



Pharmacy Workplace Practices Survey Preliminary Analysis & Results

College of Pharmacists
of British Columbia



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Territorial Acknowledgement

It is with profound respect and gratitude that we acknowledge the rights and title of the First Nations on whose collective unceded territories the office of the College of Pharmacists of British Columbia is located. These are the homelands of the hən̓q̓əmiñəm speaking peoples in the territories of the x̱məθḵəy̱əm (Musqueam) and seíłwítulh (Tsleil-Waututh) Nations, and the Sḵwxwú7mesh-ulh Sníchim speaking peoples (Squamish Nation). These nations have existed here for over 9,000 years, and we continue to support their inherent rights and title to these lands and waters.

In recognition of our role in serving people and communities across the province, we also acknowledge the rights and title of over 200 First Nations whose collective unceded territories comprise what is now colonially known as British Columbia. The College is committed to standing beside First Nations on their traditional territories in support of their rights to self-determination, sovereignty, and justice.

We also acknowledge the unique and distinct rights, including the rights to health and wellness, of First Nations, Métis, and Inuit peoples from elsewhere in Canada who now live in British Columbia.

The effects of colonization throughout Turtle Island continue to have devastating and lasting impacts on Indigenous Peoples including racism, structural inequities and the erasure of Indigenous cultures, language, traditions, and worldviews. As leaders in the settler health system, we acknowledge our responsibilities to uphold the inherent and enduring rights of Indigenous Peoples across Canada under international, national, and provincial law.

We encourage you all to take the time to learn about these histories to better understand the First Nations on whose traditional territories you reside.

Message from the CEO & Registrar

The College of Pharmacists of BC (CPBC) has become increasingly concerned about reports of pharmacy business practices that could compromise the ability of pharmacists and pharmacy technicians to deliver safe and effective care to their clients.

Despite assurances from corporate and franchise pharmacies that business targets do not exist, registrants report they are under pressure to meet financial targets, labour-based metrics, professional service targets, run rates, and/or other similar measures to increase profitability.

In April 2024, CPBC surveyed registrants to assess the prevalence and impact of business metrics on public safety in British Columbia. Out of 9,608 invitations, 2,199 individuals responded to the survey. Over 85 per cent of respondents were pharmacists, and of these, 59 per cent were providing services at corporate or franchised pharmacies.

Overall, the results of the survey indicated the negative impacts of business targets on the delivery of safe and effective client care, as well as on the mental health and wellbeing of registrants, which is deeply concerning to the CPBC board.

One of the key findings from the survey is clear: **one out of two respondents who have worked at corporate or franchised pharmacies were feeling pressured to meet imposed targets or metrics described in this report.** This is more than two times larger than respondents who currently work at independent pharmacies. Additionally, **31 per cent of respondents report that these pressures have resulted in compromised public safety.**

Pressures described by the respondents include:

- needing to complete a certain number of procedures or assessments per shift;
- pressure to meet dollar targets for:
 - immunizations or injections within a time frame;
 - prescription adaptations within a strict time frame;

- dispensed prescriptions per shift;
- pressure to conduct a specific number of professional services per shift within a strict time frame;
- pressure to reduce labour hours to meet labour-based metrics; and
- pressure to complete unnecessary medication reviews per shift.

CPBC is considering every policy and legislative tool available to us to address these very serious concerns.

At the June 27, 2024, CPBC Board meeting, the Board approved a multi-pronged, phased approach to addressing business metrics/targets, including 19 potential solutions. Some of the solutions being considered or developed include:

1. Establish a whistleblower program to facilitate the reporting of non-compliance with practice standards.
2. Explore different fee schedules for non-compliance with practice standards, with higher fees for repeated or frequent infractions.
3. Work with other healthcare regulators, government agencies, and other partners to influence positive change.
4. Explore ways to strengthen enforcement of practice standards when business goals or metrics lead to non-compliance, ensuring pharmacy owners, including corporate and franchise entities, are held accountable.
5. Monitor registrants' workload volumes in relation to staffing levels and develop a staffing standard of practice.

CPBC is acting now and beginning to develop or implement additional measures that will not only monitor and address the negative impact of business metrics on public safety, but also work to prevent such issues from arising in the future.

Suzanne Solven
CEO & Registrar
The College of Pharmacists of BC



Introduction

As part of CPBC's current strategic plan, prompted in part by recent media attention surrounding pharmacy quotas and workload concerns in Ontario in the first quarter of 2024, the CPBC Board prioritized the review and assessment of business metrics potentially impacting public safety in British Columbia.

To gain a deeper understanding of the issue in British Columbia, CPBC launched an anonymous survey in April 2024, similar to those conducted by other pharmacy regulatory bodies this year. The survey was distributed to all 9,608 active registrants, including pharmacists, pharmacy technicians, and students, with a focus on assessing the prevalence and impact of business metrics as it related to public safety. The survey closed with responses from 2,199 registrants, achieving a response rate of nearly 23 per cent.

The preliminary survey results and analysis are outlined in this report.

While this report offers valuable insights, it represents just one piece of data gathering. This report aims to equip CPBC's Board with the initial information necessary to engage in meaningful dialogue to inform next steps.

Constraints & Limitations

The findings in this report are subject to several limitations. First, due to the self-selecting nature of the survey and its administration by the regulatory body (CPBC), there is likely participation bias. Registrants who experienced pressure may have been more inclined to respond, potentially skewing the results towards negative experiences.

To mitigate potential biases, CPBC engaged a data scientist to apply standard normalization techniques to the survey results. Advanced language models were also used to analyze free-form comments. These measures, along with the aggregation of survey results, aim to deliver meaningful preliminary insights that reflect the experience of registrants across British Columbia.



The Big Picture

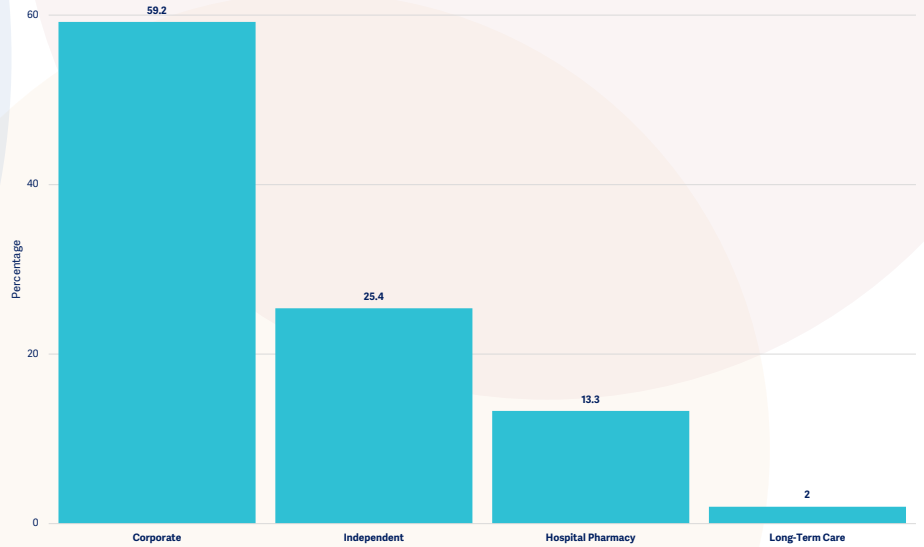
CPBC's survey on business metrics and public safety drew a substantial response, with 2,199 registrants sharing their experiences. Over 85 per cent of respondents were pharmacists. The data predominantly reflects the experiences of those working in corporate and independent pharmacies, which together represent the vast majority (84 per cent) of respondents.

9,608
Total Invitations

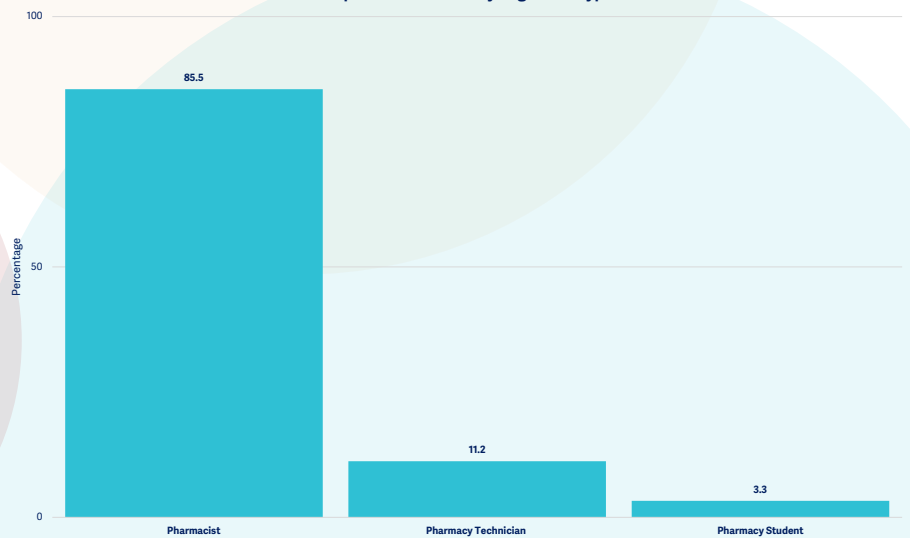
2,199
Total Participants

2,600+
Comments Received

Participation Breakdown by Pharmacy Type

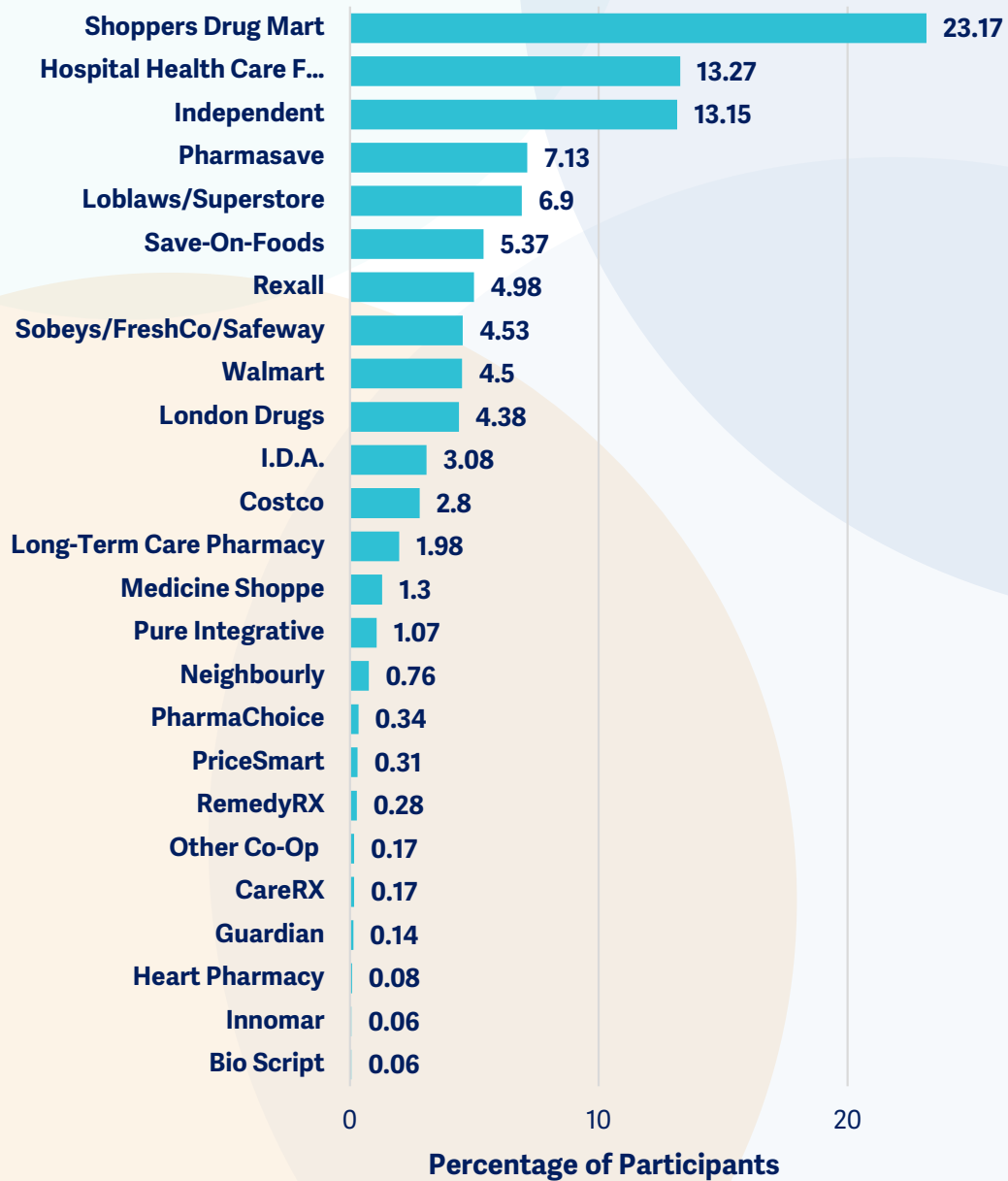


Participation Breakdown by Registrant Type





Participation Breakdown by Pharmacy



Key Findings

Public safety appears to be at risk from pharmacies that utilize business metrics, labour-based metrics and/or targets as part of their business model.

The preliminary survey results reveal a contrast between the assurances of corporate and franchised pharmacies and the lived experiences of registrants that responded to the survey. A significant number of registrants working in these settings report feeling intense pressure to meet financial, professional services, labour, and other performance targets, despite claims that such targets do not exist. This discrepancy highlights the urgent need for further investigation into the potential impact of these practices on public safety and registrant wellbeing.

Key findings from the survey data include:

- **Corporate Pressure:** One out of two registrants working in corporate or franchised pharmacies feels pressured to meet business metrics/targets, a rate more than double that of those in independent pharmacies.
- **Compromised Public Safety:** 31 per cent of registrants reported that these pressures led to actions that compromised public safety.
- **Specific Pressures:** Registrants identified pressures to meet performance targets and quotas for professional services, financial targets, labour hours, and conducting unnecessary medication reviews.

This report represents a critical first step in understanding the widespread impact of business metrics on pharmacy practice in British Columbia. The findings underscore the urgent need for action to ensure that business practices do not compromise the safety, health and wellbeing of British Columbians. CPBC is committed to using all available tools to address these concerns and uphold the highest standards of public care.



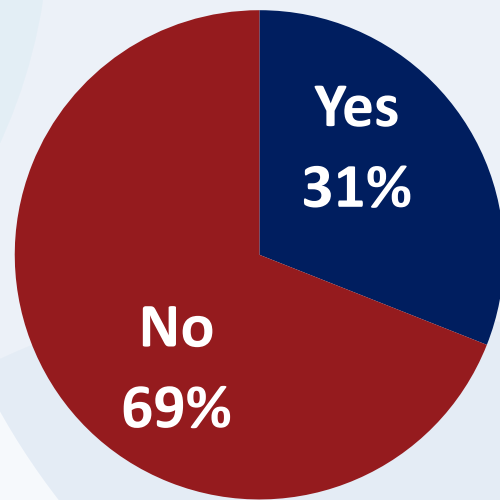
Section 1: Business Metrics and Their Impact on Public Safety

The survey data reveals a correlation between business metrics and public safety in British Columbia pharmacies. Registrants report that these pressures have contributed to errors, made it difficult to meet practice standards, and in some instances, may have led to direct harm to members of the public. The resulting work environment raises significant concerns about the potential impact on the safety and wellbeing of British Columbians.

