



WHAT WE HEARD

PROPOSED *PHARMACY PROFESSION
REGULATIONS* UNDER THE *HEALTH AND SOCIAL
SERVICES PROFESSIONS ACT*

DECEMBER | 2024



Une version française de ce document est disponible.

K'áhshó got'jne xadā k'é hederi Ɂedjht'ě yerinowę ni dé dúle.
Dene Kádá

ʔerih't'ís Dēne Sų́lné yatı t'a huts'elkēr xa beyáyatı theɁą Ɂat'e, nuwe ts'ēn yóftı.
Dēne Sų́lné

Edı gondı dehgháh got'je zhaté k'ěé edat'éh enahddhę nıde naxets'é edahfı.
Dene Zhaté

Jii gwandak izhıı ginjik vat'atr'ijahch'uu zhit yinothan jı', diits'at ginokhıı.
Dinjii Zhu' Ginjik

Uvanittuaq ilitchurisukupku Inuvialuktun, ququaqluta.
Inuvialuktun

Ć'ıdł nıń'ıbđł ĀłłJAŕł Δıđıŕł'ıŕıŕı, đđł'ıđł đđ'ıđł'ıđł.
Inuktitut

Hapkua titiqqat pijumagupkit Inuinnaqtun, uvaptinnut hivajarlutit.
Inuinnaqtun

kıspin ki nitawihtın ē nıhıyawihk ōma ācimōwin, tipwāsinān.
nēhıyawēwin

Tıjchq yatı k'ěè. Dı wegodı newq dè, gots'o gone de.
Tıjchq

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Executive Summary

Introduction

As integral members of the health care team, pharmacists and pharmacy technicians ensure that the medications prescribed for their clients are safe, appropriate, and effective, while providing education, guidance, and treatment to optimize their clients' health outcomes. The scope of practice for pharmacists in Canada has grown significantly over the last two decades and has improved public access to, and quality of, health services.

To ensure that residents of the Northwest Territories (NWT) have greater access to health services, enable pharmacists in the NWT to practice to their full scope, improve the recruitment and retention of health professionals, and to better align with the regulation of pharmacists in the rest of Canada, it is necessary to update the existing regulatory framework for pharmacists in the NWT, primarily by expanding the scope of practice of pharmacists.

From July 29 to August 30, 2024, pharmacists, Indigenous governments, stakeholders, and residents of the NWT were invited to provide comments and feedback on the [“Proposed Pharmacy Profession Regulations under the Health and Social Services Act: Discussion Paper”](#) (Discussion Paper). The Discussion Paper set out changes to the regulatory framework under consideration by the Department of Health and Social Services (the Department). The Department identified five key elements to serve as an outline for the proposed changes and to help respondents navigate the proposed changes to the regulatory framework.

Key changes being proposed include:

- Regulating pharmacy technicians
- Initiating prescriptions
- Adapting prescriptions
- Ordering and interpreting laboratory tests and conducting and interpreting point of care tests
- Administering vaccines and medications via injection and inhalation

Objective

The Department is proposing to move the regulation of the pharmacy profession under the *Health and Social Services Professions Act* (HSSPA), an “umbrella” Act that came into force in March 2022. This transition aims to modernize regulation, harmonize the scope of practice with national standards, and fulfill the GNWT's goal of unifying various health and social services professions under a single law. This will support improved access to medical services, aligns the NWT with national standards, and broaden the scope of practice for pharmacists.

The purpose of the public engagement was to gather input about the proposed *Pharmacy Profession Regulations* and how changes to the regulatory framework could best support the profession of pharmacy and improve access to health care in the NWT.

Methodology

Materials for the public engagement were designed to elicit engagement and feedback on the proposed key elements for the regulation of pharmacists under the HSSPA, including an expanded scope of practice for pharmacists in the NWT.

