Report of the Task Force on Pharmacy Practice Technology Systems

Members Present:
Patricia D’Antonio (DC), chair; Lee Ann Bundrick (SC); Danna Droz (OH); Amy Mattila (WI); Dennis McAllister (AZ); Michael Podgurski (PA); Kenneth Saunders (NE).

Others Present:
James T. DeVita, Executive Committee liaison; Carmen Catizone, Melissa Madigan, Eileen Lewalski, Deborah Zak, NABP staff.

Introduction:
The Task Force on Pharmacy Practice Technology Systems met November 1-2, 2011, at NABP Headquarters. This task force was established in response to Resolution 107-1-11, Task Force on Pharmacy Practice Technology Systems, which was approved by the NABP membership at the Association’s 107th Annual Meeting in May 2011.

Review of the Task Force Charge:
Task force members reviewed their charge and accepted it as follows:

1. Review existing current state laws and regulations addressing the use of technology systems and relevant Model State Pharmacy Act and Model Rules of the National Association of Boards of Pharmacy (Model Act) language.
2. Recommend revisions, if necessary, to the Model Act addressing this issue.
3. Propose a mechanism for researching, advising state boards of pharmacy, and updating the Model Act on future innovations and changes in technology.

Recommendation 1: NABP Should Work with Boards of Pharmacy to Recognize that Technology Can Be Utilized to Improve Patient Outcomes without the Implementation of Specific Proscriptive Laws or Rules but Utilizing Laws and Rules that are Broadly Written and Place Responsibility on the Pharmacist on Duty and Pharmacy Permit Holder

The task force recommends that NABP work with boards of pharmacy to recognize that technology can be utilized to effectively allow the pharmacist to provide pharmacist care that improves patient outcomes without necessarily implementing specific proscriptive laws or rules. Such laws or rules can be effective if they are broadly written and should place responsibility on the pharmacist on duty and pharmacy permit holder for resulting outcomes.

Background:
The task force discussed at length how to approach the issue of regulating technology and the fact that rapidly evolving technology, in many instances, outpaces regulations, particularly those that are more specific, by the time they are enacted. Members agreed that a good approach would be to focus on broadly written regulations that can encompass future technologies, as they may be difficult to envision, without the necessity of having to approve every single technology
system. Another task force concern was accountability and public safety in the event of system failures. The consensus of the task force was to allow for a multitude of technology systems providing that they are safe and placing responsibility on the pharmacist on duty and permit holder for the consequences of faulty technology that results in product loss, errors, or patient harm. Members agreed that the utilization of technology should be encouraged to increase the amount of time pharmacists are able to spend with patients, thereby increasing positive patient outcomes. Overall, members decided that boards of pharmacy would benefit from a pre-determined rubric consisting of common themes that could guide them in the development and implementation of enabling and nonspecific regulations pertaining to any type of technology while providing for accountability and quality assurance.

**Recommendation 2: NABP Should Encourage Boards of Pharmacy to Adopt Specific Requirements to Assist in Technology Systems Assessment**

The task force recommends that NABP encourage boards of pharmacy to adopt the following requirements to assist in the assessment of a technology system when requested or in order to protect the public health:

- The pharmacy shall maintain policies and procedures for implementing and maintaining a pharmacy technology system that addresses the following:
  - training;
  - security and confidentiality;
  - record keeping and accountability;
  - quality assurance;
  - quality improvement;
  - workflow processes; and
  - emergency procedures.

**Background:**

The task force determined, in accordance with recommendation 1, that the best approach for regulating and approving technology systems should be general and pragmatic. Members discussed at length which components are vital to ensuring public safety and agreed that the above-mentioned rubric should be utilized as a guide by boards of pharmacy to assess and approve technology systems that provide for increased pharmacy care, improved patient outcomes, and protection of the public. Members concurred that abiding by a rubric of standards would allow boards of pharmacy to approve various technology systems without having to enact specific laws and regulations on a continuing basis. The task force decided that a standard rubric was the best solution as it allows for flexibility and innovation while providing for public protection.

**Recommendation 3: NABP Staff Should Review the Model Act and Amend if Necessary**

The task force recommends that NABP staff review the *Model Act* and amend if necessary utilizing existing “shared services” concept language to replace technology-specific provisions such as “central fill” and “remote dispensing” and to ensure that responsibility is placed on the pharmacist and pharmacy permit holder for resulting outcomes from the use of any technology systems.
Background:
The task force reviewed existing Model Act language and various state laws and regulations focusing on the diversity in the terminology and determined that it may be beneficial to incorporate less technology-specific definitions and provisions and remove those that have become antiquated. Members agreed that technology-supported operational functions such as counting, packaging, and labeling versus technology-supported cognitive functions such as order entry verification, drug utilization review, and counseling should be recognized. Members also agreed that due to the technological advances in pharmacy practice and the trend for involvement of more than one pharmacist in the dispensing process that the “shared services” concept language currently utilized by several states should replace all technology-specific automation language such as “central fill” and “remote dispensing.” The concept of shared services is more general and allows for broad categories of systems, is overarching, and can account for both operational and cognitive technology-supported functions.

**Recommendation 4: NABP Should Remain Engaged in Assisting the Boards of Pharmacy to Assess Emerging Technologies and Determine whether they Improve the Provision of Pharmacist Care While Ensuring Public Safety.**
The task force recommends that NABP remain engaged in assisting the boards of pharmacy to assess emerging technologies and determine whether they can be utilized in ways that improve the provision of pharmacist care and patient outcomes while ensuring public safety.

Background:
The task force quickly realized the enormity of their charge in that the evolution of technology systems has far surpassed the ability of many boards of pharmacy to keep up by enacting new or revising existing laws and regulations. Members discussed how the standards rubric in Recommendation 2 can be quickly implemented to assist boards now to assess emerging technologies, but determined that NABP should continue to play a crucial role in this complex endeavor and agreed that NABP should remain active in this capacity.

**Recommendation 5: NABP Should Consider Establishing an Ongoing Task Force that Meets Regularly on this Issue to Determine if Further Action is Necessary to Assist the Boards of Pharmacy**
The task force recommends that NABP consider establishing an ongoing task force that would meet regularly on this issue and determine if further action is necessary to assist the boards of pharmacy regarding the assessment and approval of technology systems.

Background:
The task force strongly believed that the rate of pharmacy practice technology systems’ evolution is an issue of great concern for the boards of pharmacy and should be addressed on a continual basis so as to assist the boards in meeting the challenges of remaining current and to effectively regulate the practice by increasing the delivery of pharmacist care, improving patient outcomes, and protecting the public.