



**California State Board of Pharmacy**

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STATE AND CONSUMERS AFFAIRS AGENCY  
DEPARTMENT OF CONSUMER AFFAIRS  
ARNOLD SCHWARZENEGGER, GOVERNOR

**Licensing Committee  
Summary of the Meeting of March 7, 2007**

Department of Consumer Affairs  
First Floor Hearing Room  
1625 N. Market Boulevard  
Sacramento, CA 95834

Present: Ruth Conroy, PharmD, Chair and Board Member  
Clarence Hiura, PharmD, Board Member  
Susan Ravnan, PharmD, Board Member  
Robert Graul, RPh, Board Member

Virginia Herold, Executive Officer  
Anne Sodergren, Legislation Coordinator  
Judi Nurse, PharmD, Supervising Inspector

Chairperson Conroy called the meeting to order at 10 a.m.

**Proposed Regulation Requirements for Compounding by Pharmacies**

At the January 2007 Board Meeting, the board moved to regulation hearing proposed regulations for pharmacies that compound medication, providing patient protections when they receive medication compounded by a pharmacy. The draft regulations were developed during 2004 while the board was convening its Work Group on Compounding with stakeholders and other regulatory agencies.

At the January Board Meeting, noting that some individuals may wish to comment on the regulations before they are noticed, the board asked that those individuals with comments to provide these comments to the Licensing Committee by the end of February.

Comments were provided to Licensing Committee by CPhA, NACDS and Dan Wills. The comments of CPhA and Dan Wills were blended into a draft manuscript for committee review during the meeting. The comments of NACDs were received too late to incorporate into this manuscript.

Discussion during the meeting resulted in the staff being asked to work on the comments submitted and to return a draft to the committee for additional review.

The committee also discussed new legislation introduced at the federal level by Senator Kennedy to prohibit pharmacies from performing compounding.

### **Request to Add the ExCPT Exam as an Additional Qualifying Method to Become a Pharmacy Technician**

Ms. Herold updated the committee on the status of the review of the ExCPT exam, which has been developed by the Institute for the Advancement of Community Pharmacy Technicians (ICPT) as a means to assess the knowledge of applicants for a pharmacy technician registration

At the September committee meeting, staff was directed to develop a plan to review the ExCPT exam to determine if it meets the requirements of the California Business and Professions Code section 139 regarding a valid examination. Ms. Herold explained that she had hoped to use psychometric staff of the Office of Examination Resources in the Department of Consumer Affairs to perform this review. This office provides examination and psychometric services to professional and vocational licensing boards within the department. However, the office is without a PhD psychometric expert who could assist the board in performing this review. This position has been vacant since September and the department is having a difficult time with recruitment.

Discussions are currently underway between the board and departmental staff on establishing an alternative method to initiate a review of the ExCPT exam, as well as the PTCB.

The committee and audience discussed the need for evaluation of the training of technicians. Dr. Ravnan stated that she believes that there needs to be more than just an examination component for pharmacy technicians – practical training is also important. She stated that the forthcoming SCR 49 Medication Errors Report will include a need for well-trained technicians.

A comment was made that both CPhA and CSHP are taking a look at the performance required of technicians, and whether additional qualifications are needed. Other individuals suggested that two types of registration for technicians may be needed: one standard for community pharmacy technicians and another for hospital pharmacy technicians.

There was no action on this agenda item.

### **Proposal from the California Schools of Pharmacy to Identify Professional Competencies that Should be Obtained by the End of the Basic Internship Experience**

The Board of Pharmacy voted to join in a project initiated by California's schools of pharmacy, who are working together with other stakeholders to evaluate the components of ACPE approved intern experience at both the basic (IPPE) and advanced (APPE) levels. The project is called the California Pharmacy IPPE/OSCE Initiative. The goal is to develop an alternative component to assessing intern experience.

The California pharmacy schools are collaborating on this new initiative to determine and assess the competencies that students should achieve by the end of their introductory pharmacy practice experiences (IPPEs) prior to starting their advanced pharmacy practice experiences (APPEs). This initiative is in response to new ACPE accreditation standards that spell out how much time students must spend in IPPEs and APPEs rather than what they should learn (outcomes). The ACPE believes that there should be 300 hours of this basic experience.

Two day-long meetings have taken place so far – January 26 and February 28.

Dr. Ravnan, who is the board's appointee to the committee stated that work groups have been formed to develop skills that interns should learn as part of the basic internship training.

Following identification of these skills, the schools will attempt to develop a performance-based exam (i.e., objective structured clinical exam, OSCE) to assess student achievement of these competencies.

The timeline of the schools is to aim for incorporation of the standards during academic year:2007-08.

### **Request by Pacific University of Oregon to Receive Board Recognition for Purposes of Issuing California Pharmacist Intern Licenses**

Dr. Conroy stated that Pacific University School of Pharmacy has requested that the Board of Pharmacy recognize its school of pharmacy for purposes of approving intern applications.

Current regulation, 16 CCR section 1719, states that a "recognized school of pharmacy" means a school accredited, or granted candidate status, by the Accreditation Council for Pharmacy Education (ACPE).

Pacific University School of Pharmacy is in precandidate status, but is proceeding toward eligibility to candidate accreditation status.

According to the ACPE, its Board of Directors will make a decision on the status of Pacific University School of Pharmacy in June 2007 with information available to the general public in mid-July. A program that achieves candidate accreditation status can remain in this status from 2-4 years before advancing to full accreditation status. Historically, pharmacy programs that advance to candidate status do achieve full accreditation status, but ACPE cannot guarantee that any particular school will do so in the future.

