4 ADAPT Action Plan** (Activity 9) - *30 minutes*

**I: Time Tracking** (Recording time spent on module completion) - *5 minutes*

**J: Mid-Point Program Survey** (A survey about your experiences in the ADAPT course to date) - *15 minutes*

## Resources for Module 4

**Video 1** - *Mrs. Munklestein: A Comprehensive Interview* (32:21 min)

**Video 2** - *Mrs. Munklestein: Focused Interview (on one medication)* (4:15 min)

**Video 3** - *Patient Feedback about the Comprehensive Interview* (5:11 min)

**Video 4** - *Focused Pain Assessment and Head-to-Toe Approach* (20:48 min)

**Video 5** - *A More Challenging Interview with Mrs. Munklestein and Her Daughter* (21:56 min)

**Video 6** - *Patient Feedback about the Challenging Interview* (5:51 min)

# Module 5

In this module, you will review the overall principles and processes of evidence based practice in order to integrate information from patients and existing literature to make decisions about individual patients. You will be able to make decisions in the face of uncertainty and take responsibility for those decisions through the process of action, follow-up and response.

***Please note**, Module 5 of the ADAPT U.S. Program has been completely revised in order to successfully deliver the concepts of the original ADAPT Canada program, taking into consideration the U.S. practice environment. APhA engaged the following national experts in Evidence-Based Practice in the development of this module:

**Stuart T. Haines, Pharm.D., BCPS, BCACP, BC-ADM**
Professor and Vice Chair for Clinical Services
University of Maryland School of Pharmacy

**Ashley Johnson, Pharm.D., BCPS**
Adjunct Assistant Professor of Pharmacy Practice
Palm Beach Atlantic University - Lloyd L. Gregory School of Pharmacy

## Objectives



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# GOAL:

Participants will be able to understand the overall principles and process of evidence-based practice in order to begin to integrate information from patients and the literature to make decisions about individual patients. In addition, participants will make decisions in the face of uncertainty and take responsibility for those decisions through action, follow-up and response.

By the end of this module, participants will be able to:

- Generate focused clinical questions for therapeutic dilemmas.
- Answer clinical questions using current guidelines and summaries in the evidence-based medical literature.
- Evaluate the methodological quality of a study, describe and interpret study results, and apply results to an individual patient.
- Justify medication-related decisions using medical literature, patient and clinician information regarding values and preferences, and situational context and constraints.

# Guidelines

**Note:** The information used in this module is based on the most current resources available. As the nature of the information referenced within this module changes over time, **it is possible that the web links referenced here may also change**. If you notice any broken links, please contact: education@aphanet.org.

# WEEK 11:

**A: Introduction** (A Note Regarding Module 5 + Presentation + Activity 1) - *30 minutes*

**B: Study Design Overview** (Presentation + Activity 2) - *1.5 hours*

**C: Randomized Controlled Trials** (Presentation + Activity 3) - *3.5 hours*

# WEEK 12:

**D: Meta-Analyses** (Presentation + Activity 4) – *3.5 hours*

# WEEK 13:

**E: Case Control/Case Cohort Study** (Presentation + Activity 5) – *3.5 hours*

# WEEK 14:

**F: Appraising and Utilizing Guidelines** (2 Presentations + Activity 6) - *2 hours*

**G: Pharmacoeconomics** (Presentation + Activity 7) – *1.5 hours*



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**H: Bringing It All Together** (Activity 8) - 4 *hours*

**I: Module 5 ADAPT Action Plan** (Activity 9) – *1 hour*

**J: Time Tracking** (Recording time spent on module completion) *5 minutes*

# Module 6

In this module, you will practice writing a variety medication related communications so that solution focused recommendations are clear, can be easily acted upon, and also ensure that medication histories are accurate and comprehensive enough to facilitate subsequent decision-making.

## Objectives

## GOAL:

Participants will be able to improve the effectiveness of written medication-related communication so that solution-focused recommendations are clear and can be easily acted upon, and to ensure that medication histories are accurate and comprehensive enough to facilitate subsequent decision-making.

By the end of this module, participants will be able to:

- Establish effective documentation practices to support patient care.
- Assess documentation notes for accuracy, completeness and readability.
- Develop and use a standard format and strategy for effective documentation.
- Identify best practices and challenges to documentation and develop a plan to incorporate these best practices or address challenges in practice.

