Message from the President

As the year comes to a close, we tend to look back over the past year and reflect on how we’ve spent our time and what we have accomplished. The pharmacy profession is in the midst of unprecedented change. This past year alone saw many legislative changes that have impacted the services pharmacists are able to provide to their patients - and more changes are on the horizon for the coming year. While the expanded role of pharmacists in the healthcare system is a positive move forward for both the public and the profession, embracing these changes in practice is not without its challenges. Every day pharmacists are expected to balance the workload of the dispensary in a manner that fulfills their professional obligation to provide quality care to their patients.

This year the NSCP released two significant standards of practice documents: Prescribing of Drugs by Pharmacists and Methadone Maintenance Treatment Services for Community Pharmacies. Fulfilling the expectations of these Standards has required pharmacists not only to work hard to ensure they are competent to practice in these areas and to make changes in their day to day practice, but also to educate other members of the healthcare team about the new Standards.

The NSCP recognizes that there have been instances when other members of the patient’s healthcare team have challenged these changes, and in particular the requirements associated with providing methadone to patients with substance dependence. Even though these standards were developed with full support of the College of Physicians and Surgeons of Nova Scotia, Addiction Services and the Nova Scotia Department of Health and Wellness and are consistent with best practices across the country, we are aware that some practitioners have made implementing the necessary changes difficult. This may be because of a disproportionate bias towards what they perceive to be in the patient’s best interest / convenience versus what is the appropriate balance between what is best for the patient and what is in the best interest of the public.

I recognize that being at the front line of change can be painful, and for that reason I want to commend Nova Scotia pharmacists for leading the change to bring this vital service to best practice standards. So as you reflect upon the past year, you should be proud of yourselves for helping to move the practice of pharmacy forward so that it can better serve Nova Scotians.

Wishing you the merriest of the holiday season and the best in the New Year!

Craig Connolly
President NSCP

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Cathy Comeau

This Bulletin is forwarded to every licensed pharmacist and certified dispenser in Nova Scotia. Decisions of the Nova Scotia College of Pharmacists regarding matters such as regulations, drug schedules, pharmacy practice, etc., are published in this Bulletin. The Nova Scotia College of Pharmacists therefore assumes that all pharmacists/certified dispensers are aware of these matters.
NSCP 2011 Award Recipients

Each year, during the PANS Annual Conference / Dal CPE Refresher, the Nova Scotia College of Pharmacists honors pharmacists and other individuals who have given outstanding service to the public, to their community and to the profession.

We are pleased to introduce this year’s Meritorious Service Award winners—Dawn Frail, Cameron Little, and Catherine Walker and the Bowl of Hygeia Award winner—Dale Copp. Please take the time to read about these extraordinary people.

Meritorious Service Award —Dawn Frail

Dawn Frail graduated with a Baccalaureate degree in pharmacy from Dalhousie University in 1976. She went on to earn a Masters degree in Science from the College of Pharmacy in 1979.

Dawn was a member of the Council of the Nova Scotia Pharmaceutical Society from 1991 to 1999, serving on countless committees and acting as President of the organization from 1995 to 1997.

If one had the privilege of reviewing Dawn’s CV, one would be impressed not only by its fulsomeness but by the professional commitment it demonstrates. Upon closer review, one would see that the majority of the accomplishments recorded – countless presentations, papers, publications, abstracts, committee work, stakeholder involvement, awards, etc. – are directly related to pharmacy activities that positively impact the public.

Dawn’s career has included many notable positions in a variety of practice areas including community and hospital practice, administration, academia and private consulting. She has held a position at the Nova Scotia Department of Health and Wellness since 1999 and is currently the Drug Information System Pharmacy Manager. One of Dawn’s responsibilities with government has been reviewing and overseeing submitted pharmacy regulatory proposals.

Dawn is savvy and has stick handled the legislative proposals of the Nova Scotia College of Pharmacists through a myriad of resistance and obstacles to make sure they stayed on track and avoided the bureaucratic minefields that might sideline worthy initiatives. This included meeting internally with the various layers of bureaucracy, answering their questions and clarifying the intention of the proposals. She ensured that the NSCP proposals stayed on the top of the pile – a position jockeyed for by many organizations. This required constant attention and intervention – work above and beyond that required of her position.

