Dear Applicant:

Re: Your request for access to information under Part II of the Access to Information and Protection of Privacy Act [Our File #: HCS/104/2018]

On September 4, 2018, the Department of Health and Community Services (the Department) received your request for access to the following records:

“Any and all reports to regulatory authorities on new and emerging prescribing patterns for monitored drugs as per section 4 (h) of an act respecting the monitoring of prescriptions in the province as well as any evaluations of the effectiveness of the program as per Section 4 (c) of the act. Please include any correspondence -- electronic or paper -- on the prescription monitoring program from January 2018 to present.”

On September 10, 2018, this request was refined to include correspondence specifically from the Minister, Deputy Minister, Assistant Deputy Minister and Director of Pharmaceutical Services.

I am pleased to inform you that a decision has been made by the Department to provide access to some the requested information. Access to the remaining information contained within the records has been refused in accordance with the following exceptions to disclosure as specified in the Access to Information and Protection of Privacy Act (the Act):

**Cabinet Confidences**

27. (1)(i) In this section, "cabinet record" means that portion of a record which contains information about the contents of a record within a class of information referred to in paragraphs (a) to (h).

27 (2)(a) The head of a public body shall refuse to disclose to an applicant a cabinet record.

**Policy advice or recommendations**

29. (1) The head of a public body may refuse to disclose to an applicant information that would reveal

(a) advice, proposals, recommendations, analyses or policy options developed by or for a public body or minister;

(c) draft legislation or regulations.

**Disclosure harmful to the financial or economic interests of a public body**

35. (1) The head of a public body may refuse to disclose to an applicant information which could reasonably be expected to disclose:

(g) information, the disclosure of which could reasonably be expected to prejudice the financial or economic interest of the government of the province or a public body.
Disclosure harmful to personal privacy

40. (1) The head of a public body shall refuse to disclose personal information to an applicant where the disclosure would be an unreasonable invasion of a third party's personal privacy.

The following pages have been removed:
Pages 138-149 - s. 29(1)(a)

Please be advised that you may ask the Information and Privacy Commissioner to review the processing of your access request, as set out in section 42 of the Access to Information and Protection of Privacy Act (the Act). A request to the Commissioner must be made in writing within 15 business days of the date of this letter or within a longer period that may be allowed by the Commissioner.

The address and contact information of the Information and Privacy Commissioner is as follows:

Office of the Information and Privacy Commissioner
2 Canada Drive
P. O. Box 13004, Stn. A
St. John’s, NL. A1B 3V8
Telephone: (709) 729-6309
Toll-Free: 1-877-729-6309
Facsimile: (709) 729-6500

You may also appeal directly to the Supreme Court Trial Division within 15 business days after you receive the decision of the public body, pursuant to section 52 of the Act.

Please be advised that responsive records will be published following a 72 hour period after the response is sent electronically to you or five business days in the case where records are mailed to you. It is the goal to have the responsive records posted to the Completed Access to Information Requests website within one business day following the applicable period of time. Please note that requests for personal information will not be posted online.

If you have any further questions, please contact the undersigned by telephone at 709-729-7010 or by email at MichaelCook@gov.nl.ca.

Sincerely,

Michael Cook
ATIPP Manager
/Enclosures
Access or correction complaint

42. (1) A person who makes a request under this Act for access to a record or for correction of personal information may file a complaint with the commissioner respecting a decision, act or failure to act of the head of the public body that relates to the request.

(2) A complaint under subsection (1) shall be filed in writing not later than 15 business days

(a) after the applicant is notified of the decision of the head of the public body, or the date of the act or failure to act; or

(b) after the date the head of the public body is considered to have refused the request under subsection 16 (2).

(3) A third party informed under section 19 of a decision of the head of a public body to grant access to a record or part of a record in response to a request may file a complaint with the commissioner respecting that decision.

(4) A complaint under subsection (3) shall be filed in writing not later than 15 business days after the third party is informed of the decision of the head of the public body.

(5) The commissioner may allow a longer time period for the filing of a complaint under this section.

(6) A person or third party who has appealed directly to the Trial Division under subsection 52 (1) or 53 (1) shall not file a complaint with the commissioner.

(7) The commissioner shall refuse to investigate a complaint where an appeal has been commenced in the Trial Division.

(8) A complaint shall not be filed under this section with respect to

(a) a request that is disregarded under section 21;

(b) a decision respecting an extension of time under section 23;

(c) a variation of a procedure under section 24; or

(d) an estimate of costs or a decision not to waive a cost under section 26.

(9) The commissioner shall provide a copy of the complaint to the head of the public body concerned.
Direct appeal to Trial Division by an applicant

52. (1) Where an applicant has made a request to a public body for access to a record or correction of personal information and has not filed a complaint with the commissioner under section 42, the applicant may appeal the decision, act or failure to act of the head of the public body that relates to the request directly to the Trial Division.

(2) An appeal shall be commenced under subsection (1) not later than 15 business days

(a) after the applicant is notified of the decision of the head of the public body, or the date of the act or failure to act; or

(b) after the date the head of the public body is considered to have refused the request under subsection 16 (2).

(3) Where an applicant has filed a complaint with the commissioner under section 42 and the commissioner has refused to investigate the complaint, the applicant may commence an appeal in the Trial Division of the decision, act or failure to act of the head of the public body that relates to the request for access to a record or for correction of personal information.

(4) An appeal shall be commenced under subsection (3) not later than 15 business days after the applicant is notified of the commissioner’s refusal under subsection 45 (2).
From: O'Dea, Jamie
To: Roberts, Amanda K
Subject: RE: Letter for TRIM
Date: Monday, January 8, 2018 3:03:42 PM
Attachments: Reply to Tom Bursey - NLCHI Board concerns with administration of PMP.docx

Sorry

From: Roberts, Amanda K
Sent: Monday, January 8, 2018 2:39 PM
To: O'Dea, Jamie <JamieODea@gov.nl.ca>
Subject: RE: Letter for TRIM

You forgot to attach 😊

From: O'Dea, Jamie
Sent: Monday, January 08, 2018 2:27 PM
To: Roberts, Amanda K
Subject: Letter for TRIM

Hi- Please format, add to TRIM under COR-2017-068946 and action to John Abbott for review and approval.

Jamie
Tom Bursey  
NL Center for Health Information  
70 O’Leary Avenue  
St. John’s, NL  
A1B 2C7  

January 3, 2018  

Dear Mr. Bursey:

Thank you for your letter dated December 13 regarding the Prescription Monitoring Act. I am pleased to hear that the Board of Directors for the Newfoundland and Labrador Center for Health Information (NLCHI) is supportive of the NL Prescription Monitoring Program and recognizes the value of the program in addressing the growing opioid problem facing residents of this province and country. Through your correspondence, the Board has expressed valid concerns regarding the administration of the Prescription Monitoring Program which I am happy to address.

As you are aware the Act grants the Minister of Health and Community Services the authority to appoint committees to oversee the administration of the PMP. As such, Term of Reference are currently being finalized for an NL Prescription Monitoring Program Consultants Committee. The Consultants Committee will be created to provide a forum for reviewing questionable activity criteria reporting, and for providing advice and making recommendations to the Minister of the Department of Health and Community Services on improvements to the program. Membership of this committee will include ex-officio members from NLCHI who are administering the PMP. The role of NLCHIs members will be to present information, answer questions and provide administrative support for the Committee meetings. NLCHI members will not participate in voting or the decision making process of the Committee.

The Prescription Monitoring Act also allows Minister of Health and Community Services to appoint a custodian or an employee of a custodian under the Personal Health Information Act to act as an inspector who may inspect or examine the premises, processes, books and records of a person that may be considered relevant for the purpose of determining compliance with Prescription Monitoring Act. While this authority is clearly outlined in the Act, such inspections would only be necessary in the most egregious situations of inappropriate prescribing and dispensing and I anticipate that they will be used very little, With that said the possibility always exists, as history has unfortunately show us, that an individual may conduct themselves in a manner that is counter to their professional standards. Government must have the ability to fully examine such a situation if one was ever to arise. In such a case the appointment of an inspector(s) will fall to the individual(s) deemed most appropriate for the given situation but the intention is that it will fall within the Department of Health and Community Services.

Thank you for bringing the Board’s concerns forward. I trust you will find my responses satisfactory. If you have any further questions or comments please feel free to contact me.

Sincerely,
JOHN HAGGIE, MD, FRCS
MHA – Gander
Minister
Hello everyone,

Please see the attached document which will be the focus of the PMP Communications meeting this afternoon. Please review and provide any feedback you would like to bring forward.

Thank you.

Amanda Roberts
Clerk Typist III
Pharmaceutical Services Division
Health and Community Services
Tel: 729-7168; Fax: 729-7680
Newfoundland and Labrador Prescription Monitoring Program

Frequently Asked Questions
Introduction

The Newfoundland and Labrador Prescription Monitoring Program (Program) falls under the Provincial Government’s Provincial Opioid Action Plan aimed at addressing the growing opioid crisis that is facing Canada and this province.

The Program will be overseen by the PMP Consultants Committee appointed by the Minister of Health and Community Services authorized under the Prescription Monitoring Act. The Act came into effect on January 2, 2018. Subsection 7(2), the provision requiring prescribers to view a patient’s medication profile prior to prescribing a monitored drug, comes into effect on June 30, 2018.

The purpose of the Program is to help prescribers and dispensers make the most informed decisions when choosing to administer a monitored drug. Utilizing the provincial electronic health record, health professionals have access to up-to-date and accurate patient medication profiles that supports clinical decision-making and their patients’ health care needs.

The following criteria will be used by the administrators of the Program to generate reports:
- Patients receiving two or more monitored drug prescriptions from two or more prescribers in a defined time period.
- Patients receiving two or more monitored drug prescriptions from two or more pharmacies in a defined time period.
- Patients on monitored drug dependence treatment who are receiving prescriptions for other monitored drugs.
- Inordinate dispensing and prescribing practices which may include dispensing or prescribing of monitored drugs in days’ supply of greater than 30 days.
- Patients attempting to create multiple patient profiles.

If activities that are deemed to contravene the Prescription Monitoring Act are discovered, they will be sent to the PMP Consultants Committee for review to determine if further analysis or actions are required.

The Newfoundland and Labrador Prescription Monitoring Program’s primary goal is to support health care practitioners when making a decision to prescribe or fill an opioid prescription.

For further information on the Prescription Monitoring Program, please contact: info@PMPNL.ca

For information on accessing the provincial electronic health record, HEALTHe NL, please contact: 709-752-6006, 1-877-752-6006 or service@nlchi.nl.ca
1. What is the Newfoundland and Labrador Prescription Monitoring Program?

The Newfoundland and Labrador Prescription Monitoring Program (Program) is another action being implemented by the Provincial Government as a part of the Provincial Opioid Action Plan to help address the growing opioid crisis that is facing Canada and this province.

All provinces, with the exception of Quebec, have some form of Prescription Monitoring Program. This is a tool being used to help prescribers and dispensers make informed decisions for patients who require monitored drugs as part of their treatment plan.

The primary goal of the Program is to ensure that when a monitored drug is prescribed, both prescribers and dispensers have access to up-to-date and accurate patient medication profiles to help inform and support their clinical decision-making and support their patients’ health care needs.

2. What health care professionals will be a part of the Program?

The health care professionals that will be a part of the Program are authorized prescribers and dispensers of prescription medications throughout the province. These are physicians, nurse practitioners, dentists and pharmacists.

3. What are the benefits of the Program?

The Program allows for better understanding of a patient’s monitored drug utilization based on their recent prescription history.

Utilizing the provincial electronic health record to assist prescribers and dispensers, provides a quick, confidential online report. It is available 24 hours a day, 7 days a week. Information is based on prescription data from over 200 community pharmacies.

Some important public health goals that are expected to result from the Program include an increase in the quality of patient care, greater confidence when prescribing and dispensing monitored drugs and a greater efficiency and coordination of care.

The Program is also expected to lead to a decrease in monitored drug misuse, prevent or reduce hospitalizations and deaths related to monitored drugs, and potentially lead to a long-term reduction in prescription drug-related crimes.
4. **How will information from the Program be used?**

The Program will be used as a measure to help prescribers and dispensers utilize components of the electronic health record to make a more fully informed decision when choosing a monitored drug to treat a patient.

The information that will be generated from the Program, such as prescribing and dispensing histories and patterns will help:

- Promote appropriate prescribing and dispensing practices of monitored drugs
- Provide information and education to prescribers and dispensers
- Identify potential instances of abuse and misuse of monitored drugs
- Reduce abuse and misuse, including reducing diversion of monitored drugs
- Reduce the risk of addiction and death resulting from abuse or misuse of monitored drugs

The information will also be used to inform the Provincial Government on the need for further intervention services, educational programming and to evaluate the effectiveness of the Program.

5. **Why do we need the Program?**

Prescription Monitoring Programs can help improve prescribing of monitored drugs and controlled substances, support ways to lower or prevent the harms related to these drugs, and can help identify patients who may be at risk of addiction.

The Program is not intended to prevent the use of monitored drugs for legitimate medical purposes. There are many reasons why a monitored drug is the most appropriate treatment for a patient’s condition. The Program is not meant to deter prescribers from making an informed clinical decision to administer a monitored drug.

However, we all have to recognize that prescription drug abuse, especially opioids, is a real issue that impacts the lives of Newfoundlanders and Labradorians every day. It will take the collective effort of the Provincial Government, the public and front line health care professionals to make headway in reducing and addressing this very serious and real public health issue.
6. Who provides oversight of the Newfoundland and Labrador Prescription Monitoring Program?

The Minister of Health and Community Services provides oversight for the Program. The Minister is responsible for:

- administering the Program;
- monitoring the prescribing and dispensing practices of monitored drugs;
- evaluating the effectiveness of the Program;
- providing information, professional consultation and assistance to the regulatory authorities relating to prescribing and dispensing of monitored drugs;
- monitoring the use of monitored drugs;
- educating prescribers and dispensers about appropriate prescribing and dispensing of monitored drugs;
- educating individuals on the appropriate use of monitored drugs;
- reporting to regulatory authorities on new and emerging prescribing patterns for monitored drugs; and,
- any other duties prescribed in the regulations.

However, the Act permits the Minister to delegate his powers and duties.

It is intended that the Minister will delegate the administration of the Program to the Newfoundland and Labrador Centre for Health Information.

7. What powers does the Newfoundland and Labrador Prescription Monitoring Program have?

The Prescription Monitoring Act, authorizes the monitoring, analyzing and reporting of information, including personal health information, related to the prescribing and dispensing of monitored drugs in order to:

- promote appropriate prescribing and dispensing practices for monitored drugs; and
- reduce the abuse and misuse of monitored drugs.

8. How many other Canadian jurisdictions have prescription monitoring Programs?

All provinces, with the exception of Quebec, have a version of a prescription monitoring Program either in effect or in development.
9. How do I know what drugs are to be monitored by the Program?

Only prescription opioid medications listed in the Controlled Drugs and Substances Act (Canada) and tramadol are being monitored by the Program.

10. Will more controlled prescription medications or other drugs such as antibiotics be added to the list of monitored prescriptions at a later date?

Currently, the initial objective of the Program is to monitor opioid prescriptions. As the Program matures, other medications may be added to the Program.

In the long-term, the Program may consider how it could be utilized to help address the over-prescribing of certain antibiotics. This is not currently under consideration, but the foundation of the Program, utilizing the provincial electronic health record, could support such an initiative in the future.

11. Will the Program capture mail order prescriptions as part of the monitoring process?

Currently, prescriptions dispensed outside the province are not captured by the Pharmacy Network.

The Department and the Program will be consulting with the Newfoundland and Labrador Pharmacy Board on how to capture this information under the Program’s criteria.

12. What is expected of a prescriber when prescribing a monitored drug to a patient? When will this come into effect?

The only new expectation is that all prescribers review a patient’s medication profile in the electronic health record prior to prescribing a monitored drug to ensure of its appropriateness. This requirement comes into effect on June 30, 2018.
13. What is expected of dispensers when filling a prescription for a monitored drug? When will this come into effect?

There are no new expectations of dispensers as they are already expected to review a patient’s medication profile in the electronic health record prior to all dispenses. They are also obligated to input prescription information in the Pharmacy Network as per their Standards of Pharmacy Operation. These provisions of Bill 25 will come into effect on January 1, 2018.

14. What about veterinarians? Will they be required to comply with the Act?

While veterinarians fall under the definition of prescriber in the Act, they will be excluded in the Regulations while the Department of Health and Community Services works with the Newfoundland and Labrador Veterinary Medical Association to determine how to capture these prescriptions under the Program.

15. Can personal health information be shared with the Prescription Monitoring Program when requested by staff/inspectors?

Under the Act, prescribers and dispensers must provide information which may include personal health information when it is requested by the administrator of the Program. This requirement overrides any confidentiality provision in the Personal Health Information Act. Therefore, in complying with such a request, a prescriber or dispenser is not in violation of the Personal Health Information Act.

16. Are there any penalties under the Act?

Failure to comply with a requirement under the Act is an offence and may result in a fine of up to $10,000 for an individual or $20,000 for a Corporation.
17. Can prescribers/dispensers or members of the public opt out of the Newfoundland and Labrador Prescription Monitoring Program?