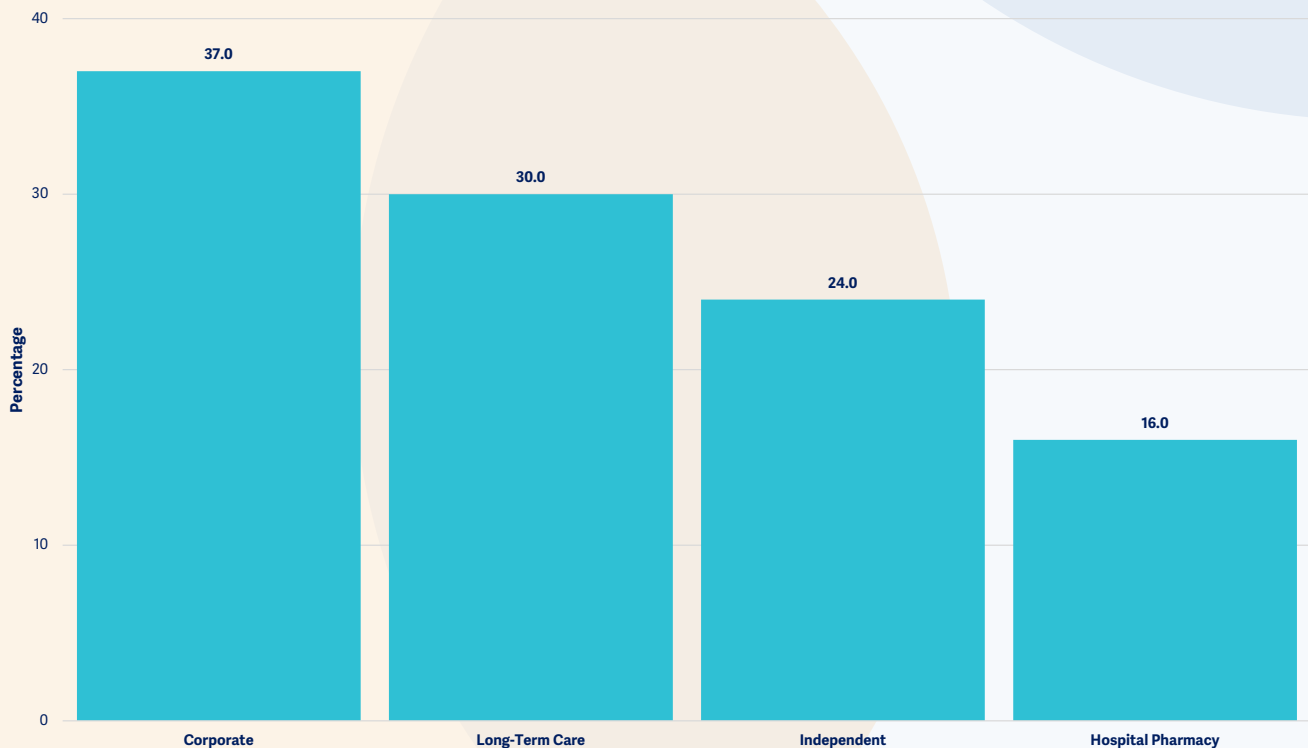
Several key findings from our survey support this analysis:

31 per cent of registrants reported that pressure to meet business metrics/targets for professional services, labour hours, financial, and performance targets, led to their failure to meet practice standards, compromising public safety.

Percentage of Registrants Reporting Unable to Meet Practice Standards Compromising Public Safety

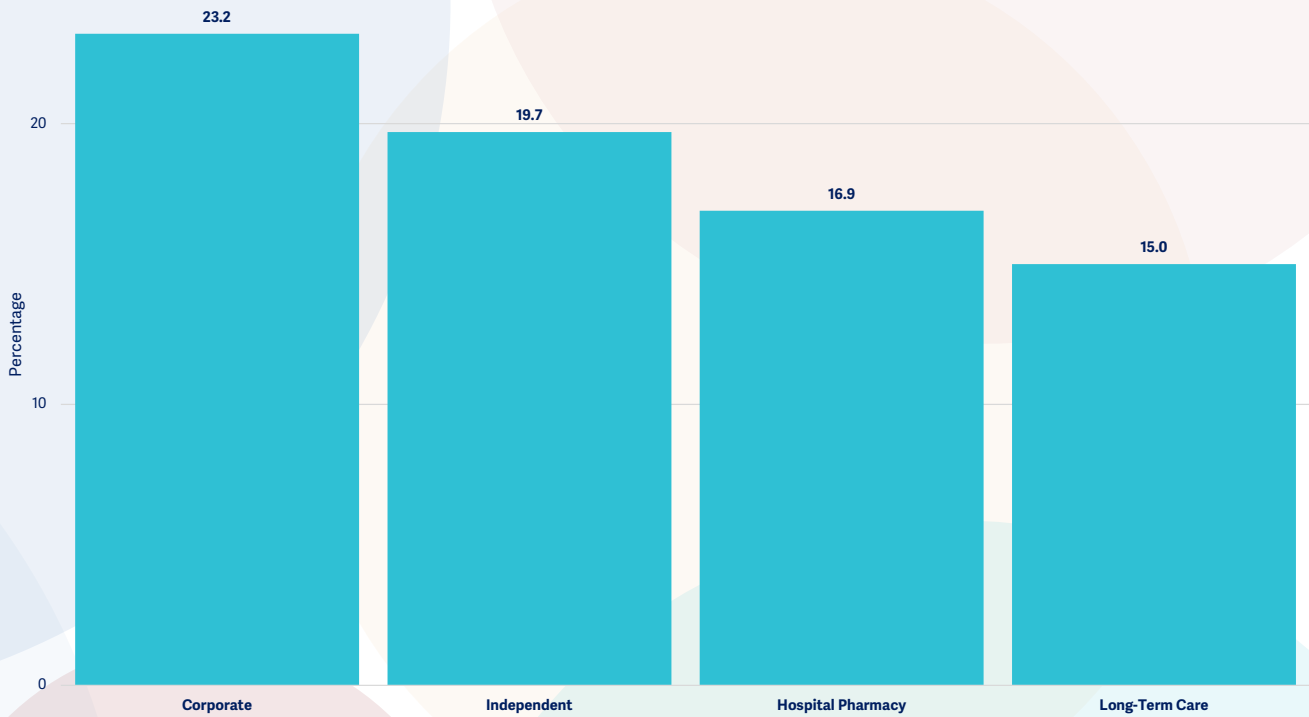


Percentage of Registrants in Each Pharmacy Type Unable to Meet Practice Standards Compromising Public Safety



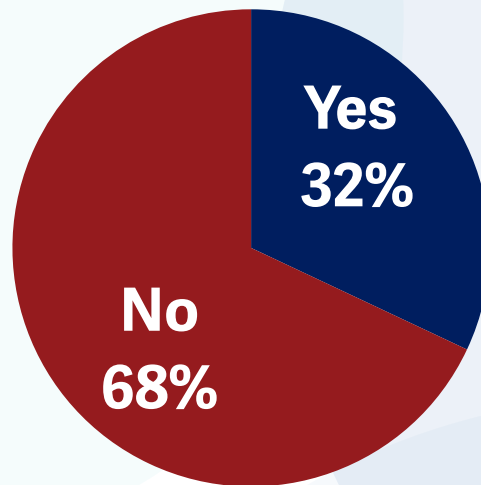
Three-quarters of registrants unable to meet practice standards due to business pressures indicated understaffing caused by labor-based metrics was a primary contributor.

Percentage of Registrants Who Reported Compromised Safety Related to Understaffing Caused by Labour Metrics

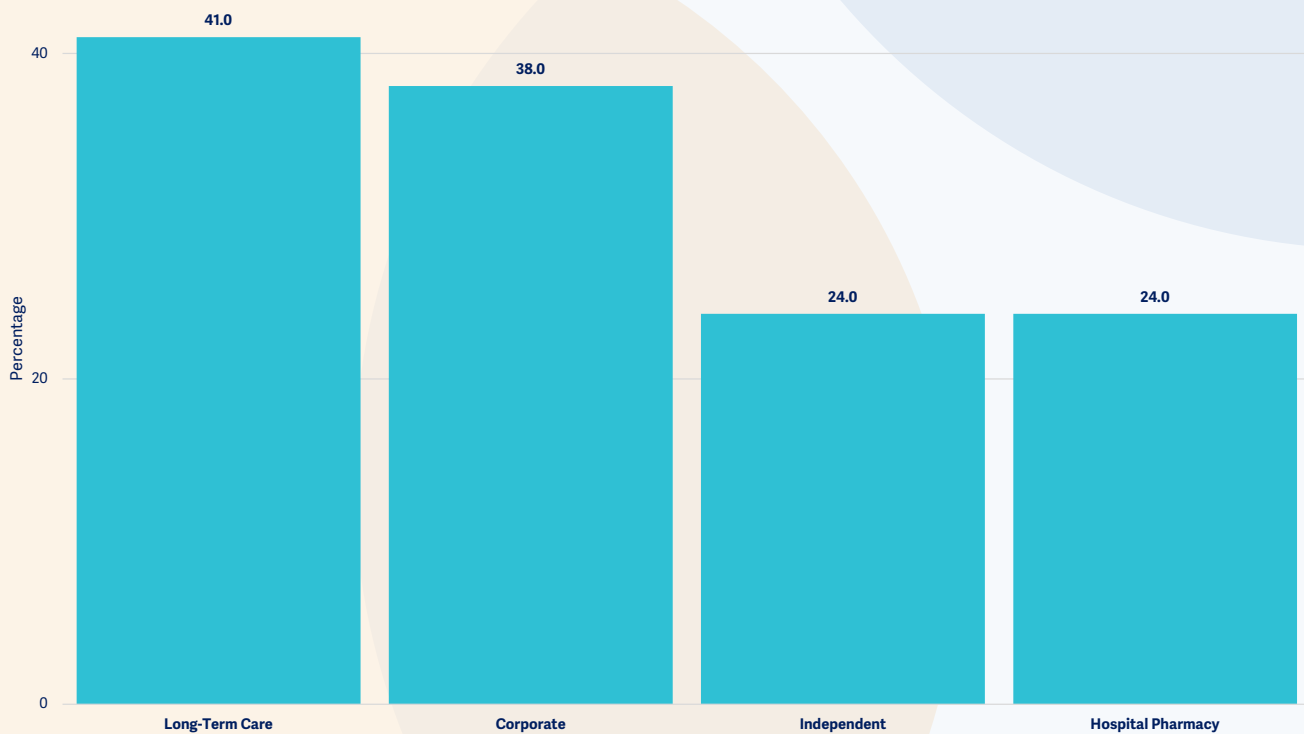


Nearly one-third of registrants reported experiencing pressure to meet financial targets, professional service targets, and other labour-based metrics that resulted in direct harm to members of the public. This was reported more frequently by registrants working in long-term care and corporate pharmacies compared to other pharmacies.

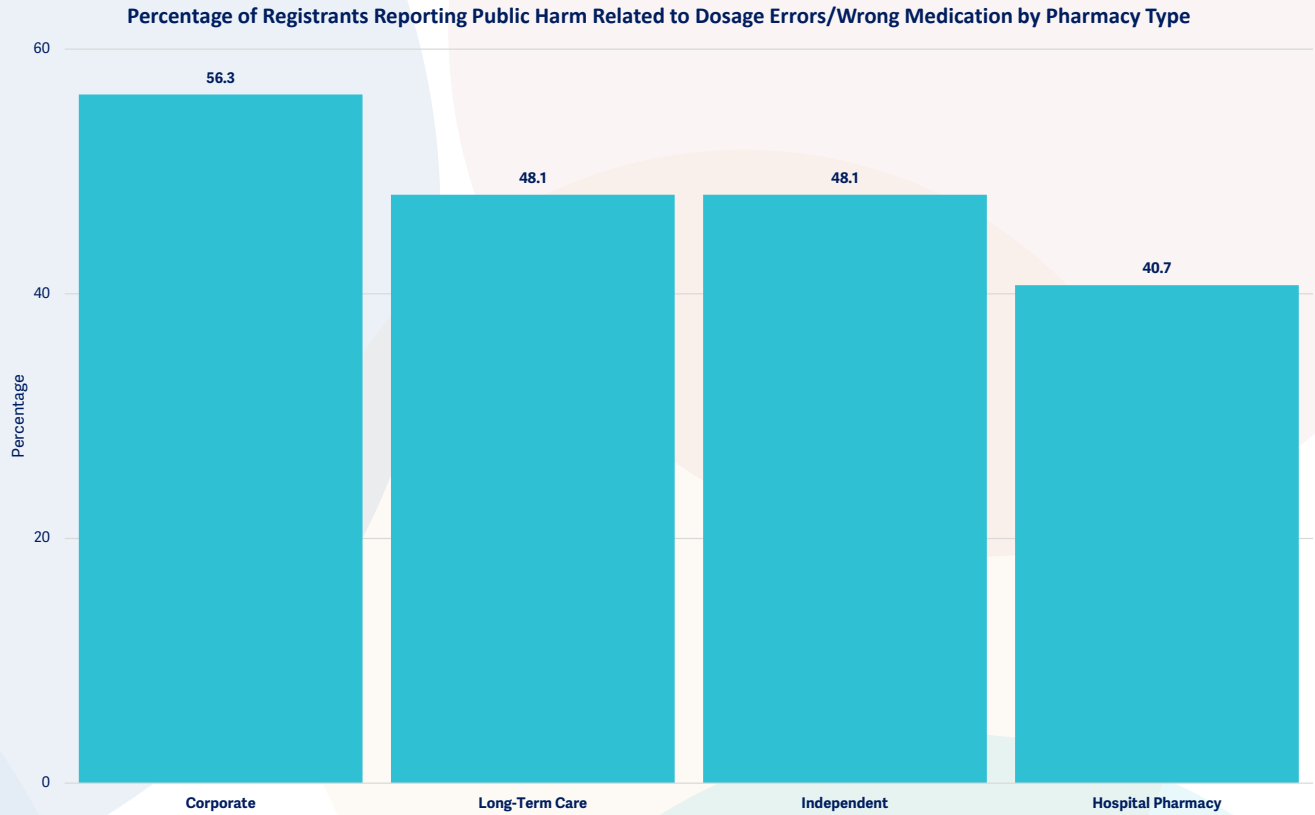
Percentage of All Registrants Who Observed Public Safety Harm Due to Pressures



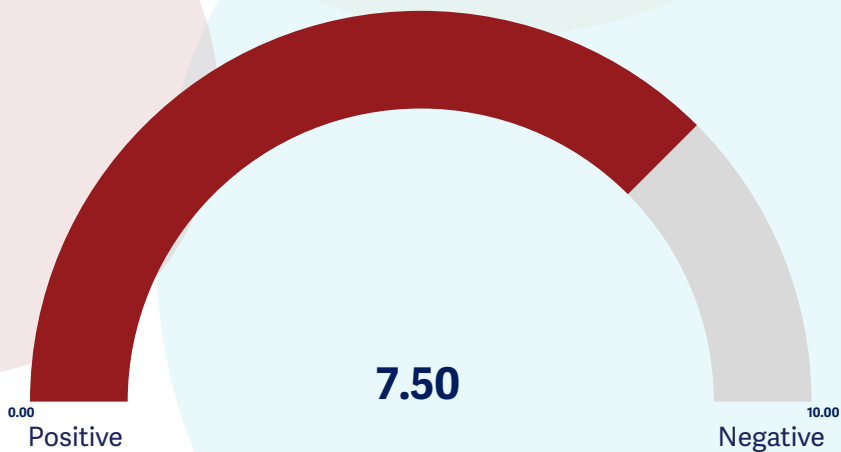
Percentage of Registrants Who Observed Public Safety Harm Due to Pressure



Registrants who reported that pressures from business metrics resulted in direct harm to members of the public, cited mistakes in dosage or dispensing the wrong medication were the leading cause of harm in 40 per cent of the reported comments. A sentiment analysis of the comments revealed a strong, negative view on public safety, with an average score of 7.5 on a scale of 10 (0 being neutral and 10 being extremely negative).