Dawn is smart, articulate and credible and therefore when she speaks positively on behalf of an NSCP initiative, she has the ear of the government and is taken seriously by decision makers.

While the work that she undertakes on behalf of the NSCP is almost exclusively unseen by most pharmacists, the evidence of her work is clearly visible. The most recent example is the authority for pharmacists to prescribe. Dawn has always been a strong supporter for the proper deployment of pharmacists within the health care system.

While Dawn’s focus at the Nova Scotia Department of Health and Wellness is now the emerging Drug Information System (DIS), the NSCP is appreciative of her reiterated commitment to continue to oversee pharmacy regulatory initiatives going before government.

It was with admiration and gratitude that the NSCP presented Dawn Frail with the Meritorious Service Award for her role in helping the NSCP achieve its mandate of governing the practice of pharmacy in the interest of the health and well-being of the public.
Meritorious Service Award—Dr. Cameron Little

Dr. Cameron Little received his medical degree from the University of Alberta in 1971 and his law degree from the University of Victoria in 1994. Upon graduation, he moved to Nova Scotia to assume the role of Registrar and CEO of the College of Physicians and Surgeons of Nova Scotia (CPSNS) from which he retired last month after 17 years of dedicated service to the public.

Prior to Cameron’s arrival to the CPSNS, the organization (then known as the Provincial Medical Board) was receiving negative media attention for being too protective of their own and crossing the line into acting as an advocate for the medical profession as opposed to acting in the best interest of the public. Despite this, Cameron agreed to take the helm, bringing with him an expertise in medicine, a lawyer’s understanding of administrative law, and his own personal ethos of integrity and collegiality.

Cameron was passionate about his mandate for public protection, doing whatever it took to fulfill that mandate. He challenged the status quo and traditional beliefs when the evidence demonstrated that it was necessary for the good of the public. He was open to new ideas and was willing to take on the establishment of tradition. Cameron was a kind and gentle mentor, willing to share his experience and wisdom in a gracious and affirming manner - a strategic thinker who was often ahead of the curve in his ideas for the best possible functioning of the health care system. The NSCP has directly benefited from his support and expertise over the years when faced with regulatory issues that seemed daunting or insurmountable. He was particularly supportive when the NSCP took on the task of addressing the regulatory barriers to an expanded scope of practice for pharmacists in Nova Scotia.

Cameron is genuinely collaborative, and this quality spilled over and changed, not only the culture within his organization, but rippled on to affect the philosophy of the Nova Scotia health care system. Because of him, the doors to collaborative practice in Nova Scotia were opened.

It was with admiration and gratitude that the NSCP presented Dr. Cameron Little with the Meritorious Service Award for his role in helping us achieve our mandate of governing the practice of pharmacy in the interest of the health and well-being of the public.

Meritorious Service Award—Catherine Walker, QC

Catherine Walker graduated from Dalhousie Law School in 1977 and was awarded a Queen’s Counsel Designation in 1993. In 1985 she became legal counsel for the Nova Scotia College of Pharmacists (then the Nova Scotia Pharmaceutical Society).

Cathy has an innate ability to know how best to govern the practice of pharmacy in a manner that appreciates and optimizes the unique knowledge and skills of pharmacists while protecting the public. She has time and time again piloted the NSCP through difficult regulatory waters, helping us to minimize our risks while ensuring that we fulfill our legal obligation to serve in the interest of the health and well-being of the public.

Cathy has faithfully demonstrated her commitment to the NSCP, putting our needs to the top of her list and setting aside her work to promptly respond to our requests for assistance. She is personally committed to continually enhancing her own competency and skills in the areas of law that deal with pharmacy practice and its governance so that she can provide the NSCP with the best possible guidance and advice.