No, all monitored drug prescriptions provided by prescribers and filled in pharmacies in Newfoundland and Labrador are subject to review under the Program.

If a patient has a consent directive on their electronic health record, it does not mask their prescriptions from the Program.

All prescribers and dispensers will be required to review the patient’s medication profile before writing or filling a monitored drug prescription.

18. Will information from the Program related to prescribers, dispensers or the general public be shared with their professional regulatory authority or law enforcement? If so, under what circumstances?

The purpose of the Program is to help prescribers and dispensers make the most informed decisions when choosing to administer a monitored drug, its intention is not to police these professionals. Prescribers and dispensers who are performing their duties as health care professionals in accordance with their regulatory guidelines and the requirements under the Act would not have their information shared with their regulatory bodies.

If activities that are deemed to contravene the Prescription Monitoring Act are discovered, they would be reviewed by the PMP Consultants Committee and possibly shared with the regulatory body or law enforcement if warranted.

The following activities will be considered for review under the Program. Other activities, as deemed necessary by the Minister, may be added in the future.

- Patients receiving two or more monitored drug prescriptions from two or more prescribers in a defined time period.
- Patients receiving two or more monitored drug prescriptions from two or more pharmacies in a defined time period.
- Patients on monitored drug dependence treatment who are receiving prescriptions for other monitored drugs.
- Inordinate dispensing and prescribing practices which may include dispensing or prescribing of monitored drugs in days’ supply of greater than 30 days.
- Patients attempting to create multiple patient profiles.
19. Who will sit on the Prescription Monitoring Program Consultants Committee?

The terms of reference for the PMP Consultants Committee is currently under development. The committee will have at least two prescribers and two dispensers.

Dispenser and prescriber representation on this committee is key in order to provide a clinical lens on the information.

20. Can a prescriber or dispenser designate someone at the clinic or pharmacy to check the patient’s medication profile?

No, it is the responsibility of the prescriber and the dispenser to review the patient’s medication profile prior to prescribing or dispensing a monitored drug.

21. Will the Program capture prescriptions from another jurisdiction?

Prescriptions filled in the province must be inputted into the Pharmacy Network. Just because a patient is from another jurisdiction that does not mean that he/she does not have a medication profile in the electronic health record. Medication profiles are maintained for all patients that have prescriptions filled in pharmacies in Newfoundland and Labrador.

22. Will there be any changes to the Tamper Resistant Prescription Drug Pad program (TRPP)?

TRPP is a program under the Pharmaceutical Services Act which requires that prescriptions for certain drugs, including opioids, be issued on a special tamper resistant drug pad. There are no substantive changes anticipated to this program. However, minor changes may be made to the actual prescription pad to denote that a prescriber has checked the patient’s medication profile prior to prescribing.
23. How will the Program know whether prescribers and dispensers are complying with the Program requirements?

The Department and NLCHI are still working on how prescribers will document that they have reviewed the medication profile. An option could be a revision to the tamper-resistant prescription pads to include a check-box where prescribers can indicate that they have reviewed the patient’s medication profile.

Random reviews of prescriptions for monitored drugs may occur to ensure that a patient’s medication profile was accessed by both the prescriber and dispenser prior to the prescription being filled.

24. Will prescribers and dispensers be required to report to the Program issues regarding how a prescriber is prescribing a monitored drug?

Bill 25 does not contain a duty to report. Concerns of this nature should be discussed with the prescriber or the prescriber’s regulatory body.

25. What about opioids that are prescribed and dispensed for patients in hospital? Will the Program capture those prescriptions?

The Program will capture all of those prescriptions dispensed by pharmacies to outpatients. However, given the nature of the provision of health care services in hospital, inpatients will not be captured.

In terms of risk, inpatients do not receive more than the required dose at any given time so the risk of abuse or misuse of opioids is quite low.
26. Didn’t the province already have a prescription monitoring program at one time?

Yes. There was a prescription monitoring program in place sometime ago. However, without an electronic system to capture the dispensing of prescriptions, it had limited success.

With the Pharmacy Network now connected in all community pharmacies in the province, the necessary tools are in place to more successfully implement a prescription monitoring program.

27. What information can the Program give to a physician, dentist, nurse practitioner or pharmacist about a patient?

The Program can provide a drug profile that identifies an individual's prescriptions for drugs monitored by the Program. It includes, but is not limited to, the identification of the prescribers prescribing the drugs and the pharmacies dispensing the drugs. This information is already available to health care professionals via the provincial electronic health record.

28. Are prescribers and dispensers permitted to share personal health information with the Prescription Monitoring Program?

As per subsection 10(2) of the Prescription Monitoring Act, a prescriber, dispenser, or other person is permitted to and is required to provide to the Minister any requested information reasonably needed to achieve the objects of the Program.
29. What tools are available to help prescribers and dispensers adhere to the Newfoundland and Labrador Prescription Monitoring Program?

The electronic health record, HEALTHe NL, will be the primary tool to help prescribers and dispensers adhere to the Program.

HEALTHe NL is a private record of an individual’s health care information, available electronically to authorized health care professionals. It integrates information from many sources into a single, lifetime record of an individual’s key health history and care. Information is available in one place when and where it is needed.

Information contained in HEALTHe NL includes:
- Patient medication profiles from all community pharmacies province wide through the Pharmacy Network
- Known allergies and medical alerts from community pharmacies only.
- Meditech data, including dictated reports, laboratory results, diagnostic imaging and encounters.
- Information about where health services have occurred, by whom and other key clinical events such as inpatient admission.

The primary tool that will be utilized by the Program will be the Pharmacy Network component. This will provide prescribers and dispensers with a complete patient medication profile to inform their clinical decision making when prescribing or filling a monitored drug prescription.

30. What is the Pharmacy Network?

The Pharmacy Network is a component of the province-wide electronic health record, HEALTHe NL, that is comprised of a real-time database of medication profiles compiled from prescriptions filled at all of the province’s outpatient pharmacies.
31. When will the *Prescription Monitoring Act* come into effect?

The Prescription Monitoring Act came into effect on January 2, 2018. Subsection 7(2) will come into on June 30, 2018. This provision requires prescribers to view a patient’s medication profile prior to prescribing a monitored drug. The delay in proclamation will provide time to ensure that all prescribers have access to HEALTHe NL so they can access their patients’ medication profiles.

32. What impact with the Program have on the illegal opioid trade?

The Department of Health and Community Services and NLCHI have worked closely with law enforcement agencies in the development of the Program and will continue to work closely with its partners and stakeholders in identifying and addressing any unintended consequences related to the implementation of the Program.

33. How will the Pharmacy Network be used for the Program? What will it produce to support the Program? Audits? Alerts? Reports?

Data from the Pharmacy Network will be used to help guide prescribers and dispensers in making clinical decisions regarding the prescribing/dispensing monitored drugs. It will also be the basis for the reports generated by the Program to detect questionable activity.
Hi Jamie,

My comments are included as tracked changes comments. If you have any questions let me know.

Thanks,

Jamie

Jamie Osmond
Associate Registrar – Licensing and Quality
Director of Operations
College of Physicians and Surgeons of Newfoundland and Labrador

709.726.8546
Email: josmond@cpsnl.ca
www.cpsnl.ca

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Unless otherwise agreed expressly in writing by an authorized representative of The College of Physicians and Surgeons of Newfoundland and Labrador, this communication is to be treated as confidential and the information in it may not be used or disclosed except for the purpose for which it has been sent. If you have reason to believe that you are not the intended recipient of this communication, please delete the message and any attachments from your system and contact the sender immediately.
Newfoundland and Labrador Prescription Monitoring Program

Frequently Asked Questions
Introduction

The Newfoundland and Labrador Prescription Monitoring Program (Program) falls under the Provincial Government’s Provincial Opioid Action Plan aimed at addressing the growing opioid crisis that is facing Canada and this province.

by the Minister of Health and Community Services authorized under the Prescription Monitoring Act. The Act came into effect on January 2, 2018. Subsection 7(2), the provision requiring prescribers to view a patient’s medication profile prior to prescribing a monitored drug, comes into effect on June 30, 2018.

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2. **What health care professionals will be a part of the Program?**

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- monitoring the use of monitored drugs;
- educating prescribers and dispensers about appropriate prescribing and dispensing of monitored drugs;
- educating individuals on the appropriate use of monitored drugs;
- reporting to regulatory authorities on new and emerging prescribing patterns for monitored drugs; and,
- any other duties prescribed in the regulations.

However, the Act permits the Minister to delegate his powers and duties.

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The Prescription Monitoring Act, authorizes the monitoring, analyzing and reporting of information, including personal health information, related to the prescribing and dispensing of monitored drugs in order to:

- promote appropriate prescribing and dispensing practices for monitored drugs; and
- reduce the abuse and misuse of monitored drugs.

8. How many other Canadian jurisdictions have prescription monitoring Programs?

All provinces, with the exception of Quebec, have a version of a prescription monitoring Program either in effect or in development.
9. How do I know what drugs are to be monitored by the Program?

Only prescription opioid medications listed in the Controlled Drugs and Substances Act (Canada) and tramadol are being monitored by the Program.

10. Will more controlled prescription medications or other drugs such as antibiotics be added to the list of monitored prescriptions at a later date?

Currently, the initial objective of the Program is to monitor opioid prescriptions. As the Program matures, other medications may be added to the Program.

This is not currently under consideration, but the foundation of the Program, utilizing the provincial electronic health record, could support such an initiative in the future.

11. Will the Program capture mail order prescriptions as part of the monitoring process?

Currently, prescriptions dispensed outside the province are not captured by the Pharmacy Network.

The Department and the Program will be consulting with the Newfoundland and Labrador Pharmacy Board on how to capture this information under the Program's criteria.

12. What is expected of a prescriber when prescribing a monitored drug to a patient? When will this come into effect?

The only new expectation is that all prescribers review a patient’s medication profile in the electronic health record prior to prescribing a monitored drug to ensure of its appropriateness. This requirement comes into effect on June 30, 2018.
13. What is expected of dispensers when filling a prescription for a monitored drug? When will this come into effect?

There are no new expectations of dispensers as they are already expected to review a patient’s medication profile in the electronic health record prior to all dispenses. They are also obligated to input prescription information in the Pharmacy Network as per their Standards of Pharmacy Operation. These provisions of Bill 25 will come into effect on January 1, 2018.

14. What about veterinarians? Will they be required to comply with the Act?

While veterinarians fall under the definition of prescriber in the Act, they will be excluded in the Regulations while the Department of Health and Community Services works with the Newfoundland and Labrador Veterinary Medical Association to determine how to capture these prescriptions under the Program.

15. Can personal health information be shared with the Prescription Monitoring Program when requested by staff/inspectors?

Under the Act, prescribers and dispensers must provide information which may include personal health information when it is requested by the administrator of the Program. This requirement overrides any confidentiality provision in the Personal Health Information Act. Therefore, in complying with such a request, a prescriber or dispenser is not in violation of the Personal Health Information Act.

16. Are there any penalties under the Act?

Failure to comply with a requirement under the Act is an offence and may result in a fine of up to $10,000 for an individual or $20,000 for a Corporation.
17. Can prescribers/dispensers or members of the public opt out of the Newfoundland and Labrador Prescription Monitoring Program?

No, all monitored drug prescriptions provided by prescribers and filled in pharmacies in Newfoundland and Labrador are subject to review under the Program.

If a patient has a consent directive on their electronic health record, it does not mask their prescriptions from the Program.

18. Will information from the Program related to prescribers, dispensers or the general public be shared with their professional regulatory authority or law enforcement? If so, under what circumstances?

The purpose of the Program is to help prescribers and dispensers make the most informed decisions when choosing to administer a monitored drug, its intention.

If activities that are deemed to contravene the Prescription Monitoring Act are discovered, they would be reviewed by the PMP Consultants Committee and possibly shared with the regulatory body or law enforcement if warranted.

The following activities will be considered for review under the Program. Other activities, as deemed necessary by the Minister, may be added in the future.

- Patients receiving two or more monitored drug prescriptions from two or more prescribers in a defined time period.
- Patients receiving two or more monitored drug prescriptions from two or more pharmacies in a defined time period.
- Patients on monitored drug dependence treatment who are receiving prescriptions for other monitored drugs.
- Inordinate dispensing and prescribing practices which may include dispensing or prescribing of monitored drug.
- Patients attempting to create multiple patient profiles.
19. Who will sit on the Prescription Monitoring Program Consultants Committee?

The terms of reference for the PMP Consultants Committee is currently under development. The committee will have at least two prescribers and two dispensers.

Dispenser and prescriber representation on this committee is key in order to provide a clinical lens on the information.

20. Can a prescriber or dispenser designate someone at the clinic or pharmacy to check the patient’s medication profile?

No, it is the responsibility of the prescriber and the dispenser to review the patient’s medication profile prior to prescribing or dispensing a monitored drug.

21. Will the Program capture prescriptions from another jurisdiction?

Prescriptions filled in the province must be inputted into the Pharmacy Network. Just because a patient is from another jurisdiction that does not mean that he/she does not have a medication profile in the electronic health record. Medication profiles are maintained for all patients that have prescriptions filled in pharmacies in Newfoundland and Labrador.

22. Will there be any changes to the Tamper Resistant Prescription Drug Pad program (TRPP)?

TRPP is a program under the Pharmaceutical Services Act which requires that prescriptions for certain drugs, including opioids, be issued on a special tamper resistant drug pad. There are no substantive changes anticipated to this program. However, minor changes may be made to the actual prescription pad to denote that a prescriber has checked the patient’s medication profile prior to prescribing.
23. How will the Program know whether prescribers and dispensers are complying with the Program requirements?

The Department and NLCHI are still working on how prescribers will document that they have reviewed the medication profile. An option could be a revision to the tamper-resistant prescription pads to include a check-box where prescribers can indicate that they have reviewed the patient’s medication profile.

Random reviews of prescriptions for monitored drugs may occur to ensure that a patient’s medication profile was accessed by both the prescriber and dispenser prior to the prescription being filled.

24. Will prescribers and dispensers be required to report to the Program issues regarding how a prescriber is prescribing a monitored drug?

25. What about opioids that are prescribed and dispensed for patients in hospital? Will the Program capture those prescriptions?

The Program will capture all of those prescriptions dispensed by pharmacies to outpatients. However, given the nature of the provision of health care services in hospital, inpatients will not be captured.

In terms of risk, inpatients do not receive more than the required dose at any given time so the risk of abuse or misuse of opioids is quite low.
26. Didn’t the province already have a prescription monitoring program at one time?

Yes. There was a prescription monitoring program in place sometime ago. However, without an electronic system to capture the dispensing of prescriptions, it had limited success.

With the Pharmacy Network now connected in all community pharmacies in the province, the necessary tools are in place to more successfully implement a prescription monitoring program.

27. What information can the Program give to a physician, dentist, nurse practitioner or pharmacist about a patient?

The Program can provide a drug profile that identifies an individual's prescriptions for drugs monitored by the Program. It includes, but is not limited to, the identification of the prescribers prescribing the drugs and the pharmacies dispensing the drugs. This information is already available to health care professionals via the provincial electronic health record.

28. Are prescribers and dispensers permitted to share personal health information with the Prescription Monitoring Program?

As per subsection 10(2) of the Prescription Monitoring Act, a prescriber, dispenser, or other person is permitted to and is required to provide to the Minister any requested information reasonably needed to achieve the objects of the Program.
29. What tools are available to help prescribers and dispensers adhere to the Newfoundland and Labrador Prescription Monitoring Program?

The electronic health record, HEALTHe NL, will be the primary tool to help prescribers and dispensers adhere to the Program.

HEALTHe NL is a private record of an individual’s health care information, available electronically to authorized health care professionals. It integrates information from many sources into a single, lifetime record of an individual’s key health history and care. Information is available in one place when and where it is needed.

Information contained in HEALTHe NL includes:
- Patient medication profiles from all community pharmacies province wide through the Pharmacy Network
- Known allergies and medical alerts from community pharmacies only.
- Meditech data, including dictated reports, laboratory results, diagnostic imaging and encounters.
- Information about where health services have occurred, by whom and other key clinical events such as inpatient admission.

The primary tool that will be utilized by the Program will be the Pharmacy Network component. This will provide prescribers and dispensers with a complete patient medication profile to inform their clinical decision making when prescribing or filling a monitored drug prescription.

30. What is the Pharmacy Network?

The Pharmacy Network is a component of the province-wide electronic health record, HEALTHe NL, that is comprised of a real-time database of medication profiles compiled from prescriptions filled at all of the province’s outpatient pharmacies.
31. When will the Prescription Monitoring Act come into effect?

The Prescription Monitoring Act came into effect on January 2, 2018. Subsection 7(2) will come into on June 30, 2018. This provision requires prescribers to view a patient’s medication profile prior to prescribing a monitored drug. The delay in proclamation will provide time to ensure that all prescribers have access to HEALTHe NL so they can access their patients’ medication profiles.

32. What impact with the Program have on the illegal opioid trade?

The Department of Health and Community Services and NLCHI have worked closely with law enforcement agencies in the development of the Program and will continue to work closely with its partners and stakeholders in identifying and addressing any unintended consequences related to the implementation of the Program.

33. How will the Pharmacy Network be used for the Program? What will it produce to support the Program? Audits? Alerts? Reports?