Negativity of Additional Comments Provided (Out of 10)

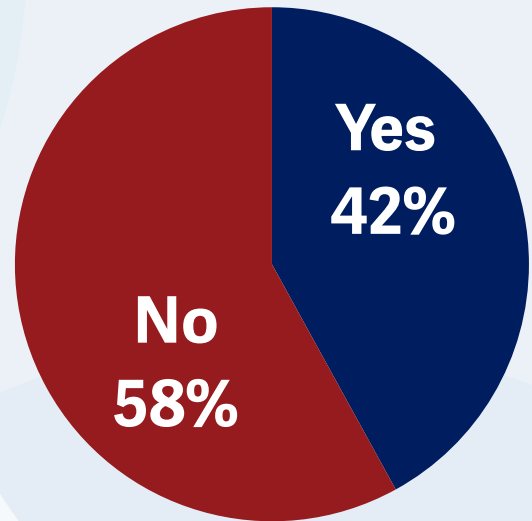


Section 2: Unsustainable Metrics and the Current Pressures Pharmacists Face

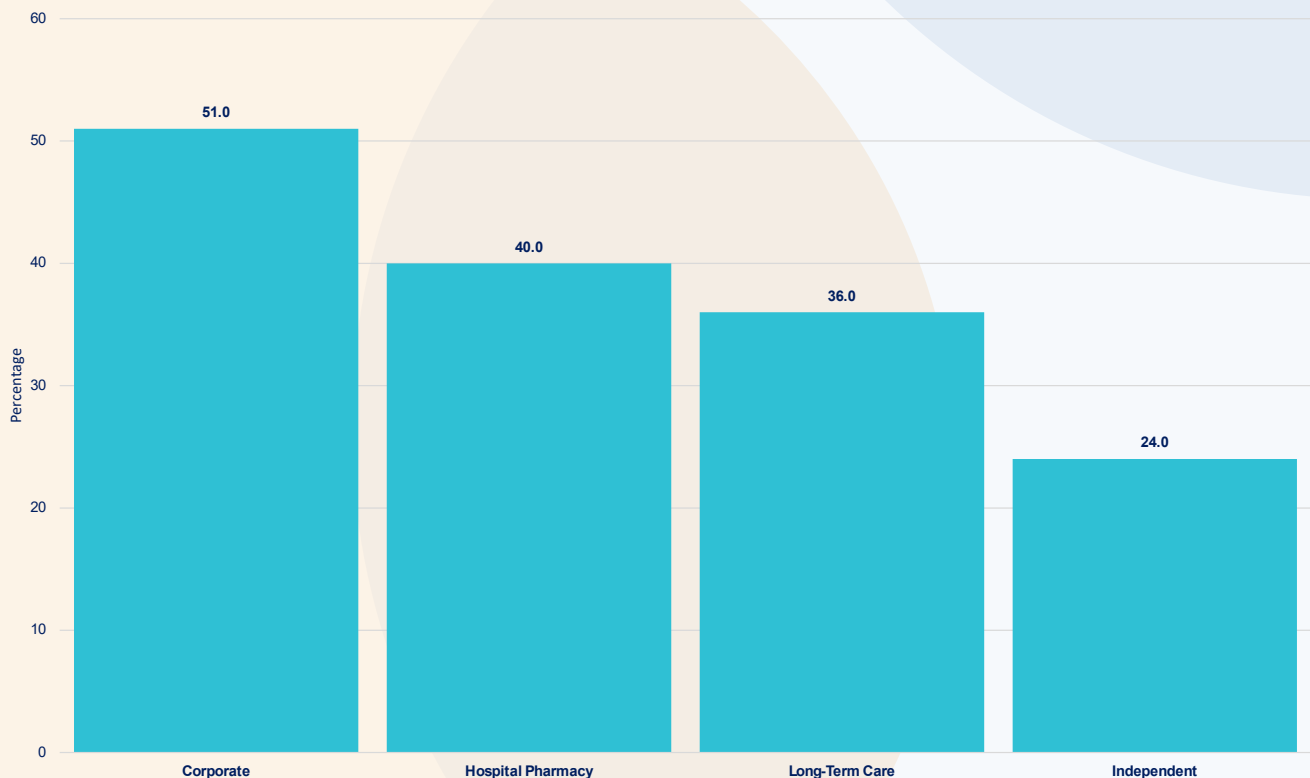
The survey revealed a trend of workplace pressures experienced among registrants across British Columbia, with 42 per cent of registrants reporting feeling pressured in their current roles.

Breaking down the 42 per cent of registrants that reported feeling pressure, **more than half (51 per cent) of those registrants working in corporate or franchised pharmacies indicated experiencing work-related pressures – a rate exceeding double that of their counterparts in independent pharmacies.**

Percentage of Registrants Currently Feeling Workplace Pressures



Registrants Feeling Pressure - By Pharmacy Type



The survey results suggest a pattern of heightened pressure and unsustainable practices, raising concerns about public safety and the potential impact on client care. **Registrants are reporting feeling more rushed and pressured to complete tasks quickly**, particularly in areas such as medication reviews, minor ailment assessments, injections, immunizations, prescription adaptations, and professional services.

Furthermore, the data suggests registrants working in corporate and franchised pharmacies experience significantly higher pressure to meet dollar-based targets for services, as well as pressure to limit labour hours to meet these business metrics. Additionally, registrants in corporate and franchised pharmacies report experiencing the most pressure to prioritize members of the public with simpler medication needs, which raises concerns about equitable access to care.

This section delves deeper into these results, examining the specific pressures faced by Registrants in all pharmacy settings and exploring the potential implications for public safety and wellbeing.

66%

of respondents report being pressured or directed to complete a specific number or dollar amount of Medication Reviews per shift, day, week, month, or quarter.





65%

of respondents indicated they were pressured or directed to adapt prescriptions within five minutes or less.

Pressure 1: Time Restrictions

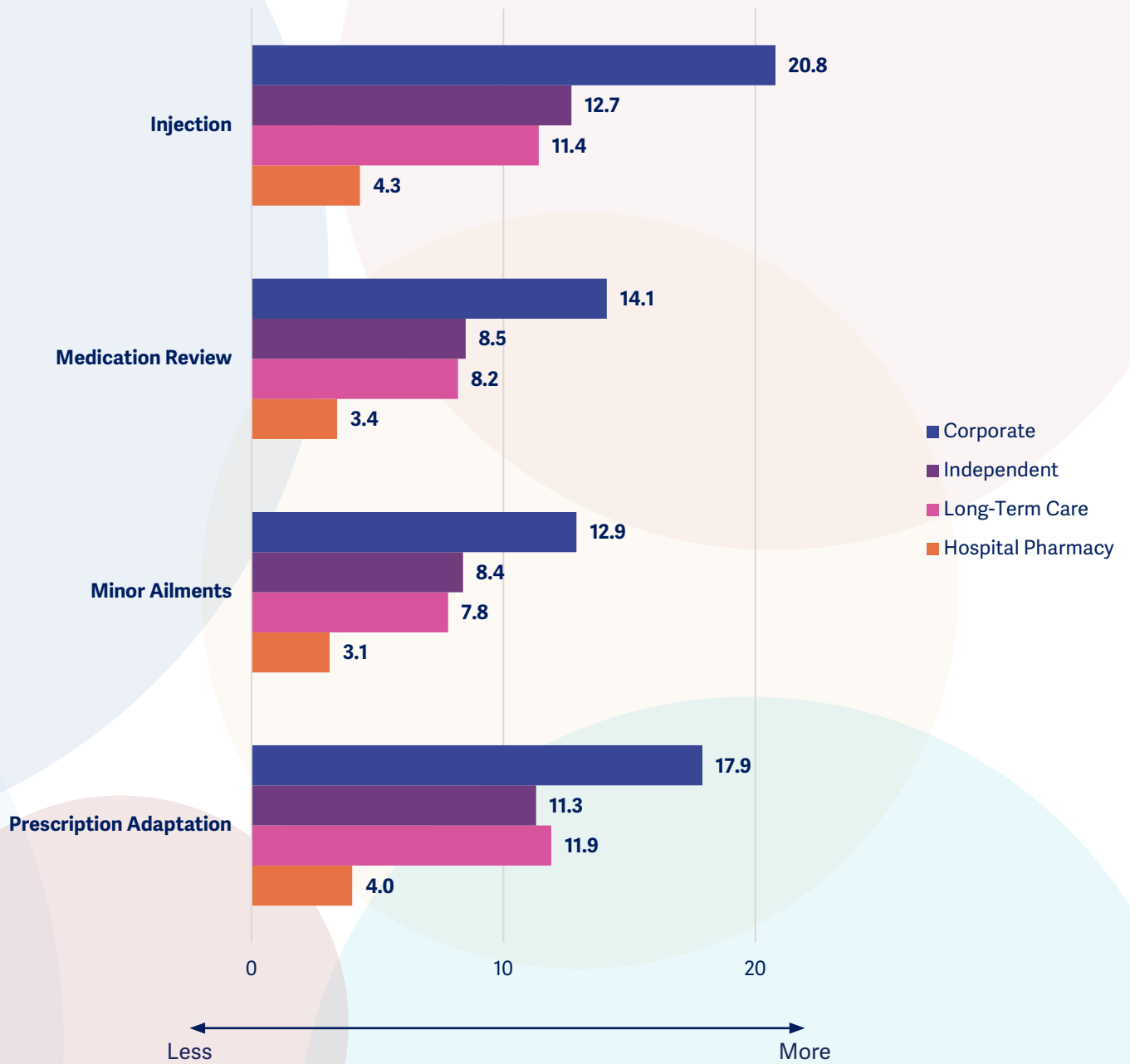
Time constraints emerged as a significant pressure point for registrants, particularly those working in corporate and franchised settings. Survey data indicated registrants in these settings consistently experienced greater time pressure across various tasks compared to their counterparts in other pharmacy types.

This heightened pressure appears in several key areas:

58%
of respondents indicated they were pressured to provide injections or immunizations within five minutes or less.

- **Overall workload:** Registrants working in corporate and franchised pharmacy settings reported feeling 50 per cent more time pressure across all tasks.
- **Minor ailment assessments:** Registrants in corporate and franchised settings were twice as likely to feel pressured to conduct a specific number of assessments and to complete them within strict time frames compared to their counterparts in different pharmacy settings.
- **Injections/immunizations:** Nearly a quarter of registrants in corporate and franchised settings reported feeling pressured to complete these services within a strict time frame.
- **Prescription adaptations:** Registrants in corporate and franchised pharmacy settings were more likely to experience time pressure when completing prescription adaptations compared to their counterparts in different pharmacy settings.

Normalized Time Pressure on Tasks



The survey indicated differences in time pressure experienced by registrants across different pharmacy settings. Registrants employed in a corporate or franchised pharmacy setting consistently reported feeling 50 per cent more time pressure across all tasks compared to their counterparts in other pharmacy types.

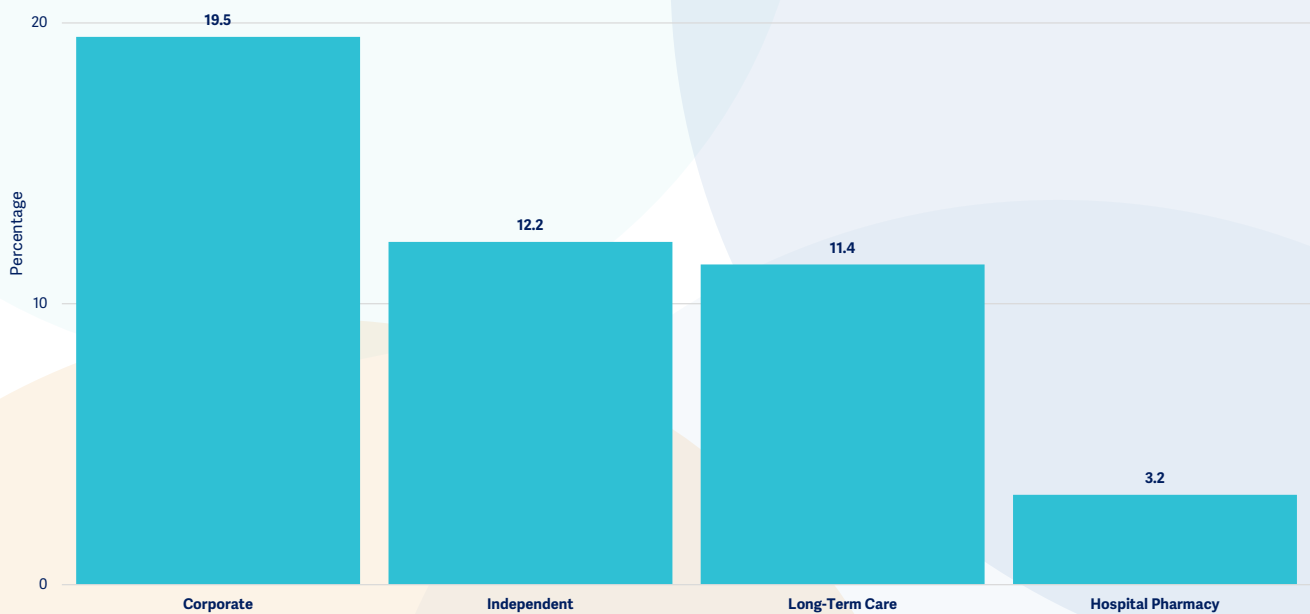
Note: the numbers displayed in the chart are normalized, with higher values indicating more pressure. For example, a registrant with a score of 20 feels the time pressure twice as much when compared to a registrant with a score of 10.

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Registrants in corporate and franchise settings reported experiencing the highest amount of pressure to conduct minor ailment assessments within a strict time frame, with nearly 20 per cent of registrants reporting this issue. This pressure is notably lower in independent pharmacies, long-term care facilities, and hospital pharmacies.

Across all pharmacy types, almost 30 per cent of registrants reported being provided less than five minutes to conduct a minor ailment assessment and almost 47 per cent reported being provided between five to ten minutes to conduct a minor ailment assessment.

Percentage of Registrants Feeling Pressured to Conduct Minor Ailment Assessments Within a Strict Time Frame



~20%

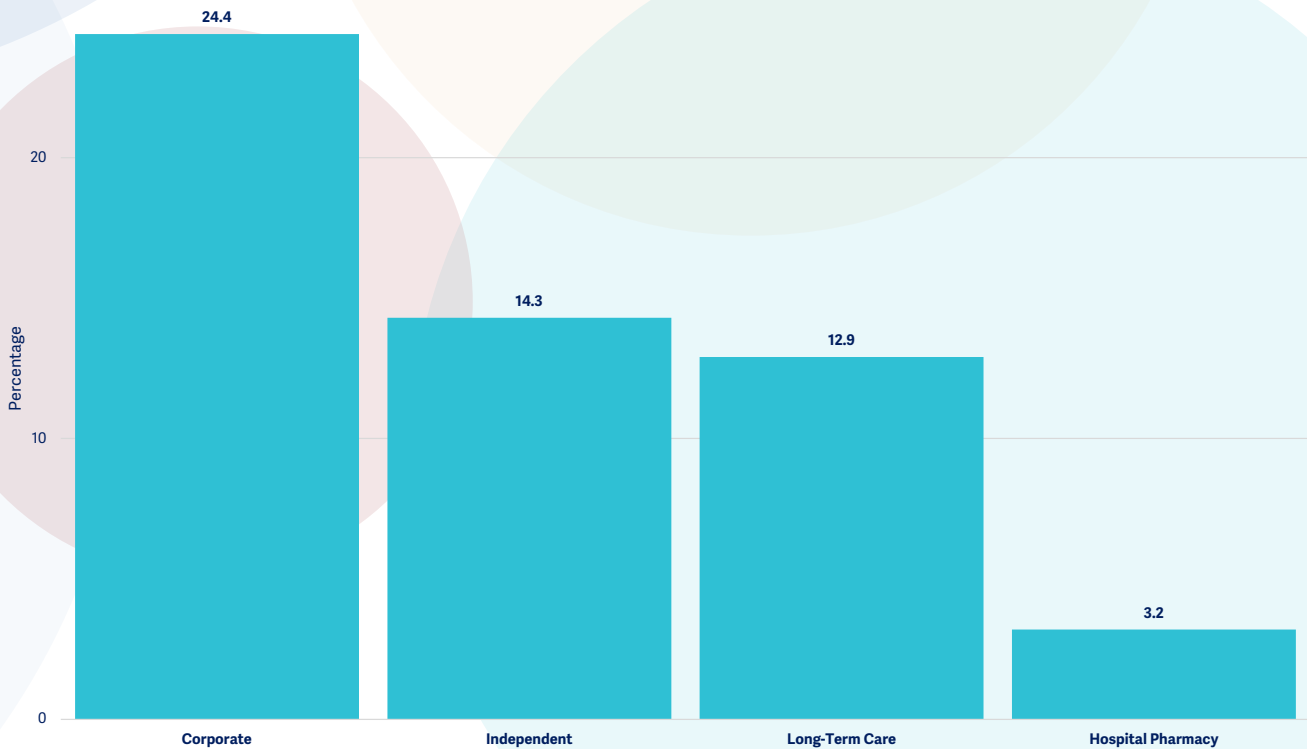
of corporate/franchise pharmacy registrants reported experiencing pressure to conduct minor ailment assessments within a strict time frame.