She has voluntarily lectured to the pharmacy students at Dalhousie University every year, preparing them for their new world as practitioners in a regulated profession. She has provided the NSCP with sound legal advice regarding our role and responsibilities on significant regulatory issues including the Fair Registration Practices Act, the Agreement on Internal Trade, and the Personal Health Information Act. During the H1N1 crisis of 2009, she rolled up her sleeves and put in long hours working with the other provincial health regulatory bodies to make the necessary emergency changes to the legislation when it appeared that the Nova Scotia Department of Health and Wellness might ask pharmacists to help with a huge immunization initiative.

She has authored all the legislative and regulatory changes that the NSCP has undertaken since 1985, including two completely new Pharmacy Acts and their associated Regulations and countless amendments to these rules in between.

Of particular note is the extraordinary time and commitment Cathy has invested in helping the NSCP create the most recent Pharmacy Act, passed by the legislature in the spring of 2011, and the time and commitment she continues to devote to the associated regulations which are still under development. Cathy continues to amaze the legislation working group with the amount of research she undertakes in preparation for the marathon legislation development sessions – ensuring that any rules created by the NSCP reflect current thinking in administrative law and health profession regulation.

Cathy has become more than our official legal counsel. She is the NSCP’s friend, mentor, protector, teacher, and admonisher when necessary. She is always in our corner. We know we can count on her. We know she has our back. She is our port in a storm.

It was with heart felt appreciation and admiration that the NSCP presented the Meritorious Service Award to Catherine Walker for going above and beyond the call of duty in helping the NSCP achieve its mandate of governing the practice of pharmacy in the interest of the health and well-being of the public.
The Pfizer Consumer Healthcare Bowl of Hygeia is awarded annually to a pharmacist who has provided outstanding service to their community above and beyond their professional activities. This year’s recipient of the award is Dale Copp.

Dale graduated from the Dalhousie College of Pharmacy in 1999 and has practiced community pharmacy since that time. He is currently the manager of the DrugStore Pharmacy in Elmsdale. Dale has demonstrated his commitment to his community in many ways. He organizes, sets up traffic control, and provides first aid for injured participants during fundraising activities including the annual Ovarian Cancer Walk and the Penguin Run. He also assists the RCMP during the annual Remembrance Day Parade by handling road closures and traffic control.

He is involved in fundraising activities of the President’s Choice Children’s Charity and the Look Good Feel Better Campaign. Dale lends his brawn to support the economy in developing countries through loading, unloading, sorting, and repacking the cargo associated with the many Ten Thousand Villages sales in his community.

He contributes his time and expertise to provide ongoing education to both children and seniors about pharmacy and fire prevention and safety issues. This includes organizing annual visits to the local fire hall and demonstrating first aid techniques and associated medical equipment used by the fire department.

While all of these contributions have benefited his community, what has benefited the community the most has been his work as a volunteer firefighter.

This past year, images of the heroic acts of firefighters during the 9/11 crisis were being broadcast globally as the world recognized the 10th anniversary of that tragedy. The resigned faces of those rescuers who were heading into the towers, while others were fleeing the scene, will permanently be etched in our minds.

This year, when consideration was being given to who would be a worthy recipient of the Bowl of Hygeia award, the NSCP considered the fact that these scenes can play out every day in the lives of firefighters here in Nova Scotia.

It’s been said that “It’s one thing to provide community service by volunteering to sit on a committee and attend meetings. However, it’s quite another thing to serve your community by getting up in the middle of the night to put yourself in harm’s way by running into a burning building.”

It is estimated that every five minutes, somewhere in this country, a firefighter is responding to a call. And what few of us consider is that many of them are volunteers.

Beyond saving people and homes, it is estimated that volunteers save communities millions in labor costs. They are the backbone of our rescue system in Nova Scotia. What would we do without them? Volunteers aren’t just part of the fabric of the community – they are the community. So when they respond to a call, in all likelihood the person they are coming to help is a neighbor or a friend. And as tough as it can sometimes be, helping your neighbor in their hour of need is what volunteer fire fighting is all about.

