EXEMPLAR

Assessment of EPA 2 - Compounding

Intern name	Intern EPA-2	**Ahpra registration**	PHA000XYZ123
Intern training program	ABC ITP	**Stage of internship**	☐ 0-3 months ☒ 3-6 months ☐ 6-9 months ☐ 9-12 months
Practice setting	☐ Hospital ☒ Community ☐ 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

Reflection on performance – areas of strength and areas for improvement

Areas of strength

- Decision-making – identifying a problem that could be resolved by compounding, collecting the relevant information, speaking with the carer, using the variety of resources available to you (which includes your co-workers).
- Working through a methodical process, even for a product you've never made before.

Areas for improvement

- Developing confidence in speaking with prescribers about the validity of a compounding prescription, being mindful of the limitations of their prescribing software.
- Conducting a "final check" of the product and label before providing it to the preceptor (or to the patient once you're fully registered!)

Ability to access information when needed

- Used the AMH, APF, Don't Rush to Crush, specialty compounding database effectively and efficiently.
- Appropriately calling on the experience of other pharmacists and pharmacy assistants – you're not expected to know everything, and you can learn a lot from the experienced team around you.

Reasoning in relation to appropriateness and safety

- Safety check is always one of your first steps, appropriately; using resources well.
- In the omeprazole suspension compounding, you were able to apply dosage form knowledge to make something more suitable for the patient and her parents, demonstrating appropriate reasoning.

Risk awareness

- Conscious of risks to yourself from the ingredients, but also to the preparation from yourself (e.g. if a hair falls in!).
- Discussed how the pH paper confirms the stability of the preparation, and how an acidic flavour like lemon is a potential "risk".

What-if questions (see below)
Questions that were posed: • What if you were working in a pharmacy without a compounding laboratory – could you make any non-sterile product eg. omeprazole suspension? • What if this script were presented on a weekend, when there is no-one rostered to work in the compounding laboratory, but you know the patient requires their medication ASAP? • What if the prescriber was on leave and couldn't be contacted for a few weeks to re-write the prescription to make it suitable for compounding? You'll let me know your answer to the first one within 7 days but were able to confidently answer the second and third.

Other comments (including any actions necessary to improve performance)
We'll review the time taken to complete omeprazole suspension the next time you compound this product. FROM NOW: Omeprazole suspensions join the other compounding products already at Entrustment Level 3 (including simple creams and ointments, T3 capsules and diclofenac gel); the pharmacist in charge must be shown the script, label and Batch Sheet both before and after the product has been made. If the pharmacist on duty on a future occasion has any reservations about you being the person to proceed with the compounding, you will be expected to respect their decision to add any extra conditions. Any compounding products that you have not made previously at this pharmacy remain Entrustment Level 2.

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. *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.*

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.