~24%

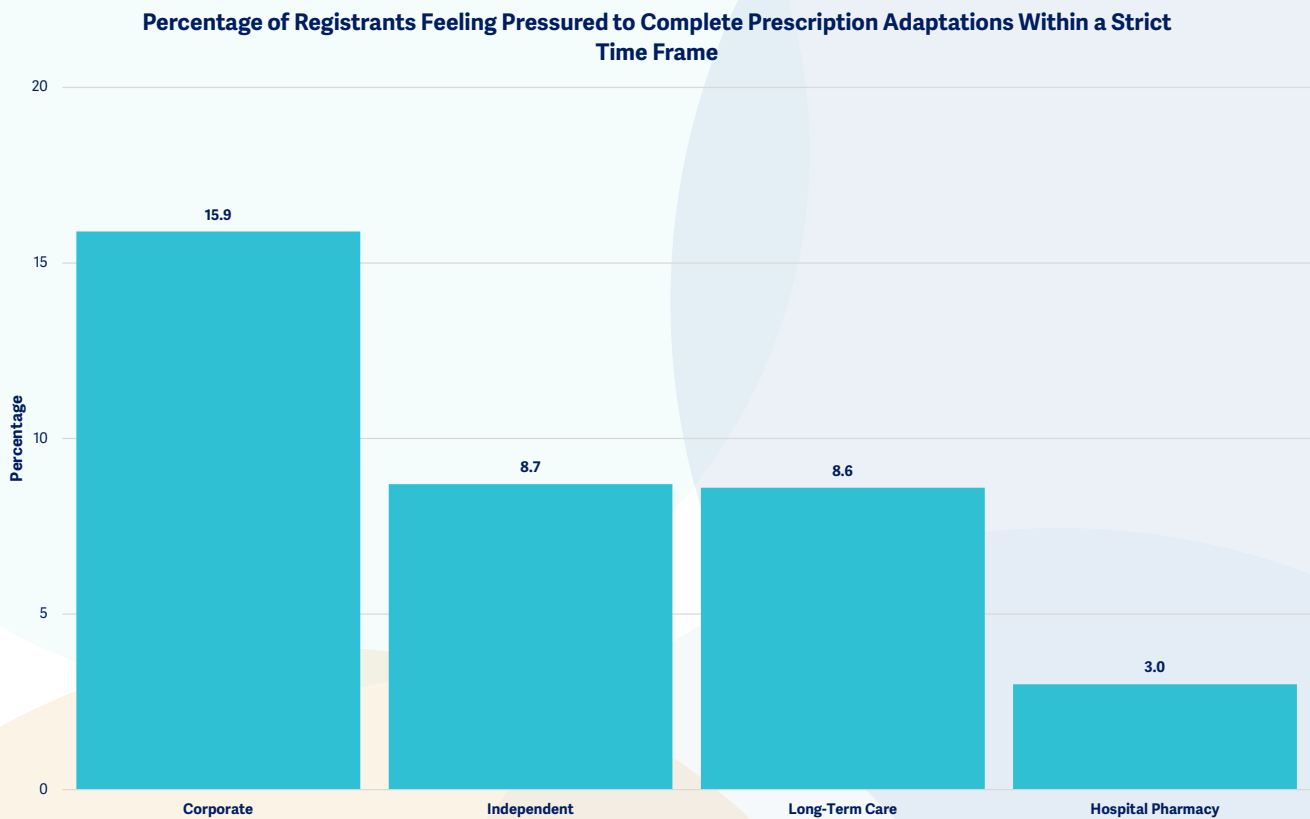
of corporate/franchise pharmacy registrants experience pressure to complete injections/immunizations within a strict time frame.

Registrants in corporate and franchise pharmacies reported experiencing the highest amount of pressure to complete injections/immunizations within a strict time frame, with nearly a quarter (24.4 per cent) reporting this issue. This pressure is notably lower in all other pharmacy types.

Percentage of Registrants Feeling Pressured to Complete Injections/Immunizations Within a Strict Time Frame



Similarly, registrants in corporate and franchised pharmacies reported experiencing the highest amount of pressure to complete prescription adaptations within a strict time frame, with nearly 16 per cent of registrants reporting this issue.



~16%

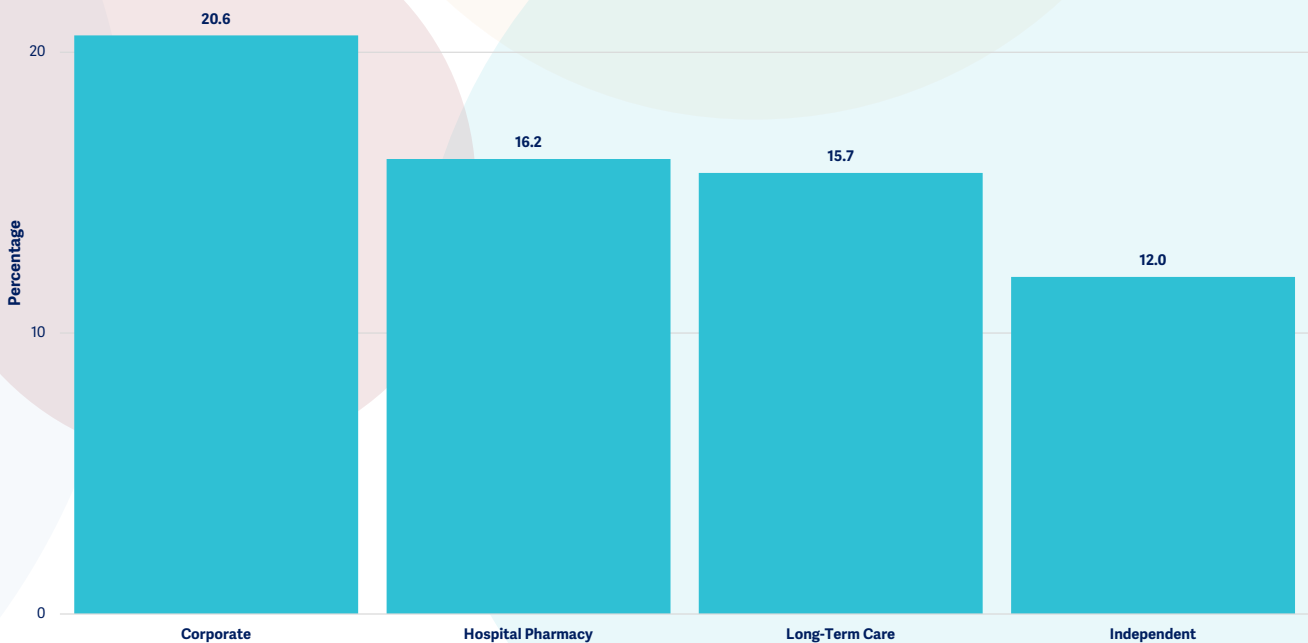
of corporate/franchised pharmacy registrants experience pressure for prescription adaptations within a strict time frame.

20%+

of corporate/franchised pharmacy registrants experience pressure to complete professional services within a strict time frame.

Registrants in corporate and franchised settings reported experiencing the highest amount of pressure to complete professional services within a strict time frame, with over 20 per cent of pharmacists reporting this issue. While pressure is also present in other settings, it is notably lower.

Percentage of Registrants Feeling Pressured to Complete Professional Services Within a Strict Time Frame



Pressure 2: Financial Targets

Pressure to meet financial targets emerged as another area of significant concern for registrants, particularly those working in corporate and franchised pharmacies. Survey data indicates that these registrants faced unique challenges relating to meeting financial targets and managing labour costs.

This pressure to meet financial targets manifested in several key areas:

- **Prioritization of revenue-generating activities:** Registrants in corporate and franchised settings feel greater pressure to meet financial targets for services like injections and immunizations, potentially impacting the time available for other essential client care activities.
- **Staffing limitations:** Nearly half of registrants in corporate and franchised pharmacies reported feeling pressured to limit labour hours to meet financial metrics, potentially impacting the quality and efficiency of client care.
- **Emphasis on prescription sales:** Registrants in corporate pharmacies experience greater pressure to reach specific dollar amounts on dispensed prescriptions, which could influence professional decision-making and prioritize sales volume over public needs.

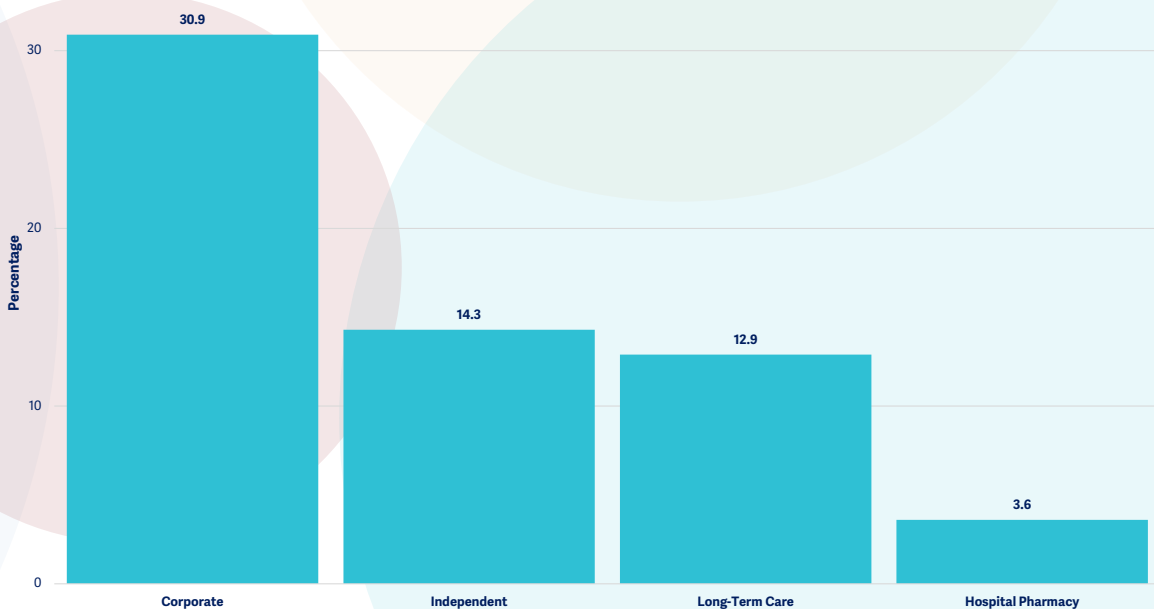


2^x

2x more registrants at corporate/franchised pharmacies reported feeling pressured to meet dollar targets for injections/immunizations.

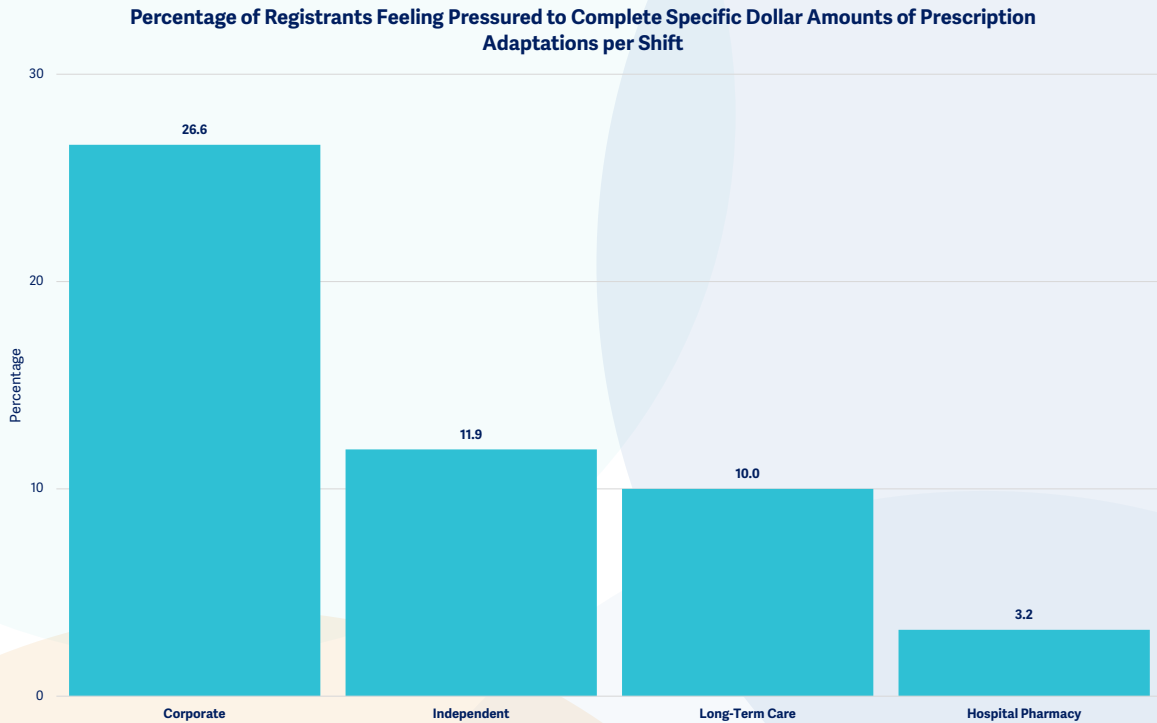
When it came to financial targets, the survey data indicated that registrants were **more than twice as likely** to feel pressured to meet specific dollar targets when conducting injections/immunizations at corporate and franchised pharmacies compared to other pharmacy settings.

Percentage of Registrants Feeling Pressured to Complete Specific Dollar Amounts of Injections/Immunizations per Shift



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Similarly, registrants were **more than twice as likely** to feel pressured to meet specific dollar targets on conducting prescription adaptations at corporate pharmacies compared to other pharmacies.



2^x

more registrants felt pressured to meet dollar targets for prescription adaptations at corporate pharmacies compared to other settings.

~ 47%

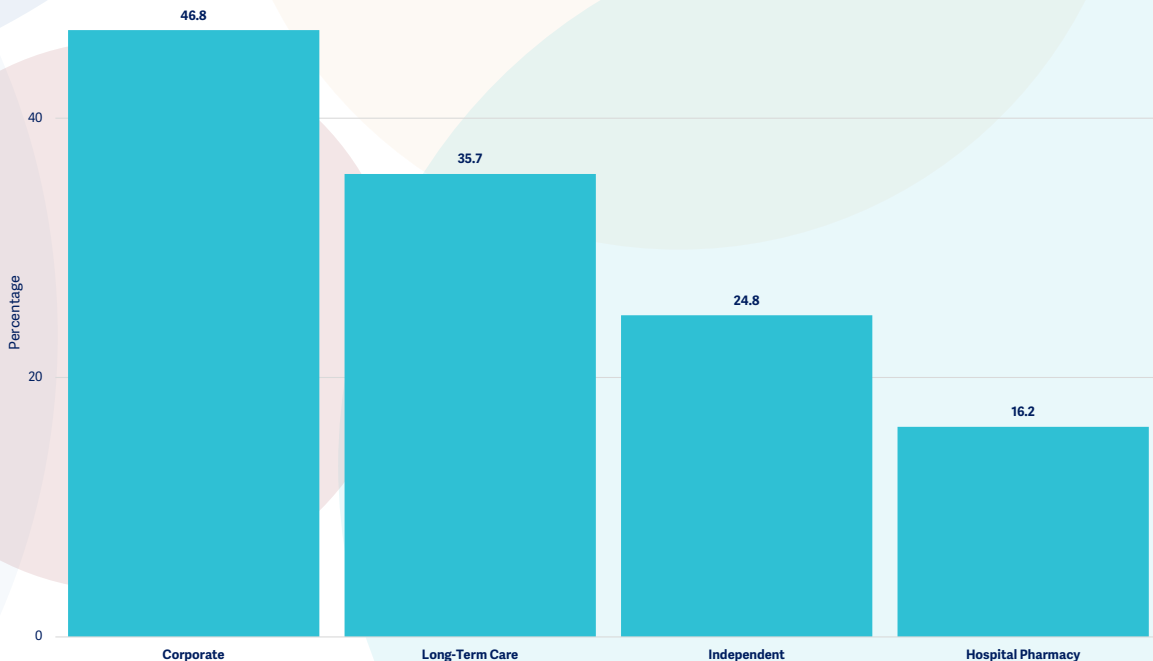
*of registrants in corporate/
franchised pharmacies
reported experiencing
pressure to limit labour
hours to meet metrics.*

~ 59%

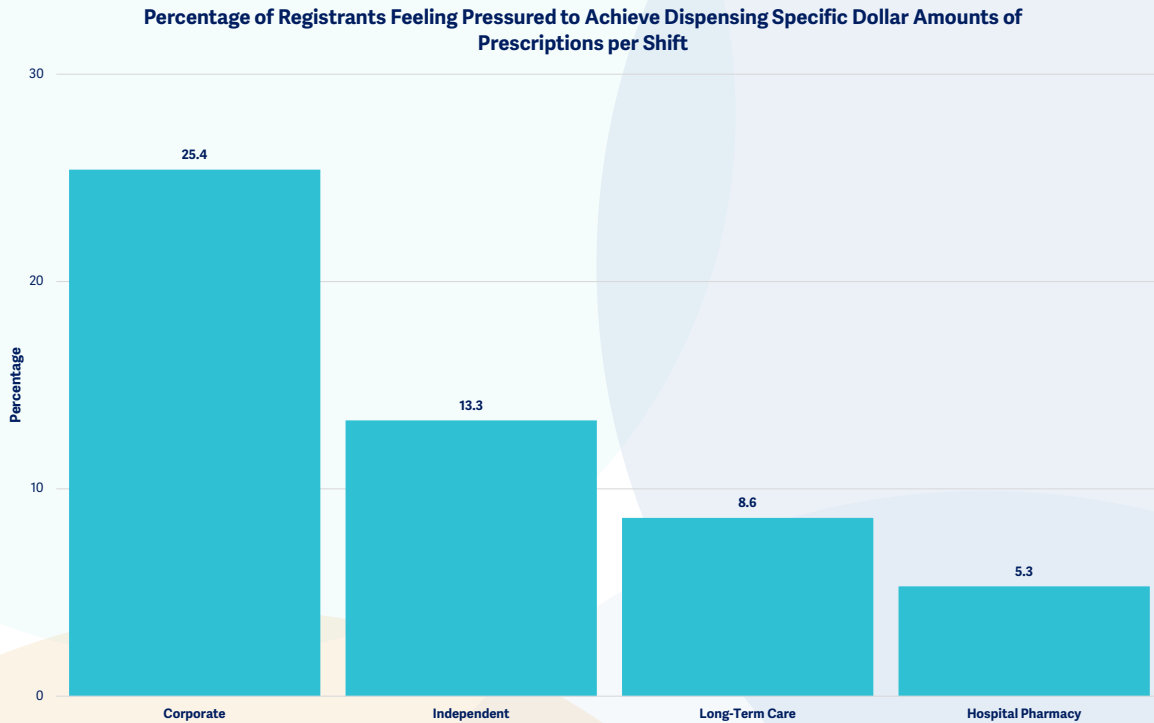
*of registrants reported
being pressured or directed
to limit labour hours
(pharmacist, technician or
assistant) in order to meet
labour-based metrics.*

Registrants in corporate and franchised pharmacies reported experiencing the most pressure to limit labour hours to meet metrics, with nearly half (46.8 per cent) reporting this issue. This pressure is significantly lower in other pharmacy settings.

