COMMUNITY PHARMACIST REVIEW

Patient Identification Verification

Reference	Requirement(s)
PODSA Bylaws s.36	A registrant must take reasonable steps to confirm the identity of a patient, patient's representative, registrant or practitioner before providing any pharmacy service that requires accessing, using or disclosing of patient personal health information.
PPP-54 Policy Statement #2	Where a patient or patient's representative is personally known to the registrant, the registrant may positively identify the patient or patients' representative. In cases where the patient or patient's representative is not known to the registrant, positive identification is best achieved by viewing one piece of primary identification or two pieces of secondary identification. As a best practice, these steps should be documented.

PharmaNet Profile Check

Reference	Requirement(s)
HPA Bylaws Schedule F Part 1 s.6(5)(b)	A full pharmacist must review patient personal health information for drug therapy problems, therapeutic duplications and other potential problems.
HPA Bylaws Schedule F Part 1 s.11(4)	A full pharmacist must review the patient's personal health information stored on the PharmaNet database before dispensing a drug and take appropriate action if necessary with respect to any concern regarding the appropriateness of the drug or any drug therapy problem.

Counselling

Reference	Requirement(s)
HPA Bylaws Schedule F Part 1 s.6(5)(c)	A full pharmacist must consult with patients concerning the patient's drug history and other personal health information
HPA Bylaws Schedule F Part 1 s.6(5)(d)	A full pharmacist must consult with practitioners with respect to a patient's drug therapy.
HPA Bylaws Schedule F Part 1 s.12(1)	A full pharmacist must consult with the patient or patient's representative at the time of dispensing a new or refill prescription in person or, where not practical to do so, by telephone.
HPA Bylaws Schedule F Part 1 s.12(4) and (5)	The pharmacist/patient consultation for a **new prescription** must include: (a) confirmation of the identity of the patient, (b) name and strength of drug, (c) purpose of the drug, (d) directions for use of the drug including the frequency, duration and route of therapy, (e) potential drug therapy problems, including any avoidance measures, and action recommended if they occur, (f) storage requirements, (g) prescription refill information, (h) information regarding (i) how to monitor the response to therapy, (ii) expected therapeutic outcomes, (iii) action to be taken in the event of a missed dose, and (iv) when to seek medical attention (j) issues the pharmacist considers relevant to the specific drug or patient. The pharmacist/patient consultation for a **refill prescription** must include: (a) confirmation of the identity of the patient, (b) name and strength of drug, (c) purpose of the drug, (d) directions for use of the drug including frequency and duration, (e) whether the patient has experienced a drug therapy problem.
HPA Bylaws Schedule F Part 1 s.12(6)	If a drug therapy problem is identified during patient consultation for a new or refill prescription, the full pharmacist must take appropriate action to resolve the problem.

HPA Bylaws Schedule F Part 1 s.13(2)	A pharmacist must offer to consult with the patient or the patient's representative regarding the selection and use of a Schedule II drug at the time of purchase.
HPA Bylaws Schedule F Part 1 s.13(3)	The pharmacist/patient consultation for a Schedule II drug must include potential drug therapy problems, including any avoidance measures, and action recommended if they occur.
HPA Bylaws Schedule F Part 1 s.13(4)	A pharmacist must be available for consultation with a patient or patient's representative respecting the selection and use of a Schedule III drug.
HPA Bylaws Schedule F Part 1 s.12(3)	The full pharmacist must conduct the consultation in a manner that respects the patient's right to privacy.

Documentation

Reference	Requirement(s)
HPA Bylaws Schedule F Part 1 s.11(1)	A patient record must be established and maintained for each patient for whom a Schedule I drug is dispensed.
PODSA Bylaws s.35(1)	A registrant must enter the prescription information and record it in PharmaNet at the time of dispensing and keep the patient record current.
HPA Bylaws Schedule F Part 1 s.6(4)(g)	At the time of dispensing, a prescription must include the following additional information: (g) written confirmation of the registrant who (i) verified the patient identification, (ii) (ii) verified the patient allergy information, (iii) reviewed the personal health information stored in the PharmaNet database in accordance with section 11(4), (iv) performed the consultation, (v) performed the final check including when dispensing a balance owing, and (vi) identified and addressed a drug therapy problem, if any.
HPA Bylaws Schedule F Part 1 s.12(2)	Where a patient declines the consultation, the full pharmacist must document that the consultation was offered and declined.

HPA Bylaws Schedule F Part 1 s.9.1(1)(d)	A registrant who prepares a prescription product must ensure that his or her identity is documented in writing.
PPP-31 Policy Statement 1(d)	The pharmacist has obtained the patient's or the patient representative's informed consent before undertaking an emergency supply.
PPP-31 Policy Statement 1(e)(i)	Document in the patient's record the rationale for the decision and any appropriate follow-up plan.
PPP-31 Policy Statement 1(e)(ii)	The pharmacist responsible for making the decision to provide an emergency supply should ensure the PharmaNet dispensing record includes the College of Pharmacists of British Columbia pharmacist registration number in the practitioner ID field to identify the pharmacist responsible for the decision.
HPA Bylaws Schedule F Part 1 s.12(7)	If an adverse drug reaction as defined by Health Canada is identified, a full pharmacist must notify the patient's practitioner, make an appropriate entry on the PharmaNet record and report the reaction to the appropriate department of Health Canada.
PPP-66 Opioid Agonist Treatment Policy Statement #1	All pharmacy managers, staff pharmacists, and relief pharmacists employed in a community pharmacy that provides pharmacy services related to buprenorphine/naloxone maintenance treatment, methadone maintenance treatment or slow release oral morphine maintenance treatment must: (a) successfully complete the British Columbia Pharmacy Association (BCPhA) Opioid Agonist Treatment Compliance and Management Program for Pharmacy (OATCAMPP) training program, and (b) record self-declaration of training completion in eServices.
HPA Bylaws Schedule F Part 4 Conditions 2	A practising pharmacist must not provide immunization services in B.C. prior to receiving notification from the College of Pharmacists of B.C. of their certification to administer immunizations.