Data from the Pharmacy Network will be used to help guide prescribers and dispensers in making clinical decisions regarding the prescribing/dispensing monitored drugs. It will also be the basis for the reports generated by the Program to detect questionable activity.
Hi Glenda,

I wanted to let you know that I’ll be sending a copy of the draft Regulations under the Prescription Monitoring Act to you tomorrow for your review. So I’d ask that you have any feedback/comments to me by the 12th so I can work on finalizing the Regulations upon my return. If you have any questions, we can arrange a time to discuss when I get back in the office or in my absence you could connect with Jamie O’Dea whom I’ve copied on this email.

Thanks.

Gerrie

Gerrie Smith, BA LLB
Legislative Consultant
Department of Health and Community Services
709-729-2560 (tel)
gerriesmith@gov.nl.ca

This email is intended only for the person to whom it is addressed. If you have received this email in error, please notify the sender immediately.
Hi,

I've updated the FAQ for PMP based on the feedback from the ARRNL, NLMA, PANL, CPSNL and PB. See attached.

We can discuss all this tomorrow.

Blair

Blair Medd
Director of Communications and eHealth Change Leadership
Newfoundland and Labrador Centre for Health Information

Blair.Medd@nlch nl.ca
W: 709-752-6111
C: 709-631-0995
Newfoundland and Labrador Prescription Monitoring Program

Frequently Asked Questions
Introduction

The Newfoundland and Labrador Prescription Monitoring Program (Program) falls under the Provincial Government’s Provincial Opioid Action Plan aimed at addressing the growing opioid crisis that is facing Canada and this province.

The Program will be overseen by a Prescription Monitoring Program Consultants Committee appointed by the Minister of Health and Community Services authorized under the Prescription Monitoring Act. The Act came into effect on January 2, 2018. Subsection 7(2), the provision requiring prescribers to view a patient’s medication profile prior to prescribing a monitored drug (opioid), comes into effect on June 30, 2018. The administration of the program will be carried out by the Newfoundland and Labrador Centre for Health Information.

The purpose of the Program is to help prescribers and dispensers make the most informed decisions when choosing to administer or dispense a monitored drug. Utilizing the provincial electronic health record, health professionals have access to up-to-date and accurate patient medication profiles that support clinical decision-making and their patients’ health care needs.

The following criteria will be used by the administrators of the Program to generate reports:

- Patients receiving two or more monitored drug prescriptions from two or more prescribers in a defined time period.
- Patients receiving two or more monitored drug prescriptions from two or more pharmacies in a defined time period.
- Patients on monitored drug dependence treatment who are receiving prescriptions for other monitored drugs.
- Inordinate dispensing and prescribing practices which may include dispensing or prescribing of monitored drugs in days’ supply of greater than 30 days or in excessive quantities.
- Patient names without an MCP number, that were dispensed a monitored drug.

If the Program identifies a dispensing or prescribing pattern that may be inappropriate, it will refer the matter to the Prescription Monitoring Program Consultants Committee for review to determine if further analysis or actions are required.

The Program is not intended to prevent the use of monitored drugs for legitimate medical purposes. There are many reasons why a monitored drug is the most appropriate treatment for a patient’s condition. The Program is not meant to deter prescribers from making an informed clinical decision to administer a monitored drug.

For further information on the Prescription Monitoring Program, please contact:
info@PMPNL.ca

For information on accessing the provincial electronic health record, HEALTHe NL, please contact: 709-752-6006, 1-877-752-6006 or service@nlchi.nl.ca
1. What is the Newfoundland and Labrador Prescription Monitoring Program?

The Newfoundland and Labrador Prescription Monitoring Program (Program) is another action being implemented by the Provincial Government as a part of the Provincial Opioid Action Plan to help address the growing opioid crisis that is facing Canada and this province.

All provinces, with the exception of Quebec, have some form of Prescription Monitoring Program.

The Program, under the authority of the Prescription Monitoring Act, requires that prescribers and dispensers, prior to writing a prescription for or dispensing a monitored drug, review their patient’s medication profile to support their clinical decision-making.

A set of criteria will be used to generate reports and data to inform the Program on how monitored drugs are being prescribed or dispensed; areas where educational opportunities can be enhanced; and, to identify prescribing or dispensing behaviours that require follow up or in some cases intervention.

The following criteria will be used to generate reports:

- Patients receiving two or more monitored drug prescriptions from two or more prescribers in a defined time period.
- Patients receiving two or more monitored drug prescriptions from two or more pharmacies in a defined time period.
- Patients on monitored drug dependence treatment who are receiving prescriptions for other monitored drugs.
- Inordinate dispensing and prescribing practices which may include dispensing or prescribing of monitored drugs in days’ supply of greater than 30 days or in excessive quantities.
- Patient names without an MCP number, that were dispensed a monitored drug.

Other activities, as deemed necessary by the Minister, may be added in the future.

2. What health care professionals will be a part of the Program?

The health care professionals that will be a part of the Program, as defined by the Prescription Monitoring Act, are authorized prescribers and dispensers of prescription medications throughout the province who are prescribing or dispensing monitored drugs. These are physicians, nurse practitioners, dentists and pharmacists.
3. **How do I know what drugs are to be monitored by the Program?**

   Only prescription opioid medications listed in the *Controlled Drugs and Substances Act* (Canada) and tramadol are currently being monitored by the Program.

4. **When will the Prescription Monitoring Act come into effect?**

   The *Prescription Monitoring Act* came into effect on January 2, 2018.

   Subsection 7(2), the provision requiring prescribers to view a patient’s medication profile prior to prescribing a monitored drug, comes into effect on June 30, 2018.

   The delay in proclamation of subsection 7(2) will provide time to ensure that all prescribers have access to HEALTHe NL, the provincial electronic health record, so they can view their patients’ medication profiles.

5. **What are the benefits of the Program?**

   Some important public health benefits that are expected to result from the Program include an increase in the quality of patient care, greater confidence when prescribing and dispensing monitored drugs and a greater efficiency and coordination of care.

   The Program creates the opportunity for a better understanding of a patient’s monitored drug utilization based on a review of their recent prescription history. Requiring prescribers and dispensers to view the medication profile of their patients prior to dispensing a monitored drug ensures that health care providers can make better informed decisions when choosing to prescribe or fill a prescription for a monitored drug.

   The Program is expected to improve monitored drug misuse and prevent or reduce hospitalizations and deaths related to monitored drugs.

6. **How will information from the Program be used?**

   The information that will be generated from the reports, using the defined criteria previously listed, will help the Program:

   - Promote appropriate prescribing and dispensing practices of monitored drugs
   - Provide information and education to prescribers and dispensers
   - Identify potential instances of abuse and misuse of monitored drugs
   - Reduce abuse and misuse, including reducing diversion of monitored drugs
• Reduce the risk of addiction and death resulting from abuse or misuse of monitored drugs

The information will also be used to inform the Provincial Government on the need for further intervention services or educational programming and to evaluate the effectiveness of the Program.

7. Why do we need the Program?

Prescription Monitoring Programs can help improve prescribing of monitored drugs and controlled substances, support ways to lower or prevent the harms related to these drugs, and can help identify patients who may be at risk of addiction.

The Program is not intended to prevent the use of monitored drugs for legitimate medical purposes. There are many reasons why a monitored drug is the most appropriate treatment for a patient’s condition. The Program is not meant to deter prescribers from making an informed clinical decision to administer a monitored drug.

However, we all have to recognize that prescription drug abuse, especially of opioids, is a real issue that impacts the lives of Newfoundlander and Labradorians every day. It will take the collective effort of the Provincial Government, the public and front line health care professionals to make headway in reducing and addressing this very serious and real public health issue.

8. Who provides oversight of the Newfoundland and Labrador Prescription Monitoring Program?

The Minister of Health and Community Services provides oversight for the Program. The Minister is responsible for:

• administering the Program;
• monitoring the prescribing and dispensing practices of monitored drugs;
• evaluating the effectiveness of the Program;
• providing information, professional consultation and assistance to the regulatory authorities relating to prescribing and dispensing of monitored drugs;
• monitoring the use of monitored drugs;
• educating prescribers and dispensers about appropriate prescribing and dispensing of monitored drugs;
• educating individuals on the appropriate use of monitored drugs;
• reporting to regulatory authorities on new and emerging prescribing patterns for monitored drugs; and,
• any other duties prescribed in the regulations.

However, the Act permits the Minister to delegate his powers and duties.

A Prescription Monitoring Program Consultants committee will be appointed by the Minister to provide oversight and accountability for the Program, make recommendations and provide a critical and clinical lens to any generated reports that require review.

The administration of the Program will be carried out by the Newfoundland and Labrador Centre for Health Information (NLCHI).

9. Who will sit on the Prescription Monitoring Program Consultants Committee?

The terms of reference for the Prescription Monitoring Program Consultants Committee is currently under development.

The committee will have at least two prescribers and two dispensers along with representation from the Department of Health and Community Services and NLCHI.

Dispenser and prescriber representation on this committee is key in order to provide a clinical lens to the information generated from the reports.

10. What powers does the Newfoundland and Labrador Prescription Monitoring Program have?

The Prescription Monitoring Act, authorizes the monitoring, analyzing and reporting of information, including personal health information, related to the prescribing and dispensing of monitored drugs in order to:

• promote appropriate prescribing and dispensing practices for monitored drugs; and
• reduce the abuse and misuse of monitored drugs.
11. Will more prescription medications or other drugs be added to the list of monitored prescriptions at a later date?

Currently, the objective of the Program is to monitor opioid prescriptions.

As the Program matures, consideration may be given as to how it could be utilized to help address the prescribing habits of other drugs. The foundation of the Program, utilizing the provincial electronic health record, could support such an initiative in the future.

12. Day-to-day, what is expected of a prescriber when prescribing a monitored drug to a patient? When will this come into effect?

The only new expectation is that all prescribers review a patient’s medication profile in the electronic health record prior to prescribing a monitored drug to ensure its appropriateness.

This requirement comes into effect on June 30, 2018.

This timeframe, between the Act coming into effect (January 2, 2018) and the requirement to view a patient’s medication profile when prescribing a monitored drug (June 30, 2018) is to allow adequate time for prescribers to get access to the provincial electronic health record.

13. What is expected of dispensers when filling a prescription for a monitored drug? When will this come into effect?

There are no new expectations of pharmacy dispensers as they are already expected to review a patient’s medication profile in the electronic health record prior to all dispenses. They are also obligated to input prescription information in the Pharmacy Network as per their Standards of Pharmacy Operation. These provisions, under the Prescription Monitoring Act, came into effect on January 2, 2018.

Dispensing physicians and nurses in rural and remote areas of the province are exempt from the requirements of dispensers as listed in the Act.
14. What about veterinarians? Will they be required to comply with the Act?

While veterinarians fall under the definition of prescriber in the Act, they will be excluded in the Regulations while the Department of Health and Community Services works with the Newfoundland and Labrador Veterinary Medical Association to determine how to capture these prescriptions under the Program.

15. Can personal health information be shared with the Prescription Monitoring Program when requested?

Under the Act, prescribers and dispensers must provide information which may include personal health information when it is requested by the administrator of the Program. This requirement overrides any confidentiality provision in the Personal Health Information Act. Therefore, in complying with such a request, a prescriber or dispenser is not in violation of the Personal Health Information Act.

16. Are there any penalties under the Act?

Failure to comply with a requirement under the Act is an offence and may result in a fine of up to $10,000 for an individual or $20,000 for a Corporation.

17. Can prescribers/dispensers or members of the public opt out of the Newfoundland and Labrador Prescription Monitoring Program?

No, all monitored drug prescriptions provided by prescribers and filled in pharmacies in Newfoundland and Labrador are subject to review under the Program.

If a patient has a consent directive on their electronic health record, it does not mask their prescriptions from the Program.

All prescribers and dispensers will be required to review the patient’s medication profile before writing or filling a monitored drug prescription after June 30, 2018.

If a patient has a consent directive on their electronic health record, the patient will have to grant the prescriber and dispenser access to view the medication profile before a monitored drug can be prescribed or filled.
18. Will information from the Program related to prescribers, dispensers or the general public be shared with their professional regulatory authority or law enforcement? If so, under what circumstances?

The purpose of the Program is to help prescribers and dispensers make the most informed decisions when choosing to administer a monitored drug. This will be achieved in part by requiring prescribers and dispensers to review their patient’s medication profile before prescribing or filling a monitored drug, through educational opportunities and by increasing awareness on the subject of monitored drug abuse. The Program’s intention is not to police these professionals. If activities that are considered inordinate or suspicious in nature are discovered, they will be reviewed by the Prescription Monitoring Program Consultants Committee and possibly shared with the regulatory body or law enforcement if warranted.

Prescribers and dispensers who are performing their duties as health care professionals in accordance with their regulatory guidelines and the requirements under the Act would not have their information shared by the Prescription Monitoring with their regulatory bodies if no concerns are noted.

19. Can a prescriber or dispenser designate someone at the clinic or pharmacy to check the patient’s medication profile?

No, it is the responsibility of the prescriber and the dispenser to review the patient’s medication profile prior to prescribing or dispensing a monitored drug.

20. Will the Program capture prescriptions from another jurisdiction?

Prescriptions filled in the province must be inputted into the Pharmacy Network. Just because a patient is from another jurisdiction that does not mean that he/she does not have a medication profile in the electronic health record. Medication profiles are maintained for all patients that have prescriptions filled in pharmacies in Newfoundland and Labrador.

21. Will there be any changes to the Tamper Resistant Prescription Drug Pad program (TRPP)?

TRPP is a program under the Pharmaceutical Services Act which requires that prescriptions for certain drugs, including opioids, be issued on a special tamper resistant drug pad. There are no substantive changes anticipated to this program. However, minor changes may be
made to the actual prescription pad to denote that a prescriber has checked the patient’s medication profile prior to prescribing.

Additionally, after June 30, 2018, prescriptions for tramadol will be added to the list of drugs that have to be written on a tamper resistant prescription drug pad.

22. How will the Program know whether prescribers and dispensers are complying with the Program requirements?

The Department and NLCHI are still working on how prescribers will document that they have reviewed the medication profile. An option could be a revision to the tamper-resistant prescription pads to include a check-box where prescribers can indicate that they have reviewed the patient’s medication profile.

Random reviews of prescriptions for monitored drugs may occur to ensure that a patient’s medication profile was accessed by both the prescriber and dispenser prior to the prescription being filled.

23. Will prescribers and dispensers be required to report to any issues regarding how a prescriber is prescribing a monitored drug?

The Prescription Monitoring Act does not contain a duty to report to the Prescription Monitoring Program. Concerns of this nature should be discussed with the prescriber or the prescriber’s regulatory body pursuant to their governing statutes.

24. What about opioids that are prescribed and dispensed for patients in hospital? Will the Program capture those prescriptions?

The Program will capture all prescriptions dispensed by pharmacies to outpatients. However, given the nature of the provision of health care services in hospital, inpatients will not be captured.

In terms of risk, inpatients do not receive more than the required dose at any given time so the risk of abuse or misuse of opioids is quite low.
25. Didn’t the province already have a prescription monitoring program at one time?

Yes. There was a prescription monitoring program in place sometime ago. However, without an electronic system to capture the dispensing of prescriptions, it had limited success.

With the Pharmacy Network now connected in all community pharmacies in the province, the necessary tools are in place to more successfully implement a prescription monitoring program.

26. What information can the Program give to a physician, dentist, nurse practitioner or pharmacist about a patient?

The Program can provide a drug profile that identifies an individual’s prescriptions for drugs monitored by the Program. It includes, but is not limited to, the identification of the prescribers prescribing the drugs and the pharmacies dispensing the drugs. This information is already available to health care professionals via the provincial electronic health record.

27. Are prescribers and dispensers permitted to share personal health information with the Prescription Monitoring Program?

As per subsection 10(2) of the Prescription Monitoring Act, a prescriber, dispenser, or other person is permitted to and is required to provide to the Minister any requested information reasonably needed to achieve the objects of the Program.
28. How will prescribers and dispensers review the patient medication profile?

The electronic health record, HEALTHe NL, will be the primary tool to help prescribers and dispensers review the patient’s medication profile.

HEALTHe NL is a private record of an individual’s health care information, available electronically to authorized health care professionals. It integrates information from many sources into a single, lifetime record of an individual’s key health history and care. Information is available in one place when and where it is needed.

Information contained in HEALTHe NL includes:
- Patient medication profiles from all community pharmacies province wide through the Pharmacy Network
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- Information about where health services have occurred, by whom and other key clinical events such as inpatient admission.

For information on accessing the provincial electronic health record, HEALTHe NL, please contact: 709-752-6006, 1-877-752-6006 or service@nlchi.nl.ca

29. What is the Pharmacy Network?

The Pharmacy Network is a component of the province-wide electronic health record, HEALTHe NL, that is comprised of a real-time database of medication profiles compiled from prescriptions filled at all of the province’s outpatient pharmacies.

