

LOS ANGELES GENERAL MEDICAL CENTER POLICY

Subject: PHARMACY STAFF COMPETENCY	Original Issue Date: 12/1/17	Policy # 942
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Policy Owner(s): Director of Pharmacy Services Executive Sponsor(s): Chief Medical Officer		
Departments Consulted: P&T Committee	Reviewed & approved by: Attending Staff Association Executive Committee Senior Executive Officer	Approved by: (Signature on File) Chief Medical Officer
		(Signature on File) Chief Executive Officer

PURPOSE

To assure that pharmacy staff members maintain appropriate knowledge and competency related to its scope of services and responsibilities.

POLICY

The department assesses competency to perform select job responsibilities.

DEFINITIONS

- **Competency:** Documented demonstration of knowledge, interpersonal relationship, technical and critical thinking skills in the delivery of patient care services
- **Core Competencies:** Competencies that apply to basic pharmacy practice, including age-related competencies
- **Advanced Practice:** Skillset evaluation of ability to perform patient assessment, initiate, adjust or discontinue drug therapy; order and interpret therapy-related tests as part of a medical staff approved collaborative practice protocol or guideline.
- **Qualified Observer:** Individual(s) having demonstrated mastery of skill in performing the task(s) in question; previous certification, licensure or experience maybe designated as a *qualified observer* by the Director of the Pharmacy

PROCEDURE

- A. All pharmacy staff, practicing at Los Angeles General Medical Center, will participate in a continuous skill set, or competency, assessment program. The program includes the following components:
1. Licensure, professional certification

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- a. Pharmacy Policy # 104 Licensure and Professional Standards
- b. Pharmacy Policy # 506 License – Registration Verification
2. Competency assessment and performance evaluation:
 - a. Inpatient setting
 - 1) Written examination(s)
 - 2) Direct observation with a demonstration of competency
 - 3) Proctored case review
 - 4) Annual performance review
 - b. Outpatient setting
 - 1) Annual performance review
 - 2) Direct observation with a demonstration of competency
 - 3) Proctored case review
 - c. Ambulatory Care Clinic setting
 - 1) Initial competency assessment
 - a. Certified Advanced Practice pharmacists approved as members of the Medical Staff are automatically granted privilege
 - b. Clinical practitioners may work under medical staff collaborative practice protocols will complete the following:
 - i. Proctored new case review by the Department Director or Clinical Coordinator
 - ii. Annual case review (10 cases) by the Department Director or Clinical Coordinator
 - iii. Ongoing competency assessment
3. Records for documentation of completion of the competency review process are kept on file in the Pharmacy Department.

B. Competency Assessment:

1. Medication use related patient care functions are performed by all department staff pharmacists working under medical staff-approved collaborative practice agreements. These are designated as “core skill sets”. (See below)
2. Competency assessment is based on the following:
 - a. Population served (age-related, gender-related, etc.)
 - b. Defined competencies that need to be assessed and reassessed on an ongoing basis, based on techniques, procedures, technology, equipment, or skills needed to provide care, treatment and services.
3. Pharmacist “CORE” Competencies (in addition to DHS annual pharmacist competency)
 - a. Renal Dose Adjustment
 - b. IV-to-PO Protocol Management
 - c. Sepsis Guidelines
 - d. Antimicrobial Use Guidelines
 - e. Medication Safety
 - f. Basic Clinical Therapeutic Skills Assessment
 - g. Clinical Pharmacokinetics and PK-PD
 - h. Anticoagulation
 - i. Pain management
 - j. Anemia?
 - k. Age related: adult
4. Pharmacist “Position Specific” Competencies
 - a. Pediatric Pharmacotherapy
 - b. Neonatal Pharmacotherapy
 - c. Emergency Medicine

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- d. Intensive Care Pharmacotherapy
- e. Oncology Practice
- f. Sterile Preparation of Antineoplastic Therapies
- g. Gero/Psych
5. Pharmacy Technician "CORE" competency (in addition to DHS annual pharmacy technician competency)
 - a. IV Competency Assessment (Aseptic Techniques)
 - b. Basic Technician Competency Test (including pharmaceutical calculations)
 - c. Pyxis Automated Dispensing Device tutorial
6. Pharmacy Technician "Position Specific" Competency
 - a. Sterile Preparation of Antineoplastic Therapies
7. Core competencies should be completed within 3 months from the first day of employment
8. The department assesses each person's ability to carry out assigned responsibilities safely, competently, and in a timely manner according to the competence assessment process.
9. Components of the competency assessment program will be reviewed periodically.

