

GUIDELINES FOR REGISTRATION OF PHARMACISTS TRAINED OUTSIDE JAMAICA

PHARMACY COUNCIL OF JAMAICA
91 DUMBARTON AVENUE
KINGSTON 10
JAMAICA

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First Edition

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By The Pharmacy Council of Jamaica

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1.0 INTRODUCTION

The Pharmacy Council of Jamaica is an agency of the Ministry of Health which was established in 1975 under the Pharmacy Act of 1966 and Regulations of 1975. It is the body charged with the responsibility for the regulation of the practice of pharmacy, which includes the registration of pharmacies, pharmacy owners, pharmacists and pharmaceutical students. The Council's regulation of training of pharmaceutical students includes the didactic and one year internship components as prescribed by the Pharmacy Act and Regulations.

Since its inception, the Council has registered many pharmacists who were trained in foreign countries such as Africa, Canada, India the United Kingdom, the United States of America and a number of Caribbean countries.

Previously, the Council employed different approaches to register foreign trained pharmacists. These approaches were dependent on the particular circumstance and included the following:

1. *Pharmacists,* who had previous practice experience, were required to sit the Foreign Trained Pharmacist Qualifying Examination (FTPQE) and obtain some exposure to pharmacy practice in Jamaica. Candidates who passed the examination and had obtained the required exposure were then eligible for registration.

- 2. Caribbean Pharmacists who obtained the *Post Diploma* Bachelor's Degree in Pharmacy from the University of Technology Jamaica (UTech Ja.) and who could prove that they had practiced pharmacy prior to their enrollment at UTech Jamaica were required to sit only the Forensic and Oral sections of the FTPQE. Successful candidates were then eligible for registration.
- 3. Pharmacists within the Caribbean region who were trained to the diploma level before the introduction of the BPharm programme at UTech Jamaica were also required to sit the FTPQE. Where deficiencies were identified, these persons were required to satisfy a period of externship before they could be registered.

In recent times, the number of applications from foreign trained pharmacists for registration has increased significantly. The Pharmacy Council of Jamaica recognized that these persons came from diverse locations; hence, there was variation in the scope of training and competence to practice in Jamaica. Cultural and legal differences could also impact on the ability to deliver quality pharmaceutical services locally.

Having reviewed the matter, the Council took the decision to standardize the requirements for registration of foreign trained pharmacists who wish to practice in Jamaica, hence the preparation of these guidelines. It is anticipated that this document will provide answers to frequently asked questions on the requirements for entry to the Register of Pharmacists in Jamaica.

2.0 SCOPE

- **2.1** These guidelines specify the requirements of the Pharmacy Council for registration of pharmacists who were not trained in Jamaica by the Pharmacy Council of Jamaica.
- **2.2** These guidelines apply to all pharmacists who wish to practice as pharmacists in Jamaica but were not trained in Jamaica.

3.0 TERMS AND DEFINITIONS

3.1 Foreign Trained Pharmacist

Any person trained outside of Jamaica as a pharmacist in an accredited institution offering Pharmacy Education.

3.2 Community Pharmacy Externship

A formally coordinated practical experience conducted in selected pharmacies with approved preceptors

3.2 Internship Period / Vocational Training

Training of Interns at approved internship sites for a period of twelve months. This is a pre-requisite for registration.

3.4 Continuing Professional Development

Participation by a registered pharmacist in educational programmes approved by the Council

4.0 REQUIREMENTS FOR REGISTRATION IN JAMAICA

General Information

- **4.1** The applicant shall satisfy the Council that he/she has been trained to at least the Bachelor's Degree in pharmacy and has undergone vocational training for a period of not less than 12 months. An additional 500 hours of community externship should also be completed.
- 4.2 Where pharmacists do not satisfy the requirements of vocational training and externship set out in 4.1 but have been trained to at least the Bachelors' Degree in pharmacy and have practiced for not less than 2 years, the experience gained will be assessed for possible reduction of the internship period (Pharmacy Regulations (1975) Section 4 Subsection 2c)
- **4.3** The Pharmacy Council of Jamaica (PCJ) reserves the right to determine the period of internship where cultural norms/practices vary significantly from standards established by the Council.
- **4.4** Where candidates originate from countries where English is not the first language, the candidate may be required to sit an English proficiency test.
- 4.5 Where deficiencies are observed, the decision on the period of internship to be served may be based on an assessment of competencies to be gained in specific areas. No applicant would be required to serve less than six months where, deficiencies exist. Consideration will be given to the level of exposure in the main practice areas (Community and Hospital)
- **4.6** Candidates must complete the FORM B for registration as required by law.