Data from the Pharmacy Network will be used to help guide prescribers and dispensers in making clinical decisions regarding the prescribing/dispensing of monitored drugs. It will also be the basis for the reports generated by the Program.
From: Melody Sorensen
To: Richard Coombs; Donna Roche; Karen Walter; Kayla Collins; Nicole Gill; Mary Slade; O'Dea; Jamie; Brittany Tibbo; Jamie Osmond; 'Melanie Healey'
Cc: Clark, Patricia
Subject: RE: Follow-up PMP Working Group Meeting
Date: Friday, February 9, 2018 11:47:42 AM
Attachments: NL PMP Evaluation Framework 02.08.2018.docx
Logic Model.docx

Good morning everyone,

I am attaching the newest version of the (Draft) Evaluation Framework for the PMP Program, for discussion at next week’s meeting. I have gone back through the Framework and made some minor changes to hopefully make the questions and indicators more clear. I am also attaching the Program Logic Model, as this may help us to focus the scope of the evaluation.

Thanks,
Melody

-----Original Appointment-----

From: Richard Coombs
Sent: February 8, 2018 10:30 AM
To: Richard Coombs; Donna Roche; Karen Walter; Kayla Collins; Nicole Gill; Mary Slade; 'O'Dea; Jamie'; Brittany Tibbo; Jamie Osmond; 'Melanie Healey'
Cc: 'pc Clark@gov.nl.ca'; Melody Sorensen
Subject: Follow-up PMP Working Group Meeting
When: February 15, 2018 10:00 AM - 11:30 AM (UTC-03:30) Newfoundland.
Where: NLCHI 70 O'Leary Ave / MR #4

Good Day,

I am scheduling this extra meeting as requested by Richard. Based on feedback I received on availability this was the best option to schedule this meeting. For those of you who are are unable to join in person, below are the teleconference details to join this meeting.

Conference call info:

Regards,

Crystal Porter on behalf of
Richard Coombs

This email and any attached files are intended for the sole use of the primary and copied addressee(s) and may contain privileged and/or confidential information. Any distribution, use or copying by any means of this information is strictly prohibited. If you received this email in error, please delete it immediately and notify the sender.
The Newfoundland and Labrador Prescription Monitoring Program
Evaluation Framework (Draft)

Program Mandate: The NLNMP will capture, analyze and report on all prescriber, pharmacist and patient information for all narcotics, controlled and monitored drugs and substances dispensed in Newfoundland and Labrador, regardless of payment type. The NLNMP will be created to provide the provincial regulatory bodies, provincial policy makers and law enforcement with the tools to identify potentially questionable prescribing and dispensing behaviours in regards to monitored drugs.

Strategic Objective: To reduce the abuse, misuse and diversion of targeted prescription drugs with a high abuse potential.

Evaluation objectives:

1. To monitor and examine the operations of the NLNMP.

2. To determine whether or not the Program has led to increased awareness among prescribers of their own opioid prescribing practices.

3. To determine whether the implementation of the NLNMP has resulted in a decrease in questionable opioid dispensing.

4. To identify the successes and challenges of implementing the Program.
<table>
<thead>
<tr>
<th>Evaluation Question</th>
<th>Indicators</th>
<th>Data Sources</th>
<th>Who is Responsible for Collecting?</th>
<th>When Collected</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Do program communications provide the information needed by prescribers and dispensers to implement the Program?</td>
<td>Prescribers and dispensers report that the program communications provide the information needed to implement the Program</td>
<td>Survey of prescribers and eligible dispensers</td>
<td>Evaluation Lead</td>
<td></td>
</tr>
<tr>
<td>2. Are the policies and procedures being implemented as outlined by program staff?</td>
<td>Regular audits of adherence to policies and procedures (e.g., Prescription Audit Procedure) show that policies and procedures are being implemented as outlined by program staff</td>
<td>Program Records</td>
<td>Program Manager, or designate</td>
<td></td>
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<tr>
<td>3. Are prescribers in compliance with the obligation to check the HEALTHc NL Viewer prior to prescribing a monitored drug?</td>
<td>Regular audits of prescriber compliance in checking the HEALTHc NL Viewer prior to prescribing a monitored drug</td>
<td>Program Records</td>
<td>Program Manager, or designate</td>
<td></td>
</tr>
<tr>
<td>4. Are there any policies or procedures that should be changed and if so, how?</td>
<td>Staff report policies or procedures that should be changed, and how</td>
<td>Focus group with program staff</td>
<td>Evaluation Lead</td>
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<tr>
<td>5. Are questionable activity reports being reviewed in a timely manner?</td>
<td>Number of days following month-end that reports are generated</td>
<td>Program Records</td>
<td>Program Manager, or designate</td>
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<td></td>
<td>Number of days from monthly report generation to completion of review</td>
<td>Program Records</td>
<td>Program Manager, or designate</td>
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<tr>
<td>6. What is the number and characteristics of cases identified for review?</td>
<td>Number and percentage of dispenses identified for review, by quarter</td>
<td>Pharmacy Network &amp; monthly reports</td>
<td>Program Manager, or designate</td>
<td></td>
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<tr>
<td></td>
<td>Number and percentage of dispenses identified for review, by DUR, regional health authority, age, and sex of client</td>
<td>Pharmacy Network &amp; monthly reports</td>
<td>Program Manager, or designate</td>
<td></td>
</tr>
<tr>
<td>7. What are the outcomes of cases identified for review?</td>
<td>Number and percentage of dispenses identified for review, by outcome (no further action required or recommend to Consultants Committee for further investigation)</td>
<td>Program Records</td>
<td>Program Manager, or designate</td>
<td></td>
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<tr>
<td></td>
<td>Number of multiple prescriber letters issued quarterly</td>
<td>Program Records</td>
<td>Program Manager, or designate</td>
<td></td>
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<tr>
<td></td>
<td>Number of Notices of Questionable Activity issued quarterly</td>
<td>Program Records</td>
<td>Program Manager, or designate</td>
<td></td>
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### Prescription Monitoring Program Evaluation Framework
**February 8, 2018**

<table>
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<th>Evaluation Question</th>
<th>Indicators</th>
<th>Data Sources</th>
<th>Who is Responsible for Collecting?</th>
<th>Timeline for Collection</th>
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<tr>
<td><strong>Evaluation objective: To determine whether or not the Program has led to increased awareness among prescribers of their own opioid prescribing practices</strong></td>
<td>8. Have prescriber report cards led to increased awareness of prescribers’ own prescribing practices?</td>
<td>Prescribers report that the prescriber report cards are useful</td>
<td>Survey of prescribers</td>
<td>Evaluation Lead</td>
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<td>Prescribers report that the report cards have resulted in greater awareness of their own prescribing behaviour in relation to their peers</td>
<td>Survey of prescribers</td>
<td>Evaluation Lead</td>
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<td>9. Have the report cards led to changes in prescribers’ own prescribing practices?</td>
<td>Prescribers report that the report cards have led to changes to their prescribing practices</td>
<td>Survey of prescribers</td>
<td>Evaluation Lead</td>
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<td>10. Has the Program resulted in greater reluctance on the part of prescribers to prescribe a monitored drug?</td>
<td>Prescribers report a greater reluctance to prescribe monitored drugs as a result of the Program</td>
<td>Survey of prescribers</td>
<td>Evaluation Lead</td>
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<tr>
<td><strong>Evaluation objective: To determine whether the implementation of the NLPMP has resulted in a decrease in questionable opioid dispensing</strong></td>
<td>11. Has the Program resulted in a decrease in questionable opioid dispensing</td>
<td>Number and percentage of all dispenses identified as questionable pre and post-implementation of the Program</td>
<td>Pharmacy Network &amp; monthly reports</td>
<td>Program Manager, or designate</td>
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<td></td>
<td></td>
<td>Number of Multiple Prescriber Letters generated monthly</td>
<td>Program Data</td>
<td>Program Manager, or designate</td>
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<tr>
<td></td>
<td></td>
<td>Number of Notices of Questionable Activity issued quarterly</td>
<td>Program Data</td>
<td>Program Manager, or designate</td>
</tr>
<tr>
<td><strong>Evaluation objective: To identify the main benefits and challenges of implementing the Program</strong></td>
<td>12. Have there been any benefits realized as a result of the Program?</td>
<td>Stakeholders report main benefits of the Program</td>
<td>Survey of prescribers and eligible dispensers</td>
<td>Evaluation Lead</td>
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<td>Focus groups with Advisory Committee and Working Group</td>
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<td>Evaluation Lead</td>
</tr>
<tr>
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<tr>
<td>13. Have there been any unforeseen harms and/or disadvantages of the Program?</td>
<td>Stakeholders report unforeseen harms and/or disadvantages of the Program</td>
<td>Survey of prescribers and eligible dispensers</td>
<td>Evaluation Lead</td>
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<td>Focus groups with Advisory Committee, Working Group and Program Staff</td>
<td>Evaluation Lead</td>
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<tr>
<td></td>
<td>Clients/patients report unforeseen harms and/or disadvantages of the Program</td>
<td>Survey of Clients/patients</td>
<td>Evaluation Lead</td>
<td></td>
</tr>
<tr>
<td>14. What facilitated the implementation of the Program?</td>
<td>Stakeholders and program staff report what facilitated the implementation of the Program</td>
<td>Survey of prescribers and eligible dispensers</td>
<td>Evaluation Lead</td>
<td></td>
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<td></td>
<td></td>
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<td>Evaluation Lead</td>
<td></td>
</tr>
<tr>
<td>15. Were there any challenges encountered in implementing the Program?</td>
<td>Stakeholders and program staff report what challenges, if any, were encountered in implementing the Program</td>
<td>Survey of prescribers and eligible dispensers</td>
<td>Evaluation Lead</td>
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<td>16. Are there any aspects of the program that should be changed? If so, how?</td>
<td>Stakeholders and program staff report aspects of the Program which should be changed, and how</td>
<td>Survey of prescribers and eligible dispensers</td>
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Figure 1. Newfoundland and Labrador Prescription Drug Monitoring Program Logic Model

Strategic Objective: To reduce the abuse, misuse and diversion of targeted prescription drugs with a high abuse potential

**INPUTS**
- PMP Advisory Committee
- PMP Working Group
- PMP Consultants Committee
- Stakeholders (e.g., RNC, RCMP, regulatory bodies, DHCS, DIPS)
- Financial investments
- Pharmacy Network

**ACTIVITIES**
- Prescription Monitoring Act
- Development of PMP regulations and policies
- Education for prescribers regarding the Act, its regulations and policies
- Public awareness campaign
- System-generated DURs managed by pharmacists about potentially inappropriate prescribing or dispensing behaviour
- Review of medication history using HEALTHe NL viewer
- Post-dispense analysis and reporting

**OUTPUTS**
- Legislation, regulations and policies
- Communications materials
- Prescriber report cards
- Questionable activity reports
- Multiple Prescriber Letters sent to all parties involved
- Notices of Questionable Activity sent to prescriber, dispenser, licensing authority, law enforcement

**SHORT/MEDIUM-TERM OUTCOMES**
- Reduction in inappropriate prescriptions and dispenses of monitored drugs.
- Providers report increased knowledge of and adherence to best practices in safe prescribing.
- Increased awareness among prescribers of own prescribing patterns.

**LONG-TERM OUTCOMES**

- Enhanced Patient Care
- Harm Reduction
- Reduction in the diversion of monitored drugs
From: O'Dea, Jamie
To: Williams, Tina (HCS)
Subject: RE: Official Name of PMP?
Date: Friday, February 9, 2018 1:10:33 PM

Ok Thanks

From: Williams, Tina (HCS)
Sent: Friday, February 9, 2018 11:56 AM
To: O'Dea, Jamie <JamieODea@gov.nl.ca>
Subject: RE: Official Name of PMP?

No. I have not heard anything. Feel free to reach out to Minister. I am sure he wouldn’t mind if you emailed or called to determine his thoughts on the naming of the program. It’s been busy so I suspect he simply missed the email below. He is in Labrador today for the Combined Councils AGM, but he will be available as of Monday for a chat.

Tina Williams
Director of Communications
Department of Health and Community Services
Government of Newfoundland and Labrador
709-729-1377
TinaWilliams@gov.nl.ca

From: O'Dea, Jamie
Sent: Friday, February 09, 2018 10:56 AM
To: Williams, Tina (HCS)
Subject: FW: Official Name of PMP?

Hi Tina – did you hear anything on this afterwards?

From: Williams, Tina (HCS)
Sent: Tuesday, February 6, 2018 8:07 AM
To: O'Dea, Jamie <JamieODea@gov.nl.ca>; Haggie, John <JohnHaggie@gov.nl.ca>
Subject: RE: Official Name of PMP?

Minister, see question below. My only thought is NLPMP is very close to the NLPDP. PMP-NL may work better in that regard.

Tina Williams
Director of Communications
Department of Health and Community Services
Government of Newfoundland and Labrador
709-729-1377
TinaWilliams@gov.nl.ca
Hi Tina,

Can you call when free? Wanted to talk about the official name of the prescription monitoring program. When Michelle left it was still up in the air (NLPMP vs PMPNL). Are you aware of the Minister’s preference? Did he have anything else in mind?

Thanks,
Jamie
On name, I’ll let you know when I touch base with Minister. As for the FAQ, I’d check in with whoever is now the ADM. I guess with Michelle gone, its John.

Tina Williams
Director of Communications
Department of Health and Community Services
Government of Newfoundland and Labrador
709-729-1377
TinaWilliams@gov.nl.ca

What are your thoughts moving forward? I’m wondering if we can proceed with the FAQ document to physicians and dispensers and just refer to it as the provincial prescription monitoring program? Then if we wanted to do some creative branding around it at a later point in time we could.

Jamie

Nope.

Tina Williams
Director of Communications
Department of Health and Community Services
Government of Newfoundland and Labrador
709-729-1377
TinaWilliams@gov.nl.ca

Hi – did you get any direction from the minister on the program name?
Hi Tony,

Thank you for your feedback. I apologize for not getting back to you earlier but I had other priorities for the moment with the House of Assembly opening last week.

In response to your comments, I’ve embedded my comments in your email below. In some cases, I’m asking that Jamie respond as I don’t have that particular information.

Please let me know if you have any questions or should you wish to discuss.

Again, thanks for reviewing the draft regulations and providing us with your comments.

Gerrie

Gerrie Smith, BA LL.B
Legislative Consultant
Department of Health and Community Services
709-729-2560 (tel)
gerriesmith@gov.nl.ca

This email is intended only for the person to whom it is addressed. If you have received this email in error, please notify the sender immediately.

Gerrie;

I have reviewed the regs with my Committee and there are some concerns.
Just some thoughts.

Tony

Anthony W. Patey  
Executive Director  
Newfoundland & Labrador Dental Association  
ph 709 579-2362  
fx 709 579-1250
From: Blair Medd
To: O'Dea, Jamie
Cc: Richard Coombs; Gillian Sweeney; Mary Slade
Subject: PMP FAQ materials
Date: Thursday, March 15, 2018 3:41:37 PM
Attachments: DRAFT - FAQ PMP - General Public.docx
          DRAFT - FAQ PMP - Prescribers and Dispensers.docx

Jamie,

Attached are the two FAQs for the PMP communications. One for Prescribers and Dispensers and one for the General Public.

I’ve done some basic layout for this, but feel free to make any suggestions.

I did speak with Tina last week who was going to check with the Communication Branch’s graphic design team to see if they can properly brand the program. But I have not heard back yet. I suspect that team is tied up with the budget.

Next steps is for HCS dept officials to review these documents and advise if there needs to be any changes.

Please let me know if you have any questions.

Blair

Blair Medd
Director of Communications and eHealth Change Leadership
Newfoundland and Labrador Centre for Health Information

Blair.Medd@nlchini.nl.ca
W: 709-752-6111
C: 709-631-0995

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Prescription Monitoring Program

NL

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Introduction

Prescription Monitoring Program – NL (Program) supports the Provincial Government’s Provincial Opioid Action Plan aimed at addressing the growing opioid crisis that is facing Canada and this province.

The Program will be overseen by a Prescription Monitoring Program Advisory Committee appointed by the Minister of Health and Community Services authorized under the Prescription Monitoring Act. The Act came into effect on January 2, 2018. Subsection 7(2), the provision requiring prescribers to view a patient’s medication profile prior to prescribing a monitored drug (opioid), comes into effect on June 30, 2018. The administration of the program will be carried out by the Newfoundland and Labrador Centre for Health Information.

The purpose of the Program is to help prescribers and dispensers make the most informed decisions when choosing to administer or dispense a monitored drug. Utilizing the provincial electronic health record, health professionals have access to up-to-date and accurate patient medication profiles that supports clinical decision-making and their patients’ health care needs.

The following criteria will be used by the administrators of the Program to generate reports:

- Patients receiving two or more monitored drug prescriptions from two or more prescribers in a defined time period.
- Patients receiving two or more monitored drug prescriptions from two or more pharmacies in a defined time period.
- Patients on opioid dependence treatment who are receiving prescriptions for monitored drugs.
- Inordinate dispensing and prescribing practices which may include dispensing or prescribing of monitored drugs in days’ supply of greater than 90 days or in excessive quantities.
- Patient names without an MCP number, that were dispensed a monitored drug.

If the Program identifies a dispensing or prescribing pattern that may be inappropriate, it will refer the matter to the Prescription Monitoring Program Consultants Committee for review to determine if further analysis or actions are required.

The Program is not intended to prevent the use of monitored drugs for legitimate medical purposes. There are many reasons why a monitored drug is the most appropriate treatment for a patient’s condition. The Program is not meant to deter prescribers from making an informed clinical decision to administer a monitored drug.