C. Medication Management Performance Expectations:

1. Able to effectively and in a timely manner identify and resolve prescribing, formulary and therapeutic issues through integration of patient variables, drug knowledge and professional judgment. Identify and suggest appropriate therapeutic alternatives, as appropriate.
2. Able to effectively and in a timely manner provide drug information to health care practitioners using standard texts and references. Peers express general approval of these decisions and recommendations.
3. *Medication therapy monitoring and clinical care plan development:* Able to conduct medication therapy monitoring for appropriate patients and medication use. This includes assessment of:
 - a. Therapeutic appropriateness of the patient's medication regimen
 - b. Therapeutic duplication in the patient's medication regimen
 - c. Appropriateness of the route and method of administration of the medication
 - d. Clinical and laboratory data evaluation
4. Able to effectively complete all required elements in the execution of pharmacist-managed therapies and automatic therapeutic substitution protocols at LAC USC Medical Center in a safe and appropriate manner.
5. The list of "Medication Management" competencies is reviewed by the Director annually. Focus of review will emphasize "problem-prone" and "high-risk" areas of performance.
6. Medication Management Skill Set Competencies
7. Clinical Pharmacokinetics and Pharmacokinetics - Pharmacodynamics (PK-PD)
8. Critical Care (Hemodynamics, acid-base balance, pain control)
9. Parenteral Nutrition Therapy Management
10. Antimicrobial Therapy
11. Anticoagulation Therapy Management
12. Diabetes Therapy Management
13. Oncology Practice and Sterile Preparation of Antineoplastic Therapies
14. A qualified observer will determine satisfactory performance based on document review, patient outcome, and clinical intervention documentation data. If performance is unsatisfactory, the observer will notify the Director of the Pharmacy and to determine the course of corrective action. The qualified observer may be the Director, Supervisor, Clinical Coordinator, or other as designated by the Director.

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D. Skills and Proficiencies Specific to the Position:

1. Possesses the skills and knowledge to provide all aspects of pharmaceutical care for all PEDIATRIC patients, including calculating medication dosages, monitoring the effects of medication and outcomes of therapy. Clinical staff assigned to work as the “Pediatric” pharmacist will have demonstrated experience in the management of pediatric in-patients. Core pharmacist staff in the pediatric service areas will complete continuing education activities related to pediatrics. Of the required 30 hours of bi-annual CE, six contact hours shall be related to skills essential to providing medication management activities to the pediatric patient.
2. Possesses the skills and knowledge to provide all aspects of pharmaceutical care for all ADOLESCENT patients, including calculating medication dosages, monitoring the effects of medication and outcomes of therapy.
3. Possesses the skills and knowledge to provide all aspects of pharmaceutical care for all GERIATRIC patients, including calculating medication dosages, monitoring the effects of medication and outcomes of therapy.
4. Possesses the skills and knowledge to provide all aspects of pharmaceutical care for all ADULT male and female patients, including calculating medication dosages, monitoring the effects of medication and outcomes of therapy.

E. Continuing Education:

1. The Los Angeles General Medical Center Pharmacy Department require that each pharmacist and pharmacy technician maintain the same standards as the California State Board of Pharmacy requirements for Continuing Education.
2. Pharmacy Policy # 505 Continuing Education Standards
3. Medical Center Policy # 512 Continuing Education
4. Pharmacy Law with Rules and Regulations, California Edition

RESPONSIBILITY

Pharmacy Staff

REVISION DATES

November 16, 2020