

# A LEAP Forward using Online Modular Education Programs

(Leveraging E-learning Applications for Pharmacy technicians)



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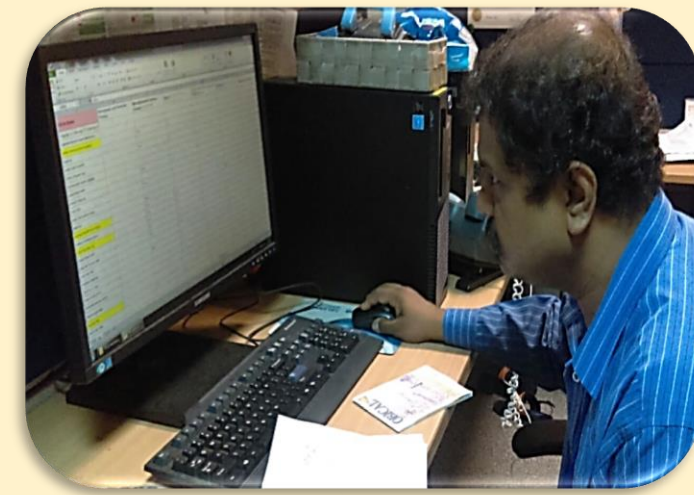


## BACKGROUND

KKH Pharmacy's in-house Pharmacy Technician Dispensing Course (PTDC) is a pre-requisite to dispensing and runs annually since 2007.

Each run was held over 7 months comprising:

- ✓ Pharmacists' didactic teaching covering Women's & Children's topics
- ✓ Group role play in class
- ✓ Annual competency assessment at the end of the course



PTDC Topics Comprises:

Basic Dispensing Module

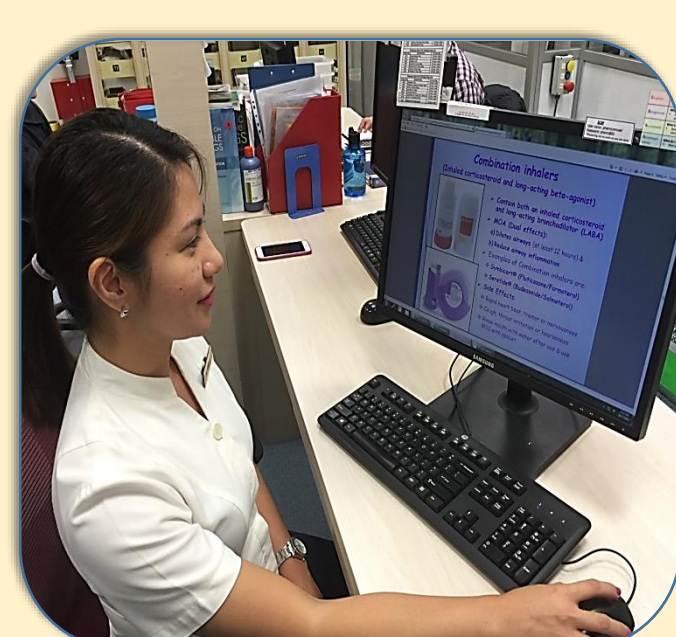
Children's Health I

Children's Health II

Women's Health I

Women's Health II

Special Population



## PROBLEM STATEMENT

However we identified some issues with current PTDC which include :