For further information on the Prescription Monitoring Program, please contact: info@PMPNL.ca

For information on accessing the provincial electronic health record, HEALTHe NL, please contact: 709-752-6006, 1-877-752-6006 or service@nlchi.nl.ca
General Information: Prescription Monitoring Program – NL

1. What is the Prescription Monitoring Program?

Prescription Monitoring Program – NL (Program) is another action being implemented by the Provincial Government as a part of the Provincial Opioid Action Plan to help address the growing opioid crisis that is facing Canada and this province.

All provinces, with the exception of Quebec, have some form of prescription monitoring program.

The Program, under the authority of the Prescription Monitoring Act, requires that prescribers and dispensers, prior to writing a prescription for or dispensing a monitored drug, review their patient’s medication profile to support their clinical decision-making.

A set of criteria will be used to generate reports and data to inform the Program on how monitored drugs are being prescribed or dispensed; areas where educational opportunities can be enhanced; and, to identify prescribing or dispensing behaviours that require follow up or in some cases intervention.

The following criteria will be used to generate reports:

- Patients receiving two or more monitored drug prescriptions from two or more prescribers in a defined time period.
- Patients receiving two or more monitored drug prescriptions from two or more pharmacies in a defined time period.
- Patients on monitored drug dependence treatment who are receiving prescriptions for other monitored drugs.
- Inordinate dispensing and prescribing practices which may include dispensing or prescribing of monitored drugs in days’ supply of greater than 90 days or in excessive quantities.
- Patient names without an MCP number, that were dispensed a monitored drug.

Other activities, as deemed necessary by the Minister, may be added in the future.
2. What health care professionals will be a part of the Program?

The health care professionals that will be a part of the Program, as defined by the Prescription Monitoring Act, are authorized prescribers and dispensers of prescription medications throughout the province who are prescribing or dispensing monitored drugs. These are physicians, nurse practitioners, dentists and pharmacists.

3. What about veterinarians? Will they be required to comply with the Act?

While veterinarians fall under the definition of prescriber in the Act, they will be excluded in the Regulations while the Department of Health and Community Services works with the Newfoundland and Labrador Veterinary Medical Association to determine how to capture these prescriptions under the Program.

4. How do I know what drugs are to be monitored by the Program?

Only opioid medications listed in the Controlled Drugs and Substances Act (Canada) and tramadol are currently being monitored by the Program.

5. When will the Prescription Monitoring Act come into effect?

The Prescription Monitoring Act came into effect on January 2, 2018.

Subsection 7(2), the provision requiring prescribers to view a patient’s medication profile prior to prescribing a monitored drug, comes into effect on June 30, 2018.

The delay in proclamation of subsection 7(2) will provide time to ensure that all prescribers have access to HEALTHe NL, the provincial electronic health record, so they can view their patients’ medication profiles.

6. What are the benefits of the Program?

Some important public health benefits that are expected to result from the Program include an increase in the quality of patient care, greater confidence when prescribing and dispensing monitored drugs and a greater efficiency and coordination of care.
The Program creates the opportunity for a better understanding of a patient’s monitored drug utilization based on a review of their recent prescription history. Requiring prescribers and dispensers to view the medication profile of their patients prior to dispensing a monitored drug ensures that health care providers can make better informed decisions when choosing to prescribe or fill a prescription for a monitored drug.

The Program is expected to improve monitored drug misuse and prevent or reduce hospitalizations and deaths related to monitored drugs.

7. How will information from the Program be used?

The information that will be generated from the reports, using the defined criteria previously listed, will help the Program:

- Promote appropriate prescribing and dispensing practices of monitored drugs
- Provide information and education to prescribers and dispensers
- Identify potential instances of abuse and misuse of monitored drugs
- Reduce abuse and misuse, including reducing diversion of monitored drugs
- Reduce the risk of addiction and death resulting from abuse or misuse of monitored drugs

The information will also be used to inform the Provincial Government on the need for further intervention services or educational programming and to evaluate the effectiveness of the Program.

8. Why do we need the Prescription Monitoring Program?

Prescription Monitoring Programs can help improve prescribing of monitored drugs and controlled substances, support ways to lower or prevent the harms related to these drugs, and can help identify patients who may be at risk of addiction.

The Program is not intended to prevent the use of monitored drugs for legitimate medical purposes. There are many reasons why a monitored drug is the most appropriate treatment for a patient’s condition. The Program is not meant to deter prescribers from making an informed clinical decision to administer a monitored drug.

However, we all have to recognize that prescription drug abuse, especially of opioids, is a real issue that impacts the lives of Newfoundlanders and Labradorians every day. It will take the collective effort of the Provincial Government, the public and front line health care professionals to make headway in reducing and addressing this very serious and real public health issue.
9. **Who provides oversight of the Prescription Monitoring Program?**

The Minister of Health and Community Services provides oversight for the Program. The Minister is responsible for:

- administering the Program;
- monitoring the prescribing and dispensing practices of monitored drugs;
- evaluating the effectiveness of the Program;
- providing information, professional consultation and assistance to the regulatory authorities relating to prescribing and dispensing of monitored drugs;
- monitoring the use of monitored drugs;
- educating prescribers and dispensers about appropriate prescribing and dispensing of monitored drugs;
- educating individuals on the appropriate use of monitored drugs;
- reporting to regulatory authorities on new and emerging prescribing patterns for monitored drugs; and,
- any other duties prescribed in the regulations.

However, the Act permits the Minister to delegate his powers and duties.

A Prescription Monitoring Program Consultants committee will be appointed by the Minister to provide oversight and accountability for the Program, make recommendations and provide a critical and clinical lens to any generated reports that require review.

The administration of the Program will be carried out by the Newfoundland and Labrador Centre for Health Information (NLCHI).

10. **What powers does the Prescription Monitoring Program have?**

The *Prescription Monitoring Act*, authorizes the monitoring, analyzing and reporting of information, including personal health information, related to the prescribing and dispensing of monitored drugs in order to:

- promote appropriate prescribing and dispensing practices for monitored drugs; and
- reduce the abuse and misuse of monitored drugs.
11. Will more prescription medications be added to the list of monitored drugs?

Currently, the objective of the Program is to monitor opioid prescriptions.

As the Program matures, consideration may be given as to how it could be utilized to help address the prescribing habits of other drugs. The foundation of the Program, utilizing the provincial electronic health record, could support such an initiative in the future.

12. Can personal health information be shared with the Program?

As per subsection 10(2) of the Prescription Monitoring Act, a prescriber, dispenser, or other person is permitted to and is required to provide to the Minister, or administrator of the Program, any requested information reasonably needed to achieve the objects of the Program.

In complying with such a request, a prescriber or dispenser is not in violation of the Personal Health Information Act.

13. Can you opt out of the Prescription Monitoring Program?

No, all monitored drug prescriptions provided by prescribers and filled in pharmacies in Newfoundland and Labrador are subject to review under the Program.

If a patient has a consent directive on their electronic health record, it does not mask their prescriptions from the Program.

All prescribers and dispensers will be required to review the patient’s medication profile before writing or filling a monitored drug prescription after June 30, 2018.

If a patient has a consent directive on their electronic health record, the patient will have to grant the prescriber and dispenser access to view the medication profile before a monitored drug can be prescribed or filled.
14. Will information be shared with a regulatory authority or law enforcement?

The purpose of the Program is to help prescribers and dispensers make the most informed decisions when choosing to administer a monitored drug. This will be achieved in part by requiring prescribers and dispensers to review their patient’s medication profile before prescribing or filling a monitored drug, through educational opportunities and by increasing awareness on the subject of monitored drug abuse. The Program’s intention is not to police these professionals. If activities that are considered inordinate or suspicious in nature are discovered, they will be reviewed by the Prescription Monitoring Program Consultants Committee and possibly shared with the regulatory body or law enforcement if warranted.

Prescribers and dispensers who are performing their duties as health care professionals in accordance with their regulatory guidelines and the requirements under the Act would not have their information shared by the Prescription Monitoring with their regulatory bodies if no concerns are noted.

15. Will the Program capture prescriptions from another jurisdiction?

Prescriptions filled in the province must be inputted into the Pharmacy Network. Just because a patient is from another jurisdiction that does not mean that he/she does not have a medication profile in the electronic health record. Medication profiles are maintained for all patients that have prescriptions filled in pharmacies in Newfoundland and Labrador.

16. If a member of the public has a concern or complaint about prescribing or dispensing habits who should they contact?

The most appropriate place for members of the public to express a concern or complaint about a prescriber or dispenser would be to the governing or regulatory bodies who provide oversight to those health care providers.

Additionally, if the member of the public felt their concern or complaint was related to criminal activity, they could also file a report with the police.
17. Didn’t the province already have a prescription monitoring program?

Yes. There was a prescription monitoring program in place sometime ago. However, without an electronic system to capture the dispensing of prescriptions, it had limited success.

With the Pharmacy Network now connected in all community pharmacies in the province, the necessary tools are in place to more successfully implement a prescription monitoring program.

18. What information can the Program give prescribers or dispensers about a patient?

The Program can provide a drug profile that identifies an individual’s prescriptions for drugs monitored by the Program. It includes, but is not limited to, the identification of the prescribers prescribing the drugs and the pharmacies dispensing the drugs. This information is already available to health care professionals via the provincial electronic health record.
Prescription Monitoring Program

NL

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The Program, under the authority of the *Prescription Monitoring Act*, requires that prescribers and dispensers, prior to writing a prescription for or dispensing a monitored drug, review their patient’s medication profile to support their clinical decision-making.

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The Program is expected to improve monitored drug misuse and prevent or reduce hospitalizations and deaths related to monitored drugs.

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The information that will be generated from the reports, using the defined criteria previously listed, will help the Program:

- Promote appropriate prescribing and dispensing practices of monitored drugs
- Provide information and education to prescribers and dispensers
- Identify potential instances of abuse and misuse of monitored drugs
- Reduce abuse and misuse, including reducing diversion of monitored drugs
- Reduce the risk of addiction and death resulting from abuse or misuse of monitored drugs

The information will also be used to inform the Provincial Government on the need for further intervention services or educational programming and to evaluate the effectiveness of the Program.

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Prescription Monitoring Programs can help improve prescribing of monitored drugs and controlled substances, support ways to lower or prevent the harms related to these drugs, and can help identify patients who may be at risk of addiction.

The Program is not intended to prevent the use of monitored drugs for legitimate medical purposes. There are many reasons why a monitored drug is the most appropriate treatment for a patient’s condition. The Program is not meant to deter prescribers from making an informed clinical decision to administer a monitored drug.

However, we all have to recognize that prescription drug abuse, especially of opioids, is a real issue that impacts the lives of Newfoundlanders and Labradors every day. It will take the collective effort of the Provincial Government, the public and front line health care professionals to make headway in reducing and addressing this very serious and real public health issue.
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- providing information, professional consultation and assistance to the regulatory authorities relating to prescribing and dispensing of monitored drugs;
- monitoring the use of monitored drugs;
- educating prescribers and dispensers about appropriate prescribing and dispensing of monitored drugs;
- educating individuals on the appropriate use of monitored drugs;
- reporting to regulatory authorities on new and emerging prescribing patterns for monitored drugs; and,
- any other duties prescribed in the regulations.

However, the Act permits the Minister to delegate his powers and duties.

A Prescription Monitoring Program Consultants committee will be appointed by the Minister to provide oversight and accountability for the Program, make recommendations and provide a critical and clinical lens to any generated reports that require review.

The administration of the Program will be carried out by the Newfoundland and Labrador Centre for Health Information (NLCHI).

10. **What powers does the Prescription Monitoring Program have?**

The *Prescription Monitoring Act*, authorizes the monitoring, analyzing and reporting of information, including personal health information, related to the prescribing and dispensing of monitored drugs in order to:

- promote appropriate prescribing and dispensing practices for monitored drugs; and
- reduce the abuse and misuse of monitored drugs.
11. Will more prescription medications be added to the list of monitored drugs?

Currently, the objective of the Program is to monitor opioid prescriptions.

As the Program matures, consideration may be given as to how it could be utilized to help address the prescribing habits of other drugs. The foundation of the Program, utilizing the provincial electronic health record, could support such an initiative in the future.

12. Can personal health information be shared with the Program?

As per subsection 10(2) of the Prescription Monitoring Act, a prescriber, dispenser, or other person is permitted to and is required to provide to the Minister, or administrator of the Program, any requested information reasonably needed to achieve the objects of the Program.

In complying with such a request, a prescriber or dispenser is not in violation of the Personal Health Information Act.

13. Can you opt out of the Prescription Monitoring Program?

No, all monitored drug prescriptions provided by prescribers and filled in pharmacies in Newfoundland and Labrador are subject to review under the Program.

If a patient has a consent directive on their electronic health record, it does not mask their prescriptions from the Program.

All prescribers and dispensers will be required to review the patient’s medication profile before writing or filling a monitored drug prescription after June 30, 2018.

If a patient has a consent directive on their electronic health record, the patient will have to grant the prescriber and dispenser access to view the medication profile before a monitored drug can be prescribed or filled.
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Prescribers and dispensers who are performing their duties as health care professionals in accordance with their regulatory guidelines and the requirements under the Act would not have their information shared by the Prescription Monitoring with their regulatory bodies if no concerns are noted.

15. Will the Program capture prescriptions from another jurisdiction?

Prescriptions filled in the province must be inputted into the Pharmacy Network. Just because a patient is from another jurisdiction that does not mean that he/she does not have a medication profile in the electronic health record. Medication profiles are maintained for all patients that have prescriptions filled in pharmacies in Newfoundland and Labrador.

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Additionally, if the member of the public felt their concern or complaint was related to criminal activity, they could also file a report with the police.
17. Didn’t the province already have a prescription monitoring program?

Yes. There was a prescription monitoring program in place sometime ago. However, without an electronic system to capture the dispensing of prescriptions, it had limited success.

With the Pharmacy Network now connected in all community pharmacies in the province, the necessary tools are in place to more successfully implement a prescription monitoring program.

18. What information can the Program give prescribers or dispensers about a patient?

The Program can provide a drug profile that identifies an individual’s prescriptions for drugs monitored by the Program. It includes, but is not limited to, the identification of the prescribers prescribing the drugs and the pharmacies dispensing the drugs. This information is already available to health care professionals via the provincial electronic health record.

Prescribers and Dispensers

19. What is now expected of a prescriber when prescribing a monitored drug?

The only new expectation is that all prescribers review a patient’s medication profile in the electronic health record prior to prescribing a monitored drug to ensure its appropriateness.

This requirement comes into effect on June 30, 2018.

This timeframe, between the Act coming into effect (January 2, 2018) and the requirement to view a patient’s medication profile when prescribing a monitored drug (June 30, 2018) is to allow adequate time for prescribers to get access to the provincial electronic health record.
20. What is now expected of dispensers when filling a prescription for a monitored drug?

There are no new expectations of pharmacy dispensers as they are already expected to review a patient’s medication profile in the electronic health record prior to all dispenses. They are also obligated to input prescription information in the Pharmacy Network as per their Standards of Pharmacy Operation. These provisions, under the Prescription Monitoring Act, came into effect on January 2, 2018.

Dispensing physicians and nurses in rural and remote areas of the province are exempt from the requirements of dispensers as listed in the Act.

21. Who will sit on the Prescription Monitoring Program Consultants Committee?

The Consultants Committee is created to provide a forum for reviewing questionable activity criteria reporting, and for providing advice and making recommendations to the Minister of Health and Community Services on action to be taken following a review or improvements to the program.

The committee will consist of:
• 2 physicians (at least one physician must be a family physician)
• A dentist
• A nurse practitioner
• 2 pharmacists (at least one dispenser must be a community pharmacist)

Pharmacist and prescriber representation on this committee is key in order to provide a clinical lens to the information presented to it by the program.

There will also be representation from the Department of Health and Community Services and NLCHI, however these will be ex-officio positions.

22. Are there any penalties under the Act?

Failure to comply with a requirement under the Act is an offence and may result in a fine of up to $10,000 for an individual or $20,000 for a corporation.
23. Can a prescriber or dispenser designate someone to check a patient’s medication profile?

No, it is the responsibility of the prescriber and the dispenser to review the patient’s medication profile prior to prescribing or dispensing a monitored drug.

24. Will there be any changes to the Tamper Resistant Prescription Drug Pad program (TRPP)?

TRPP is a program under the *Pharmaceutical Services Act* which requires that prescriptions for certain drugs, including opioids, be issued on a special tamper resistant drug pad. There are no substantive changes anticipated to this program. Minor changes will be made to the actual prescription pad to denote that a prescriber has checked the patient’s medication profile prior to prescribing.

Additionally, after June 30, 2018, prescriptions for tramadol will be added to the list of drugs that have to be written on a tamper resistant prescription drug pad.

25. How will the Program know whether prescribers and dispensers are complying with the Program requirements?

New Tamper Resistant Prescription Drug Pads will be issued that will include a check-box where prescribers can indicate that they have reviewed the patient’s medication profile.

Random reviews of prescriptions for monitored drugs may occur to ensure that a patient’s medication profile was accessed by both the prescriber and dispenser prior to the prescription being filled.

26. Will prescribers and dispensers be required to report any issues regarding how another prescriber is prescribing a monitored drug?