Dale responds to the call when it comes in. He has responded to car accidents, house fires, medical assistance calls and even a 747 crash and fire at the airport. Many of you will remember a report in the national news of a pharmacist who delivered a baby in the front seat of her car – that was Dale. The RCMP officer who also responded to the panicked call for help commented, “I have to commend Dale. For a guy delivering his first baby, you wouldn’t have known that last night...he acted extremely professional, like he had done this before.”

The mom was particularly grateful for Dale’s willingness to step up and calmly oversee the miracle of birth. She said that Dale, her now favorite fire fighter, made her feel comfortable and confident during the whole process. She commented, “He said he knew what he was doing and that was a big relief.”

The Nova Scotia College of Pharmacists is very thankful that there are community oriented people like Dale that are willing to volunteer their time and efforts on our behalf by putting themselves on call 24 hours a day to come to help those of us in need.

The Nova Scotia College of Pharmacists is pleased and proud to name Dale Copp as this year’s recipient of the Pfizer Consumer Health Care Bowl of Hygeia Award for Nova Scotia. He is truly an inspiration to us all.
Standards of Practice Updates

Pharmacist Drug Administration

Work on the “Standards of Practice: Drug Administration” is nearing completion. As reported in previous Bulletins, pharmacist drug administration legislation proposed by the NSCP has been approved by the provincial legislature. The associated regulations were recently completed by the NSCP and submitted to the provincial Cabinet for consideration. Once these regulations are approved and the Standards of Practice are in place, pharmacists will be legally authorized to administer drugs including vaccines by injection, in accordance with the Standards. The Standards require pharmacists to complete the Immunization Injection and Administration Training Program (IIATP) and CPR/ First Aid training, review the Standards and apply for the NSCP Drug Administration by Injection Permit. As well as significant education by the NSCP, the implementation of the Standards will involve pharmacists working closely with their partners in Public Health, where publicly funded vaccines are involved.

Pharmacist Prescribing

As pharmacists become more comfortable with prescribing activities, the NSCP continues to provide ongoing support and assistance to registrants through various means. For example, the NSCP provides an annual grant to Dalhousie’s Continuing Pharmacy Education (CPE) Division with the proviso that the Division provides Nova Scotia pharmacists with education and training that will align with the expanded scope of practice and the prescribing Standards of Practice. Dal CPE offered a series of educational programs at the refresher course in late October. These programs provided tools to assist pharmacists in continuing to build the necessary skills and competencies needed as they move into the role of prescriber. Pharmacists are encouraged to continue to read and become familiar with the Standards of Practice: Prescribing of Drugs by Pharmacists and related documents at: www.nspharmacists.ca/standards/prescribing-of-drugs-by-pharmacists.html.

Respect and Privacy for All

Pharmacies that provide methadone to patients with substance dependence must ensure that the pharmacy provides patients with a respectful environment in which to receive these pharmacy services. This includes setting aside a private area for observing the ingestion of methadone. While some patients may be comfortable taking their dose at the pharmacy counter in full view of other customers, some may prefer more privacy. Giving patients additional privacy to ensure their ingestion of methadone is not witnessed by other customers may help to protect them from stigmatization.

Pharmacists can determine the patient’s privacy preference during the initial conversation when the patient is enrolling in the program at the pharmacy. It is important to respect the patient’s wishes and to note their stated preference in their chart.

As a patient’s treatment progresses, their preference with respect to privacy of witnessed ingestion may change. Pharmacies should consider confirming the patient’s preference at set times, such as at the start of each new year, or when the patient progresses in their recovery so that they are authorized to receive the maximum carries (i.e. six per week).

It is important to remember that the interactions a patient has with their health care providers have a significant impact on their success in recovery.

Private Counseling Areas—Safety/Security

The NSCP has been fielding questions from pharmacies about renovations they intend to make to their patient counselling area so that it meets the requirements set out in the Standards of Practice: Prescribing of Drugs by Pharmacists (i.e. a separate room providing visual and sound barriers for privacy and a comfortable environment for the patient to share information).