The following materials were developed and made available to the public on the [GNWT's Have Your Say](#) website:

- Proposed *Pharmacy Profession Regulations* under the *Health and Social Services Act*: Discussion Paper; and
- National Association of Pharmacy Regulatory Authorities' (NAPRA):
 - [Scope of Practice for Pharmacists in Canadian Jurisdictions](#); and
 - [Scope of Practice for Pharmacy Technicians in Canadian Jurisdictions](#)

Results

From July 29 to August 30, 2024, the Department sought input and feedback from Indigenous governments, the public, service delivery partners, and stakeholders on the proposed changes outlined in the Discussion Paper. In total, there were 24 written submissions received.

While some responses did not provide feedback specific to the proposed changes, all comments have been summarized in this report.

Respondents identified support for some of the proposed changes, as well as areas of concern. Common themes included:

- Support for regulating pharmacy technicians in the NWT;
- Concern that the proposed changes will be extremely costly for the health and social services system and difficult to implement for the pharmacists;
- Potential issues were raised with respect to allowing pharmacists to initiate prescriptions and order and interpret laboratory and point of care tests, such as: adding to the disjointed and episodic care in most parts of the NWT, the financial conflict of interest in prescribing and selling medications, overloading the laboratory services, and ordering unnecessary laboratory testing; and
- Support for the proposal to allow pharmacists to administer vaccinations and other medications by injection or inhalation.

Background

The existing NWT *Pharmacy Act* came into force in 2007. While pharmacists are currently regulated under the *Pharmacy Act*, the Department is proposing to move the regulation of the pharmacy

profession under HSSPA, an “umbrella” Act that regulates several different health and social services professions.

Each profession will have their own regulation under the HSSPA that covers the specific registration requirements related to each profession, including but not limited to, scope of practice, standards of practice and codes of ethics, protected titles, training, education, and continuing competency.

Bringing pharmacists under the HSSPA will support:

- the modernization of the regulatory framework and consistency with the other professions already regulated under the HSSPA;
- a scope of practice that is more in line with the provincial pharmacy regulatory authorities;
- providing NWT residents with more options to meet their health care needs;
- the better utilization of pharmacists’ skills and abilities; and
- the Department’s intention with the HSSPA to work towards bringing all currently regulated health and social services professions under a single umbrella statute.

Public Engagement

Engagement on the proposed changes took place between July 29 and August 30, 2024, when the [Discussion Paper](#) was made available on the GNWT’s website. A snapshot of the scope of practice for pharmacists and pharmacy technicians in Canada, as developed by the National Association of Pharmacy Regulatory Authorities (NAPRA), was posted as part of the Discussion Paper (Appendix A and Appendix B) as a visual to further support respondents in providing feedback.

The goal of the engagement was to solicit feedback from Indigenous governments, pharmacists, stakeholders, and NWT residents on the proposed *Pharmacy Profession Regulations*.

This report provides a summary of the feedback received. The views represented in this report reflect the priorities and concerns of respondents. Responses should not be construed as representative of the Department’s position or views. Conclusions or recommendations based on the concerns raised are not provided.

The feedback from this engagement, as summarized in this report, will be considered by the Department in developing the proposed *Pharmacy Profession Regulations*.

What We Heard

The Department requested feedback on the Discussion Paper, which provided:

- An overview of the current scope of practice of pharmacists;
- A list of the changes to the regulatory framework under consideration by the Department for the proposed *Pharmacy Profession Regulations*, organized into key elements; and
- Questions for consideration pertaining to each key element.

See Appendix A for a list of questions for the proposed changes to the regulatory framework for the proposed *Pharmacy Profession Regulations*.

The Department received 24 written submissions from:

- One (1) Indigenous government;
- Seven (7) pharmacists;
- Nine (9) medical professionals; and
- Seven (7) members of the public.

Summaries of the responses are provided below and are organized by key element as proposed in the Discussion Paper. General responses that are not specific to the key elements are also included below.

This report provides a summary of comments received during the engagement period only. Any additional feedback received following the engagement period will still be considered by the Department when moving forward with this work.