Percentage of Registrants Feeling Pressured to Limit Labour Hours to Meet Labour-Based Metrics

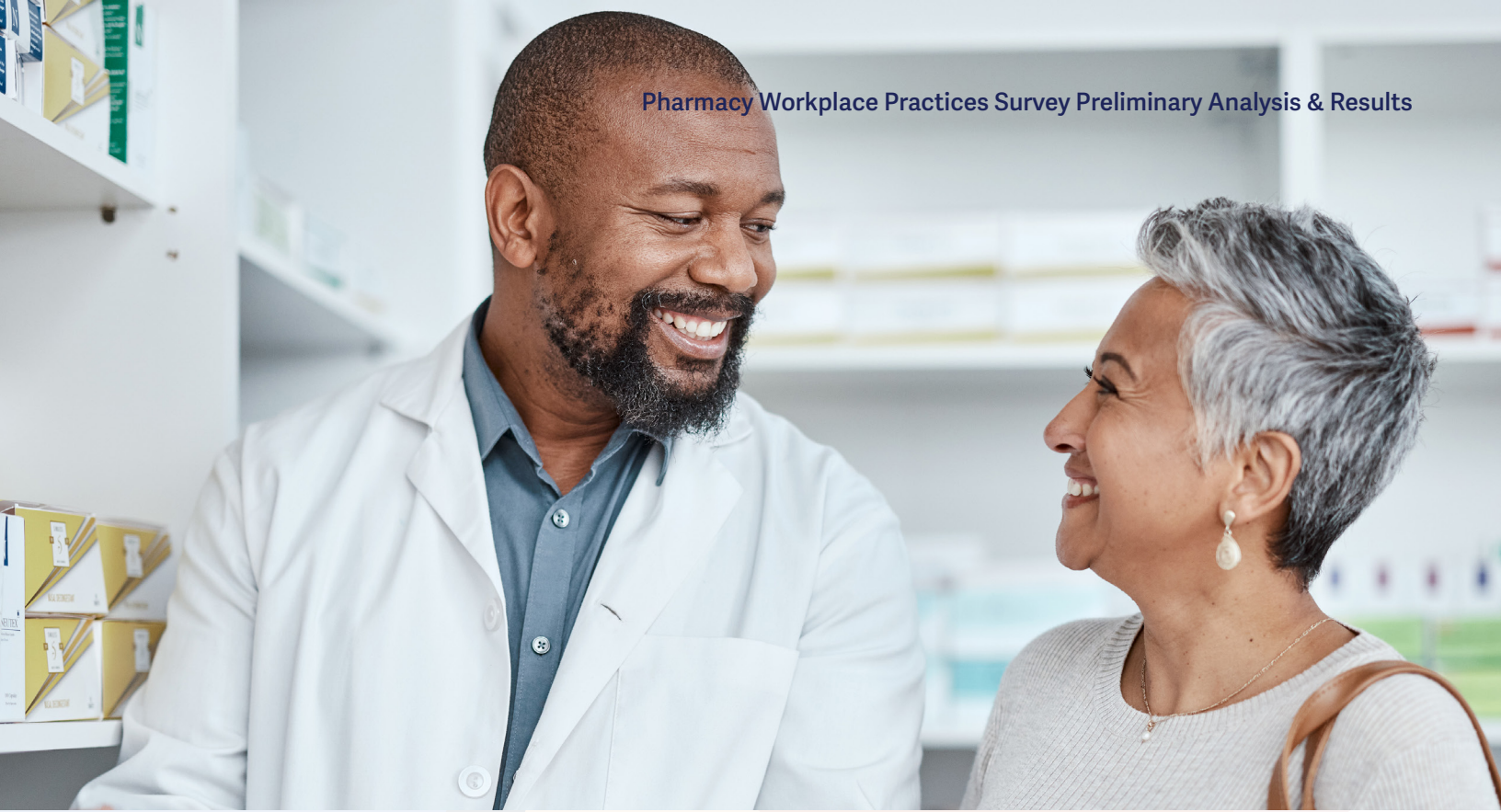


Registrants **were almost twice as likely to feel pressured to reach a certain dollar amount on dispensed prescriptions per shift** at corporate pharmacies compared to other pharmacies.



2^x

more registrants felt pressured to reach a certain dollar amount on dispensed prescriptions per shift at corporate pharmacies.



Pressure 3: Providing Professional Services

Beyond time and financial constraints, registrants also face pressure related to the volume and types of professional services they are expected to deliver. This pressure is particularly pronounced in corporate and franchised pharmacies, where registrants report feeling pressured to meet specific targets for professional services, prioritize members of the public with simpler needs, and conduct a higher number of medication reviews, even when deemed unnecessary.

Key areas where this pressure manifests include:

- **Volume of professional services:** Registrants in corporate pharmacies are more than twice as likely to feel pressured to conduct a specific number of professional services per shift.
- **Prioritization of simpler cases:** Corporate and franchised pharmacies report the highest pressure to prioritize members of the public with less complex medication needs, raising concerns about equitable access to care for those with more complex conditions.
- **Unnecessary medication reviews:** Corporate and franchised pharmacists report significantly higher pressure to conduct unnecessary medication reviews, potentially diverting time and resources away from other essential care activities.
- **Minor ailment assessments:** Registrants in corporate settings are twice as likely to feel pressured to conduct a specific number of minor ailment assessments per shift.

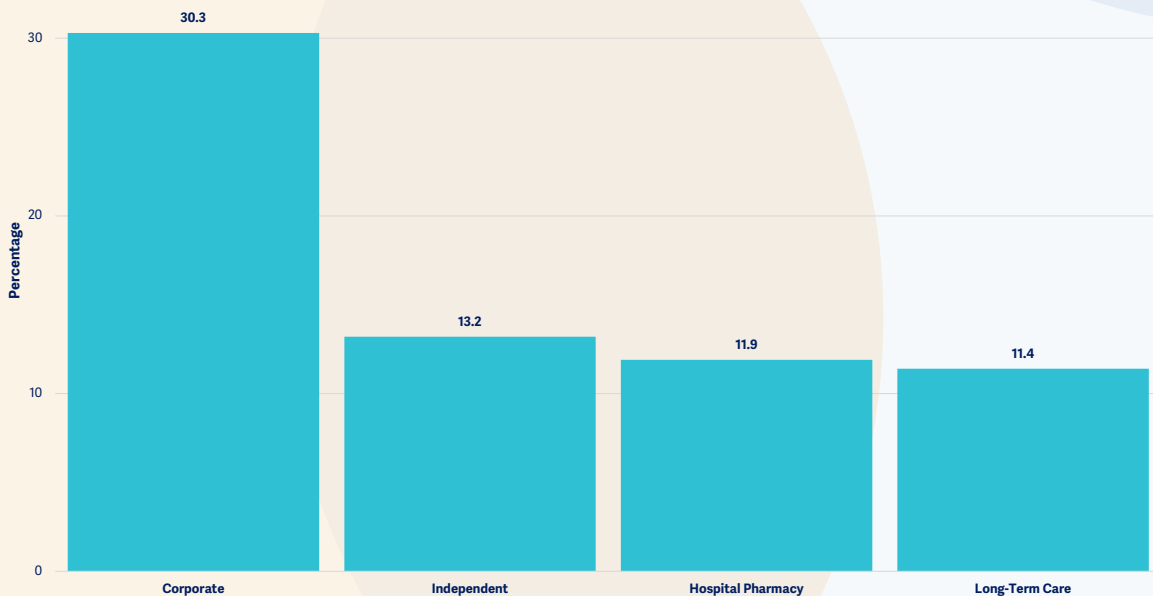
These findings highlight the challenges registrants face in providing comprehensive and person-centred care within a corporate or franchised environment. The pressure to meet service targets and prioritize efficiency may undermine registrants' ability to address the complex and diverse needs of the public.

2^x

more registrants at corporate pharmacies felt pressured to conduct a specific number of professional services per shift.

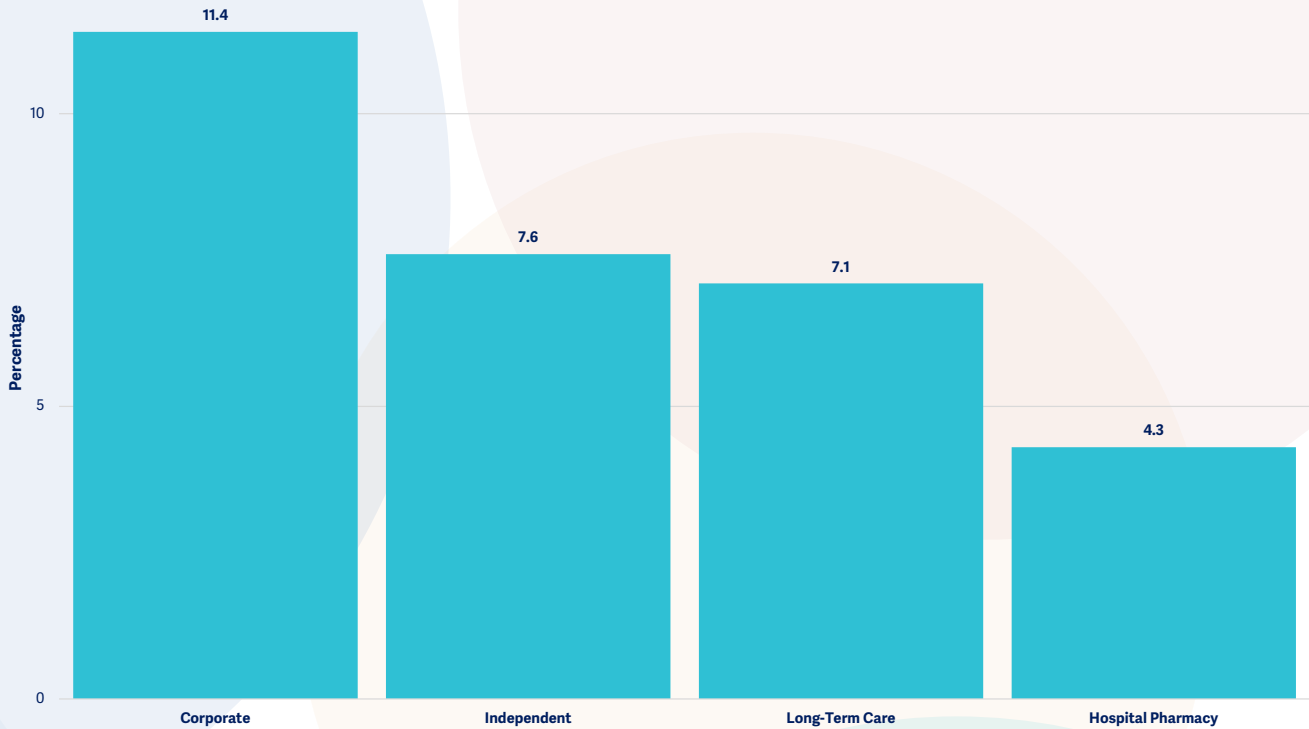
Registrants were **more than twice as likely** to feel pressured to conduct a specific number of professional services per shift at corporate pharmacies compared to other pharmacies.

Percentage of Registrants Feeling Pressured to Complete Specific Number of Professional Services per Shift



Registrants in corporate and franchised settings reported experiencing the highest amount of pressure to prioritize members of the public with simpler medication needs, with over 11 per cent of respondents reporting this issue. This pressure is less pronounced in other pharmacy settings.

Percentage of Registrants Feeling Pressured to Prioritize Members of the Public with Simpler Medication Needs



11%+

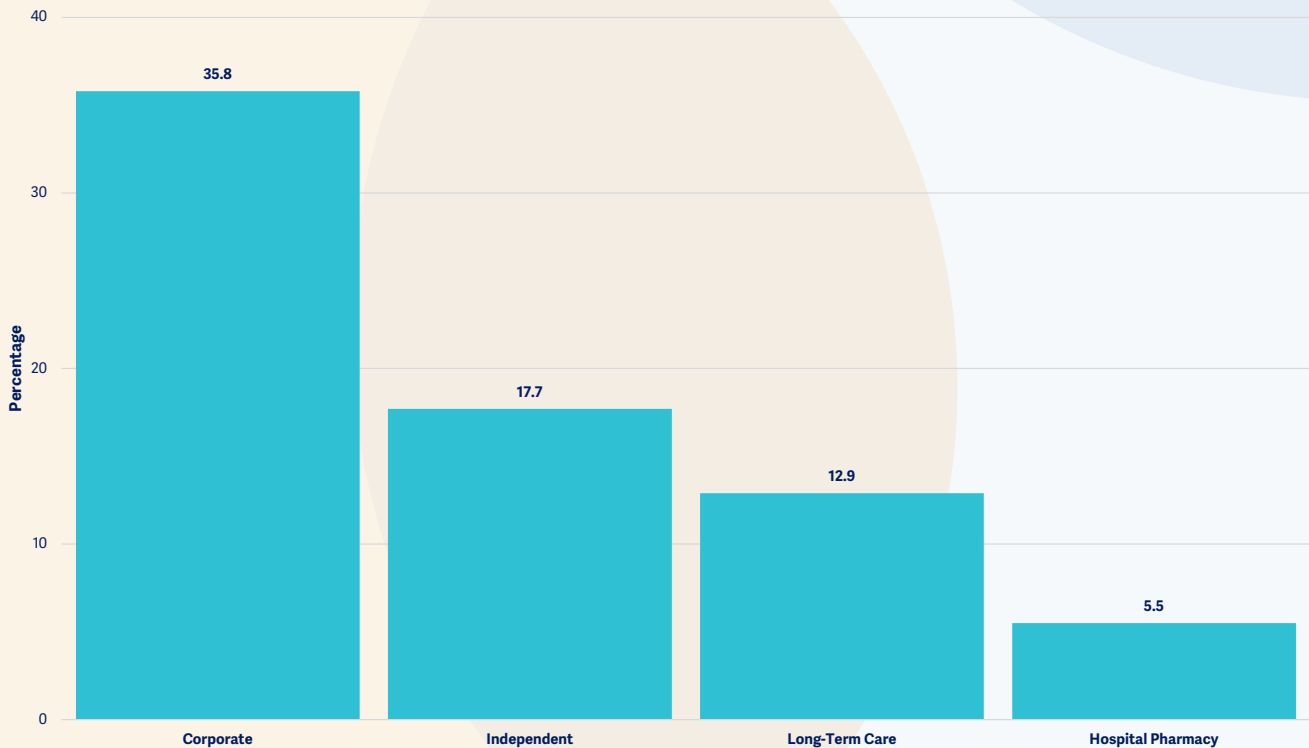
*of registrants in corporate/
franchised settings feel the
highest amount of pressure
to prioritize members of
the public with simpler
medication needs.*

2^x

more registrants at corporate pharmacies felt pressured to conduct a certain number of minor ailment assessments.