## Guidelines

## WEEK 15:

**A: Introduction** (Welcome + Activity 1) - *15 minutes*

**B: Documentation of Medication-Related Care** (Presentation + Activity 2) - *4 hours*

## WEEK 16:

**C: Practice Documenting Medication Assessments Part 1** (Activity 3) - *4 hours*

## WEEK 17:



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**D: Practice Documenting Medication Assessments Part 2** (Activity 4) - *4 hours*

**E: Documentation Standards and Guidelines** (Activity 5) - *1 hour*

**F: Module 6 ADAPT Action Plan** (Activity 6) - *30 minutes*

**H: Time Tracking** (Recording time spent on module completion) - *5 minutes*

# Module 7

In this module, you will review key skills covered in module 2-6 and create a plan to implement those skills in your practice setting.

## Objectives

## GOAL:

To review key skills covered in Modules 2 – 6 and create a plan to implement those skills in participants' practice settings.

By the end of this module, participants will be able to:

- Produce a comprehensive medication assessment including a medication history, identification of drug therapy problems, and a care plan.
- Practice primary health care skills in patient care.
- Develop a learning portfolio to showcase skills and development.
- Create a comprehensive ADAPT Action Plan for addressing personal learning needs.

## Guidelines

## WEEK 18:

**A: Introduction** (Presentation) - *5 minutes*

**B: Integrating Patient Care Skills** (Activity 1 and 2) - *4.5 hours*

## WEEK 19:

**C: Integrating Patient Care Skills** (Activity 3) - *1.5 hours*

**D: Implementing Care Plans in Practice** (Activity 4 + Presentation) - *1.5 hours*

**E: Preparing the Final ADAPT Action Plan** (Activity 5) - *1.5 hours*



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**F: Time Tracking** (Recording time spent on module completion) - *5 minutes*

**ADAPT End of Program Survey** (We really value your opinions about ADAPT and will be using your input on this survey to improve the program) - *15 minutes*

**Moderator Assessment Survey** (Please submit within 2 weeks of completing the course) - *10 minutes*

## BEYOND MODULE 7:

**G: Practicing Patient Care Skills** (Activity 7) - *ongoing activities to sustain practice change*

## Resources for Module 7

**Video 1 -** *Interview with John Kostopoulos* (15:56 min)

**Video 2** - *Mr. Kostopoulos: Discussion of a Care Plan* (10:34 min)

**Video 3** - *Post-Interview: Diabetes* (1:08 min)

**Video 4** - *Post-Interview: Acid Reflux* (4:34 min)

**Note:** Videos 2, 3 and 4 will become available after certain activities are completed. Please see Module Activities for more details.

# Assessment to earn the Certificate in Patient Care Skills

Students who have completed the program and successfully earned their CEUs are also eligible to challenge a summative Certificate Assessment Process. This involves actual scoring of submitted activity documents relating to a patient case, according to a series of assessment scales. This summative activity is actually a repeat of a summative activity in the final module of the program; only this time students are formally assessed, rather than just provided with feedback.

Students who earn over 80% in this Certificate Assessment Process are provided with the Certificate in Patient Care Skills

No additional CEUs are provided, but the attainment of the Certificate is tangible recognition of the effort put in and the student's mastery of the full learning objectives of the program.

Students who do not achieve the 80% or greater mark on their first attempt are provided with specific feedback on their assessment and the areas in which they should improve, and are allowed to repeat the graded exercise with a new patient case scenario.

No third attempts are provided.



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# Attachment 2

# Proposal for Approval of CPhA/NACDS Advanced Practice Pharmacist Program

With the new classification of Advanced Practice Pharmacist (APP) (Business & Professions Code, Section 4052.6), the practices where pharmacists provide clinical services has expanded from hospital and health-system settings to now include community practices. Working collaboratively with physicians, health facilities, and other systems of care, pharmacists in community settings can now be part of the health care team that expands affordable access to pharmacist-delivered care throughout California.

**The intent of the proposal in front of this Committee today is to receive a recommendation of approval for the full Board of Pharmacy hearing scheduled for November 11, 2015. The recommendation would be to approve the program so that any pharmacist who completes this program be deemed to have met criterion 'A' of B&P Section 4210, as one of the two requirements to achieve APP licensure.**

## Objectives of the CPhA/NACDS Program:

Upon successfully completing this program, candidates will have learned and been assessed on their knowledge and skills to competently perform those duties specified in an Advance Practice Pharmacists' scope of practice (B&P Section 4052.6).