In times of constrained health care resources, it is important to note that the Department's main objective is to modernize the legislative framework for the regulation of pharmacy to better align with the rest of Canada. The Department is seeking to enhance the public's choice in accessing healthcare by allowing pharmacists to practice to their full scope. The expansion of scope of practice for pharmacy professionals is not viewed as the answer to the access problem at the primary care level, but as one of many steps required to improve overall access to healthcare and choices available to residents.

In times of constrained health care resources, it is important to note that the Department's main objective is to modernize the regulatory framework for the pharmacy profession to better align with the rest of Canada. The Department is seeking to enhance the public's choice in accessing healthcare by allowing pharmacists to practice to their full scope. The expansion of scope of practice for pharmacy professionals is not viewed as the answer to the access problem at the primary care level, but as one of many steps required to improve overall access to healthcare and choices available to residents.

General Responses

Expanded Scope of Practice

- The Department needs to ensure proper tools are in place and pharmacists are compensated fairly for the extra time it will take to accomplish tasks associated with the expanded scope of practice.
- Regulating pharmacy technicians will bring new job opportunities to the North.
- It would be better to equip those with the necessary training and skills to diagnose and treat with the tools and time they need to be able to do their job well, rather than venture into this

new territory, which they would argue has not turned out well in other jurisdictions that are being used as examples.

Financial Interests and Associated Costs

- Concerns were raised over pharmacists that own pharmacies and that their views will be slightly biased, as broadening the scope of practice could lead to an increase in revenue.
- Using expansion of scope to attempt to solve an access problem at the primary care level will only shift costs to the private sector, increase overall costs, and further fragment the system, and not improve care for patients.
- Pursuing expansion of pharmacist scope is likely to be a costly endeavor that will not reduce wait time nor increase access to care that is needed.

Improving Patient Access to Care

- Changes made to modernize the regulation of pharmacists, including the regulation of pharmacy technicians in the NWT, is concerning as it will cause a misguided hope that this can help fix primary care access.
- There are better ways to improve patient access to care; front-line clinical staff have continued to provide feedback to management and leadership about how this can be accomplished.
- The GNWT needs to work towards putting a proper health network system in place to make the provision of these expanded scope functions easier, effective, and part of an integrated patient information system.

Engagement Process

- There were requests from respondents to have the questions made available in an electronic survey format.
- There was interest in this topic but having it delivered in the format was too time consuming to fill out.

Specific Responses on the Proposed Key Elements

Regulation of Pharmacy Technicians

- There was general support to regulate pharmacy technicians in the NWT as they will have their own scope of practice, focusing on technical aspects of the job, that will free up the pharmacists' time to allow them to conduct more clinical work and focus on patient care.
- Regulating pharmacy technicians ensures they receive standardized minimum training and recognizes and differentiates them from other undertrained staff that may also work within a pharmacy.

- One respondent did not support regulating pharmacy technicians as this would create another layer of red tape/bureaucracy, without necessarily improving safety/care for patients as pharmacy technicians are already supervised.

Initiating Prescriptions

- There was support for pharmacists being able to initiate prescriptions for a limited list of conditions, including minor ailments, as there are many conditions that pharmacists are uniquely situated to perform initial management of, which means that the time of physicians and other practitioners can be saved for more complicated aspects of those conditions (treatment non-responsive, moderate-severe adverse drug reaction, etc.).
- Authorizing pharmacists to initiate prescriptions would help offload primary care/same day/ER visits for minor ailments. The public would like to see a list of ailments they are authorized to prescribe for.
- Respondents raised concerns regarding the inherent conflict of interest that exists for any health professional (in this case, pharmacists) who financially benefit from a drug they prescribe and sell, as well as the pharmacists' ability to assess a patient fully, especially considering they do not have access to the patient's full medical history and file.

