

EXEMPLAR

Assessment of EPA 2 - Compounding

Intern name	Intern EPA-2	Ahpra registration	PHA000XYZ123
Intern training program	ABC ITP	Stage of internship	<input type="checkbox"/> 0-3 months <input type="checkbox"/> 3-6 months <input checked="" type="checkbox"/> 6-9 months <input type="checkbox"/> 9-12 months
Practice setting	<input type="checkbox"/> Hospital <input checked="" type="checkbox"/> Community <input type="checkbox"/> Other (describe):		

About this form

This form is to be used for assessment of EPA 2 - Compounding pharmaceutical products.

Instructions for interns

Ask your supervisor to observe you compounding a pharmaceutical product. Take part in an entrustment discussion with your supervisor.

Instructions for supervisors

Observe the intern compounding a pharmaceutical product. Review the intern's documentation and final product, and hold an entrustment discussion with your intern. Use this template to record your feedback.

Performance outcomes to be assessed

3.15: preparing and supplying extemporaneously compounded medications safely and accurately in accordance with current legislation, scope of practice, PharmBA Guidelines and other relevant jurisdictional requirements.

4.2: identifying and acknowledging professional limitations and seeking appropriate support where necessary, including additional professional education and/or referral of patients to other health care professionals.

5.3: recognising and responding to the inherent complexity, ambiguity and uncertainty of contemporary and future professional practice.

Entrustment discussion components – supervisor comments

<p>Reflection on performance – areas of strength and areas for improvement</p> <p>Areas of strength</p> <ul style="list-style-type: none"> Confident and competent in all the major aspects of compounding a simple cream, including dispensing the prescription, deciding the formula and calculations including documentation on compounding worksheet, compounding the cream itself, cleaning the area and interacting with the patient. <p>Areas for improvement</p> <ul style="list-style-type: none"> Ensure the time taken for compounding is well considered, including managing priorities and making sure the patient has a realistic expectation of waiting times, so not compromising workflow or dispensing for other patients. Ensuring clean transfer of product to final container
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<p>Ability to access information when needed</p> <ul style="list-style-type: none"> Generally good! Can use APF, PBS website, MIMS and the dispensing software effectively. Also consulting with other pharmacists as a "resource" and collecting relevant information from the patients. Make sure you're also familiar with Martindale for some more complicated questions about these ingredients.
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<p>Reasoning in relation to appropriateness and safety</p> <ul style="list-style-type: none"> Able to work out the indication from the information available from the patient, prescription and APF/AMH. Safety not a problem for the APF-formula creams you've been making, but we discussed where and how you could find information about maximum strengths (eg. Martindale) and how it depends on the indication, prior use, etc. Discussed the importance of counselling to make sure the patient will use safely and appropriately.

Risk awareness

- Discussed the use of PPE, and the dangers about inhalation, skin contact, etc. of the ingredients we commonly use. Also discussed environmental risks (eg. residue in the sink if not cleaning up properly, etc.). Discussed how most Safety Data Sheets are available through a Google search.

What-if questions (see below)

Questions that were posed:

- What if this were a new prescriber, how would you determine whether the doctor intended for both ingredients to be prescribed at 2% strength?
- In what circumstances would wearing gloves be appropriate for extemporaneous compounding?
- What potential risks do these ingredients pose to other team members in the pharmacy, e.g. if there is residue in the sink? Where can you find this information?
- What if the doctor asked about the maximum strength of salicylic acid and/or sulfur that the intern would be comfortable compounding for this condition? What resource(s) would you use to support your recommendations?

We discussed "pressure from patient", especially how compounding takes considerable time and we usually can't stop everything we're doing to make it immediately.

Also discussed how to handle a situation where the doctor wanted to know the maximum strength you thought was safe to use, and where you could find information about this (you'll look through Martindale and get familiar with what it contains)

Other comments (including any actions necessary to improve performance)

We noted the importance of re-ordering ingredients used in compounding (and where to get it from, who is responsible in the pharmacy for doing that, why it won't automatically reorder).

FROM NOW: any future simple creams or ointments for compounding will now be your responsibility at Entrustment Level 3, and that as a minimum, a pharmacist should be shown the script, label and formula sheet BEFORE any ingredients are measured out, and again AFTER the product has been made. You must consult a supervisor if there is ANYTHING you're unsure or unclear about.

Entrustment decision (completed by supervisor)¹:
 1

 2

 3

 4

Supervisor	Name:	Preceptor Pharmacist	Intern	Name:	Intern Pharmacist
	Date:	TBC		Date:	TBC
	Signature:	TBC		Signature:	TBC

Levels of supervision related to entrustment decision

Level 1	Observe only, even with direct supervision
Level 2	Perform with direct, proactive supervision and intervention
Level 3	Perform with indirect proximal (nearby) supervision, on request and quickly available
Level 4	Perform with minimal supervision, available if needed, essentially independent performance. <i>It is critical to note, however, that even when an intern has been deemed entrustable at level 4, the Pharmacy Board requirements for supervision while the intern is provisionally registered still apply. In addition, at least one pharmacist with general registration must be physically present on the premises in accordance with legal requirements under the Health Practitioner Regulation National Law.</i>

What-if questions

These are designed to evaluate the intern's adaptive expertise. What would you do if:

- unable to read prescription
- unable to contact prescriber for clarification
- pressure from patient
- invalid prescription presented
- possible forgery presented
- not therapeutically safe or appropriate

¹ Entrustment level 1 is "Observe only" and its use during the intern period is expected to be rare.