



Friday Five

April 5, 2019

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Council Meeting Updates

The College of Pharmacists of Manitoba Council (Council) met on March 25, 2019. Updates from this meeting are included below:

Practice Directions - Opportunity for Member Feedback

A Practice Direction is a written statement made by Council for the purpose of providing direction to members and owners about the conduct of their practice and pharmacy operations. Compliance with approved practice directions is required under *The Pharmaceutical Act*. As a component of the required review and assessment of practice directions at a minimum of every 5 years.

On March 25, 2019, Council approved the release of the following five amended practice directions for member feedback:

- Sale of NAPRA Schedule 2 Drugs
- Sale of NAPRA Schedule 3 Drugs
- Lock and Leave Component
- Transfer of Patient Care

Professional Development Opportunities

Opioid Replacement Therapy 101 Introduction to Clinical Practice

[April 25 & 26, 2019 \(Winnipeg\)](#)
[June 20 & 21, 2019 \(Thompson\)](#)
[September 13 & 14, 2019 \(Winnipeg\)](#)

[2019 Pharmacists Manitoba Conference](#)

April 12 to 14, 2019

Online Programs:

[Ordering Lab Tests for Manitoba Pharmacists](#)

Visit www.cphm.ca for more information on [Expanded Scope of Practice](#) training.

[Self-Limiting Conditions Independent Study Program](#)

Visit www.cphm.ca for more information on [Expanded Scope of Practice](#) training.

- Prescribing

Please review the draft amendments provide your feedback by email to feedback@cphm.ca by May 17, 2019.

For information on the consultation process and providing feedback, please review the [Policy Statement on Practice Directions](#).

Collaborative Practice Direction for Member Feedback – Inter professional Collaboration

The Interprofessional Collaboration Practice Direction was developed by nine healthcare regulators, including the College of Pharmacists of Manitoba. The purpose of this document is to prescribe that interprofessional collaboration be exercised by all regulated health professionals.

On March 25, 2019, Council approved the release of this Practice Direction for member feedback. The document can be found [here](#).

Please review this draft Practice Direction and provide your feedback by email to feedback@cphm.ca by May 17, 2019.

Updated Pharmacy Technician SPT Documents

On March 25, 2019, Council approved updates to the Pharmacy Technician Structured Practical Training documents – the manual, logbook and submission forms. Upon completion of the SPT program, both the technician-in-training and supervisor provide feedback and the SPT documents have been updated to reflect many of these recommendations. Suggestions were also solicited from hospital pharmacy staff to include additional learning activities specific to hospital practice. Below is a synopsis of some of the changes to the SPT documents:

Submission Forms - Applications that need to updated each year were removed and pages were re-aligned for ease of submission.

Manual – Links updated

All PD opportunities are listed on the College website under

[Upcoming Professional Development Opportunities](#)

Logbook -

- Links and resources have been updated and for convenience, a comprehensive resource page has been added.
- The Learner Pre-Rotation Self-Assessment was changed to include only competencies rather than learning activities similar to the pharmacist internship program.
- For ease of use, ratings and signatures for each learning activity were moved to directly below each learning activity.

Please access the [updated SPT documents](#) on the College website.

*If a technician-in-training began their SPT program before March 25, they can complete the program with the previous documents.

Amendments to Preceptor Application guidelines

In accordance with Section 20 of *The Pharmaceutical Act*, the approval of a preceptor falls under the responsibility of Council. Council approved all registered pharmacists to be preceptors, provided they are willing to supervise the internship and that they satisfy set guidelines established by Council. In June 2014, Council established set guidelines to be administered by the Registrar for the approval of preceptor applications from registered pharmacists.

On March 25, 2019, Council approved additions and amendments to the existing preceptor approval criteria in an effort to improve clarity in establishing a pharmacist's suitability as a preceptor.

The current established preceptor application approval guidelines include the following:

1. The person is not on the conditional register;
2. The person has not voluntarily surrendered his registration or license;
3. The person is not subject to an agreement pursuant to section 34(1)(f) of the *Pharmaceutical Act (Act)* in which the satisfaction of the terms stated therein remain outstanding;

4. The Registrar will review the person's involvement in any current/active complaints matter, and/or whether the person is the subject of an investigation;
5. The Registrar will review any decisions by the Complaints Committee within the past two (2) years for consideration;
6. The person has not been found guilty of an offence under section 54 of the *Act*, of which a Discipline order has been directed, pursuant to sections 54, 55, and 56 of the *Act*, within the past five (5) years;
7. The person has not been found guilty of an offence under section 54 of the *Act* for which there are outstanding terms of any order made by the Discipline Committee pursuant to sections 54, 55, and 56 of the *Act*;
8. The person has been licensed in the province of Manitoba for a minimum of one (1) year preceding the date of the application;
9. The person will not serve as preceptor for other immediate family members (including parents, children, husbands, wives, aunts, uncles, grandparents, grandchildren, sisters, brothers, and in-laws); and
10. The person agrees to provide time for the purpose of assisting the intern and ensuring the competencies of the internship manual are being assessed and met.

For more information on preceptors, including the application process and preceptor resources, please see the College webpage [here](#).

Results of Inducements Survey

In December 2017, College Council conducted a survey of pharmacists in Manitoba regarding inducements and loyalty programs in pharmacy practice. An inducement or loyalty program provides purchasers of goods or services from a business with an inducement such as a reward (may include a service), gift (may include cash or credit card), prize, cost-savings coupon, or points that may be used to receive an inducement.