Adapting Prescriptions

- Respondents voiced their support that pharmacists should be authorized to adapt prescriptions as it would:
 - Decrease the quantity of prescription faxes physicians get back from pharmacists with small errors on them;
 - Save effort in contacting the prescriber and prevent treatment delays;
 - Allow pharmacists to switch the medications to a liquid form to improve compliance, and switch to a generic substitute, which can be important for those paying out of pocket; and
 - Assist in situations where medications need to be switched to an alternate in the event of drug shortages.
- Concerns were raised that adapting a physician or nurse practitioner's prescription without consultation with the prescribing practitioner would not be appropriate, as the practitioner prescribed the medication with consideration of the patient's presenting complaint, medical history, medications on file, and intentionally completed the prescription as such.

Ordering and Interpreting Laboratory Tests and Conducting and Interpreting Point of Care Tests

- There was support for pharmacists to order and interpret laboratory results and conduct and interpret point of care testing, such as simple based POCT tests like influenza and Strep A, as

this may lead to timely treatment and avoid lengthy waits in the ER or delayed appointments through primary health care.

- Authorizing pharmacists to order and interpret laboratory tests and conduct and interpret point of care tests would ensure that patients are taking or injecting the appropriate dosage. If not, pharmacists can advise the prescriber to modify the therapy. This exemplifies the circle of care and collaboration between clinics and pharmacies. Revising regulations is in the best interest of our patients and optimizing drug therapies.
- Many respondents raised concern that authorizing pharmacists to order and interpret laboratory tests could lead to over utilization on our laboratory services that are already overloaded. Adding potentially unnecessary laboratory testing from a pharmacist could create further burden on the system.

Administering Vaccines and Medications via Injection and Inhalation

- Many respondents were in support of authorizing pharmacists to administer vaccinations and medications via injection or inhalation, as this would help with herd immunity, offload public health and primary care, and allow the public better access, including evenings and weekend access.
- Administering vaccines is a helpful skill that pharmacists in other jurisdictions have provided, especially during flu and COVID vaccination times; however, vaccines that have more specific criteria and comorbidities to review, such as pneumococcal vaccines or childhood vaccines, are best left to public health and clinicians to monitor eligibility and administer, ensuring appropriate document of timing of administration.
- One respondent did not see any benefit to allowing pharmacists to administer vaccines and medications and felt that this would lead to inaccurate records of vaccinations.

Next Steps

The public engagement process represents the beginning stages of proposing changes to the regulatory framework for the pharmacy profession. The results of the public engagement, along with cross-jurisdictional reviews and additional policy research will inform the *Pharmacy Profession Regulations*.

APPENDIX A

Regulating Pharmacy Technicians

1. Do you think there is value in regulating pharmacy technicians in the NWT?
 - a. If yes, why?
 - b. If no, why not?

Initiating Prescription Drug Therapy

1. Do you think Pharmacists in the NWT should be authorized to initiate prescriptions (excluding the prescribing of controlled substances)?
 - a. If yes, why?
 - b. If no, why not?
2. Do you think pharmacists should be authorized to initiate prescriptions for minor ailments only (minor ailments are non-life threatening and include conditions such as eczema, acne, and lice)?
 - a. If yes, why?
 - b. If no, why not?

Adapting Prescriptions

1. Do you think pharmacists in the NWT should be authorized to adapt prescriptions?
 - a. If yes, why?
 - b. If no, why not?

Ordering and Interpreting Laboratory Tests and Conducting and Interpreting Point of Care Tests

1. Do you think pharmacists in the NWT should be authorized to order and interpret laboratory tests?
 - a. If yes, why?
 - b. If no, why not?
2. Do you think pharmacists in the NWT should be authorized to conduct and interpret point of care tests?
 - a. If yes, why?
 - b. If no, why not?

Administering Vaccines and Medications via Injection and Inhalation

1. Do you think pharmacists in the NWT should be authorized to administer vaccinations?
 - a. If yes, why?

- b. If yes, which ones?
 - c. If no, why not?
2. Do you think pharmacists in the NWT should be authorized to administer other medications by injection (e.g., Humira for autoimmune conditions) or inhalation (e.g., inhalers for asthma or COPD)?
- a. If yes, why?
 - b. If yes, which ones?
 - c. If no, why not?