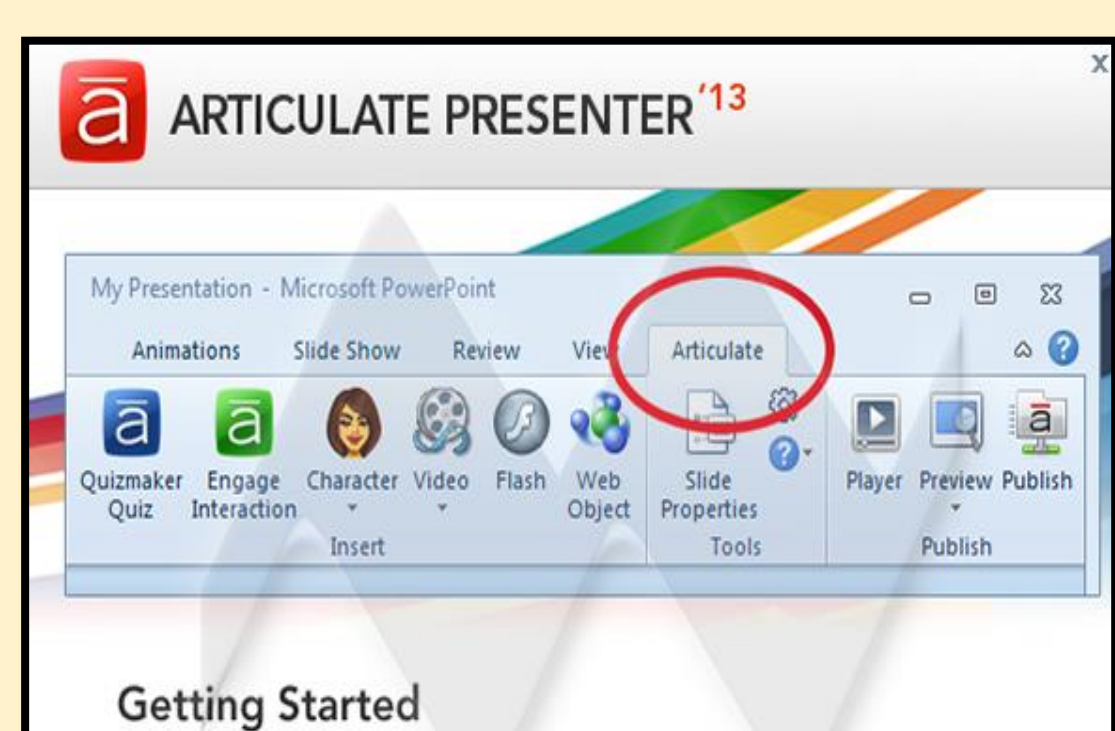
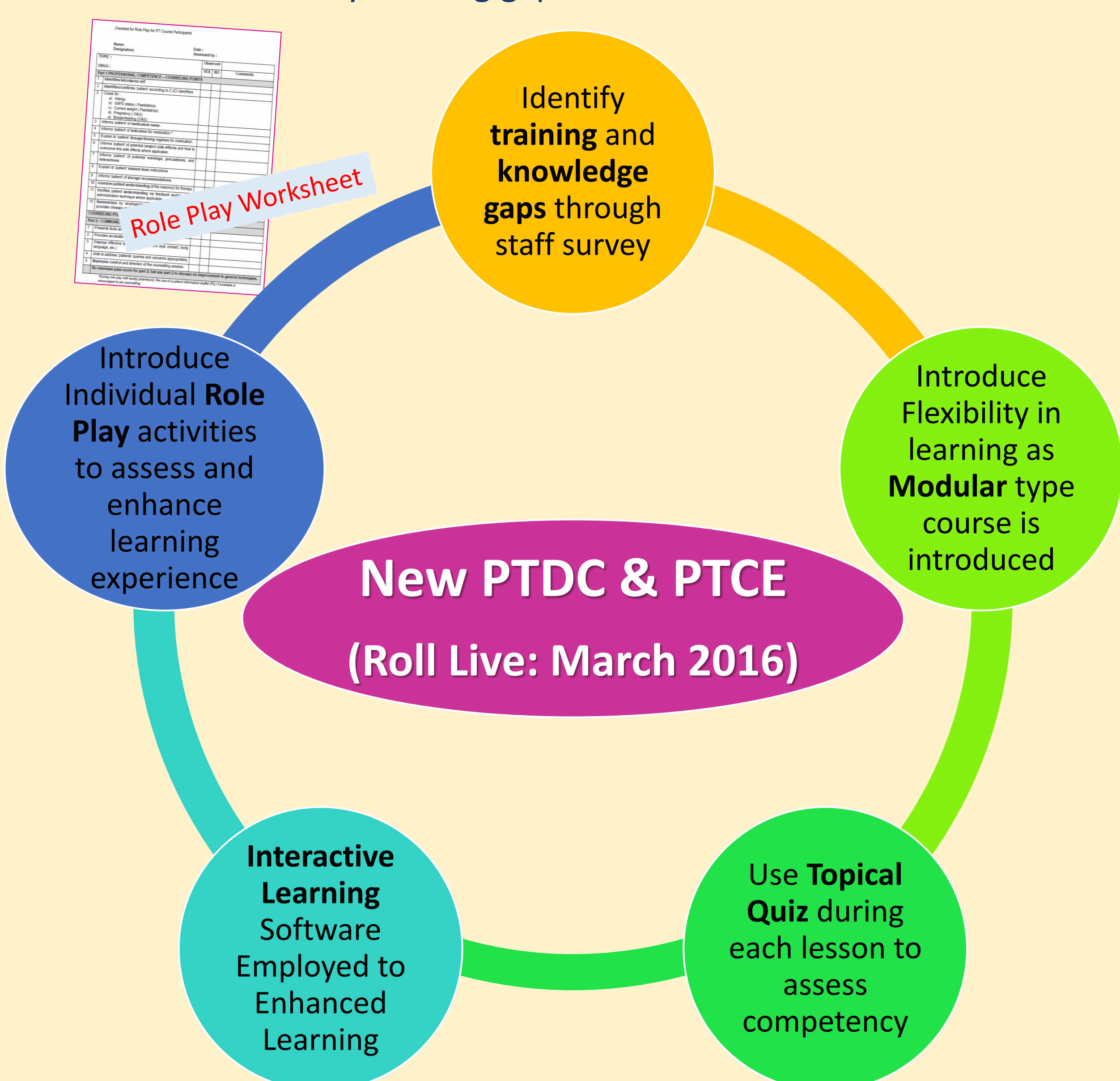
- Lack of flexibility in lesson timing
- Participants required to attend physically
- No options for participants to make up classes
- Poor take up rate, poor class attendance
- No earlier hands on dispensing experience
- Participants found difficulty in applying knowledge learnt