After discussion, the committee agreed to recommend approval of this request.

Motion: Ravan/Hiura: Recommend approval of Pacific University School of Pharmacy for purposes of issuing intern pharmacist licenses to its students.

3-0

**Update: Disaster Response for California Pharmacy/Health Care Surge Project**

At the October Board Meeting, the board amended and approved a general policy statement that outlines its expectations for how disaster response in California may proceed. This policy statement is on the board's Web site and was published in the January 2007 *The Script*.

Ms. Herold noted that at the end of February and the first week in March, the state is hosting a conference for state agencies on disaster preparedness. Several inspectors from the board are attending the conference. The schedule for these seven days of training is:

- February 27-March 1: Surge Response
- March 5-6: Standards and Liability
- March 8-9: Reimbursement

Chairperson Conroy directed the committee to background materials on this training in the committee's packet. Inspector Ralph Orlandella attended the three-day "Surge Response" session, and Chairperson Conroy stated she was able to attend the March 1 session.

Inspector Orlandella provided information about the training which is being coordinated under contract by Price Waterhouse. He indicated that the general feeling of some of those coordinating the training that since there is a pharmacist shortage, there may not be sufficient pharmacists available to respond to emergencies, which was very frustrating to Dr. Orlandella.

The information collected during these sessions will be used by the Department of Health Services to develop emergency response plan for immediate response to disasters. Once developed, this information will be shared with the committee and board.

**Proposals for Legislative Amendments**

Chairperson Conroy noted that staff has submitted two proposals for legislative changes to existing California requirements.

**1. Amend Sections 4200-4200.3**

Staff suggests that the statutory reference for what the board calls the California Pharmacist Jurisprudence Examination (CPJE) be changed to more accurately reflect the statutorily established breath of the exam to The California Pharmacist-Patient Communication and Jurisprudence Examination.

The committee supported this recommendation, but thought that perhaps a better name could be established.

Motion: Hiura/Graul: Move proposal to board recommending adoption  
3-0

**2. Amend section 4052.(a)(9) to allow pharmacists to administer immunizations pursuant to the National Protocol for Vaccinations**

Jeff Goad, PharmD, a professor at USC, provided information to the committee about a proposal to establish a statewide protocol under which pharmacists could administer immunizations if using the CDC's National Protocol for Vaccinations. If such a statutory modification is made, the board would need to develop regulations with specific protocols in them.

Dr. Goad stated that in 44 states, pharmacists can administer immunizations. He distributed information about pharmacy immunization protocols for a number of vaccines.

Discussion was very supportive.

Motion: Graul:Hiura: Recommend that the board approve the establishment of a state protocol under which pharmacists can administer vaccines.

**Request to Accept the Certification Examination of the Commission for Certification in Geriatric Pharmacy for Continuing Education Credit for Pharmacists**

The committee was advised that the Commission for Certification in Geriatric Pharmacy will attend the April Board Meeting to request that the board award continuing education credits to those pharmacists who past the commission's certification examination to become a Certified Geriatric Pharmacist. According to this association, there are 1,300 certified geriatric pharmacists in the US, Canada, Australia and other counties. To become certified, the individual must pass a 3-hour, 150-question examination covering three areas: patient specific, disease specific, and population specific activities. Two states, Ohio and Washington, do award CE units for passing this examination.

The committee asked for the commission to appear so the board could learn more about the examination and qualifying process.

### **Strategic Plan Update for 2007/08**

Chairperson Conroy asked the committee if they had modifications to suggest to the committee's strategic plan for 2007-08. She noted that a major revision was made in the plan last year, but each year in the spring, the board revises its plan to keep it current.

No changes were suggested to the committee's strategic objectives.

### **NABP Accredits Suppliers of Durable Medical Equipment**

Chairperson Conroy noted that for informational purposes only: that the National Association of Boards of Pharmacy has been approved by the Centers for Medicare and Medicaid Services to become an accrediting organization for suppliers of durable medical equipment, prosthetics, orthotics and supplies.

According to the NABP, the goal of the program is to ensure that Medicare beneficiaries receive the appropriate products, services, a patient care associated with these items.

### **Competency Committee Report**

The Department of Consumer Affairs awarded the test administration contract for departmental professional and vocational licensing exams (which is what the board uses to administer the CPJE) to Psychological Services LLC (PSI) on February 28, 2007. This is a new company.

While there was a protest filed with the DCA's Office of Examination Resources, the contract was nevertheless awarded since the new agreement contained language to move forward with a winning vendor even if there should be a protest.

Ms. Herold stated that board staff attended an information-sharing meeting on contract implementation on March 1, 2007. Board staff will be working the DCA on the transition from using the current vendor (Thompson Prometric) to the new vendor, PSI.

Given that there will be a new vendor on June 1, there will be transition issues, and the timing is bad for June pharmacy school graduates. The board is now developing materials to educate applicants about the new testing company. However, the board does not have any information about how to apply to take the exam from the new vendor, how much it will cost and what testing locations exist.

Ms. Herold also stated that staff is working with California pharmacy schools to advise them of the new vendor and aid them in getting their graduates into the examination at Thompson Prometric sites if the students graduate prior to mid-May.

An informational fact sheet is being prepared, and all CPJE-eligible candidates are being notified they need to schedule and take the examination with Thompson Prometric before June 1.

### **Adjournment**

There being no additional business, Chairperson Conroy adjourned the meeting at 1 p.m.