The *Prescription Monitoring Act* does not contain a duty to report to the Prescription Monitoring Program. Concerns of this nature should be discussed with the prescriber or the prescriber’s regulatory body pursuant to their governing statutes.
Regional Health Authorities

27. Are prescribers and dispensers practicing within a hospital setting subject to the Prescription Monitoring Act?

Prescribers writing prescriptions on a Tamper Resistant Prescription Pad for a monitored drug that will be filled in a community pharmacy need to check the patient’s medication profile in the electronic health record prior to writing a prescription.

If a prescriber or dispenser is prescribing or dispensing a monitored drug with the intention that it is administered as a part of a patient’s treatment plan, while in a hospital, they are not required to check the patient’s medication profile.

28. In some regional health authority locations, some physicians and registered nurses can both prescribe and dispense medications, are they required to check the patient’s medication profile when prescribing or dispensing a monitored drug?

In these instances, physicians and registered nurses who have both prescribing and dispensing powers are required to check the patient’s medication profile before writing a prescription for a monitored drug.

They are not required to check the medication profile again when dispensing that monitored drug.

29. Are prescribers, who are administering prescriptions for monitored drugs to long-term care patients, required to check the patient’s medication profile?

Yes, long-term care patients are not in-patients, but considered out-patients. Prescriptions filled for a long-term care patient are done in community pharmacies. Prescribers are required to check the long-term care patient’s medication profile in the electronic health record before writing a prescription for a monitored drug.
30. How will prescribers and dispensers review the patient medication profile?

The electronic health record, HEALTHe NL, will be the primary tool to help prescribers and dispensers review the patient’s medication profile.

HEALTHe NL is a private record of an individual’s health care information, available electronically to authorized health care professionals. It integrates information from many sources into a single, lifetime record of an individual’s key health history and care. Information is available in one place when and where it is needed.

Information contained in HEALTHe NL includes:
- Patient medication profiles from all community pharmacies province wide through the Pharmacy Network
- Known allergies and medical alerts from community pharmacies only.
- Meditech data, including dictated reports, laboratory results, diagnostic imaging and encounters.
- Information about where health services have occurred, by whom and other key clinical events such as inpatient admission.

For information on accessing the provincial electronic health record, HEALTHe NL, please contact: 709-752-6006, 1-877-752-6006 or service@nlchi.nl.ca

31. What is the Pharmacy Network?

The Pharmacy Network is a component of the province-wide electronic health record, HEALTHe NL, that is comprised of a real-time database of medication profiles compiled from prescriptions filled at all of the province’s outpatient pharmacies.

Data from the Pharmacy Network will be used to help guide prescribers and dispensers in making clinical decisions regarding the prescribing/dispensing of monitored drugs. It will also be the basis for the reports generated by the Program.
“While this is our final draft, it is still a draft version and is not for distribution. We would like to meet to have a final review of this draft and discuss methods of distribution.”

Thanks, Jamie.
Prescription Monitoring Program
NL

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6. **What are the benefits of the Program?**

Some important public health benefits that are expected to result from the Program include an increase in the quality of patient care, greater confidence when prescribing and dispensing monitored drugs and a greater efficiency and coordination of care.
The Program creates the opportunity for a better understanding of a patient’s monitored drug utilization based on a review of their recent prescription history. Requiring prescribers and dispensers to view the medication profile of their patients prior to dispensing a monitored drug ensures that health care providers can make better informed decisions when choosing to prescribe or fill a prescription for a monitored drug.

The Program is expected to improve monitored drug misuse and prevent or reduce hospitalizations and deaths related to monitored drugs.

7. How will information from the Program be used?

The information that will be generated from the reports, using the defined criteria previously listed, will help the Program:

- Promote appropriate prescribing and dispensing practices of monitored drugs
- Provide information and education to prescribers and dispensers
- Identify potential instances of abuse and misuse of monitored drugs
- Reduce abuse and misuse, including reducing diversion of monitored drugs
- Reduce the risk of addiction and death resulting from abuse or misuse of monitored drugs

The information will also be used to inform the Provincial Government on the need for further intervention services or educational programming and to evaluate the effectiveness of the Program.

8. Why do we need the Prescription Monitoring Program?

Prescription Monitoring Programs can help improve prescribing of monitored drugs and controlled substances, support ways to lower or prevent the harms related to these drugs, and can help identify patients who may be at risk of addiction.

The Program is not intended to prevent the use of monitored drugs for legitimate medical purposes. There are many reasons why a monitored drug is the most appropriate treatment for a patient’s condition. The Program is not meant to deter prescribers from making an informed clinical decision to administer a monitored drug.

However, we all have to recognize that prescription drug abuse, especially of opioids, is a real issue that impacts the lives of Newfoundlanders and Labradorians every day. It will take the collective effort of the Provincial Government, the public and front line health care professionals to make headway in reducing and addressing this very serious and real public health issue.
9. **Who provides oversight of the Prescription Monitoring Program?**

The Minister of Health and Community Services provides oversight for the Program. The Minister is responsible for:

- administering the Program;
- monitoring the prescribing and dispensing practices of monitored drugs;
- evaluating the effectiveness of the Program;
- providing information, professional consultation and assistance to the regulatory authorities relating to prescribing and dispensing of monitored drugs;
- monitoring the use of monitored drugs;
- educating prescribers and dispensers about appropriate prescribing and dispensing of monitored drugs;
- educating individuals on the appropriate use of monitored drugs;
- reporting to regulatory authorities on new and emerging prescribing patterns for monitored drugs; and,
- any other duties prescribed in the regulations.

However, the Act permits the Minister to delegate his powers and duties.

A Prescription Monitoring Program Consultants committee will be appointed by the Minister to provide oversight and accountability for the Program, make recommendations and provide a critical and clinical lens to any generated reports that require review.

The administration of the Program will be carried out by the Newfoundland and Labrador Centre for Health Information (NLCHI).

10. **What powers does the Prescription Monitoring Program have?**

The *Prescription Monitoring Act*, authorizes the monitoring, analyzing and reporting of information, including personal health information, related to the prescribing and dispensing of monitored drugs in order to:

- promote appropriate prescribing and dispensing practices for monitored drugs; and
- reduce the abuse and misuse of monitored drugs.
11. Will more prescription medications be added to the list of monitored drugs?

Currently, the objective of the Program is to monitor opioid prescriptions.

As the Program matures, consideration may be given as to how it could be utilized to help address the prescribing habits of other drugs. The foundation of the Program, utilizing the provincial electronic health record, could support such an initiative in the future.

12. Can personal health information be shared with the Program?

As per subsection 10(2) of the Prescription Monitoring Act, a prescriber, dispenser, or other person is permitted to and is required to provide to the Minister, or administrator of the Program, any requested information reasonably needed to achieve the objects of the Program.

In complying with such a request, a prescriber or dispenser is not in violation of the Personal Health Information Act.

13. Can you opt out of the Prescription Monitoring Program?

No, all monitored drug prescriptions provided by prescribers and filled in pharmacies in Newfoundland and Labrador are subject to review under the Program.

If a patient has a consent directive on their electronic health record, it does not mask their prescriptions from the Program.

All prescribers and dispensers will be required to review the patient’s medication profile before writing or filling a monitored drug prescription after June 30, 2018.

If a patient has a consent directive on their electronic health record, the patient will have to grant the prescriber and dispenser access to view the medication profile before a monitored drug can be prescribed or filled.
14. Will information be shared with a regulatory authority or law enforcement?

The purpose of the Program is to help prescribers and dispensers make the most informed decisions when choosing to administer a monitored drug. This will be achieved in part by requiring prescribers and dispensers to review their patient’s medication profile before prescribing or filling a monitored drug, through educational opportunities and by increasing awareness on the subject of monitored drug abuse. The Program’s intention is not to police these professionals. If activities that are considered inordinate or suspicious in nature are discovered, they will be reviewed by the Prescription Monitoring Program Consultants Committee and possibly shared with the regulatory body or law enforcement if warranted.

Prescribers and dispensers who are performing their duties as health care professionals in accordance with their regulatory guidelines and the requirements under the Act would not have their information shared by the Prescription Monitoring with their regulatory bodies if no concerns are noted.

15. Will the Program capture prescriptions from another jurisdiction?

Prescriptions filled in the province must be inputted into the Pharmacy Network. Just because a patient is from another jurisdiction that does not mean that he/she does not have a medication profile in the electronic health record. Medication profiles are maintained for all patients that have prescriptions filled in pharmacies in Newfoundland and Labrador.

16. If a member of the public has a concern or complaint about prescribing or dispensing habits who should they contact?

The most appropriate place for members of the public to express a concern or complaint about a prescriber or dispenser would be to the governing or regulatory bodies who provide oversight to those health care providers.

Additionally, if the member of the public felt their concern or complaint was related to criminal activity, they could also file a report with the police.
17. Didn’t the province already have a prescription monitoring program?

Yes. There was a prescription monitoring program in place sometime ago. However, without an electronic system to capture the dispensing of prescriptions, it had limited success.

With the Pharmacy Network now connected in all community pharmacies in the province, the necessary tools are in place to more successfully implement a prescription monitoring program.

18. What information can the Program give prescribers or dispensers about a patient?

The Program can provide a drug profile that identifies an individual’s prescriptions for drugs monitored by the Program. It includes, but is not limited to, the identification of the prescribers prescribing the drugs and the pharmacies dispensing the drugs. This information is already available to health care professionals via the provincial electronic health record.

Prescribers and Dispensers

19. What is now expected of a prescriber when prescribing a monitored drug?

The only new expectation is that all prescribers review a patient’s medication profile in the electronic health record prior to prescribing a monitored drug to ensure its appropriateness.

This requirement comes into effect on June 30, 2018.

This timeframe, between the Act coming into effect (January 2, 2018) and the requirement to view a patient’s medication profile when prescribing a monitored drug (June 30, 2018) is to allow adequate time for prescribers to get access to the provincial electronic health record.
20. What is now expected of dispensers when filling a prescription for a monitored drug?

There are no new expectations of pharmacy dispensers as they are already expected to review a patient’s medication profile in the electronic health record prior to all dispenses. They are also obliged to input prescription information in the Pharmacy Network as per their Standards of Pharmacy Operation. These provisions, under the Prescription Monitoring Act, came into effect on January 2, 2018.

Dispensing physicians and nurses in rural and remote areas of the province are exempt from the requirements of dispensers as listed in the Act.

21. Who will sit on the Prescription Monitoring Program Consultants Committee?

The Consultants Committee is created to provide a forum for reviewing questionable activity criteria reporting, and for providing advice and making recommendations to the Minister of Health and Community Services on action to be taken following a review or improvements to the program.

The committee will consist of:
• 2 physicians (at least one physician must be a family physician)
• A dentist
• A nurse practitioner
• 2 pharmacists (at least one dispenser must be a community pharmacist)

Pharmacist and prescriber representation on this committee is key in order to provide a clinical lens to the information presented to it by the program.

There will also be representation from the Department of Health and Community Services and NLCHI, however these will be ex-officio positions.

22. Are there any penalties under the Act?

Failure to comply with a requirement under the Act is an offence and may result in a fine of up to $10,000 for an individual or $20,000 for a corporation.
23. Can a prescriber or dispenser designate someone to check a patient’s medication profile?

No, it is the responsibility of the prescriber and the dispenser to review the patient’s medication profile prior to prescribing or dispensing a monitored drug.

24. Will there be any changes to the Tamper Resistant Prescription Drug Pad program (TRPP)?

TRPP is a program under the Pharmaceutical Services Act which requires that prescriptions for certain drugs, including opioids, be issued on a special tamper resistant drug pad. There are no substantive changes anticipated to this program. Minor changes will be made to the actual prescription pad to denote that a prescriber has checked the patient’s medication profile prior to prescribing.

Additionally, after June 30, 2018, prescriptions for tramadol will be added to the list of drugs that have to be written on a tamper resistant prescription drug pad.

25. How will the Program know whether prescribers and dispensers are complying with the Program requirements?

New Tamper Resistant Prescription Drug Pads will be issued that will include a check-box where prescribers can indicate that they have reviewed the patient’s medication profile.

Random reviews of prescriptions for monitored drugs may occur to ensure that a patient’s medication profile was accessed by both the prescriber and dispenser prior to the prescription being filled.

26. Will prescribers and dispensers be required to report any issues regarding how another prescriber is prescribing a monitored drug?

The Prescription Monitoring Act does not contain a duty to report to the Prescription Monitoring Program. Concerns of this nature should be discussed with the prescriber or the prescriber’s regulatory body pursuant to their governing statutes.
Regional Health Authorities

27. Are prescribers and dispensers practicing within a hospital setting subject to the Prescription Monitoring Act?

Prescribers writing prescriptions on a Tamper Resistant Prescription Pad for a monitored drug that will be filled in a community pharmacy need to check the patient’s medication profile in the electronic health record prior to writing a prescription.

If a prescriber or dispenser is prescribing or dispensing a monitored drug with the intention that it is administered as a part of a patient’s treatment plan, while in a hospital, they are not required to check the patient’s medication profile.

28. In some regional health authority locations, some physicians and registered nurses can both prescribe and dispense medications, are they required to check the patient’s medication profile when prescribing or dispensing a monitored drug?

In these instances, physicians and registered nurses who have both prescribing and dispensing powers are required to check the patient’s medication profile before writing a prescription for a monitored drug.

They are not required to check the medication profile again when dispensing that monitored drug.

29. Are prescribers, who are administering prescriptions for monitored drugs to long-term care patients, required to check the patient’s medication profile?

Yes, long-term care patients are not in-patients, but considered out-patients. Prescriptions filled for a long-term care patient are done in community pharmacies. Prescribers are required to check the long-term care patient’s medication profile in the electronic health record before writing a prescription for a monitored drug.
Provincial Electronic Health Record – HEALTHe NL

30. How will prescribers and dispensers review the patient medication profile?

The electronic health record, HEALTHe NL, will be the primary tool to help prescribers and dispensers review the patient’s medication profile.

HEALTHe NL is a private record of an individual’s health care information, available electronically to authorized health care professionals. It integrates information from many sources into a single, lifetime record of an individual’s key health history and care. Information is available in one place when and where it is needed.

Information contained in HEALTHe NL includes:
- Patient medication profiles from all community pharmacies province wide through the Pharmacy Network
- Known allergies and medical alerts from community pharmacies only.
- Meditech data, including dictated reports, laboratory results, diagnostic imaging and encounters.
- Information about where health services have occurred, by whom and other key clinical events such as inpatient admission.

For information on accessing the provincial electronic health record, HEALTHe NL, please contact: 709-752-6006, 1-877-752-6006 or service@nlchi.nl.ca

To begin the registration process for HEALTHe NL, please visit - HEALTHe NL User Registration Form

31. What is the Pharmacy Network?

The Pharmacy Network is a component of the province-wide electronic health record, HEALTHe NL, that is comprised of a real-time database of medication profiles compiled from prescriptions filled at all of the province’s outpatient pharmacies.

Data from the Pharmacy Network will be used to help guide prescribers and dispensers in making clinical decisions regarding the prescribing/dispersing of monitored drugs. It will also be the basis for the reports generated by the Program.
Hi Tina,

Edits were made to two of these questions. Highlighted sections added.

Have a great weekend.

Blair

Page 7

What is now expected of dispensers when filling a prescription for a monitored drug?

There are no new expectations of pharmacy dispensers as they are already expected to review a patient’s medication profile in the electronic health record prior to all dispenses. They are also obligated to input prescription information in the Pharmacy Network as per their Standards of Pharmacy Operation. These provisions, under the Prescription Monitoring Act, came into effect on January 1, 2018.

Dispensers are not expected to deny service to a patient if the check-box on a Tamper Resistant Prescription is not ticked. Dispensers should make clinical decisions based on their professional standards.

Dispensing physicians and nurses in rural and remote areas of the province are exempt from the requirements of dispensers as listed in the Act.

Page 8

How will the Program know whether prescribers and dispensers are complying with the Program requirements?

New Tamper Resistant Prescription Drug Pads will be issued that will include a check-box where prescribers can indicate that they have reviewed the patient’s medication profile prior to the prescription being written.

The purpose of the check-box is to act as a formal reminder to physicians that they are to check the medication profile. By signing their names to the prescription they are certifying that they have done so.

Dispensers are not expected to deny service to a patient if the check-box is not ticked. Dispensers should make clinical decisions based on their professional
standards

Random reviews of prescriptions for monitored drugs may occur to ensure that a patient’s medication profile was accessed by both the prescriber and dispenser prior to the prescription being written or filled.

---

From: Williams, Tina (HCS)  [mailto:TinaWilliams@gov.nl.ca]
Sent: April 27, 2018 3:18 PM
To: Blair Medd <Blair.Medd@nlchि.nl.ca>; O'Dea, Jamie <JamieODea@gov.nl.ca>
Cc: Richard Coombs <Richard.Coombs@nlchि.nl.ca>
Subject: RE: PMP Communications Materials for Friday’s meeting., Apr 20, 10 a.m.

There have been no changes or additions made to the version since you provided it to me. That is the version that went to the Minister.

Tina Williams
Director of Communications
Department of Health and Community Services
Government of Newfoundland and Labrador
709-729-1377
TinaWilliams@gov.nl.ca

---

From: Blair Medd  [mailto:Blair.Medd@nlchि.nl.ca]
Sent: Friday, April 27, 2018 3:17 PM
To: O'Dea, Jamie; Williams, Tina (HCS)
Cc: Richard Coombs
Subject: RE: PMP Communications Materials for Friday's meeting., Apr 20, 10 a.m.

