



Practice Direction Patient Counselling

1.0 Scope and Objective:

1.1 Expected Outcome

This document is a practice direction by Council concerning implementation of concept of patient counselling through the authority of *The Pharmaceutical Regulations* to *The Pharmaceutical Act* and *The Pharmaceutical Act*.

1.2 Document Jurisdiction (Area of Practice)

- 1.2.1 Compliance is enabled through the collaboration with all practitioners and patient counselling can be provided by all licensed pharmacists, academic registrants or interns.
- 1.2.2 Pharmacy students may perform patient counselling, but only under the direct supervision of a licenced pharmacist.

1.3 Regulatory Authority Reference

Clause 42{3}{j}{ii), subsection 56{1}1., and s. 73 of the Regulation to the Act empowers Council to create this practice direction.

2.0 Practice Direction

- 2.1 Patient counselling must only be done by a licenced pharmacist, an academic registrant, or an intern.

Circumstances in which a dialogue is required

- 2.2 A licenced pharmacist, an academic registrant or an intern must enter into a dialogue with a patient:
 - 2.2.1 when a Schedule I drug is dispensed to a patient, or the patient's agent
 - 2.2.2 when a Schedule II drug is sold to a patient, or the patient's agent
 - 2.2.3 When other non-prescription drugs, medical devices, and other items of clinical significance are sold to a patient, as appropriate
 - 2.2.4 if the patient requests health-related information
 - 2.2.5 if, in the licenced pharmacist's professional opinion, a dialogue is required to:
 - 2.2.5.1 provide the patient with sufficient information to enable the patient to receive the intended benefit of the drug therapy; or
 - 2.2.5.2 avoid, resolve or monitor a drug therapy problem.
- 2.3 When a patient requests a Schedule II or III product, the licenced pharmacist, academic registrant, or intern must collect information to assess the patient's knowledge and needs before providing advice.

- 2.4 A licensed pharmacist, academic registrant, or intern must be available and accessible to a person who needs to self-select a Schedule III drug.
- 2.5 When a licenced pharmacist, academic registrant, or intern counsels a patient, or the patient's agent, the dialogue must be in person unless it is not practical for the patient.
- 2.6 When a patient has requested delivery of their medication, the licenced pharmacist, academic registrant, or intern must make all reasonable attempts to contact the patient directly.
- 2.7 If a patient identifies an agent to receive their medication the licenced pharmacist, academic registrant, or intern must use their professional judgment regarding whether it may be appropriate to provide counselling through the patient's agent or whether it would be more appropriate for the licenced pharmacist, academic registrant, or intern to contact the patient by telephone to provide counselling or as described under section 2.8.
- 2.8 When direct verbal communication is not possible in advance of dispensing, written information must be provided with the dispensed medication.
- 2.9 Patient counselling must be done in a manner which respects the patient's right to privacy.
- 2.10 Despite 2.2, a communication or dialogue with a patient may not be required if the drug being dispensed or sold will
 - 2.10.1 only be administered by or under the supervision of a regulated health professional acting within the scope of their practice, or
 - 2.10.2 be dispensed to an inpatient of a hospital.

Dialogue to be specific to the patient

- 2.11 The licenced pharmacist, academic registrant, or intern must:
 - 2.11.1 focus the dialogue on the particular patient's condition and needs,
 - 2.11.2 assess the patient's level of understanding, and
 - 2.11.3 endeavour to respond to the patient at the appropriate level.

Required elements of the dialogue when a drug is dispensed or sold to a patient for the first time

- 2.12 The dialogue under 2.2.1 and 2.2.2 must:
 - 2.12.1 confirm the identity of the patient,
 - 2.12.2 identify the name and strength of the drug being dispensed,
 - 2.12.3 identify the purpose of the drug,
 - 2.12.4 provide directions for use of the drug including the frequency, duration and route of therapy,
 - 2.12.5 identify the importance of compliance and the procedure if a dose is missed,
 - 2.12.6 discuss common adverse effects, drug and food interactions and

- therapeutic contraindications that may be encountered, including their avoidance , and the actions required if they occur,
- 2.12.7 discuss activities to avoid,
- 2.12.8 discuss storage requirements,
- 2.12.9 provide prescription refill information,
- 2.12.10 provide information regarding how to monitor response to therapy,
- 2.12.11 provide information regarding expected therapeutic outcomes,
- 2.12.12 provide information regarding when to seek medical attention, and
- 2.12.13 provide other information unique to the specific drug or patient.

A licensed pharmacist, an academic registrant, student (while under direct supervision) or an intern must use reasonable means to comply with the provision of the information listed 2.12.1 through 2.12.13 for patients or their representatives who have language or communication difficulties.

- 2.13 If a drug-therapy problem is identified during the patient counselling, a licensed pharmacist, academic registrant, or intern must take appropriate action to resolve the problem.

Professional judgment to guide licenced pharmacist in other circumstances when a dialogue is required

- 2.14 For repeat and refill prescriptions, the licenced pharmacist, academic registrant, or intern may exercise professional judgment as to the content of the dialogue. However, licenced pharmacists, academic registrant, or intern are encouraged to ask specific questions regarding changes to dosage regimens, compliance, efficacy and the presence of adverse effects.

Use of written materials

- 2.15 A licenced pharmacist, academic registrant, or intern must provide written information to a patient to enhance understanding about the patient's drug therapy, unless it is deemed by the licenced pharmacist that it is not in the best interests of the patient or written materials are not available. Licenced pharmacists, academic registrants, or interns must be familiar with the content of the information provided. When reviewing the drug information leaflet with the patient, the licenced pharmacist should discuss the information pertinent to the patient or any information that may be missing and details, such as side effects which may cause patient concern.

3.0 Documentation

- 3.1 Patient counselling must be documented and the information contained in the record would be dependent upon the judgment of the pharmacist performing the counselling. Any follow-up required should be noted.
- 3.2 If the patient refuses to participate or fails to respond under section 2.6 in patient counselling, the licenced pharmacist, academic registrant, or intern

must ensure that the refusal or failure to respond is documented in the record.

4.0 Compliance Adjudication

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

5.0 Appendices

Not applicable

A College Practice Direction is a written statement made by Council for the purposes of giving direction to members and owners about the conduct of their practice or pharmacy operations. Compliance with practice directions is required under the Pharmaceutical Act.

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

Development Source:	Standards of Practice Committee
Regulatory Reference:	Clause 42{3}{j}{ii), ss56{1}1., s.73 <i>The Pharmaceutical Regulations</i>
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