4.7 The Council shall evaluate applicants on a case-by-case basis.

5.0 DOCUMENTS REQUIRED FOR REGISTRATION

- 5.1 Pharmacists applying for registration by the Pharmacy Council of Jamaica must provide the following:-
- 1. CERTIFIED COPY OF BIRTH CERTIFICATE
 - 2. THREE TESTIMONIALS (FROM RECENT EMPLOYER,

 PHARMACIST, FAMILY PHYSICIAN OR HEAD OF EDUCATIONAL

 INSTITUTION)
- 3. CERTIFIED COPY OF CURRENT PHARMACIST LICENCE(S)
- 4. CERTIFIED COPY OF PHARMACY DEGREE(S)
- 5. CURRICULUM VITAE
- 6. TWO (2) PASSPORT SIZE PHOTOGRAPHS (<u>NOTARIZED/CERTIFIED</u>)
 - 7. COMPLETED EXAMINATION APPLICATION FORM ACCOMPANIED BY PROCESSING FEE OF US\$ 65.00 OR EQUIVALENT IN JAMAICAN DOLLARS (THIS FEE IS NON REFUNDABLE AND MUST BE PAID AT THE TIME OF SUBMISSION OF THE APPLICATION FORM.)
 - 8. TRANSCRIPT FROM THE TRAINING INSTITUTION(S) FROM WHICH QUALIFICATION WAS OBTAINED (TO BE SENT TO THE COUNCIL DIRECTLY FROM THE INSTITUTION)
 - 9. LETTER OF GOOD STANDING FROM REGULATORY BODY/CERTIFYING BOARD <u>WITH OFFICIAL SEAL</u>
- 5.2 All documents should be in English. Where applicants are from non-English speaking countries, official documents such as Licences and Certificates issued in the language of the country of

origin must be translated into English by certified translators. The translated copies will be verified with issuing institutions and embassies before the Council responds.

6.0 EXAMINATION INFORMATION/INSTRUCTIONS

- **6.1** Effective January 2006, applicants trained outside of Jamaica who wish to be entered on the Register of Pharmacists will be required to sit a single paper which will be a comprehensive; involving aspects of Pharmacy Practice, Forensic Pharmacy and the Pharmaceutical Sciences.
- **6.2** The examination will consist of two parts (I and II).

Part I will comprise the following sections as part of a comprehensive multiple choice/objective type paper:

- (a) Questions which test pharmaceutical/clinical knowledge base.
- (b) Forensic Pharmacy questions which test knowledge of the Jamaican Pharmacy Laws and Regulations.
- (c) Prescription filling exercises to assess the candidate's ability to dispense medicines.

Part II will be an Oral Examination - The candidate will be interviewed by a panel of examiners to further assess the applicants' knowledge and ability to practice pharmacy in Jamaica.

- **6.3** If the candidate fails either section (a) (b) or (c) of Part I, he/she will be required to repeat the entire exam and pay the full cost of the examination fee.
- **6.4** If the candidate fails Part II only, then this section would be repeated at a cost of one hundred and fifty dollars (US\$150.00) or the Jamaican equivalent.

- 6.5 Unsuccessful candidates will be allowed to re-sit the examination. However, after the third sitting, candidates must wait for at least two years before re-applying for a fourth sitting.
- **6.6** Candidates who apply after the first two sittings must demonstrate that they have undergone professional development that should improve their chances of succeeding in the examination. **This opportunity at the examination will be the final sitting.**
- 6.7 The examination is **administered only twice** in any one calendar year at the following times:

The last Friday in January
The last Friday in July

- **6.8** Candidates' wishing to sit the examination should apply to the Council at least two (2) months prior to the scheduled date of the examination.
- **6.9** Results of the examination will be available 6-9 weeks after the sitting

7.0 EXAMINATION AND REGISTRATION FEES

- **7.1** A non-refundable processing fee of **forty-dollars (US\$65.00)** or the Jamaican equivalent is payable on submission of application.
- 7.2 The examination fee is four hundred dollars (US\$400.00) or the Jamaican equivalent and must be paid at least one calendar month prior to the sitting of the examination. Fees are subject to change from time to time as determined by the Council.
- **7.3** For each examination attempt, the candidate will be required to pay the fees set by the Pharmacy Council
- **7.4** Applicants sponsored for training abroad by the Jamaican Government will be exempted from paying the fees for the <u>first</u> sitting of the examination.
- **7.5** Successful candidates will be eligible for registration. The Registration fee is **two thousand five hundred dollars (J\$2500.00)**.