I can yes,

Tina you would have the most up to date copy that would reflect the DMs edits. That is, I am assuming there have been edits to the Prescribers and Dispenser’s document since Tuesday?

Blair

---

From: O'Dea, Jamie  [mailto:JamieODea@gov.nl.ca]
Sent: April 27, 2018 3:14 PM
To: Williams, Tina (HCS) <TinaWilliams@gov.nl.ca>
Cc: Blair Medd <Blair.Medd@nlchि.nl.ca>; Richard Coombs <Richard.Coombs@nlchि.nl.ca>
Subject: RE: PMP Communications Materials for Friday’s meeting., Apr 20, 10 a.m.

Thank you Tina – Blair can you draft something up?
From: Williams, Tina (HCS)
Sent: Friday, April 27, 2018 3:14 PM
To: O'Dea, Jamie <JamieODea@gov.nl.ca>
Cc: blair.meddi@nlchi.nl.ca; Richard Coombs <Richard.Coombs@nlchi.nl.ca>
Subject: RE: PMP Communications Materials for Friday’s meeting, Apr 20, 10 a.m.

It’s with the Minister for approval.

My suggestion is for you folks to add in any edits from PANL. You would be the holders of the master copy. You can resend to me with the additions highlighted and I will simply discuss with the Minister.

Tina Williams
Director of Communications
Department of Health and Community Services
Government of Newfoundland and Labrador
709-729-1377
TinaWilliams@gov.nl.ca

From: O'Dea, Jamie
Sent: Friday, April 27, 2018 3:08 PM
To: Williams, Tina (HCS)
Cc: blair.meddi@nlchi.nl.ca; Richard Coombs
Subject: RE: PMP Communications Materials for Friday’s meeting, Apr 20, 10 a.m.

Thanks Tina – how far through the approval process are we? Wondering how much of a setback it will be if we add an couple of lines of clarification.

Jamie

From: Williams, Tina (HCS)
Sent: Friday, April 27, 2018 3:06 PM
To: O'Dea, Jamie <JamieODea@gov.nl.ca>
Cc: blair.meddi@nlchi.nl.ca; Richard Coombs <Richard.Coombs@nlchi.nl.ca>
Subject: RE: PMP Communications Materials for Friday’s meeting, Apr 20, 10 a.m.

Whatever you folks prefer as you are holding the pen on the document.

Tina Williams
Director of Communications
Department of Health and Community Services
Government of Newfoundland and Labrador
709-729-1377
TinaWilliams@gov.nl.ca
From: O'Dea, Jamie
Sent: Friday, April 27, 2018 12:01 PM
To: Williams, Tina (HCS)
Cc: blair.medd@nlchi.nl.ca; Richard Coombs
Subject: FW: PMP Communications Materials for Friday's meeting,, Apr 20, 10 a.m.

Thanks Blair – looping Tina in.

Tina please see below. Basically we have received some last minute feedback for the FAQs from PANL. The feedback is valid and will need to be communicated to pharmacists. However, we are concerned about the delay this could cause in getting the FAQs out. The edit would not be substantial – just a clarification of the duties of dispensers.

A second option would be for us to leave the FAQs as they are and ask PANL to communicate this particular point to their members.

What are your thoughts?

Jamie

From: Blair Medd [mailto:Blair.Medd@nlchi.nl.ca]
Sent: Friday, April 27, 2018 11:53 AM
To: O'Dea, Jamie <JamieODea@gov.nl.ca>; Richard Coombs <Richard.Coombs@nlchi.nl.ca>
Subject: RE: PMP Communications Materials for Friday’s meeting,, Apr 20, 10 a.m.

Jamie, it would be worth mentioning to Tina. If this has not gone to the Communications branch and is still with the DM and/or Minister, Tina should be able to add it to the faq without much issue. It is an important point to clarify in my opinion.

Blair

From: O'Dea, Jamie [mailto:JamieODea@gov.nl.ca]
Sent: April 27, 2018 11:50 AM
To: Richard Coombs <Richard.Coombs@nlchi.nl.ca>; Blair Medd <Blair.Medd@nlchi.nl.ca>
Subject: RE: PMP Communications Materials for Friday’s meeting,, Apr 20, 10 a.m.

I’m thinking that it will cause a delay. Any changes will have to go back through the approval process. A note from PANL may be a better way to go.

From: Richard Coombs [mailto:Richard.Coombs@nlchi.nl.ca]
Sent: Friday, April 27, 2018 11:49 AM
To: O'Dea, Jamie <JamieODea@gov.nl.ca>; Blair Medd <Blair.Medd@nlchi.nl.ca>
Subject: RE: PMP Communications Materials for Friday’s meeting,, Apr 20, 10 a.m.

I’m ok with adding it as long as it doesn’t result in any further delay in getting it out. Alternatively, PANL could send out something to their membership letting them know that they’ve consulted with
us and that it’s not their responsibility to police it.

Richard

From: O’Dea, Jamie [mailto:JamieODea@gov.nl.ca]
Sent: April 27, 2018 11:45 AM
To: Blair Medd <Blair.Medd@nlchi.nl.ca>
Cc: Richard Coombs <Richard.Coombs@nlchi.nl.ca>
Subject: FW: PMP Communications Materials for Friday’s meeting, Apr 20, 10 a.m.

Hi – See below. I just received this from Jennifer. What are your thoughts?

From: O’Dea, Jamie
Sent: Friday, April 27, 2018 11:43 AM
To: ‘Jennifer Collingwood’ <jcollingwood@panl.net>
Subject: RE: PMP Communications Materials for Friday’s meeting, Apr 20, 10 a.m.

Hi Jennifer - let me look into it. It may be difficult at this point as the FAQs have gone through the formal approval process but let me talk to comms to see if a/they think it’s necessary (ie: is the duties of dispenser sufficient) or b/ if it can be added if needed.

Thanks,
Jamie

From: Jennifer Collingwood [mailto:jcollingwood@panl.net]
Sent: Friday, April 27, 2018 11:32 AM
To: O’Dea, Jamie <JamieODea@gov.nl.ca>
Subject: RE: PMP Communications Materials for Friday’s meeting, Apr 20, 10 a.m.

Jamie, do you think this should be noted anywhere in the FAQ for pharmacists?

From: O’Dea, Jamie <JamieODea@gov.nl.ca>
Sent: Friday, April 27, 2018 11:27 AM
To: ‘Melanie Healey’ <mhealey@nlpb.ca>; Clark, Patricia <pclark@gov.nl.ca>; Gillian Sweeney <gillian.sweeney@nlchi.nl.ca>; Jamie Osmond <josmond@cpsnl.ca>; Lynn Power <lpower@arn.nl.ca>; Mary Slade <Mary.Slade@nlchi.nl.ca>; Michelle Osmond <Mosmond@arn.nl.ca>; Richard Coombs <Richard.Coombs@nlchi.nl.ca>; Jennifer Collingwood <jcollingwood@panl.net>; blair.meddd@nlchi.nl.ca; 'Jonathan Carpenter' <JCarpenter@nlma.nl.ca>; Smith, G errie <GerrieSmith@gov.nl.ca>
Cc: Margot Priddle <mpriddle@nlpb.ca>
Subject: RE: PMP Communications Materials for Friday’s meeting, Apr 20, 10 a.m.

Thank you Melanie,

You are correct in your answer to Jennifer’s inquiry. Pharmacists are not expected to enforce the
checking of the tick box.

The purpose of the tick box is to act as a formal reminder to physicians that they are to check the medication profile. By signing their names to the Rx they are certifying that they have done so. I don’t believe that it will have negative impacts on patient care.

Thanks,
Jamie

From: Melanie Healey [mailto:mhealey@nlpb.ca]
Sent: Friday, April 27, 2018 11:18 AM
To: Clark, Patricia <pclark@gov.nl.ca>; Gillian Sweeney <gillian.sweeney@nlchi.nl.ca>; Jamie Osmond <josmond@cpsnl.ca>; Lynn Power <lpower@arnnl.ca>; Mary Slade <Mary.Slade@nlchi.nl.ca>; Michelle Osmond <Mosmond@arnnl.ca>; O'Dea, Jamie <JamieODEa@gov.nl.ca>; Richard Coombs <Richard.Coombs@nlchi.nl.ca>; Jennifer Collingwood <jcollingwood@panl.net>; blair.medd@nlchi.nl.ca; 'Jonathan Carpenter' <JCarpenter@nlma.nl.ca>
Cc: Margot Priddle <mpriddle@nlpb.ca>
Subject: RE: PMP Communications Materials for Friday’s meeting, Apr 20, 10 a.m.

Good morning everyone,

and so asked that I respond on her behalf.

Our understanding is that the responsibilities of the “dispenser” are outlined in the Prescription Monitoring Act and include recording required information, checking the electronic health record, verifying the patient’s identity and recording the dispense in the pharmacy network.

The act permits inspections of both prescribers offices and pharmacies to allow for this requirement to be audited after-the-fact, if need be.

Melanie

From: Margot Priddle
Sent: April-27-18 10:36 AM
To: Melanie Healey
Subject: Fwd: PMP Communications Materials for Friday’s meeting, Apr 20, 10 a.m.
Begin forwarded message:

From: Jennifer Collingwood <jcollingwood@panl.net>
Date: April 27, 2018 at 7:34:55 AM EDT
To: "Roberts, Amanda K" <AmandaRoberts@gov.nl.ca>, "Clark, Patricia" <pclark@gov.nl.ca>, Gillian Sweeney <gillian.sweeney@nlchi.nl.ca>, "Jamie Osmond" <josmond@cpsn.ca>, Lynn Power <lpower@arnl.ca>, Margot Priddle <mpriddle@nlpb.ca>, Mary Slade <Mary.Slade@nlchi.nl.ca>, Michelle Osmond <Mosmond@arnl.ca>, "O'Dea, Jamie" <JamieODea@gov.nl.ca>, Richard Coombs <Richard.Coombs@nlchi.nl.ca>, "blair.medd@nlchi.nl.ca" <blair.medd@nlchi.nl.ca>, 'Jonathan Carpenter' <JCarpenter@nlma.nl.ca>, "Smith, Gerrie" <GerrieSmith@gov.nl.ca>
Subject: RE: PMP Communications Materials for Friday's meeting., Apr 20, 10 a.m.

Good morning,
Will pharmacists be required to take any action if they receive a prescription where the physician has not ticked the 'I have reviewed the patient’s HER’ box?
Thank you,
Jennifer

From: Roberts, Amanda K <AmandaRoberts@gov.nl.ca>
Sent: Wednesday, April 18, 2018 9:04 AM
To: Clark, Patricia <pclark@gov.nl.ca>; Gillian Sweeney <gillian.sweeney@nlchi.nl.ca>; Jamie Osmond <josmond@cpsn.ca>; Lynn Power <lpower@arnl.ca>; Margot Priddle <mpriddle@nlpb.ca>; Mary Slade <Mary.Slade@nlchi.nl.ca>; Michelle Osmond <Mosmond@arnl.ca>; O'Dea, Jamie <JamieODea@gov.nl.ca>; Richard Coombs <Richard.Coombs@nlchi.nl.ca>; Jennifer Collingwood <jcollingwood@panl.net>; 'blair.medd@nlchi.nl.ca' <blair.medd@nlchi.nl.ca>; 'Jonathan Carpenter' <JCarpenter@nlma.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>
Subject: PMP Communications Materials for Friday's meeting., Apr 20, 10 a.m.

"While this is our final draft, it is still a draft version and is not for distribution. We would like to meet to have a final review of this draft and discuss methods of distribution."

Thanks, Jamie

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Prescription Monitoring Program
NL

Frequently Asked Questions

Information for Prescribers and Dispensers

Newfoundland Labrador
The Prescription Monitoring Program – NL supports the Provincial Government’s Opioid Action Plan to help address the growing opioid issue facing Canada and this province.

The purpose of the program is to help prescribers and dispensers – for example, physicians, nurse practitioners, dentists, pharmacists and dispensing Registered Nurses – make the most informed decisions when choosing to prescribe or dispense a drug.

The Prescription Monitoring Act governs the program and came into effect on January 1, 2018. To view a copy of the Act, please visit Prescription Monitoring Act.

Under the Act, by June 30, 2018, all prescribers and dispensers in Newfoundland and Labrador will be required to check their patient’s medication profile using the provincial electronic health record, now called HEALTHe NL, before prescribing and dispensing a monitored drug.

For more information on the Prescription Monitoring Program – NL, email info@PMPNL.ca.

For more information on HEALTHe NL, call 709-752-6006 or 1-877-752-6006 or email healthenl@nlchhi.nl.ca

To begin the registration process for HEALTHe NL, please visit HEALTHe NL User Registration Form
What is the Prescription Monitoring Program?

The Prescription Monitoring Program – NL is another action being implemented by the Provincial Government as part of the Opioid Action Plan to help address the growing opioid issue facing Canada and this province.

The purpose of the program is to help prescribers and dispensers – for example, physicians, nurse practitioners, dentists and pharmacists – make the most informed decisions when choosing to prescribe or dispense a drug.

Through the program, prescribers and dispensers will have access to up-to-date and accurate patient medication profiles to help inform and support the needs of their patients.

All provinces, with the exception of Quebec, have some form of a prescription monitoring program.

What health care professionals will be a part of the program?

The health care professionals that will be a part of the program are authorized prescribers and dispensers of prescription medications throughout the province. These include physicians, nurse practitioners, dentists and pharmacists.

What about veterinarians? Will they be required to comply with the Act?

While veterinarians fall under the definition of prescriber, they are excluded in the regulations. Work is underway to determine how to capture these prescriptions under the program.

How do I know what drugs are to be monitored by the Program?

Only opioid medications are being monitored by the program. As the program matures, other medications may be added.

When will the Prescription Monitoring Act come into effect?

The Prescription Monitoring Act is the legislation that governs the program and came into effect on January 1, 2018. To view a copy of the Act, please visit Prescription Monitoring Act. Under the Act, by June 30, 2018, all prescribers and dispensers in Newfoundland and Labrador will be required to check their patient’s medication profile using the provincial electronic health record, now called HEALTHe NL, before prescribing and dispensing a monitored drug.
What are the benefits of the Program?

The program supports better understanding of a patient’s drug use based on their medication use.

Using HEALTHe NL prescribers and dispensers can access a quick, confidential online report. It is available 24 hours a day, 7 days a week. Information is based on prescription data from over 200 community pharmacies.

Some important public health goals that are expected to result from the program include an increase in the quality of patient care, greater confidence when prescribing and dispensing drugs and greater efficiency and coordination of care.

The program is also expected to lead to a decrease in drug misuse, and prevent or reduce hospitalizations and deaths resulting from misuse.

How will information from the program be used?

The information that will be generated from the program will help:
- Promote appropriate prescribing and dispensing practices;
- Provide information and education to prescribers and dispensers;
- Identify potential instances of drug abuse and misuse;
- Reduce drug abuse and misuse; and,
- Reduce the risk of addiction and death resulting from drug abuse or misuse.

The information will also be used to inform the Provincial Government on the need for further intervention services, educational programming and to evaluate the effectiveness of the program.

Why do we need the Prescription Monitoring Program?

Prescription drug abuse is an issue that impacts the lives of Newfoundlanders and Labradorians every day. It will take a collective effort to make headway to address and reduce this serious public health issue.

Prescription monitoring programs can help improve drug prescribing, support ways to lower or prevent harms related to certain drugs, and can help identify patients who may be at risk of addiction.

The program is not intended to prevent the use of drugs for legitimate medical purposes. There are many reasons why certain drugs are the most appropriate treatment for a patient’s condition. The program is not meant to deter prescribers from making an informed clinical decision to administer a monitored drug.
Who provides oversight of the Prescription Monitoring Program?

The Minister of Health and Community Services provides oversight of the program. A Prescription Monitoring Program Consultants Committee will be appointed by the Minister to provide oversight and accountability. This Committee will make recommendations and provide a critical and clinical lens to any generated reports that require review. Administration of the program will be carried out by the Newfoundland and Labrador Centre for Health Information (NLCHI).

What powers does the Prescription Monitoring Program have?

The Prescription Monitoring Act authorizes the monitoring, analyzing and reporting of information, including personal health information.

Will more prescription medications be added to the list of monitored drugs?

Only opioid medications are being monitored by the program. As the program matures, other medications may be added.

Can personal health information be shared with the Program?

Under the Prescription Monitoring Act, prescribers and dispensers must provide information which may include personal health information when it is requested by the administrator of the program. This requirement overrides any confidentiality provision in the Personal Health Information Act. Therefore, in complying with such a request, a prescriber or dispenser is not in violation of the Personal Health Information Act.

Can you opt out of the Prescription Monitoring Program?

No. All drug prescriptions provided by prescribers and filled in pharmacies in Newfoundland and Labrador are subject to review under the program.

Will information be shared with a regulatory authority or law enforcement?

The purpose of the program is to help prescribers and dispensers make the most informed decisions. The intention is not to police these professionals.

Prescribers and dispensers who are performing their duties as health care professionals in accordance with their regulatory guidelines and the requirements under the Prescription Monitoring Act would not have their information shared with their regulatory bodies.