Because the size, layout and traffic patterns vary between stores, the changes that are necessary to meet these requirements will also vary. However, when planning for the renovation, pharmacists are cautioned to ensure that the creation of a private counselling room doesn’t inadvertently result in a dispensary that no longer meets the requirement that it be inaccessible to the public. This may be the case if a private counselling room has a direct entrance into the dispensary that is not secure/lockable.

Pharmacists are reminded to submit a completed Application for Renovation of an Existing Pharmacy to the NSCP in advance of any changes.
Obligation to Ensure the Appropriateness of Therapy

Pharmacists are reminded that the Pharmacy Act of Nova Scotia obliges them to take reasonable steps to ensure that all therapy prescribed for patients is pharmaceutically and therapeutically appropriate for the patient. This means that, when a prescription is received by the pharmacist, steps must be taken to gather patient information and assess its relevance to patient care.

This information includes, but is not limited to: the prescriber’s diagnosis/the indication for the therapy, the seriousness of the symptoms, the history of the current condition, the patient’s desired outcomes, relevant patient demographics, relevant family medical history, relevant social history, the existence of relevant medical conditions, known risk factors, drug allergies or sensitivities, known contraindications, and other medications that the patient is taking.

Asking the appropriate questions in order to collect and assess important clinical information falls within the scope of a pharmacist versus a pharmacy assistant/technician. This critical step in the dispensing process must be considered carefully when developing dispensary workflow designs and processes. The workflow design that is approved by the pharmacy manager must not only allow for the above activities to occur, it must ensure that they always occur.

New and Improved: Professional Library Requirements

Pharmacists assume responsibility for information retrieval, evaluation and dissemination to ensure safe and effective provision of quality patient care and to promote health. In order to fulfill this role, pharmacists must have ready access to credible, objective, up-to-date professional resources. With the pharmacist’s scope of practice being expanded, the need for access to comprehensive, quality information for informed decision making is more important than ever. With this in mind, the NSCP recently reviewed and updated the document: Professional Library Requirements for Community Pharmacies in Nova Scotia.

Improvements include:
- A more robust therapeutics requirement (Therapeutics Choices and one other resource)
- A new Evidence Based Practice section
- The inclusion of more web links and electronic resources to enhance access to references
- The inclusion of certain handheld applications (iPharmacist®) as acceptable references
- The requirement that all pharmacies have complete internet (not just intranet) access
- Replacement of the Journals and Periodicals section with a recommendation that pharmacies subscribe to (free) journal abstracting services

Pharmacy managers are expected to comply with the revised requirements. Pharmacists are expected to be familiar with all library references available in their workplace. In so doing, they will have quick access to the best information available to serve the needs of their patients. The new document can be accessed on the NSCP website at www.nspharmacists.ca > Practice Resources.

Reminder of Responsibility when Reporting Narcotic and Controlled Drug Loss/shortages

When a pharmacy manager determines that there is a quantity of narcotic or controlled drugs that is missing from their inventory (e.g. subsequent to conducting a monthly narcotic reconciliation, after a known theft, etc.) they are required to report this loss or theft to the Office of Controlled Substances within 10 days (form can be accessed on the NSCP website under “Practice Resources”).

Pharmacy managers are reminded that the NSCP Narcotic Reconciliation Policy requires that this completed form also be faxed to the NSCP (Fax: 902-422-0885)
Faxed Prescriptions—Requirement for Signed Certification

The NSCP’s policy on the Facsimile Transmission of Prescriptions was developed in collaboration with the federal government’s Therapeutic Products Directorate. The Policy is designed to allow pharmacists and prescribers to use technology to better serve the patient while ensuring consistency with federal legislation regarding prescriptions. The College of Physicians and Surgeons of Nova Scotia is aware of this Policy.

The NSCP has learned that some prescribers and pharmacists are not complying with the Policy. Some prescribers are not completing the Prescriber Certification section of the approved fax form and/or are faxing prescriptions to pharmacies (and sometimes multiple pharmacies) and then giving the original prescription to the patient. Some pharmacies are enabling this activity, which is of serious concern to the College as there is evidence that as a result of prescribers and pharmacists not complying with the Policy, patients are having the same prescription order filled numerous times at multiple pharmacies.