8.0 EXAMINATION STRUCTURE

8.1 The Examination consists of Comprehensive Multiple Choice and Objective Questions in the following subject areas as well as an Oral Examination.

8.1.1 A **two-hour Multiple Choice Question Paper** covering :

- Pharmaceutical Calculations
- Medicinal Chemistry
- Pharmacology & Therapeutics
- General Pharmacy
- Pharmacy Practice

8.1.2 A **one-hour Forensic Pharmacy Paper** requiring preparation utilising the following Laws of Jamaica:

- The Pharmacy Act & Regulations
- The Dangerous Drug Act & Regulations
- The Food & Drug Act & Regulations
- The Precursor Chemicals Act
- Amendments to the Pharmacy Act and Regulations

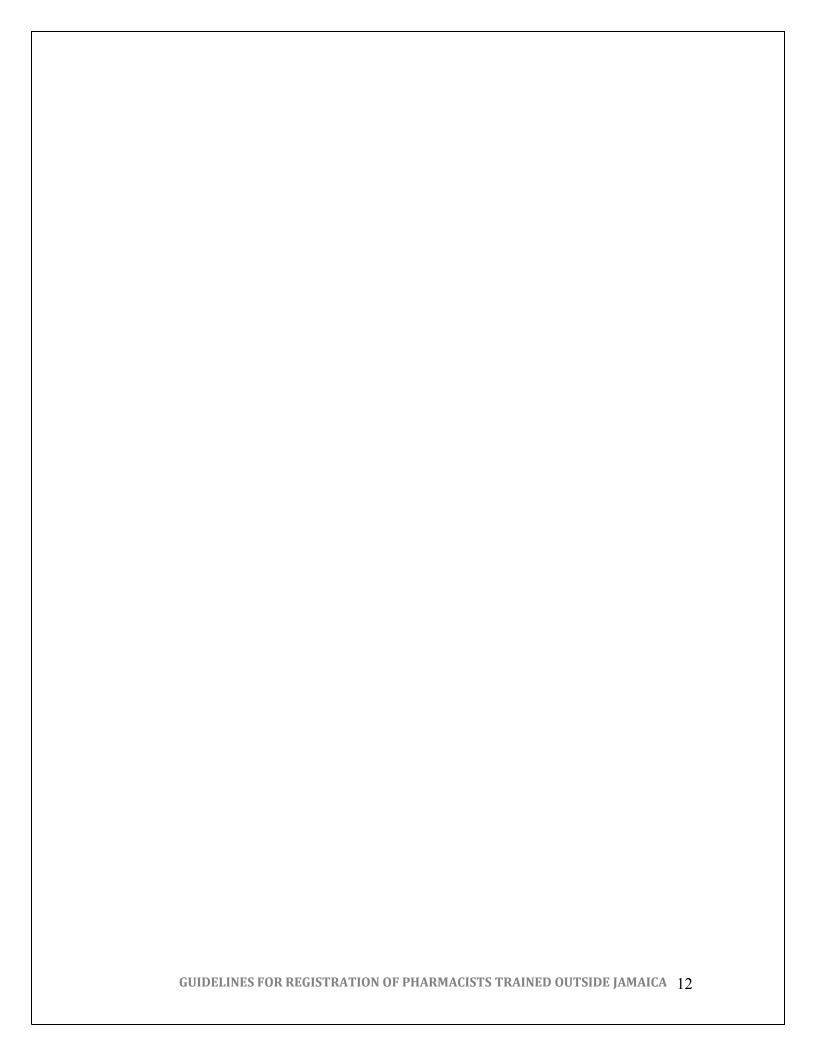
8.1.2 A one-hour Prescription Filling Paper:

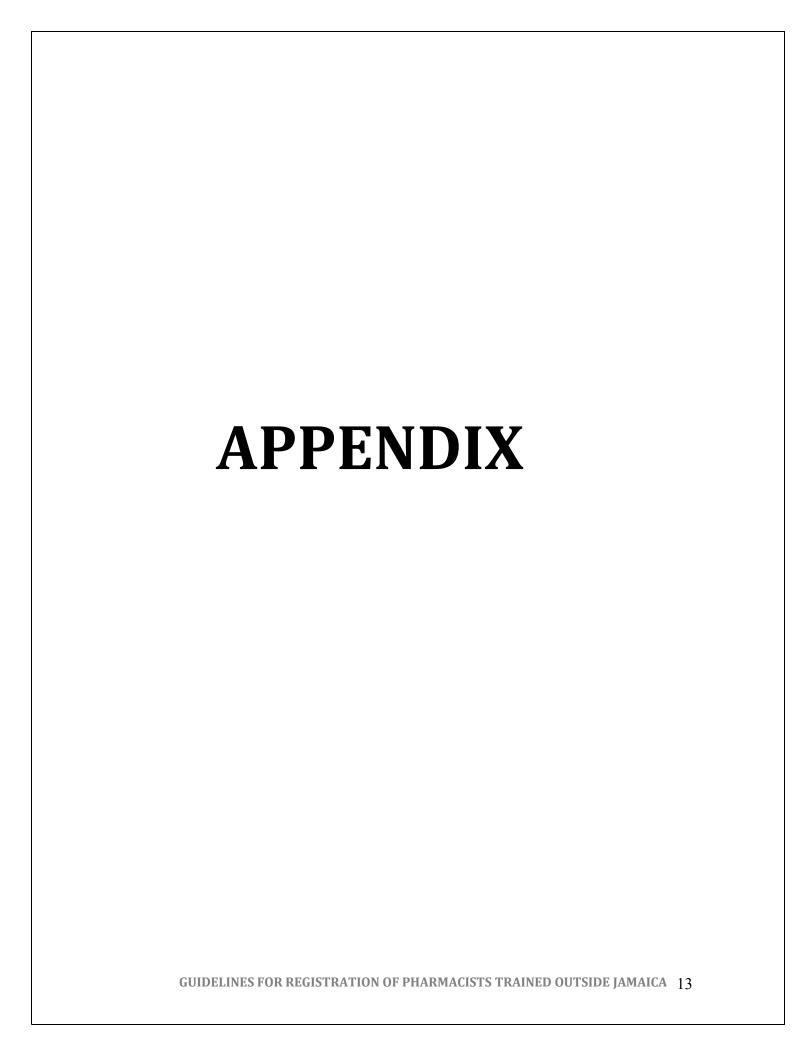
- Prescriptions should be dispensed generically unless otherwise instructed.
- All the prescribed rules for filling prescriptions should be applied.
- Labels should be prepared according to the legal requirements in Jamaica where such is requested.
- Only the reference texts provided by the examining body will be allowed for use during the examination.

8.1.4 A forty-five minute **Oral Examination**:

- Involves description of practical scenarios to determine how the candidates would handle similar situations in the practice setting.
- The candidates' ability to manage unique situations, such as requests for prescription drugs without prescriptions is tested.
- The candidates' ability to advise clients on the proper use of medical devices and correct administration of various dosage forms such as eye, ear and nose drops, Metered Dose Inhalers, etc. is tested.

8.1.5 The Oral examination may be held on a separate day from the written section of the examination.





RECEIPT NUMBER	

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Tel: 926-2637/4353 Fax #: 926-6935

E-mail: rxcounciljm@yahoo.com

APPLICATION FORM FOR REGISTRATION OF PHARMACISTS TRAINED OUTSIDE OF JAMAICA

1. I	Full Name:						
	(SURNAME)	(FIRST	NAME)	(OTHER)			
2.	Marital Status:	S⊡GLE	MAR□ED	DIVO□CED			
		WID⊄WED	SEPAR□TED				
	(If married, maid	en name:)				
3.	Gender: MAI	E 🗀	FEMALE				
4.	Date of Birth:	Date of Birth:					
5.	Country of Birth:	Country of Birth:					
5.	Nationality:						
6.	Permanent	Address:					
7.	Mailing	Address:					

8.	Previous	Address:						
9.	E-mail:							
10.	Current Employment							
11. Phai	Countries rmacist	where		egistered	as	a		
Education & Training								
	Start date End date		d date	School of	Training			
I hereby certify that the information presented is complete and accurate.								
Signature of applicant:								
	Date:							
	_							
		FOR OFF	ICE USE ONLY					

REF NO: _____ DATE RECEIVED:____

EXAM NO: _____

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