## Program Structure

The CPhA/NACDS APP program will deliver **educational content** and use a variety of **assessment methods** for determining candidate competency in the relevant areas of practice. The program will be delivered both online and in-person. Overall the program is expected to contain up to 38 hours of content and assessment.

### Educational Content

The educational content will include information on the specific skills needed for pharmacists to deliver the standard of care for those duties authorized in the APP scope of practice (B&P Section 4052.6). The content will be organized into five (5) sequential educational modules and will be delivered to the candidate through online and in-person educational delivery systems.

### Assessment Methods

The assessment methods for the program will be conducted in two ways: 1) written assessments embedded within each of the five content modules delivered through the online educational system, and 2) proctored hands-on demonstration assessments within the modules as well as a comprehensive assessment at the completion of the in-person portion of the program.

## CPhA/NACDS Content Modules

The following program elements are consistent with the APP scope of practice and will be delivered both online and in-person using didactic training as well as hands-on skills demonstrations.

***Skill: Patient Assessments (Up to 8 hours online, 2 hours in-person)***

- Demonstrate the ability to assess a patient for common acute and chronic disease states or conditions in the community pharmacy setting.
- Demonstrate ability to assess patients by showing minimal competency in an array of patient assessment skill sets.
- Demonstrate use of top rating scales.

***Skill: Ordering Tests (Up to 4 hours online, 1 hour in-person)***

- Recognize when a treatment-related test should be ordered and communicated to patient's primary care provider. Document appropriate information in patient record system shared with prescriber(s) or transmitting documentation to prescribers via other communication methods.
- Demonstrate the ability to order and interpret the results of certain treatment related-tests used to monitor common acute and chronic-disease states or conditions.
- Assess appropriate medication monitoring for safety and efficacy based on laboratory tests.

***Skill: Patient Referral (Up to 4 hours online)***

- Recognize the appropriate circumstances when a referral to another health care provider is indicated.
- Understand the procedures necessary for referring patient to other health care providers.
- Determine when to initiate a patient referral and how to communicate this referral to patient's primary care provider.
- Understand when and how to coordinate referrals with other health care providers in the evaluation and management of acute and chronic diseases and health conditions for patients.
- Document appropriate referral information in patient record system shared with prescriber(s) or transmitting documentation to prescribers via other communication methods.

***Skill: Medication Therapy Management & Effective Communication (Up to 8 hours online, 3 hours in-person)***

- Demonstrate the ability to appropriately manage drug therapy regimens in order to meet therapeutic and patient-centered goals.
- Demonstrate the ability to effectively document medication therapy management interactions, provide necessary follow-up and education, and communicate with a health care provider on changes to a drug therapy regimen or when ordering a test.

***Skill: Documentation (Up to 6 hours online, 2 hours in-person)***

- Demonstrate the ability to accurately document care provided, including commonly accepted standards for documentation.
- Demonstrate the ability to document details from patient cases using SOAP (Subjective, Objective, Assessment, and Plan) note format.

## Overall Skills Assessment

In addition to the interstitial assessments built within the five online and in-person training modules, an overall assessment will be conducted at the conclusion of the program to assess a candidate's competency. This assessment may include a written exam and/or hands-on skills demonstration. Upon successful completion of the five modules and overall assessment, CPhA/NACDS will attest to the participant's successful completion of the program by providing a certificate of achievement to the candidate.

## Oversight of the Program

1. The CPhA/NACDS program (content & assessments) will be developed and delivered by subject matter experts. These experts will be chosen from academia as well as the practice of pharmacy based on the depth and breadth of their experience and scholarship/research in that applicable domain.

2. The program will be developed and led by an overall advisory committee charged with oversight of the development, deployment, and stewardship of the program. The advisors will be comprised of nationally-recognized experts in educational program design, health systems and community pharmacy practice, advanced pharmacy care, and scholarship/research.

## Required Pre-requisite and Credential Renewal

1. Candidate Pre-requisite (minimal requirements to participate in program): Licensed pharmacists in good standing with the state Board of Pharmacy are eligible to participate in this educational program.