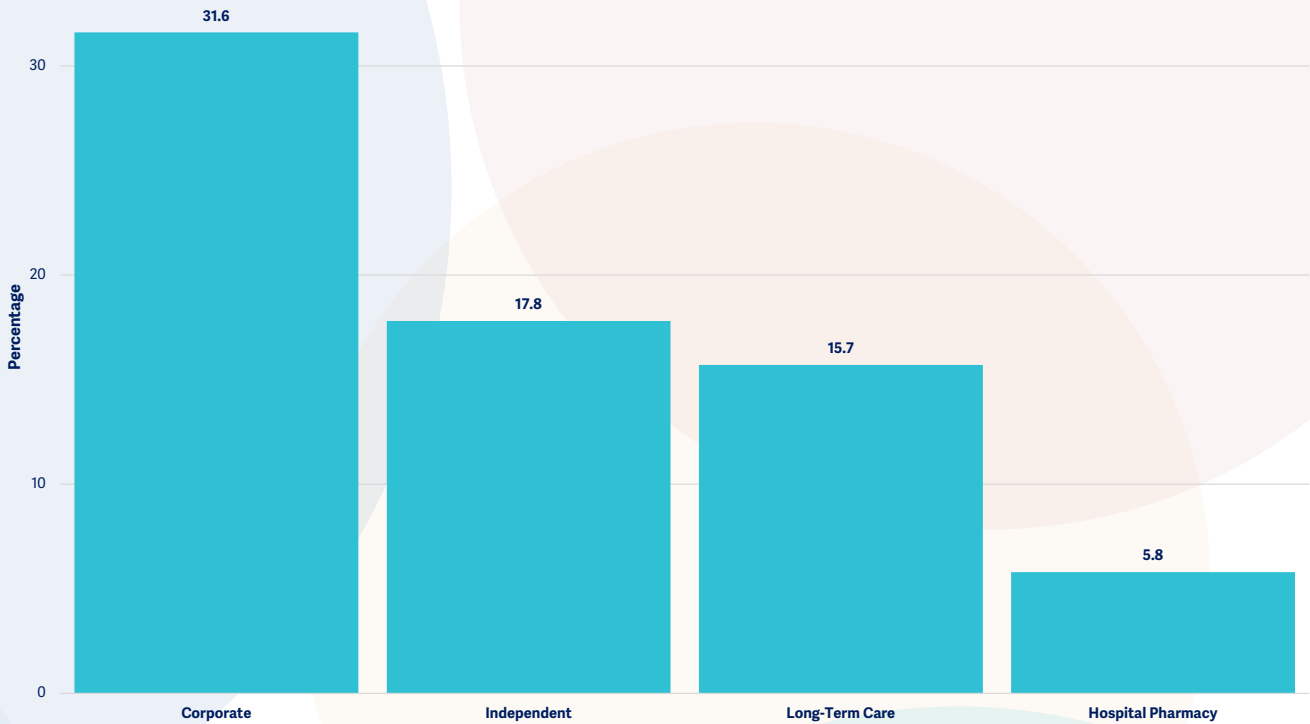
Registrants were also **twice as likely** to feel pressured to conduct a certain number of minor ailment assessments at corporate pharmacies compared to other pharmacies.

Percentage of Registrants Feeling Pressured to Conduct a Certain Number of Minor Ailment Assessments per Shift



Registrants in corporate and franchised pharmacies reported experiencing the highest amount of pressure to conduct unnecessary medication reviews, with 31.6 per cent of registrants reporting this issue. This reported pressure is almost twice as much as in independent pharmacies (17.8 per cent).

Percentage of Pressure on Conducting Unnecessary Medication Reviews



2^x

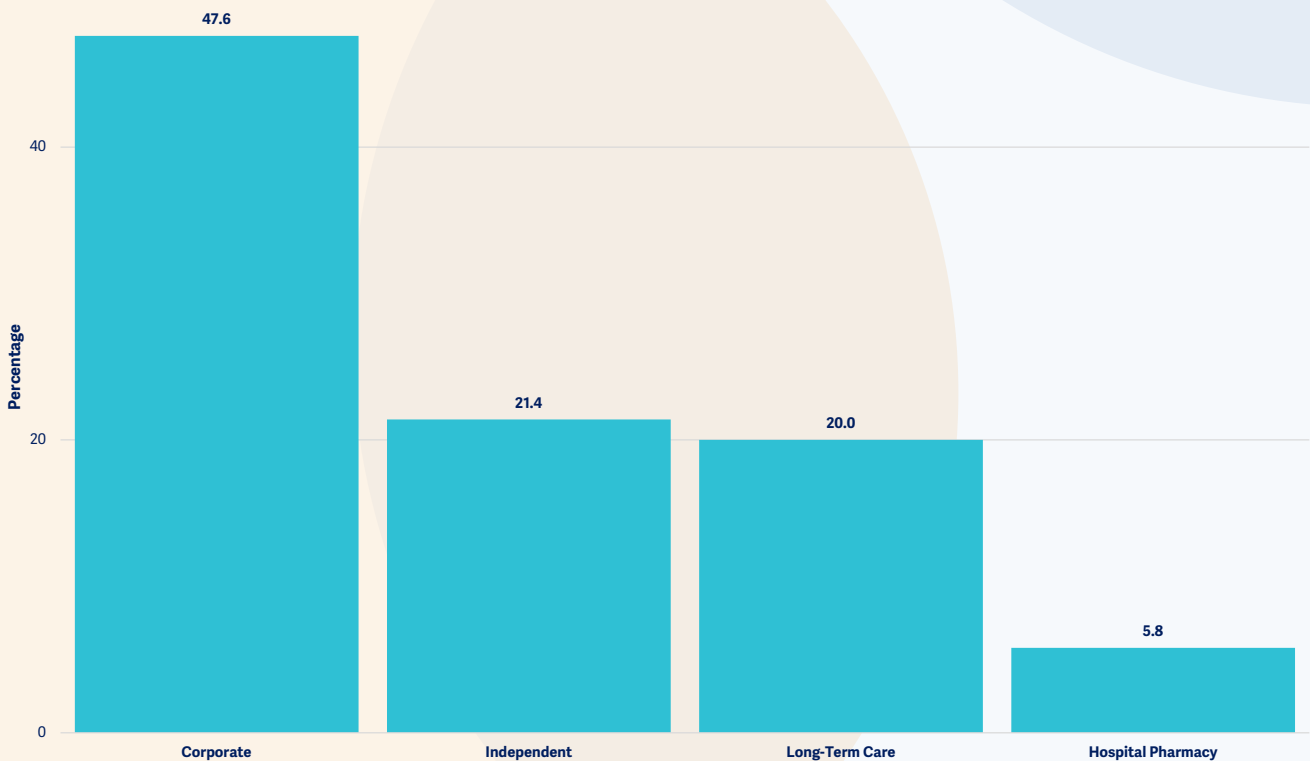
more registrants in corporate/franchised pharmacies reported pressure to conduct unnecessary medication reviews compared to those in independent pharmacies.

2^x

more registrants from corporate pharmacies reported feeling pressured to conduct a certain amount of medication reviews per shift.

Registrants from corporate pharmacies reported feeling pressured to conduct a certain amount of medication reviews per shift at **more than twice the rate** of other pharmacies.

Percentage of Pressure on Conducting Certain Medication Reviews per Shift



Analysis of Open-Ended Questions

The survey provided registrants with three opportunities to elaborate on their responses:

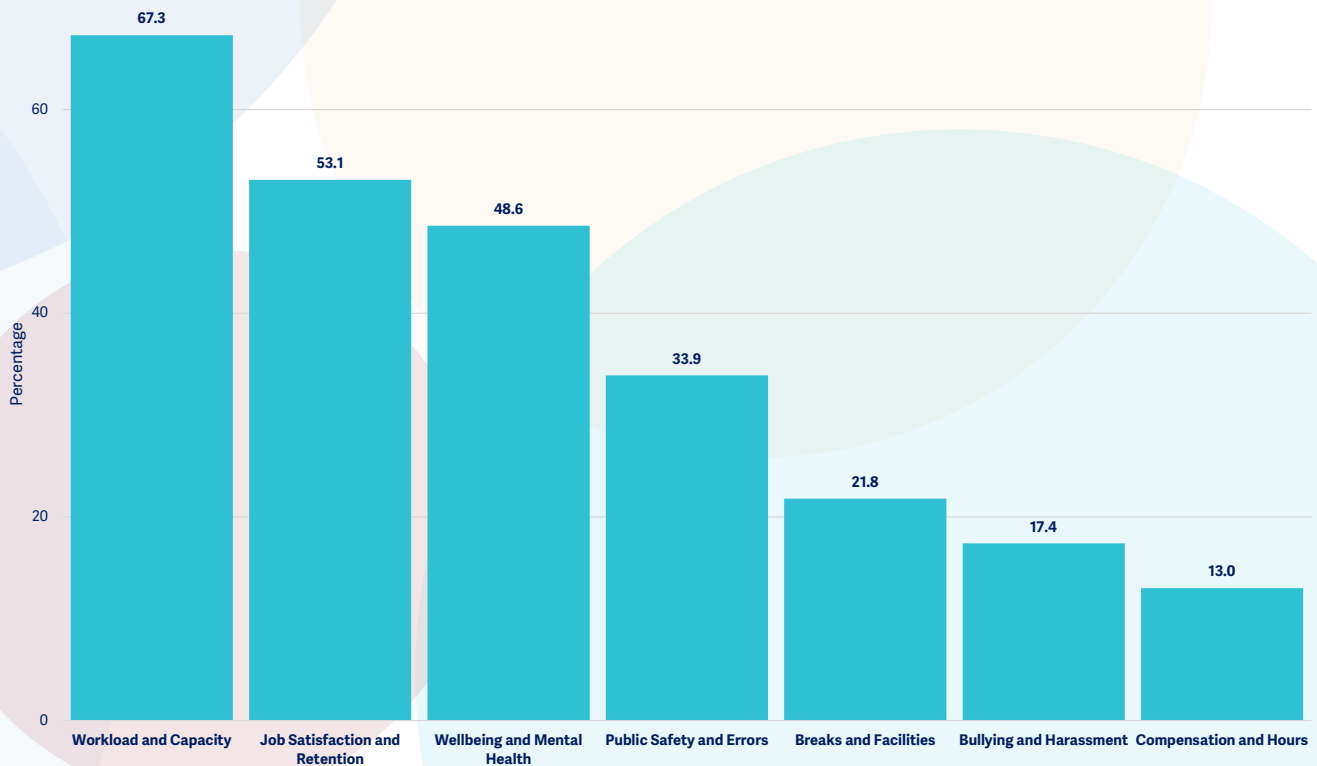
1. reasons for reporting public harm,
2. reasons for reporting compromised safety standards, and
3. any additional general comments.

An advanced language model was employed to analyze all 2,600+ comments, revealing seven distinct categories into which most responses naturally aligned. They are as follows:

1. workload and capacity
2. job satisfaction and retention
3. wellbeing and mental health
4. client safety and errors
5. breaks and facilities
6. bullying and harassment
7. compensation and hours

Note: each response potentially includes comments under multiple categories, so the total summation does not add up to 100 per cent.

Percentage of Comments from Registrants By Category

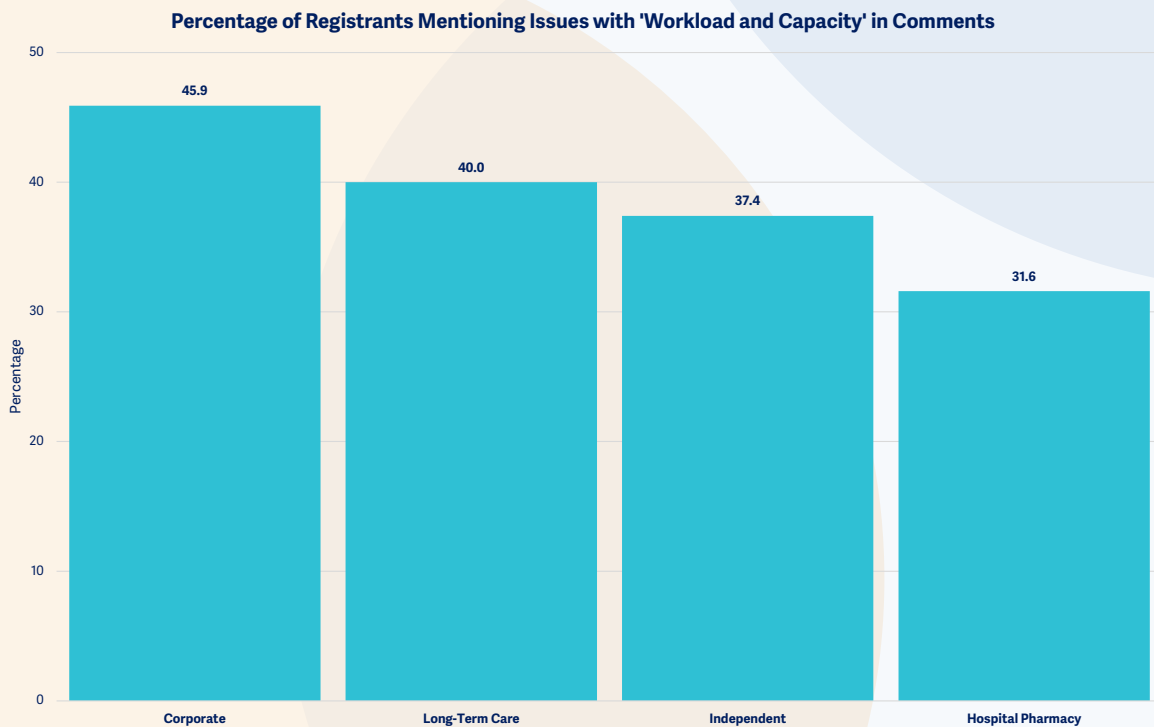


Workload and Capacity

Most registrants across all pharmacy settings expressed concerns about workload and capacity in their comments. Corporate and franchise pharmacies had the highest percentage of registrants mentioning these issues (45.9 per cent), followed closely by long-term care (40.0 per cent), and independent pharmacies (37.4 per cent). While hospital pharmacies had the lowest percentage (31.6 per cent), it is still notable that nearly one-third of registrants in this setting also voiced concerns about workload and capacity.

~ 46%

*of registrants in corporate/
franchise pharmacies
expressed concerns about
workload and capacity, the
highest among all settings.*



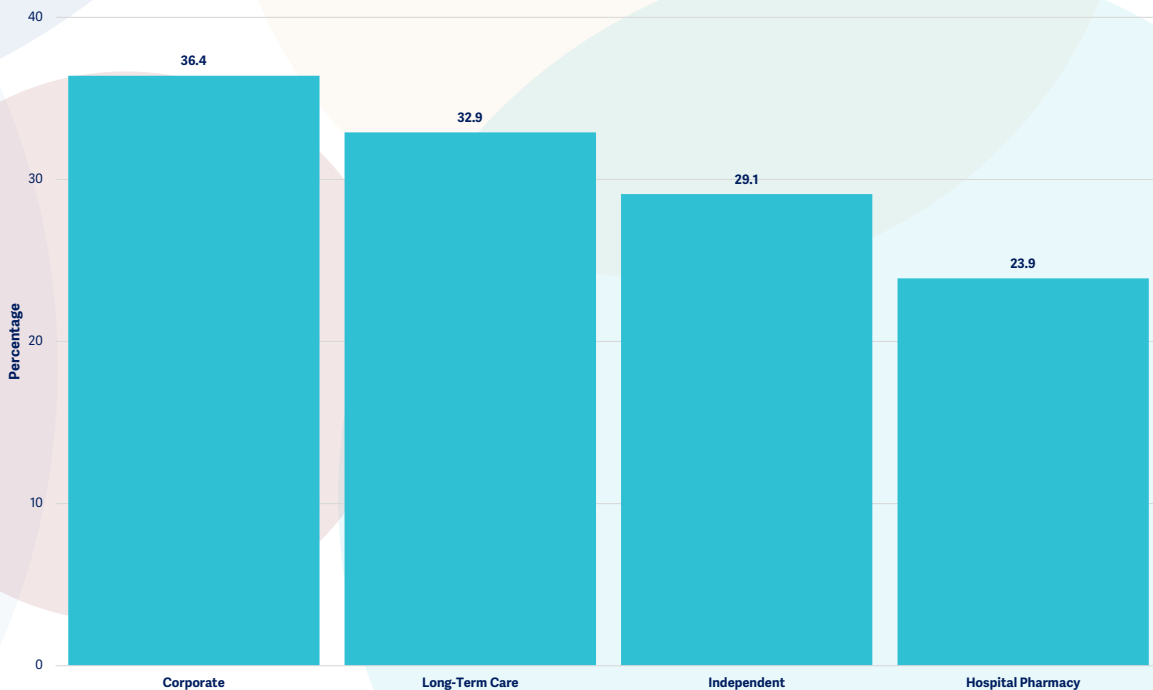
Job Satisfaction and Retention

36%+

of registrants in corporate pharmacies expressed concerns about job satisfaction, the highest among all settings.

