

# ALABAMA BOARD OF PHARMACY

Board Status and Work

Susan Alverson

# Finding Us.

- Moved out further on highway 280.
- Close to hwy 119 and hwy 280
- Turn into Greystone on Hugh Daniels
- First stoplight on right corner
- 205 981-2280

# LICENSING

- We have 5 people who handle licensing
- Register technicians in odd number years
- Register pharmacists and all businesses in even number years.
- Moving toward submitting all data online
- We are required to have proof of citizenship or right to be in country
- All payments on line.

# Inspections/Investigations

- We have 7 investigators. All have a criminal justice degree-- state law.
- We work to inspect all pharmacies every 2 years.
- Now, we are working to inspect all compounding pharmacies in the state.
- Staff also does the investigation for all complaints.

# Pharmacists

- We have 2 pharmacists who are part of compounding inspections
- Answer questions that come to the Board.
- Help with training for inspections.
- Assist with organizing our documentation and communication for investigations.

# New

CE—have 2 years to obtain CE hours

- Techs—3 hours per year and 1 hour live
- 6 total hours in 2 years and of which 2 live
- Pharmacists – 15 hours per year and 3 of those are live      30 total hours and 6 must be live

# Non-sterile compounding

- Facility design for non-sterile compounding –
  - this is not a new law, we have it in the rules portion of pharmacy law.
  - It states must have cleanable ceiling, walls, counter, floors.
  - A clean sink with hot and cold running water accessible.
  - Must use purified water for compounding.
  - Record lot and expiration date of ingredients; show calculations.

# Others

- Adjusted pharmacy student hours that they can meet state requirements through school.
- USP 800 chemotherapy
- Looking at pharmacist in charge
- Trying to make all registrations easy, online and paperless



# New FDA regs.

- No compounding for physician offices
- May not ship over 30% across state lines
- Managed by state office
- Everything is for a single patient
- For 503b—may ship any amount
- May sell to physicians
- Only 14 days on injectables and only drugs from FDA approved list

# Challenges

- Who to approve for a license
- When to remove a license
- Should technicians need more training
- Should high risk compounding need more training

# Change is coming faster than ever

- Education is not only valuable for the “facts” you learn, but for your ability to solve problems.
- We can design systems, the question is who is looking at solving the problem?
- What craziness drives payment in healthcare?

# COMPOUNDING

- We see poor facilities,
- lead pharmacists who obviously don't know the guidelines,
- Owners who are in it only for the money,
- people who are not well trained,
- hospitals that won't spend what is needed to protect patients,
- drugs that have been shipped into the country illegally.

# Our Actions

- We have closed some pharmacies,
- have required others to revamp and get more training,
- have made simple suggestions for some,
- and have been pleased when we see others that do so much right.
- Working with medical and nursing boards