2. Maintaining competency: As required in B&P Section 4233, pharmacists must demonstrate continued competency by updating his/her knowledge through continued commitment to learning by achieving an additional 10 hours of continuing education every two years. The CPhA/NACDS collaboration will provide continuing education opportunities for candidates to meet this requirement.

# Pharmacist Provider Status Legislation
# SB 493 (Hernandez) Summary

Now that the pharmacist provider status bill has been signed by the Governor, many pharmacists are asking: "*what does this bill do for me*?" SB 493 grants all pharmacists certain authorities in all practice settings that had previously been limited to inpatient settings or integrated systems. The bill also establishes a new "Advanced Practice Pharmacist" recognition. This recognition can be granted when specified experience and/or certification requirements are met. The Advanced Practice Pharmacist recognition is not mandatory, but it does allow pharmacists to provide additional services. Below is a summary of SB 493's changes, which take effect January 1, 2014, though some provisions require regulations by the Board of Pharmacy and will not take effect until those regulations are approved.

- Declares pharmacists as healthcare providers who have the authority to provide health care services.
- Authorizes *all licensed pharmacists* to:
  - Administer drugs and biologics when ordered by a prescriber. Previously, this was limited to oral and topical administration. SB 493 allows pharmacists to administer drugs via other methods, including by injection.
  - Provide consultation, training, and education about drug therapy, disease management and disease prevention.
  - Participate in multidisciplinary review of patient progress, including appropriate access to medical records.
  - Furnish self-administered hormonal contraceptives (the pill, the patch, and the ring) pursuant to a statewide protocol. This authority is similar to the existing emergency contraception protocol. Once a statewide protocol is adopted by the Board of Pharmacy, it will automatically apply to all pharmacists.
  - Furnish travel medications recommended by the CDC not requiring a diagnosis.
  - Furnish prescription nicotine replacement products for smoking cessation pursuant to a statewide protocol if certain training, certification, recordkeeping, and notification requirements are met. Once a statewide protocol is adopted by the Board of Pharmacy, it will automatically apply to all pharmacists.
  - Independently initiate and administer immunizations to patients three years of age and older if certain training, certification, recordkeeping, and reporting requirements are met. A physician protocol is still required to administer immunizations on children younger than three years of age.
  - Order and interpret tests for the purpose of monitoring and managing the efficacy and toxicity of drug therapies, in coordination with the patient's primary care provider or diagnosing prescriber.
- Establishes an Advanced Practice Pharmacist (APP) recognition, and authorizes APPs to:
  - Perform patient assessments.
  - Order and interpret drug therapy-related tests in coordination with the patient's primary care provider or diagnosing prescriber.
  - Refer patients to other healthcare providers.
  - Initiate, adjust, and discontinue drug therapy pursuant to an order by a patient's treating prescriber and in accordance with established protocols.
  - Participate in the evaluation and management of diseases and health conditions in collaboration with other healthcare providers.
- Requires pharmacists seeking recognition as APPs to complete any *two* of the following three criteria:
  - Earn certification in a relevant area of practice, such as ambulatory care, critical care, oncology pharmacy or pharmacotherapy.
  - Complete a postgraduate residency program.
  - Have provided clinical services to patients for one year under a collaborative practice agreement or protocol with a physician, APP pharmacist, CDTM pharmacist, or health system.

# Attachment 3

# Business and Professions Code Section 4210

4210. (a) A person who seeks recognition as an advanced practice pharmacist shall meet all of the following requirements:

(1) Hold an active license to practice pharmacy issued pursuant to this chapter that is in good standing.

(2) Satisfy any two of the following criteria:

(A) Earn certification in a relevant area of practice, including, but not limited to, ambulatory care, critical care, geriatric pharmacy, nuclear pharmacy, nutrition support pharmacy, oncology pharmacy, pediatric pharmacy, pharmacotherapy, or psychiatric pharmacy, from an organization recognized by the Accreditation Council for Pharmacy Education or another entity recognized by the board.

(B) Complete a postgraduate residency through an accredited postgraduate institution where at least 50 percent of the experience includes the provision of direct patient care services with interdisciplinary teams.

(C) Have provided clinical services to patients for at least one year under a collaborative practice agreement or protocol with a physician, advanced practice pharmacist, pharmacist practicing collaborative drug therapy management, or health system.

(3) File an application with the board for recognition as an advanced practice pharmacist.