Job satisfaction was a concern mentioned in the comments by registrants across all pharmacy settings. However, corporate pharmacies had the highest percentage of registrants raising this issue (36.4 per cent), followed by those in long-term care (32.9 per cent), and independent pharmacies (29.1 per cent). Hospital pharmacies had the lowest percentage (23.9 per cent) of registrants mentioning job satisfaction concerns.

Percentage of Registrants Mentioning Issues with 'Job Satisfaction' in Comments



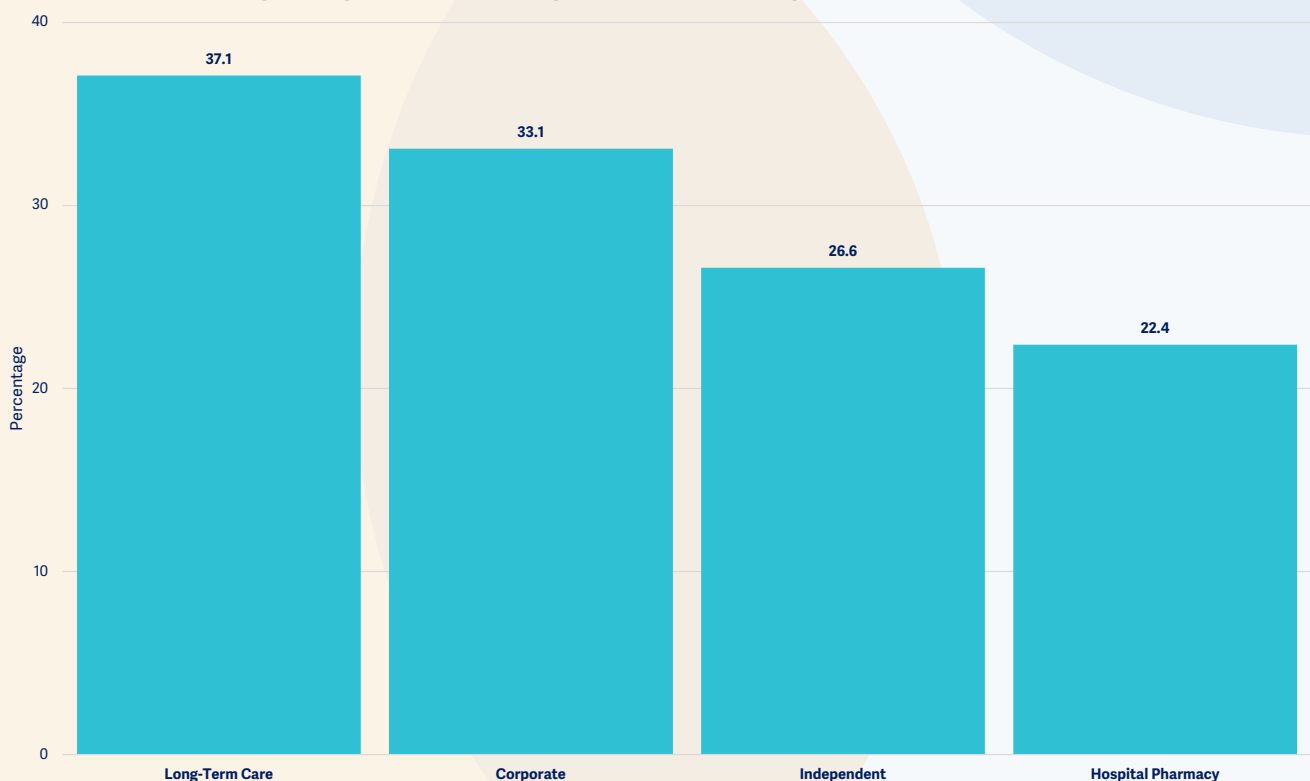
Wellbeing and Mental Health

Registrants from long-term care pharmacies expressed concerns about their wellbeing and mental health at a rate 10 per cent higher than corporate pharmacies, and 40 per cent higher than independent or health authority pharmacies.

40%

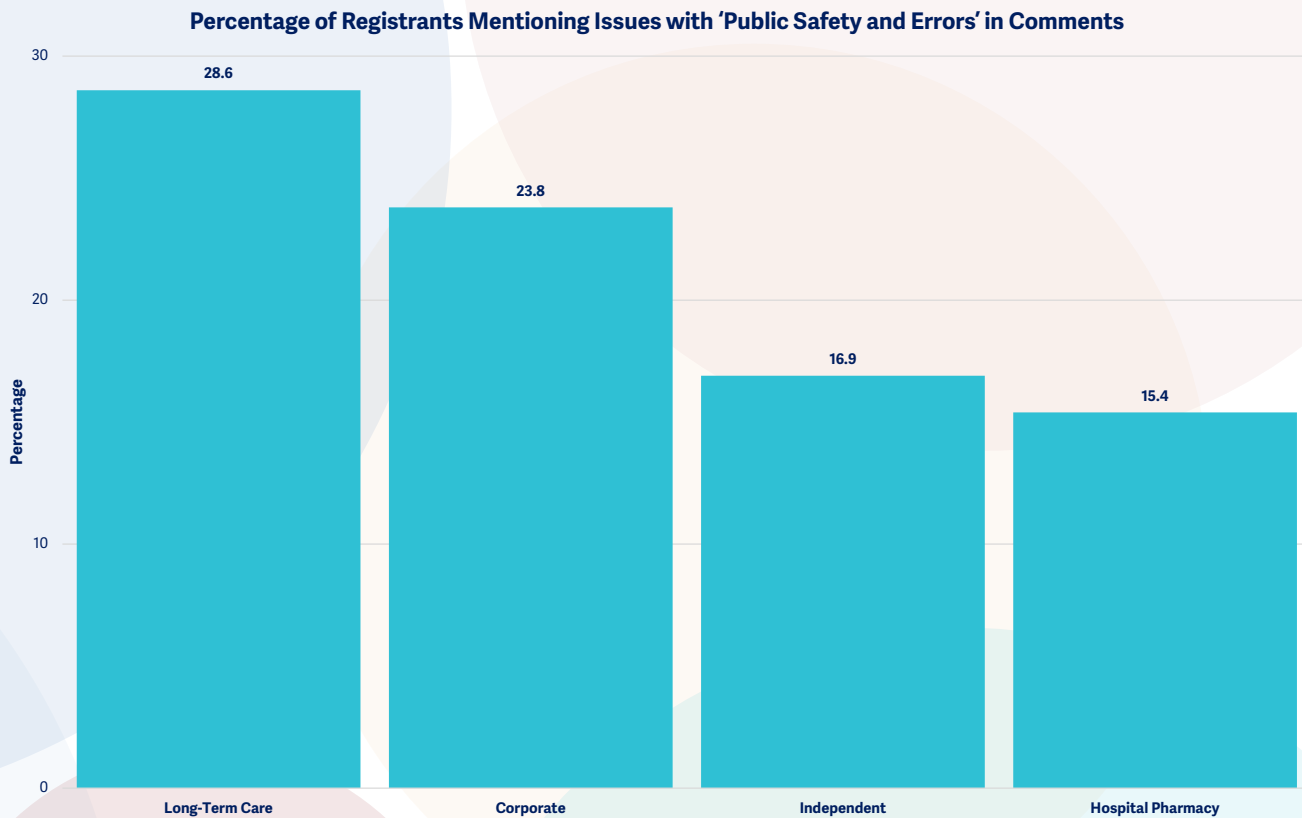
more registrants from long-term care pharmacies expressed concerns about wellbeing and mental health compared to those in independent or health authority pharmacies.

Percentage of Registrants Mentioning Issues with 'Wellbeing and Mental Health' in Comments



Public Safety and Errors

Comments with references to public safety and errors came up more frequently from registrants practicing in long-term care pharmacies than other pharmacies.

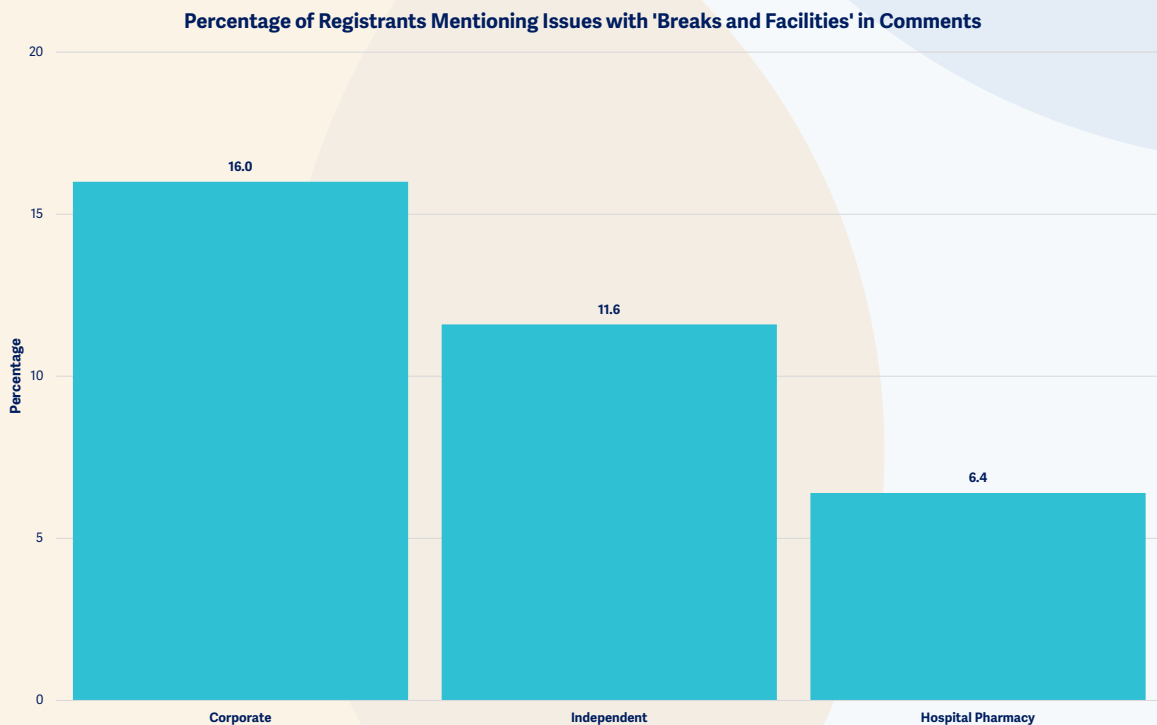


Breaks and Facilities

16%

of registrants in corporate pharmacies reported concerns about breaks and facilities, the highest among all settings.

Issues with breaks and facilities were mentioned less frequently than workload and capacity in the comments. However, registrants in corporate pharmacies still reported the highest percentage (16.0 per cent) of concerns in this area, followed by those in independent pharmacies (11.6 per cent) and hospital pharmacies (6.4 per cent).



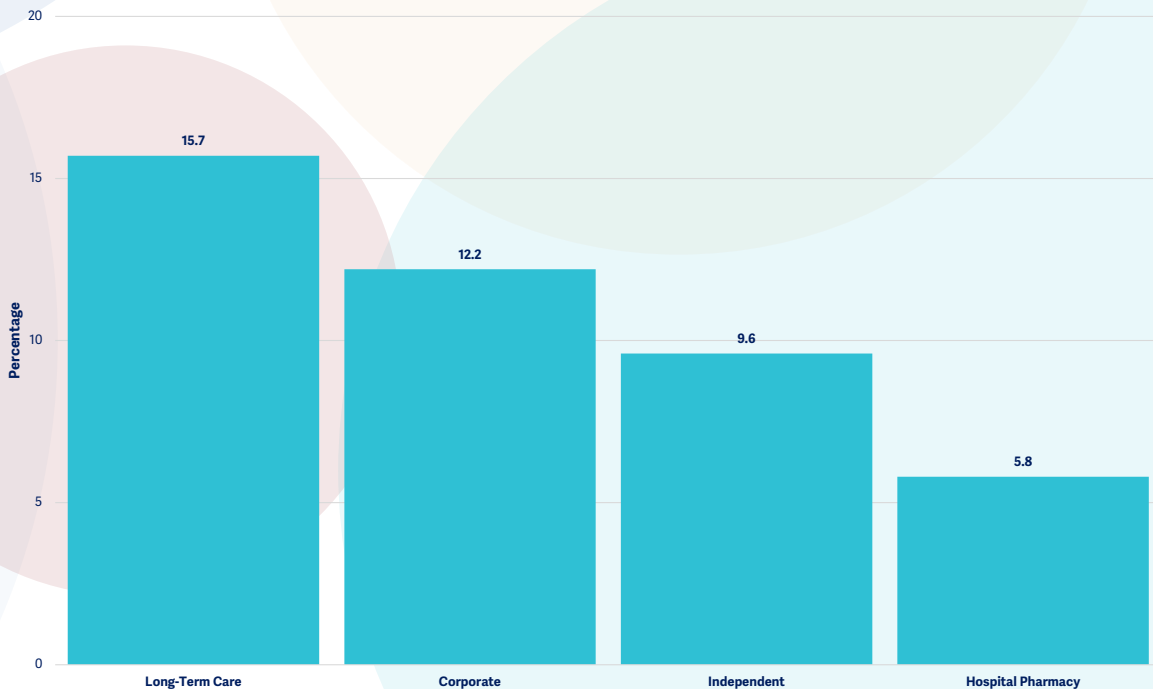
Bullying and Harassment

~16%

of pharmacists in long-term care pharmacies reported concerns about bullying and harassment, the highest among all settings.

Bullying and harassment were mentioned in the comments by registrants across all pharmacy settings. However, registrants in long-term care pharmacies reported the highest percentage (15.7 per cent) of concerns in this area. This is more than twice the rate reported by registrants in hospital pharmacies (5.8 per cent), and notably higher than those in independent (9.6 per cent) and corporate (12.2 per cent) pharmacies.

Percentage of Registrants Mentioning Issues with 'Bullying and Harassment' in Comments

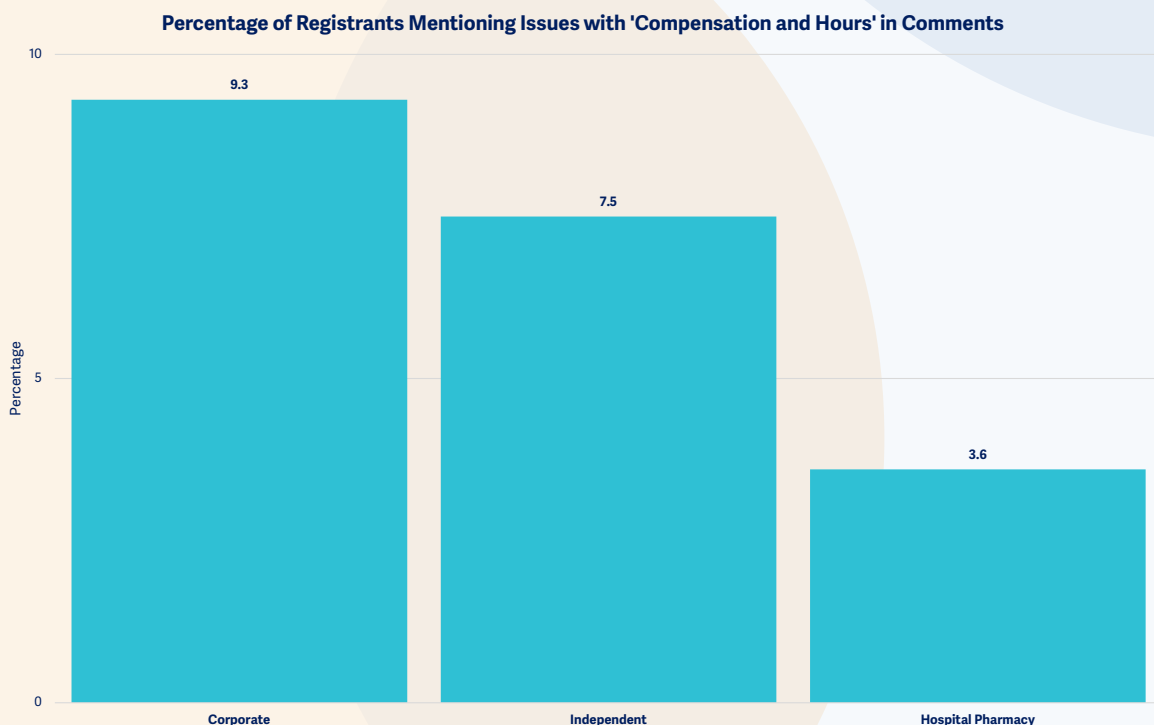


Compensation and Hours

Compensation and work hours were mentioned less frequently in the comments compared to other categories. However, registrants in corporate pharmacies still reported the highest percentage (9.3 per cent) of concerns in this area, followed by those in independent pharmacies (7.5 per cent), and hospital pharmacies (3.6 per cent).