## OBJECTIVES

- To improve and implement a new & more structured teaching method for Pharmacy Technicians (PTs)
- To increase accessibility to learning via online platforms
- To improve drug knowledge for PTs
- To enhance the learning experience for PTs

## METHODS

PT Continuing Education (CE) Workgroup comprising PTs & Pharmacists was formed to identify training gaps.



## RESULTS

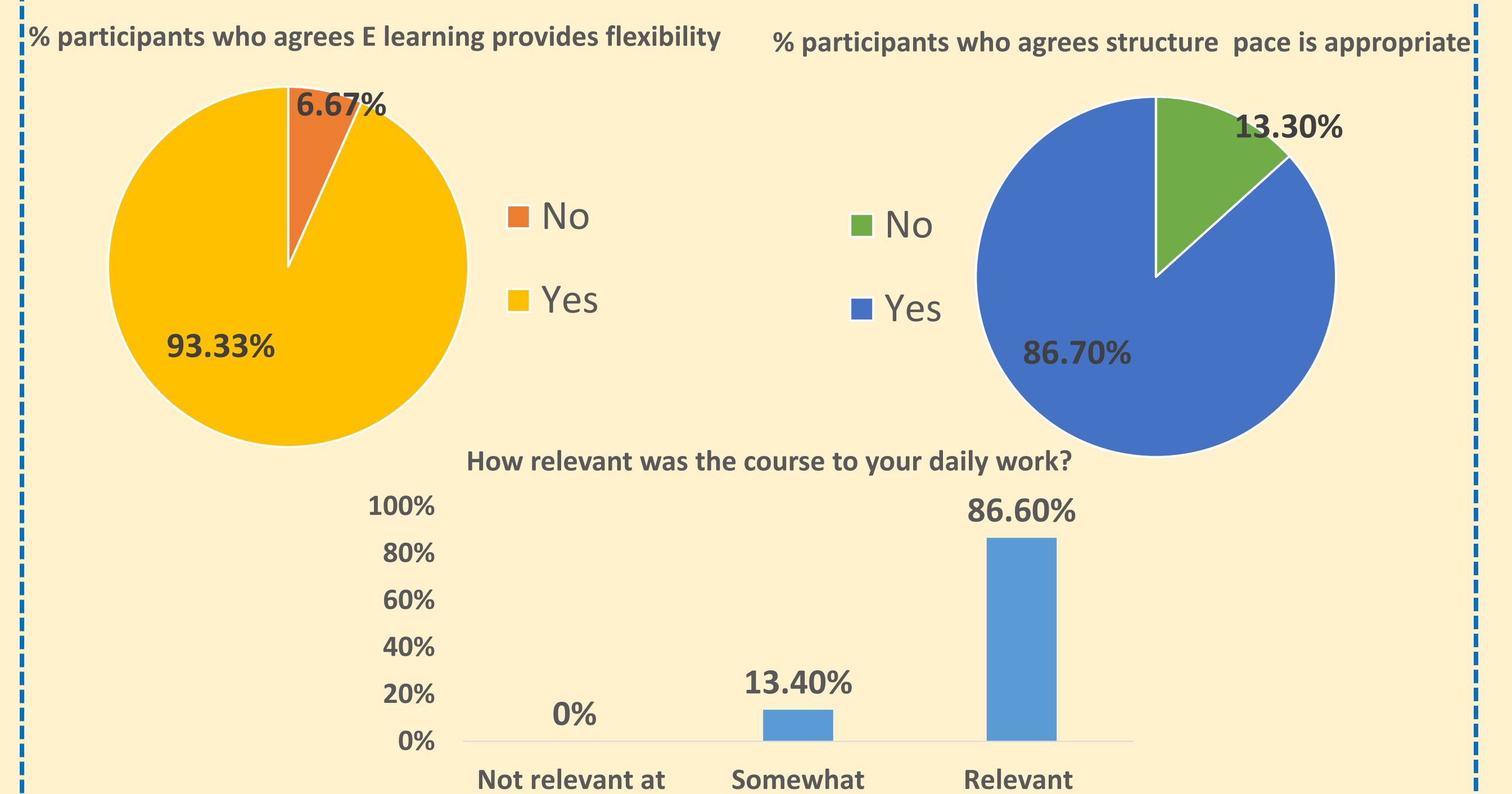
- Introduction of a PTDC course with Modular program allowed earlier hands-on dispensing upon module completion ; increasing dispensing exposure & learning through day to day operations.
- Topics comprise integrated didactic sessions with role-play, topical quiz, coupled with Pharmacist-guided patient counselling. E-blackboard slides created with articulate software allowed online learning
- In addition, the flexibility of the modular training also allowed a second batch of PTs to be enrolled in August 2016 PTDC, giving new PTs an opportunity to optimize their learning earlier.

## POST IMPLEMENTATION SURVEY

The workgroup also conducted a post implementation quantitative and qualitative survey midway through the course to measure satisfaction and success of the new structure. In addition, any feedback gathered was used to explore ways to improve the course.

A pre-implementation survey could not be performed as past participants are not enrolled in the new structure.

### Quantitative



### Qualitative

- More role play to gain experience and courage
- Not clear on what drugs we can dispense yet
- Buddy system is useful but may have variations in grading
- Articulate ( voice recording) sessions can be lengthy

Based on the qualitative survey: a few new modifications to PTDC has been implemented & more improvements planned

- Standardised role play worksheet to ensure consistency **COMPLETED**
- Introduce peer to peer learning with other senior PTs to increase dispensing exposure **COMPLETED**
- Use of eblackboard to introduce self-marking of drug logs with explanations **COMPLETED**
- Standardised drug dosing guide which indicates drugs that PTs can dispense **WORK IN PROGRESS**

## CONCLUSION

Modular PTDC and CE structure is effective in increasing the attendance rate & to promote continual learning in PTs. PTs are able to start contributing to patient counselling much earlier with completion of each module (6 to 8 weeks) increasing the pool of PTs who can dispense. This contributes a bigger pool of PTs that can be deployed to dispense during peak hours.