

In
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Patients embrace pharmacists' new role

by Alison DeLory

Overall acceptance of pharmacists' recently expanded role in New Brunswick, which gives them authority for continued care prescribing, has been "significant," says Paul Blanchard, executive director of the New Brunswick Pharmacists' Association (NBPA). "The public has been ready for this change for some time."

Amendments to the Pharmacy Act enabled October 30 give the province's pharmacists more responsibility for medication management. A \$100,000 campaign of print and radio ads helped educate people that pharmacists could now replace, extend and renew their existing prescriptions. In the transition stage, however, "Pharmacists are taking the time to explain to people when they can help them, and when it is more appropriate for them to see their physician," says Blanchard. Overall, pharmacists have about five minutes to spend with each patient, says Blanchard, adding that when situations exceed this time frame because of their complexity, it is likely pharmacists will refer patients back to their physicians.

This fall, the NBPA and New Brunswick Pharmaceutical Society (NBPhS) held regional meetings to explain the changes—which also allow pharmacists to issue new prescriptions for pre-existing

conditions in emergency situations and alter prescriptions to accommodate special needs. Blanchard reports that while pharmacists expressed concerns about time management, unreasonable public expectations and third-party insurers' reaction, they have responded positively and thus far, find the changes, "enabling, positive and a time saver."



Ads paved the way to consumer acceptance

Getting doctors on-side was not overlooked. Realizing that for the changes to be effective there had to be collaboration with all stakeholders, the NBPA and NBPhS consulted with the medical college and professional association. "We have a good working relationship with the doctors," Blanchard says. "Doctors want to make better use of pharmacists."

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IN NOVA SCOTIA, the College of Pharmacists tabled draft legislation at its council meeting in November to give pharmacists more responsibility for medication management. Registrar Susan Wedlake says although these are preliminary proposals, they include pharmacists adapting prescriptions by choosing dose or regimen or based on test results, emergency prescribing, administering vaccines, and prescribing schedule II and III drugs—all decisions pharmacists will make in the best interests of the patient.

The college expects feedback from council members within a month, and after consulting with doctor and government stakeholders will forward the new regulations to cabinet for approval. "There's no steep learning curve or huge barriers in terms of education on the part of pharmacists. Council really does believe everyone is going to benefit from this. Patients will get improved access and high-quality, safe health care. Also, it will help the workload for physicians. We are so convinced we want to move forward quickly."

IN P.E.I., a legislative amendment that would give pharmacists the ability to renew certain prescriptions for known patients is expected to pass any day. Pharmacy Board registrar Neila Auld says it could be the first of a number of changes to come. She would like pharmacists to be able to prescribe schedule II and III drugs so eligible patients could get drug plan coverage. "Down the road [P.E.I. pharmacists could be] adapting prescriptions, changing doses, those sorts of things," Auld says.

P.E.I. has applied for its legislative amendment without seeking doctors' input first. "It's not a collaborative care agreement," Auld said according to the College of Physicians and Surgeons act, doctors cannot delegate any of their responsibility, including the authority to prescribe. "We said okay, we'll go out on our own," said Auld. Although P.E.I. doctors have expressed concern, Auld remains convinced: "In the overall picture the profession is using their skills better, the healthcare system is using professionals better and the patient gets easier access to their chronic medications."

IN NEWFOUNDLAND AND LABRADOR, pharmacists have been talking among themselves and with doctors about taking on more responsibility for medication management. Pharmacy Board secretary-registrar Don Rowe is careful to say pharmacists will not seek authority to "prescribe"—a red flag word that people interpret differently. Rowe will, however, be drafting protocol to allow pharmacists to: provide continuation of care (extending existing prescriptions), dispense emergency supplies, adapt existing prescriptions and prescribe schedule II and III drugs. "These are things pharmacists are competently already doing all the time, technically illegally," Rowe says.

Talking with doctors' groups, Rowe says they find the proposed changes "reasonable, and in the patient's interest." Rowe, however, says Newfoundland is the last province not to accept out-of-province prescriptions and it is his priority to have that addressed first.

—Alison DeLory