

PREFACE TO THE SECOND EDITION

Since publication of the first edition of the *Model Curriculum for Pharmacy Technician Training*, much has changed in the scope of potential practice activities of pharmacy technicians and pharmacy's perception of the significant role technicians might play in remedying the current pharmacist shortage and facilitating pharmacist engagement in direct patient care activities. The initial spur for the development of the Model Curriculum for Pharmacy Technician Training was the 1994 task analysis of pharmacy technicians conducted as part of the Scope of Pharmacy Practice Project. The recent 2000 update of that task analysis by the Pharmacy Technician Certification Board has provided sufficient evidence of change in technician practice to justify revision of the curriculum.

Those familiar with the 1996 version of the Model Curriculum will find the most notable content changes in the introduction of the technician's role in enhancing safe medication-use, tech-check-tech, and assisting in immunizations. New skills identified include negotiation and stress management. Other areas of change include a more finely tuned identification of the specific skills and knowledge required of the community pharmacy technician in both independent and chain practice.

Previous users of the curriculum will also note two significant changes in terminology. Enabling objectives have been renamed as instructional objectives. The term pharmaceutical care has been replaced with the term direct patient care except when referring specifically to the philosophy of pharmaceutical care. The term direct patient care is used to describe any direct patient care function whether delivered in the practice models of pharmaceutical care, clinical pharmacy, or self-care. The term drug has been replaced with the term medication except when its use seemed out of step with evolving usage.

While all the original participating organizations have provided assistance with the second edition, participation has broadened to include the National Association of Chain Drug Stores. We welcome the engagement of NACDS in this project for it has helped assure that we have correctly identified the knowledge, skills, attitudes, and abilities of technicians in chain community practice.

It is our hope that the curriculum will expand in its usefulness. While originally created to guide the design and delivery of technician training, we foresee three new uses. First, as pharmacy managers seek new ways to use technicians to free up pharmacist time for direct patient care, the list of job responsibilities and associated tasks can provide a catalogue of ideas for technician job redesign. Second, the statements of job responsibilities and associated tasks are prime for transfer to technician job descriptions. Third, as the national discussion of standardizing training of technicians progresses, we

offer the Model Curriculum, with its succinct descriptors of all known technician job responsibilities and associated tasks, as a starting point for identifying core competencies.

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