Council has now requested that these results be

shared with the College membership. The survey results can be found [here](#).

University of Manitoba Opioid Survey

COLLEAGUES: WE NEED YOUR HELP IN A 10 MINUTE, ANONYMOUS SURVEY ABOUT OPIOID PRESCRIBING.

We are conducting an anonymous online survey of **pharmacists**, orthopedic surgeons, anesthesiologists, nurses and patients regarding opioid prescribing and misuse by patients after ambulatory surgery. The survey is designed to assess our perceptions about opioid misuse and the feasibility of potential solutions. Please click on the [link](#) below if you would like to participate.

Sincerely,

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Resources for Drug Shortages and Recalls/Withdrawals

As drug shortages and drug recalls/withdrawals become increasingly prevalent across Canada, providing patients with their needed medication therapy can be challenging, and options for alternative therapies scarce. Drug shortages and recalls can pose a risk to patient safety if not dealt with appropriately and in a timely manner. Pharmacists are in a unique position as front-line practitioners to provide guidance to prescribers, and patients often rely on pharmacists for direction and re-assurance in these situations. The following is recommended for further guidance:

- All pharmacists must stay informed of all current and anticipated drug shortages and discontinued products that may affect patient safety through the following resources:
 - [Manitoba Designated Drug Shortages - Claims Submission Procedure](#) is communication forwarded to all pharmacy managers on behalf of Manitoba Health, which includes information for claim submissions of drug shortages to DPIN. Pharmacy managers are responsible for informing their staff of the outlined procedures.
 - [Drug Shortage Canada](#) reports all current and upcoming drug shortages and discontinued drug products.
 - Notices from Health Canada (available for free subscription)
 - [MedEffect™ Canada e-Notice](#) are emails communicating the latest safety information about health product alerts, advisories and drug recalls as they become available
 - [Health Product InfoWatch](#) is a monthly publication with relevant information concerning marketed health products and their safety

It is important for pharmacists to understand that Health Canada issued recall notices do not always provide clear directives for pharmacists in terms of contacting patients affected by the drug recall. Pharmacist must employ their professional judgement in these situations, and if provided, follow the directives specifically outlined by their regulatory authority.

- The Canadian Pharmacists Association (CPhA) has published [Drug Shortages: A Guide for Assessment and Patient Management](#), which presents a systematic approach to assess the impact of drug unavailability and subsequent patient management.

It is imperative that pharmacies employ the use of a clear procedure when a drug recall is issued or a drug is listed as short from the manufacturer. Assigning the responsibility of maintaining and managing the drug

inventory to one pharmacy team member can often assist with proactively preventing interruptions to medication supplies. The pharmacy drug recall or shortage procedure must also include appropriate communication to all patients affected.

When communicating with prescribers, pharmacists should recommend therapeutic alternatives with equivalent doses to the short/recalled drug, rather than solely requesting an alternative. For drug specific therapeutic information and alternatives, the Compendium of Therapeutic Choices (CTC), Compendium of Pharmaceuticals and Specialties (CPS), and RxFiles are all excellent resources.

Communication with the patient and their family is imperative to ensure seamless transition between different dose strengths and therapeutically equivalent products. Patients must be informed immediately upon discovery of a drug shortage/recall that will impact them, and their prescriber must be consulted for collaborative discussion as well. Ideally, the least number of therapeutic changes and/or dose changes should be considered in order to reduce the risk of medication errors.

Deactivating Old Prescriptions

The practice direction '[Patient Profiles](#)', indicates that a patient profile must be prepared and kept current for each patient. In order to ensure patient safety and continuity of care, all pharmacy managers must ensure a system is established for deactivating or stopping a prescription on file, once a new prescription (in replacement) has been presented. As patients with chronic medical conditions may often have changes to their medication therapy or dosage regimens over time, using the most recent prescriptions for refill requests, while deactivating previously written prescriptions, including those with any refills remaining on them, is essential to ensuring patient safety. This is preferably done with notations to link the deactivated prescription to the newly presented prescription, and using additional notes on patient profiles as needed. Such notes can include, but are not limited to: the date of dose change or discontinuation, name of prescriber discontinuing the therapy, and reasons mentioned by the patient or

prescriber for the changes (e.g. adverse effect, unmet therapeutic goals, etc.) This practice can prevent dispensing of duplicate therapies and outdated doses. In addition, it is imperative that pharmacists communicate clearly with patients, both verbally and in writing, when any changes are made to their medication regimens, and such conversations are documented appropriately.

It is important for pharmacists to also be aware that prescribers most often provide prescriptions for a particular time frame (e.g. 6 months) with the expectation that the patient will return for follow-up, including a review of therapeutic outcomes, and to issue a new prescription. An example includes diabetic patients who are expected to return for follow-up blood work and therapeutic review. Once again, to ensure patients are compliant with their follow-up care, pharmacists must recognize the importance of utilizing the most current prescription, with the deactivation of previous prescriptions.

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The *Friday Five* e-bulletin is published by the **College of Pharmacists of Manitoba** and is forwarded to every licenced pharmacist and pharmacy owner in the Province of Manitoba. Decisions of the College of Pharmacists of Manitoba regarding all matters such as regulations, drug-related incidents, etc., are published in the *Friday Five*. The College of Pharmacists of Manitoba therefore assumes that all pharmacists and pharmacy owners are aware of these matters.

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