- 1. Is the CPW Board Filled out correctly?
 - a. Today's date is filled out.
- 2. Are the TMs rotating approximately every 2 hours?
 - a. Same TM is assigned to different zones at different times, throughout the day
- 3. Are the zones populated correctly using the staffing section?
 - a. Check CPW, confirm that board matches the zone suggestion for that time / staffing level
- 4. Are the TMs in scheduled zones based on skills/tasks for the time of the day?
 - a. RxOM considered tenure & peak in volume to assign TMs to zones
- 5. Is there someone listed for IC3?
 - a. IC3 name is updated to reflect who is in store; TMs are aware of IC3 contact
- 6. Is the training log filled out with the dates of training completion from both CPW
 - a. All TMs are fully trained (reasonable exceptions allowed)
 - b. RxOM has clear upskilling plan for remaining TMS
 - c. TMs observed actions reflect training validation
- 7. Is each TM, including SM, listed in the training log
 - a. All TMs are included in log, as confirmed by roster (with exception of new hires
- 8. Is each TM, with at least 3 months tenure, trained on each activity?
 - a. Validate that all TMs are trained, leaving room for special exceptions
- 9. Does the team have a plan in place to address gaps in training for any TM?
 - a. SM/ RxM knows which Ms require additional training, and they have made a plan to ensure training occurs
- 10. OOS Do all OOS exceptions which have been created \$24 ago have a comment?
 - a. Go through each queue, ensure that the majority of entries satisfy guidelines:
- 11. OOS Are there any OOS older than 2 days? if yes, has the team communicated solutions to the patient?
 - a. Is not older than 10 business days
- 12. WCS/CMD Check 6-8 WCBs at random: Does each wcv have a comment on when last outreach occurred?
 - a. Comments are present, and have clear action with date attached
- 13. WC/CMD Are all exceptions in the queue according to SOP guidance?
- 14. WCS/CMD Are there CMD exceptions and do they have comments?

- 15. MQ if there is an MQ indicator: is MQ properly addressed?
- 16. MQ- if there is not an MQ indicator: Ask TM when they opened it how many were in the queue is the MQ size reasonable?
- 17. Are Green Zone SMS resources posted at each POS terminal?
 - a. Green zone TM is asking patient about SMS preference, guiding them on pinpad and SMS consent
- 18. Are Blue Zone resources posted at each fill station?
 - a. Resources are posted and team members are referring to them (if necessary)
- 19. Do they have today's phlomometer threshold value on them?
 - a. phlomometer guidance is reflected and current date is shown
- 20. Is each 1-pager easily accessible (e g, in a binder), do TMs know where to find them?
 - a. Non-senior tech know where one pagers are (note; might need to ask TMs directly if observation is not enough to answer this question)
- 21. Do TMs check the CPW board for zone assignment when they enter the pharmacy and signing into MyZone? >50% of TMs for yes
 - a. Technicians are able to state what zone they are in, their main responsibility, and their Primary & secondary, tasks
- 22. Check CPW reporting, are TMs logging in every day over at least the past week
 - a. Avg. unique employees visiting CPW per day should equal the number of TMs scheduled each day
- 23. Are TMs checking Myone for guidance when they change zones? -50% of TMs for yes
 - a. Technicians can explain how they use the board and when they switch zones
- 24. Are TMs continuing to monitor Myone throughout rotation? Are TMs switching to secondary tasks? ≥50% of TMs for yes
 - a. Technicians can open CP and explain how they go from primary to secondary tasks
- 25. Are TMs switching to tertiary tasks when below min threshold?
 - a. TMs refer to threshold and conduct tertiary tasks when below threshold
- 26. Are TMs asking for IC3 when above IC3 threshold?
 - a. Technicians can explain when they call for IC3 (why and who is coming to support)
- 27. Do TMs adjust behavior when phlomometer reaches above threshold?
 - a. Observe techs move priorities based on phlomometer reading, specifically when above max threshold

- 28. Are TMs asking patients to consent / enroll in SMS when not already enrolled?
 - a. TMs asking patients about SMS preferences at POS
- 29. Is CPW lead coaching workflow: managing rotation timing and calling out when min/max are being approached?
 - a. Observe CPW lead encouraging TMs to rotate (if applicable), reconciling phlomometer with execution of primary & secondary tasks
- 30. When asked: Does ROM/CPW Lead have action items for the team to improve on? Do they effectively communicate these to TMS?
 - a. RxOM/CPW lead has a clear idea of PEXT priorities (E g, training next steps listed in weekly business meetings. Training updated within the schedule/board)
- 31. As barriers to PEXT adherence are identified: Does store leadership have a plan in place to address barriers/performance gaps present?
 - a. RxOM/CPW lead has a plan to mitigate challenges