In response to evidence that the public is being negatively affected by non-compliance with the Policy, the NSCP will monitor prescriptions that have been faxed to pharmacies. Collaboration with the College of Physicians and Surgeons of Nova Scotia and Health Canada’s Inspectorate will continue in order to ensure the public is not placed at risk.

Pharmacists are reminded that in order for a faxed prescription to be considered valid, not only must the prescription include the prescriber’s name, address, telephone number, fax number and signature, but also certification statements by the prescriber that:

i) the prescription represents the original of the prescription drug order,

ii) the addressee (i.e. pharmacy) is the only intended recipient and there are no others, and

iii) the original prescription will be invalidated by marking it in such a way that it cannot be reissued.

Exempted Codeine Products
Tracking, Recording, and Monitoring

The NSCP has received complaints from patients that some pharmacies are asking for their name when they request an exempted codeine product without providing an explanation as to the purpose of gathering this information. Their concern is that they don’t know why the information is being collected, how it will be used, and how it will be stored/protected.

Both the Supplemental Standards of Practice for Schedule II and III Drugs and the NSCP Sale of OTC Codeine Preparations Council Policy establish that pharmacists should document the sale of OTC codeine if appropriate. In keeping with best practice and to strengthen the pharmacist-patient relationship, when the pharmacist decides to document the sale, they should explain to the patient that the information is being gathered to ensure completeness of the patient profile and to monitor for safety and efficacy and further, that the information will be handled in a confidential manner.

The most effective manner to achieve this expected standard and ensure that the pharmacy complies with privacy legislation is to enter the information into the patient profile—including creating a profile for a patient that is new to the pharmacy. This not only enables the pharmacy to provide optimal care to the patient, but gathering, documenting and storing information using this process provides the same level of security and confidentiality as exists for all other patient records.

Providing Methadone Maintenance Treatment Services?

Pharmacies that provide Methadone Maintenance Treatment (MMT) services must notify the NSCP of this by submitting the Registration of Pharmacy as Providing Maintenance Treatment Services form and mailing or faxing it to the College (Fax: 902-422-0885). This form can be found as Appendix H of the Methadone Maintenance Treatment Services: Standards of Practice for Community Pharmacies in NS. Information from this registry will be used as required to provide other healthcare practitioners with information about which pharmacies provide methadone services so as to better serve patients requiring Methadone Maintenance Treatment.
Patients with permanent Atrial Fibrillation

Important changes to Multaq® monograph - Information on increased cardiovascular events associated with use of Multaq® in patients with permanent Atrial Fibrillation

Health Canada Advisories

Pharmacists, especially Pharmacy Managers, are reminded that critical health/drug advisories, warnings, and drug recalls are posted on the NSCP website homepage under “Safety Advisories”, as well as the Health Canada website.

It is the responsibility of every licensed pharmacists and certified dispensers to keep abreast of there safety advisories and to advise their patients where appropriate.
Pharmacy Technician Survey

Last month, the NSCP distributed a survey for completion by those pharmacy assistants/technicians currently in practice who would be eligible to pursue registration/licensure as a “registered pharmacy technician”. The purpose of this survey is to obtain data related to the regulation of technicians upon which pending and future policy decisions can be made and to facilitate optimal planning. We are pleased to report that to date we have received over 320 responses. Of those who responded to the survey, almost three-quarters (72%) indicated they would be likely/very likely to pursue regulation, with similar numbers to match the intent to take a “bridging program” (see article on Pharmacy Technician Regulation).

Pharmacy Technician Regulation

The NSCP’s initiative to regulate pharmacy technicians is on course. Comprehensive regulations enabling this authority are currently being developed by the NSCP and are nearing completion. It is the expectation that these proposed regulations, once submitted, will be approved by the provincial Cabinet in 2012. The NSCP continues to work diligently on the supporting framework - a summary of which can be found in the enclosed Annual Report.