(4) Pay the applicable fee to the board.

(b) An advanced practice pharmacist recognition issued pursuant to this section shall be valid for two years, coterminous with the certificate holder's license to practice pharmacy.

(c) The board shall adopt regulations establishing the means of documenting completion of the requirements in this section.

(d) The board shall, by regulation, set the fee for the issuance and renewal of advanced practice pharmacist recognition at the reasonable cost of regulating advanced practice pharmacists pursuant to this chapter. The fee shall not exceed three hundred dollars ($300).

# Business and Professions Code Section 4052.6

4052.6. (a) A pharmacist recognized by the board as an advanced practice pharmacist may do all of the following:

(1) Perform patient assessments.

(2) Order and interpret drug therapy-related tests.

(3) Refer patients to other health care providers.

(4) Participate in the evaluation and management of diseases and health conditions in collaboration with other health care providers.

(5) Initiate, adjust, or discontinue drug therapy in the manner specified in paragraph (4) of subdivision (a) of Section 4052.2.

(b) A pharmacist who adjusts or discontinues drug therapy shall promptly transmit written notification to the patient's diagnosing prescriber or enter the appropriate information in a patient record system shared with the prescriber, as permitted by that prescriber. A pharmacist who initiates drug therapy shall promptly transmit written notification to, or enter the appropriate information into, a patient record system shared with the patient's primary care provider or diagnosing provider, as permitted by that provider.

(c) This section shall not interfere with a physician's order to dispense a prescription drug as written, or other order of similar meaning.

(d) Prior to initiating or adjusting a controlled substance therapy pursuant to this section, a pharmacist shall personally register with the federal Drug Enforcement Administration.

(e) A pharmacist who orders and interprets tests pursuant to paragraph (2) of subdivision (a) shall ensure that the ordering of those tests is done in coordination with the patient's primary care provider or diagnosing prescriber, as appropriate, including promptly transmitting written notification to the patient's diagnosing prescriber or entering the appropriate information in a patient record system shared with the prescriber, when available and as permitted by that prescriber.

Proposal to add Section 1730.2 of Article 3.5 of Division 17 of Title 16 of the California Code of Regulations as follows:

1730.2 (a) In addition to the relevant areas of practice certification programs specified in Business and Professions Code Section 4210 (a)(2)(A), for purposes of a community pharmacist seeking to demonstrate certification as one of the criterion for advanced practice pharmacist recognition by the board, the board recognizes pharmacy patient care certification programs in relevant areas of practice that are provider by an organization recognized as a continuing education provided by the Accreditation Council for Pharmacy Education or accredited by the National Commission for Certifying Agencies as a certification provider, so long as the certification program meets the following minimum requirements:

(1) The certification program includes specified learning objectives in at least five sequentially-arranged education modules, covering the following topics: Performing patient assessments; ordering and interpreting drug therapy-related tests; referring patients to other health care providers; participating in the evaluation and management of diseases and health conditions in collaboration with other health care providers; and Initiating, adjusting and discontinuing drug therapy;

(2) The certification program includes assessment after completion of each of the education modules in an examination format or by other assessment methodology that confirms the participant's understanding, knowledge, and application of the specific learn objectives for the module, where any failure to successfully complete the assessment in any module prevents advancement to the next module;

(3) The instruction and assessments in each of the modules are performed by an advance practice pharmacist recognized by the board or by an expert with demonstrated expertise in the respective area of focus;

(4) Upon successful completion of all modules and their respective assessments, each participant must successfully complete a final overall assessment with a passing score before being awarded certification, using either a final written examination or an objective structured clinical examination developed and administered in collaboration with an accredited school of pharmacy recognized by the board;

(5) The certification program must be completed within one year of entrance in order to receive certification; and

(6) Upon successful completion within one year, the certification program provides participants with written documentation of certification that includes the name of the individual and the date of completion.

(7) The certification program must require a minimum of 10 hours of continuing education in the authorities established in B&PC 4052.6 (a)(1)- (a)(5) every two years as a condition to maintain certification.

(b) To satisfy the certification requirement as one criterion for recognition as an advanced practice pharmacist, an applicant must have completed the certification program within one year of the entry date.

Note: Authority cited: Section 4005, 4210 and 4400, Business and Professions Code. Reference: Sections 4052.6, 4210 and 4400, Business and Professions Code.