9%+

of registrants in corporate pharmacies reported concerns about compensation and work hours, the highest among all settings.



What We Heard

The staff I regularly speak with at multiple locations are under immense stress due to understaffing and corporate pressure to push specific services. This pressure has led to frequent errors and a toxic work environment. Employees are often pressured to meet unrealistic quotas, even resorting to performing services on themselves to meet these targets. So many people I know have decided to simply quit due to these pressures.

We're constantly under pressure to meet service quotas. If we don't meet these quotas, we won't be allocated enough labour hours for the next quarter.

The pressure from parent companies to expand market share has resulted in numerous near-misses. The overwhelming workload makes it impossible to adhere to practice standards when providing services like counselling on medications, ultimately compromising the quality of care provided to patients. This situation not only jeopardizes patient safety, but also undermines the professional standards and expectations of pharmacists within the healthcare system.

The company doesn't care how many medication reviews we do versus injections, so long as we reach a specific dollar target set for each store. If these sales targets aren't met, labour support is simply withheld.

On multiple occasions, I've seen firsthand how the pressure to quickly check and sign off on prescriptions has led to the incorrect medications being dispensed. I've also overheard management wanting to dismiss a newer pharmacist due to being "too thorough" and taking too long to complete tasks.

I was instructed to follow certain billing and medication delivery practices under the false pretense of approval from the College. Because of this, inaccurate records were submitted and Pharmacare was incorrectly billed.

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Nearly every medication error or near miss has occurred due to a labour model that requires one pharmacist per operating hour while expanding the scope of practice to unmanageable levels. One pharmacist cannot simultaneously check prescriptions, give injections, complete medication reviews, handle adaptations, complete minor ailments, answer phones, speak to physicians, address customer questions, provide over the counter and prescription counselling, assist pharmacy technicians, send faxes and more. This overwhelming workload, combined with the threat of further cutting pharmacy assistant hours if professional service targets are not met, make it humanly impossible to maintain focus and ensure patient safety.

We are constantly multitasking and distracted at work. I was counselling and answering phones while verifying a prescription. If a patient requests a minor ailment assessment, injection, or adaptation, I must do that too to meet quotas. These constant interruptions have caused several dispensing errors in the past, making it an unsafe working environment.

I observed many uncomfortable situations as a practicum student. These situations included pharmacists hiding work, including triplicates and vaccination records so they could complete them later to avoid overtime, students replacing staff so they could go on vacation instead of adequately staffing the pharmacy, being asked to complete deliveries with my own vehicle because someone called in sick, and others. As a fully licensed pharmacist, I have seen quotas that pushed unnecessary medication reviews, prescription adaptations, providing services under PPMAC, all resulting in burnt out pharmacists. Burnt out pharmacists easily equal medication errors.

Our wages are linked to bonuses based on clinical services like medication review and injections. During the peak of COVID and flu shot seasons, I have seen many pharmacists prioritize injections over thoroughly checking medications to maximize bonus income. One pharmacist, in a rush, gave a patient incorrect high blood pressure medication. The patient unknowingly took the wrong dosage for two months and requested a refill early. Upon investigating, I found that the pharmacist had made a mistake on the label of the medication and dispensed the wrong amount. Fortunately, the patient did not experience any adverse effect and was understanding of the mistake.



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Corporate pressure to meet quotas leads to rushed work, causing multiple errors. Inadequate staffing further makes the problem worse, forcing pharmacists to multitask and potentially causing errors and putting patients' safety at risk. This negatively impacts public safety by increasing wait times for urgent medication, and increasing the likelihood of errors.

Due to being understaffed and having to multitask, I accidentally provided a patient with expired medication. Additionally, the incorrect strain of COVID vaccine was administered to another patient because of drug location placement error, understaffing, time constraints, and missing the double-check.

Labour hours are so restricted at my pharmacy that it is nearly impossible to avoid making mistakes when dispensing or checking complex prescriptions.

With only one pharmacist, one LPN, and one pharmacy assistant, the team is required to handle over 500 prescriptions, administer vaccines, supervise OAT and LPNs, adapt medication, and conduct medication reviews, among other responsibilities. Errors in medication dispensing occurred daily and were neither reported or documented. There was a lack of proper documentation, and issues with drug interactions that were frequently ignored due to time constraints and workload.

I simply do not have time to adhere to practice standards due to labour restrictions placed on us by management. Because of this, medication errors have happened - we're always being rushed.

Head office decreased staffing levels and this has forced the removal of a very important safety check where pharmacists reviewed medication batches. This change eliminates an opportunity to catch coding errors in pre-packed medication, increasing the risk of dispensing errors. I know for a fact we do catch errors via this method. But, management has decided to prioritize productivity and efficiency over patient safety by eliminating this control measure.

As quotas increase and labour hours are cut for not meeting these targets, the rate of serious medication errors has increased. Management instructed us not to report these errors. Some examples include administering the wrong medication strengths, a narcotic dose 10 times higher than intended that led to a hospital visit, and an incorrect insulin concentration given to a patient that could have been fatal if not noticed by the patient's guardian. Additionally, rushed pharmacists often provide inadequate drug checking and minimal patient care.

I was told - incorrectly - by management that if I did not accommodate walk-in requests for flu or COVID vaccines, I would be working against CPBC's code of ethics by refusing to provide care.

I constantly felt pressured to work for free, just so I could finish my work - past the time my shift ended. I refused to let patients suffer due to my employer's unwillingness to hire more people, and I eventually quit because of this.

The labour-based metrics lead to the pharmacy being staffed at minimal levels, inadequate for supporting its operations. This results in patients not receiving counselling, even for new medications, as pharmacists lack the time to review everything due to the high volume of prescriptions and other tasks. In some cases, pharmacy assistants end up providing counselling because the pharmacists are too busy. Errors occur as pharmacists rush through checks due to the heavy workload, leading to incorrect medications being dispensed or wrong instructions on labels. Pharmacists often don't get breaks, sometimes working entire shifts without eating or using the bathroom, which affects their ability to provide quality patient care. Additionally, quotas and deadlines pressure pharmacists into performing medication reviews on patients who may not need them, just to meet targets.

Pharmacist hours were evaluated based on labour cost per prescription, with a predetermined target set by district management. Exceeding this target labelled pharmacists "at risk," creating a threatening work environment where job security was constantly in question.



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The pressure to meet increasing services quotas has resulted in numerous errors that directly endangered patients due to understaffing, long hours without breaks, and inadequate support. The errors I've personally witnessed include dispensing incorrect medications, missing critical drug interactions, and administering wrong injections. I have witnessed patients coming back to inform the pharmacy team of an error that would've caused serious harm had they taken the medication. I have also witnessed medication errors where the wrong dosage was given to the patient due to the pharmacist working 14 hours straight. These errors are primarily due to the lack of overlap, breaks for food, lack of support staff, 12 to 14 hour shifts without designated breaks, and it's all being driven by business-based metrics.

I'm ready to quit. Between labour metrics determining how many pharmacists and assistants should be on shift, and being heavily relied upon to fill the gaps in areas where family doctors are far and few between, there's just too much work and not enough staff. I'm happy to help most of the time, but when patients are entitled and rude, and you're getting no assistance from management, it's increasingly difficult to keep going. The current state of pharmacy practice is unsustainable, and something needs to change.

I've had the same wage as a pharmacist in a retail setting for the past two decades, and things are just getting worse. Understaffing, no support from management, more responsibilities, poor compensation, lack of breaks during shift... it's taking a serious toll on my mental health and wellbeing.

Due to labour-based metrics imposed by upper management, pharmacists are often rushed to complete prescriptions on time and face additional pressure from customers upset about delays, leading to preventable medication errors. In the past three months, I have not witnessed any medication errors directly, but previously, there have been instances of wrong medications being dispensed, medications in incorrect vials, or labels being wrong. These errors are worsened by the pressure and insufficient pharmacy support staff, leading to missed steps in workflow and a higher risk of mistakes. I've also seen pharmacists check prescriptions without the actual hard copy, confusing new prescriptions with refills, which was a near miss that could have been harmful if not caught before dispensing or if there were errors in typing the prescription.

Conclusion

CPBC's April 2024 survey unveiled the reality in the British Columbia pharmacy landscape: business metrics are prevalent across all pharmacy types, with the highest reports within corporate and franchise pharmacies. The survey also indicated that business metrics appear to be significantly impacting public safety and registrant wellbeing.

Despite public assurances to the contrary, these metrics implemented by business owners, corporations, and franchises are placing undue pressure on pharmacists and pharmacy technicians, driving practices that may be compromising the delivery of safe and effective client care.

This preliminary report underscores the need to not only monitor and address these concerns, but also work to prevent such issues in the future.

As such, CPBC is committing to exploring all regulatory options including:

1. Developing a comprehensive whistleblower program to provide a safe and confidential avenue for registrants to report non-compliance with practice standards.
2. Expediting the review of current enforcement tools and exploring a focus on implementing a sliding scale of fees for repeat non-compliance.
3. Prioritizing and enhancing partnerships with government agencies, other regulatory bodies, and relevant organizations to foster a collective approach to addressing these systemic issues.
4. Reviewing opportunities to strengthen enforcement actions against pharmacies that fail to meet practice standards due to business pressures, emphasizing accountability for all pharmacy owners, including those of corporate and franchise entities.
5. Utilizing the survey data and ongoing monitoring to develop and implement staffing standards of practice that ensure adequate staffing levels in pharmacies.

CPBC reaffirms its commitment to safeguarding the health and wellbeing of British Columbians and ensuring that pharmacy practice in the province is guided by the principles of safety, ethics, and professional integrity.



Appendix: Survey Questions

1. Where do you currently practice? (Choose all that apply)
 - Costco
 - I.D.A.
 - Loblaws/Superstore
 - London Drugs
 - Medicine Shoppe
 - PharmaSave
 - PriceSmart
 - Pure Integrative
 - Rexall
 - Save-On-Foods
 - Shoppers Drug Mart
 - Sobeys/FreshCo/Safeway/Thrifty Foods
 - Walmart
 - Independently owned pharmacy
 - Long-term care pharmacy
 - Hospital/healthcare facility
 - Other Corporate or Community Chain Pharmacies not listed above

2. Please indicate your current member type:
 - Pharmacist
 - Pharmacy technician
 - Pharmacy student

3. CURRENTLY, OR WITHIN THE PAST THREE MONTHS, have you experienced regular pressure or direction to provide pharmacy services within a limited time frame OR to meet a specified quota, financial target, or labour-based metric?
 - Yes
 - No

4. Where have you experienced this type of pressure or direction either CURRENTLY, OR WITHIN THE PAST THREE MONTHS? (Choose all that apply)
 - Costco
 - I.D.A.
 - Loblaws/Superstore
 - London Drugs
 - Medicine Shoppe
 - PharmaSave
 - PriceSmart
 - Pure Integrative
 - Rexall
 - Save-On-Foods
 - Shoppers Drug Mart
 - Sobeys/FreshCo/Safeway/Thrifty Foods
 - Walmart
 - Independently owned pharmacy
 - Long-term care pharmacy
 - Hospital/healthcare facility
 - Other Corporate or Community Chain Pharmacies not listed above

5. Please select any situations you have experienced in your work in a pharmacy either CURRENTLY, OR WITHIN THE PAST THREE MONTHS. (Choose all that apply)
 - Being pressured or directed to carry out a certain number of minor ailment assessments per shift, day, week, month, or quarter.
 - Being pressured or directed to complete minor ailment assessments within a strict time limit.

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- Being pressured or directed to complete a specific number or dollar amount of Medication Reviews per shift, day, week, month, or quarter.
 - Being pressured or directed to complete unnecessary Medication Reviews.
 - Being pressured or directed to complete a specific number or dollar amount of injections/immunizations per shift, day, week, month, or quarter.
 - Being pressured or directed to complete injections/immunizations within a strict time limit.
 - Being pressured or directed to complete a specific number or dollar amount of prescription adaptations per shift, day, week, month, or quarter.
 - Being pressured or directed to complete prescription adaptations within a strict time limit.
 - Being pressured or directed to provide a specific number of other professional services per shift, day, week, month, or quarter.
 - Being pressured or directed to provide other professional services within a strict time limit.
 - Being pressured or directed to dispense a certain number or dollar amount of prescriptions per shift, day, week, month, or quarter.
 - Being pressured or directed to give priority to patients with simpler medication needs over those with more complex needs.
 - Being pressured or directed to limit labour hours (pharmacist, technician or assistant) in order to meet labour-based metrics.
 - Other (Please be specific but do not include any personally identifiable information)
6. In situations where you have been pressured or directed to provide pharmacy services within a strict time limit, please indicate the amount of time you were allotted:
- Minor Ailments Assessments
 - Medication Reviews
 - Adaptations
 - Immunizations/Injections
 - Other professional services
7. Have you ever observed or experienced pressure to meet quotas, deadlines or labour-based metrics that have resulted in direct harm to patients (e.g. medication errors)?
- Yes
 - No
8. Has pressure to meet quotas, deadlines or labour-based metrics forced you to compromise patient safety and/or fail to meet practice standards for pharmacy care as outlined in the Health Professions Act Bylaws - Community Pharmacy Standards of Practice?
- Yes
 - No
9. Have you PREVIOUSLY (i.e. longer than three months ago) experienced regular pressure or direction to provide pharmacy services within a limited time frame OR to meet a specified quota, financial target or labour-based metric?
- Yes
 - No
10. Where have you PREVIOUSLY (i.e. longer than three months ago) experienced this type of pressure or direction? (Choose all that apply)
- Costco
 - I.D.A.
 - Loblaws/Superstore
 - London Drugs
 - Medicine Shoppe
 - PharmaSave
 - PriceSmart
 - Pure Integrative
 - Rexall
 - Save-On-Foods
 - Shoppers Drug Mart
 - Sobeys/FreshCo/Safeway/Thrifty Foods
 - Walmart

- Independently owned pharmacy
 - Long-term care pharmacy
 - Hospital/healthcare facility
 - Other Corporate or Community Chain Pharmacies not listed above
11. Please select any situations you have PREVIOUSLY (i.e. longer than three months ago) experienced in your work in a pharmacy. (Choose all that apply)
- Being pressured or directed to carry out a certain number of minor ailment assessments per shift, day, week, month, or quarter.
 - Being pressured or directed to complete minor ailment assessments within a strict time limit.
 - Being pressured or directed to complete a specific number or dollar amount of Medication Reviews per shift, day, week, month, or quarter.
 - Being pressured or directed to complete unnecessary Medication Reviews.
 - Being pressured or directed to complete a specific number or dollar amount of injections/immunizations per shift, day, week, month, or quarter.
 - Being pressured or directed to complete injections/immunizations within a strict time limit.
 - Being pressured or directed to complete a specific number or dollar amount of prescription adaptations per shift, day, week, month, or quarter.
 - Being pressured or directed to complete prescription adaptations within a strict time limit.
 - Being pressured or directed to provide a specific number of other professional services per shift, day, week, month, or quarter.
 - Being pressured or directed to provide other professional services within a strict time limit.
 - Being pressured or directed to dispense a certain number or dollar amount of prescriptions per shift, day, week, month, or quarter.
 - Being pressured or directed to give priority to patients with simpler medication needs over those with more complex needs.
 - Being pressured or directed to limit labour hours (pharmacist, technician or assistant) in order to meet labour-based metrics.
 - Other (please be specific but do not include any personally identifiable information)
12. Please provide any additional comments or information you may have or anything else you think CPBC should know. (Please ensure your response does not include any personally identifiable information that could reveal your identity or that of your patients or co-workers, e.g. names, geographical location, practice type etc.)