The Nova Scotia Community College (NSCC) intends to conduct province wide information sessions in January to exchange information and gauge interest in a “bridging program”. A bridging program provided by a CCAPP-accredited educational institution is a registration requirement for applicants who are currently working as pharmacy assistants and who have not graduated from a CCAPP-accredited pharmacy technician training program. While there is currently no bridging program offered by any CCAPP accredited institution in Nova Scotia, the NSCP Council has agreed to recognize bridging programs offered by a CCAPP accredited institution outside the province as acceptable for meeting the bridging program requirement. Meanwhile, the NSCP will continue to lobby for local bridging programs.

What’s the latest on Cold Chain?

From time to time the NSCP receives questions regarding the preservation of Cold Chain. According to the Public Health Agency’s Vaccine Storage and Handling Guidelines for Immunization Providers, Cold Chain refers to the process used to maintain optimal conditions during the transport, storage, and handling of vaccines, starting at the manufacturer and ending with the administration of the vaccine to the client. The soon to be released NSCP Standards of Practice: Drug Administration will contain additional references to support pharmacists in accessing the best information on the subject.

Pharmacists handling vaccines should familiarize themselves with the Public Health Agency of Canada’s National Vaccine Storage and Handling Guidelines for Immunization Providers (2007). This valuable resource provides support regarding storage and handling protocols, equipment, temperature monitoring, vaccine management and shipping and information on storage troubleshooting. Pharmacies that handle vaccines should use these Guidelines to support them in the safe and appropriate handling of vaccines and other biologics.

Drug Scheduling Changes: NSAIDs Summary

The National Drug Scheduling Advisory Committee (NDSAC) has approved the following with respect to the scheduling of NSAIDS (excluding ASA and acetaminophen) on the Canadian market. The National Drug Schedules (which Nova Scotia references) have been amended accordingly.

- Ibuprofen and its salts containing 400 mg or less per oral dosage unit (when sold in package sizes of up to 18,000 mg) Unscheduled (no change)
- Ibuprofen and its salts containing 400 mg or less per oral dosage unit (when sold in package sizes exceeding 18,000 mg) Schedule III (from Unscheduled) EFFECTIVE FEB 17, 2012
- Naproxen sodium 220 mg per oral dosage unit (when sold in products labeled with a recommended maximum daily dose of 440 mg, and in package sizes of up to 6,600 mg) Unscheduled (no change)
- Naproxen sodium 220mg per oral dosage unit (when sold in products labelled with a recommended maximum daily dose of 440 mg, and in package sizes exceeding 6,600 mg) Schedule III (no change)
- Diclofenac diethylamine in preparations for topical use on the skin in concentrations of not more than the equivalent of 1% diclofenac Unscheduled (no change)
Learning from the Experience of Colleagues: Québec Court of Appeal upholds determination of Professional Misconduct

The following is a summary of a case which led to a finding of professional misconduct against a Quebec staff pharmacist and a pharmacist owner in 2001. The finding was appealed to the Quebec Court of Appeal this May, and the original ruling was upheld.

SCENARIO:

Initial patient contact
- Patient presents to the pharmacy with multiple prescriptions after experiencing rejection reaction post stem cell transplant.
- One prescription is for tapering high doses of prednisone: 75 mg x 7 days, then 60 mg x 7 days, then 50 mg x 7 days
- To avoid confusion for the patient, Pharmacist #1 decides to subdivide the prescription into three separate prescriptions.
- The first prescription is filled with 11 prednisone 50mg tablets with the directions “Take 1 ½ tablets with breakfast for 7 days”. Label indicates “No Refills” Auxiliary reads “This prescription cannot be refilled without physician authorization”.
- The balance of the prescription is logged on the computer as two more prescriptions (one week supply at a time).
- No clear proof was obtained that Pharmacist #1 properly explained the purpose of the medication and for the need to come back the following week to get more medication/continue treatment.

