College of Pharmacists of Manitoba

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Practice Direction
Ensuring Patient Safety

~~Document Number: _____~~

1.0 Scope and Objective:

1.1 Expected Outcome

This document is a practice direction of Council concerning Ensuring Patient Safety and exists through the authority of The Pharmaceutical Regulation~~s~~ to *The Pharmaceutical Act* (Regulation) and *The Pharmaceutical Act*.

1.2 Document Jurisdiction (Area of Practice)

Compliance is expected from all licensed pharmacists in Manitoba as per Section 83 of the ~~Regulations to The Pharmaceutical Act~~Regulation.

1.3 Regulatory Authority Reference

Section 83 of the Regulation~~s to *The Pharmaceutical Act*~~ allows Council to create this practice direction.

2.0 Practice Direction

2.1 A pharmacist may only engage in practices for which they have scope and competence. Refer to section 18 of the -R~~r~~egulation.~~s~~

2.2 A ~~licensed~~ pharmacist manager is responsible for ensuring that patient safety is of primary consideration ~~considered~~ in all policies and procedures, that policies and procedures are updated when guidelines and processes change and that policy and procedure manuals meet the requirements of section 56 of the ~~r~~Regulation~~s~~ and as adapted to site specific requirements.

2.3 A ~~licensed~~ pharmacist is responsible for identifying and mitigating individual and systemic risk associated with factors known to contribute to dispensing errors and other safety issues and for discussing those identified risks with their manager.

~~2.2~~2.4 When gathering information relating to the patient and the drug therapy,

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a ~~licensed~~ pharmacist must consider~~s~~ the following:

~~2.2.1~~2.4.1 condition or symptom(s) to be treated;

~~2.2.2~~2.4.2 any previous history of complaint given;

~~2.2.3~~2.4.3 the length of present symptoms;

~~2.2.4~~2.4.4 current and relevant information regarding disease state(s), allergies and/or sensitivities;

~~2.2.5~~2.4.5 current medication use; and/or

2.4.6 other medications or therapies previously tried.

~~2.2.6~~2.4.7 patient financial considerations

~~2.3~~2.5 A ~~licensed~~ pharmacist must determine if there is an actual or potential drug related problem, specific to the patient and the drug therapy, which may include but is not limited to:

~~2.3.1~~2.5.1 the patient requires a drug product but is not receiving it;

~~2.3.2~~2.5.2 the patient is taking or receiving the wrong drug product;

2.5.3 the patient is taking or receiving too much or too little of the right drug product;

~~2.3.3~~2.5.4 the patient is receiving a duplicate drug or therapy

~~2.3.4~~2.5.5 the patient fails to take or receive a drug product or is taking or receiving a drug product inappropriately;

~~2.3.5~~2.5.6 the patient is experiencing an adverse reaction to a drug product;

~~2.3.6~~2.5.7 the patient is experiencing a drug interaction including drug-drug, drug-food, drug-laboratory test, drug-disease, or drug-blood product;

~~2.3.7~~2.5.8 the patient is taking or receiving a drug product for no medically valid indication; or

~~2.3.8~~2.5.9 the current drug therapy is not achieving the desired outcome.

~~2.4~~2.6 Where an actual or potential drug-related problem has been identified, the licensed pharmacist must take appropriate action(s) to address the problem, collaborating with the patient and prescriber where appropriate. Actions may include but are not limited to one or more of the following:

2.6.1 ~~-~~gathering additional information from the patient, the patient's health record, the patient's designate or another health care professional;

~~2.4.1~~2.6.2 responding appropriately to intervention codes from the Drug Programs Information Network (DPIN).

~~2.4.2~~2.6.3 implementing a plan to monitor the drug related problem and to follow up when required;

~~2.4.3~~2.6.4 assessing the patient's understanding and willingness of involvement in the plan and its outcomes;

~~2.4.4~~2.6.5 reducing the drug related problem by adapting a prescription as described under section 68(3) of the ~~the~~ Regulation~~s to *The Pharmaceutical Act*, Section 68(3)~~;

~~2.4.5~~2.6.6 accessing available lab values or ordering specific laboratory tests in consultation with the prescriber;

~~2.4.6~~2.6.7 advising the patient, and the prescriber, where appropriate, about the drug related problem and discuss an alternative action, where appropriate;

~~2.4.7~~2.6.8 entering into a patient-care relationship with another health care professional to manage the patient's drug therapy;

~~2.4.8~~2.6.9 refusing to dispense or sell the drug or product to the patient; or

2.6.10 reporting an adverse reaction to the Canadian Adverse Drug Reaction Monitoring Program.

2.7 Where a pharmacist has become aware of an individual that is receiving a drug that is excessive or inconsistent with good medical care and where the pharmacist has not been able to solicit satisfactory response through consultation with the prescriber(s), the identity of the patient and circumstance is to be forwarded in writing to the office of the College of Pharmacists.

2.8 Documentation

~~Documentation~~

All action(s) taken must be clearly ~~shall be~~ documented in the patient's health record.

3.0 Compliance Adjudication

All documentation must be readily accessible and open to regulatory review.

4.0 Appendices

Not applicable

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A Practice Direction is a written statement of a regulatory position made by Council for the purposes of giving direction to members and owners about the conduct of their practice or pharmacy operations.

A Practice Direction carries similar legal weight to a Regulation under the Act and compliance by all Manitoba pharmacists and pharmacy license holders is expected.

The process for development, consultation, implementation, appeal and review is been published on the College website.

Development Source:	Standards of Practice Committee
Regulatory Reference:	Section 83, *The Pharmaceutical Regulations*
Consultation Close:	
Authorized by Council:	
Effective Date:	Draft
Revised:	
Review Due:	