Subsequent contact with patient
- Two days later, patient’s spouse comes into the pharmacy to get advice on a product for his wife’s dry eyes. Pharmacist #2/owner recommends eye ointment and documents this in the patient profile. No mention of the prednisone prescription during this encounter.
- Patient finishes 7 day course of prednisone. The next day, the spouse brings in two new different prescriptions for his wife. Both are filled by Pharmacist #2/owner and documented in the patient profile. No mention of the prednisone prescription during this encounter.
- Two days later (three days after finishing the first week of the prednisone prescription), the spouse goes back to the pharmacy to pick up two other prescription refills for his wife. Once again, there is no mention of the prednisone prescription.
- Tragically, one day later (four days after finishing the first week of the prednisone prescription), the patient is readmitted to hospital with a diagnosis of acute rejection and dies two months later.

HIGHLIGHTS OF FINDINGS:
- Professional misconduct on the part of Pharmacist #1 who filled original prescription.
- Pharmacist #2/owner held accountable for error committed by staff pharmacist and also found guilty of professional misconduct as was the pharmacist on duty for the two subsequent visits to the pharmacy.
- Ruling appealed. Decision upheld by Court of Appeal. Significant sanctions were imposed.

COMMENTS OF THE COURT OF APPEAL JUDGE:
- Original order from the doctor, which included nine drugs, many of which were specific to the patient’s transplant, constituted a clear message for the pharmacist that this patient would need “special attention”.
- Filling the prescription in the manner that was chosen and entering it as three separate prescriptions with zero refills is ambiguous for the average person and does not serve to adequately inform the patient. In fact, the “No Refills” notations constitute misleading information.
- Pharmacist #1 is guilty of professional misconduct by not fulfilling his professional obligations in dispensing this medication and not properly counseling the patient on the proper use of the drug.
- Pharmacist #2/owner is held responsible for both the error of his staff pharmacist and the errors made by himself in not recognizing that this patient required special attention and that the second week of prednisone should have been dispensed. When making a notation in the patient profile with respect to the recommended OTC product, and when processing the two prescription refills, Pharmacist #2 should have noticed on the first page of the profile the two “on hold” prescriptions for prednisone.
- Although it was not until 2003 that the Quebec law stating that a pharmacist has an obligation to monitor a patient’s medication therapy came into effect, the judge reaffirmed that even before this date, this obligation existed. The pharmacy owner is responsible to have a system in place to ensure that there is appropriate follow-up after the initial dispensing of the prescription. The absence of such a system contributed to a ruling of professional misconduct on the part of the owner. The judge noted that “The rules of prudence and diligence always apply to the pharmacist as it does to all professionals”.

DISCUSSION:
- The practice of pharmacy has evolved from being drug focused to being patient focused.
- The judge in this case has confirmed and set a legal precedent that the practice of pharmacy is no longer simply the accurate distribution of drugs. Rather, pharmacists are expected to (and will be held accountable for) using the full scope of their knowledge and skills to optimally manage a patient’s drug therapy.
- While pharmacy support staff can assist the pharmacist, it is the pharmacist who is responsible to effectively review a patient’s profile, even when processing refills, and to take the necessary steps to ensure that the patient’s drug therapy needs are being met.
Annual Report 2010-2011

Accompanying this Bulletin is the 2010-2011 NSCP Annual Report. The report highlights the NSCP’s activities over the past year, particularly in its core business areas of registration and licensing, quality assurance, legislation and pharmacy practice standards, and professional accountability. It demonstrates the NSCP’s commitment to activities that support its mission to “govern the practice of pharmacy in Nova Scotia in the interest of the health and well being of the public”.

If you have any questions or comments, please feel free to contact the NSCP office.

Holiday Hours

Monday, Dec 26: Closed  
Tuesday, Dec 27: Closed  
Wednesday, Dec 28: Regular hours  
Thursday, Dec 29: Regular hours  
Friday, Dec 30: Regular hours  
Monday, Jan 2: Closed

As we reflect on the true spirit of the season, it is our hope that the past year has been good to you and that the year to come provides you, your family and friends with peace, happiness and good health!

~ the Council and Staff of the Nova Scotia College of Pharmacists

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