If activities that are deemed to contravene the Prescription Monitoring Act are discovered, they would be reviewed by the Prescription Monitoring Program Consultants Committee and possibly shared with the regulatory body or law enforcement if warranted.
Will the Program capture prescriptions from another jurisdiction?

Yes. Medication profiles are maintained for all patients that have prescriptions filled in pharmacies in Newfoundland and Labrador even if they are not from the province.

If a member of the public has a concern or complaint about prescribing or dispensing habits who should they contact?

The most appropriate place for members of the public to express a concern or complaint about a prescriber or dispenser would be to the regulatory bodies who provide oversight to those health care providers.

If a member of the public felt their concern or complaint was related to criminal activity, they could also file a report with the police.

Didn't the province already have a prescription monitoring program?

Yes. There was a paper-based prescription monitoring program in place sometime ago. Without an electronic system to capture the dispensing of prescriptions; however, it had limited success. With the electronic Pharmacy Network, the necessary tools are in place to more successfully implement a prescription monitoring program.

What information can the program give prescribers or dispensers about a patient?

The program provides a drug profile of an individual's prescriptions for drugs monitored by the program. It includes the identification of the prescribers prescribing the drugs and the pharmacies dispensing the drugs. This information is already available to health care professionals via HealtheNL.

Prescribers and Dispensers

What is now expected of a prescriber when prescribing a monitored drug?

The new expectations for prescribers will be the requirement to review a patient’s medication profile in the electronic health record, HEALTHe NL, prior to prescribing a monitored drug to ensure its appropriateness.

Prescribers will also be required to check a box indicating they have reviewed the patient’s medication profile on the new Tamper Resistant Prescription Drug Pads (TRPP).

These requirements come into effect on June 30, 2018.
What is now expected of dispensers when filling a prescription for a monitored drug?

There are no new expectations of pharmacy dispensers as they are already expected to review a patient’s medication profile in the electronic health record prior to all dispenses. They are also obligated to input prescription information in the Pharmacy Network as per their Standards of Pharmacy Operation. These provisions, under the Prescription Monitoring Act, came into effect on January 1, 2018.

Dispensers are not expected to deny service to a patient if the check-box on a Tamper Resistant Prescription is not ticked. Dispensers should make clinical decisions based on their professional standards.

Dispensing physicians and nurses in rural and remote areas of the province are exempt from the requirements of dispensers as listed in the Act.

Who will sit on the Prescription Monitoring Program Consultants Committee?

The Consultants Committee will provide a forum for reviewing questionable activity criteria reporting, and for providing advice and making recommendations to the Minister of Health and Community Services on action to be taken following a review or improvements to the program.

The committee will consist of:
- 2 physicians (at least one physician must be a family physician)
- A dentist
- A nurse practitioner
- 2 pharmacists (at least one dispenser must be a community pharmacist)

Pharmacist and prescriber representation on this committee is key in order to provide a clinical lens to the information presented to it by the program.

There will also be representation from the Department of Health and Community Services and NLCHI, however these will be ex-officio positions.

Are there any penalties under the Act?

Failure to comply with a requirement under the Act is an offence and may result in a fine of up to $10,000 for an individual or $20,000 for a corporation.

Can a prescriber or dispenser designate someone to check a patient’s medication profile?

No, it is the responsibility of the prescriber and the dispenser to review the patient’s medication profile prior to prescribing or dispensing a monitored drug.
Will there be any changes to the Tamper Resistant Prescription Drug Pad program (TRPP)?

TRPP is a program under the Pharmaceutical Services Act which requires that prescriptions for certain drugs, including opioids, be issued on a special tamper resistant drug pad. There are no substantive changes anticipated to this program. Minor changes will be made to the actual prescription pad to denote that a prescriber has checked the patient’s medication profile prior to prescribing.

Additionally, after June 30, 2018, prescriptions for tramadol will be added to the list of drugs that have to be written on a tamper resistant prescription drug pad.

How will the Program know whether prescribers and dispensers are complying with the Program requirements?

New Tamper Resistant Prescription Drug Pads will be issued that will include a check-box where prescribers can indicate that they have reviewed the patient’s medication profile prior to the prescription being written.

The purpose of the check-box is to act as a formal reminder to physicians that they are to check the medication profile. By signing their names to the prescription they are certifying that they have done so.

Dispensers are not expected to deny service to a patient if the check-box is not ticked. Dispensers should make clinical decisions based on their professional standards

Random reviews of prescriptions for monitored drugs may occur to ensure that a patient’s medication profile was accessed by both the prescriber and dispenser prior to the prescription being written or filled.

Will prescribers and dispensers be required to report any issues regarding how another prescriber is prescribing a monitored drug?

The Prescription Monitoring Act does not contain a duty to report to the Prescription Monitoring Program. Concerns of this nature should be discussed with the prescriber or the prescriber’s regulatory body pursuant to their governing statutes.

Some health professions may have a duty to report in the own professional legislation. Those duties continue to apply and are not impacted by the Act.
Regional Health Authorities

Are prescribers and dispensers practicing within a hospital setting subject to the Prescription Monitoring Act?

Prescribers writing prescriptions on a Tamper Resistant Prescription Drug Pad for a monitored drug that will be filled in a community pharmacy need to check the patient’s medication profile in the electronic health record prior to writing a prescription.

If a prescriber or dispenser is prescribing or dispensing a monitored drug with the intention that it is administered as a part of a patient’s treatment plan, while in a hospital, they are not required to check the patient's medication profile. Inpatients do not receive more than the required dose at any given time so the risk of abuse or misuse of opioids is quite low.

In some regional health authority locations, some physicians and registered nurses can both prescribe and dispense medications, are they required to check the patient’s medication profile when prescribing or dispensing a monitored drug?

In these instances, physicians and registered nurses who have both prescribing and dispensing powers are required to check the patient’s medication profile before writing a prescription for a monitored drug.

They are not required to check the medication profile again when dispensing that monitored drug.

Are prescribers, who are administering prescriptions for monitored drugs to long-term care patients, required to check the patient’s medication profile?

Yes, long-term care patients are not in-patients, but considered out-patients.

Prescriptions filled for a long-term care patient are done in community pharmacies.

Prescribers are required to check the long-term care patient’s medication profile in the electronic health record before writing a prescription for a monitored drug.
Provincial Electronic Health Record – HEALTHe NL

How will prescribers and dispensers review the patient medication profile?

The electronic health record, HEALTHe NL, will be the primary tool to help prescribers and dispensers review the patient’s medication profile.

HEALTHe NL is a private record of an individual’s health care information, available electronically to authorized health care professionals. It integrates information from many sources into a single, lifetime record of an individual’s key health history and care. Information is available in one place when and where it is needed.

Information contained in HEALTHe NL includes:
- Patient medication profiles from all community pharmacies province wide through the Pharmacy Network
- Known allergies and medical alerts from community pharmacies only.
- Meditech data, including dictated reports, laboratory results, diagnostic imaging and encounters.
- Information about where health services have occurred, by whom and other key clinical events such as inpatient admission.

Clinicians using the provincial electronic medical record (EMR) program, eDOCSNL, can launch HEALTHe NL from within their EMR to view their patient’s medication profile.

For information on accessing the provincial electronic health record, HEALTHe NL, please contact: 709-752-6006, 1-877-752-6006 or healthenl@nlch nl.ca

To begin the registration process for HEALTHe NL, please visit - HEALTHe NL User Registration Form

What is the Pharmacy Network?

The Pharmacy Network is a component of the province-wide electronic health record, HEALTHe NL, that is comprised of a real-time database of medication profiles compiled from prescriptions filled at all of the province’s outpatient pharmacies.

Data from the Pharmacy Network will be used to help guide prescribers and dispensers in making clinical decisions regarding the prescribing/dispensing of monitored drugs. It will also be the basis for the reports generated by the Program.
Ok thanks

From: Anthony Patey [mailto:anthony.patey.nlda@nfld.net]
Sent: Wednesday, May 2, 2018 3:15 PM
To: O'Dea, Jamie <JamieODea@gov.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>
Cc: 'Amin Alibhai'  

Jamie;

I was told that we could not search by name and DOB but I will check again the member who contacted me. Thanks.

Tony

Anthony W. Patey
Executive Director
Newfoundland & Labrador Dental Association
ph 709 579-2362
fx 709 579-1250

Hi Tony,

I have just reached out to the NL Center for Health Information who are the administers of HealtheNL. They have confirmed that dentists have full search capability and aren't limited to MCP only searches. They should be able to search by name and DOB. If you are finding this is not the case please let us know.

Jamie

From: Anthony Patey [mailto:anthony.patey.nlda@nfld.net]
Sent: Wednesday, May 2, 2018 1:33 PM
To: Smith, Gerrie <GerrieSmith@gov.nl.ca>; O'Dea, Jamie <JamieODea@gov.nl.ca>
Cc: 'Amin Alibhai' 
Subject: RE: [Potential Junk/Spam] RE: prescription monitoring regulations
Hi;

I do have another question or concern re the PMP and the searching of patient history on the HealthNL system. The HealtheNL portal allows searching for patient's by MCP alone as is. In Dentistry most work is not covered by MCP and therefore the Dentist would not have the number on file and as many patients don't carry the card with them everywhere. We would need the database searchable by First and Last names with date of Birth.

Is this an easy fix for HealthNL?

Thanks

Tony

Anthony W. Patey  
Executive Director  
Newfoundland & Labrador Dental Association  
ph 709 579-2362  
fx 709 579-1250

From: Smith, Gerrie [mailto:GerrieSmith@gov.nl.ca]  
Sent: Monday, March 05, 2018 1:01 PM  
To: 'Anthony Patey'  
Cc: O'Dea, Jamie  
Subject: RE: prescription monitoring regulations

Hi Tony,

Thank you for your feedback. I apologize for not getting back to you earlier but I had other priorities for the moment with the House of Assembly opening last week.

In response to your comments, I’ve embedded my comments in your email below. In some cases, I’m asking that Jamie respond as I don’t have that particular information.

Please let me know if you have any questions or should you wish to discuss.

Again, thanks for reviewing the draft regulations and providing us with your comments.

Gerrie

Gerrie Smith, BA LL.B  
Legislative Consultant  
Department of Health and Community Services
709-729-2560 (tel)
gerriesmith@gov.nl.ca

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From: Anthony Patey [mailto:anthony.patey.nlnd@gov.nl.net]
Sent: Wednesday, February 21, 2018 10:05 AM
To: Smith, Gerrie <GerrieSmith@gov.nl.ca>
Cc: O'Dea, Jamie <JamieODea@gov.nl.ca>
Subject: RE: prescription monitoring regulations

Gerrie;

I have reviewed the regs with my Committee and there are some concerns.

s. 29(1)(a)
Just some thoughts.

Tony

Anthony W. Patey  
Executive Director  
Newfoundland & Labrador Dental Association  
ph 709 579-2362  
fx 709 579-1250

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From: O'Dea, Jamie
To: Clark, Patricia
Subject: RE: call from upset doc about PMP
Date: Monday, May 28, 2018 4:25:51 PM

Thanks – it was my understanding that NLCHI would be fielding these calls as they are the administrators of the program.

From: Clark, Patricia
Sent: Tuesday, May 15, 2018 10:50 AM
To: O'Dea, Jamie <JamieODea@gov.nl.ca>
Cc: Clark, Patricia <pclark@gov.nl.ca>
Subject: FW: call from upset doc about PMP

FYI

To discuss when you are back.

From: Gillian Sweeney [mailto:Gillian.Sweeney@nlchi.nl.ca]
Sent: Tuesday, May 15, 2018 10:30 AM
To: Clark, Patricia; Mary Slade
Cc: Mullins, Marguerite
Subject: RE: call from upset doc about PMP

Thanks Trish. That sounds good. Some further discussions will be helpful for sure given both DHCS and NLCHI will both be getting requests for information as well as true complaints.

Gillian

From: Clark, Patricia [mailto:pclark@gov.nl.ca]
Sent: May 15, 2018 10:26 AM
To: Gillian Sweeney <Gillian.Sweeney@nlchi.nl.ca>; Mary Slade <mary.slade@nlchi.nl.ca>
Cc: Mullins, Marguerite <margueritemullins@gov.nl.ca>
Subject: RE: call from upset doc about PMP

Thanks Gillian.

The FAQ document noted the email below (which is why I contacted you guys), and I just heard back from Richard who suggested to direct the question there and he will respond when he returns to work. I will follow up with the physician as well, but perhaps we should have further discussion on internal process and if there is a need for a phone number to direct these calls to as well. Happy to discuss further.

Cheers
Trish

Contact Information:

Prescription Monitoring Program - NL:
For further information on Prescription Monitoring Program – NL, email: info@PMPNL.ca

From: Gillian Sweeney [mailto:Gillian_Sweeney@nlchi.nl.ca]
Sent: Tuesday, May 15, 2018 9:51 AM
To: Clark, Patricia; Mary Slade
Cc: Mullins, Marguerite
Subject: RE: call from upset doc about PMP

Hi Trish,

It is my recollection from previous meetings that any complaints or concerns about PMP were to be addressed by DHCS as per policies and procedures that are currently in place because the Minister is ultimately accountable.
That was outlined in the PIA as well. If you require any information from NLCHI to assist with that process just let us know.

Thanks,
Gillian

From: Clark, Patricia [mailto:pclark@gov.nl.ca]
Sent: May 15, 2018 9:09 AM
To: Gillian Sweeney <Gillian.Sweeney@nlchi.nl.ca>; Mary Slade <mary.slade@nlchi.nl.ca>
Cc: Mullins, Marguerite <marginemullins@gov.nl.ca>
Subject: FW: call from upset doc about PMP
Importance: High

Hi Gillian/Mary – see below.

From: Clark, Patricia
Sent: Tuesday, May 15, 2018 9:06 AM
To: Richard Coombs (Richard_Coombs@nlchi.nl.ca)
Cc: Mullins, Marguerite; Clark, Patricia
Subject: FW: call from upset doc about PMP
Importance: High

Hi Richard,

See below. Are you guys fielding these calls from physicians?

Thanks
Trish

From: Kavanagh, Kelly
Sent: Monday, May 14, 2018 3:23 PM
To: Clark, Patricia; Ryan, Colleen; Mullins, Marguerite
Subject: call from upset doc about PMP
Importance: High

Hi,
I just called very upset about the PMP prgm being forced
on them and in particular the announcement today that Tramadol is being included
as it “will double his work”. He wants my manager to call and discuss this with him.

And he said we should expect to be inundated with calls from angry docs over the
next few days. Our number is listed on the notification and he pointed out that
there’s no option on the phone system for PMP questions so he chose #2 and got
me. He suggests that the phone system include an option for PMP.

Kelly

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or copying by any means of this information is strictly prohibited. If you received this email in
error, please delete it immediately and notify the sender.”
Thanks Gerrie

From: Smith, Gerrie  
Sent: Monday, May 28, 2018 5:08 PM  
To: O'Dea, Jamie  
Cc: Coffin, David J (HCS) <DavidJCoffin@gov.nl.ca>; Mullins, Marguerite <margueritemullins@gov.nl.ca>  
Subject: RE: NL Prescription Monitoring Program

Hi Jamie,

I spoke with Sandra on May 15th. She called me. She was sending something out to their registrants I believe gauging interest in sitting on the committee. I think she was going to ask for responses back to the Board by the middle / end of June.

When you get settled back in, perhaps we can have a chat.

Gerrie

From: O'Dea, Jamie  
Sent: Monday, May 28, 2018 5:03 PM  
To: Coffin, David J (HCS) <DavidJCoffin@gov.nl.ca>; Mullins, Marguerite <margueritemullins@gov.nl.ca>  
Cc: Smith, Gerrie <GerrieSmith@gov.nl.ca>  
Subject: RE: NL Prescription Monitoring Program

Hi - there was no deadline given as the regs have not been approved yet. We just wanted to give the board plenty of time to provide the name of a representative for the committee.

Jamie

From: Coffin, David J (HCS)  
Sent: Thursday, May 10, 2018 1:29 PM  
To: Mullins, Marguerite <margueritemullins@gov.nl.ca>  
Cc: O'Dea, Jamie <jamieODea@gov.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>  
Subject: FW: NL Prescription Monitoring Program

Hi Marguerite
Please review and let me know if you can help provide a response to Sandra re: the date.

Thanks

David

---

From: Fry, Connie  
Sent: Thursday, May 10, 2018 1:06 PM  
To: 'Sandra Knox'  
Cc: Coffin, David J (HCS)  
Subject: RE: NL Prescription Monitoring Program

Hi Sandra:

By cc on this email, I will ask David Coffin to follow up with you to see if he can help.

Thanks.

Connie Fry  
Secretary, Policy, Planning and Performance Monitoring and Medical Services  
Department of Health and Community Services  
1st Floor, West Block, Confederation Building  
Government of Newfoundland and Labrador  
PO Box 8700, St. John's, NL A1B 4J6  
709-729-3103  
cfry@gov.nl.ca

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From: Sandra Knox [mailto:nldb@nl.bro.com]  
Sent: Thursday, May 10, 2018 12:48 PM  
To: Fry, Connie  
Subject: FW: NL Prescription Monitoring Program

Hi Connie

I received an away message from Gerry – wondering if you can help me.

Thanks

Sandra

Sandra M. Knox  
Administrator  
Office of the Registrar  
Newfoundland & Labrador Dental Board  
Suite 204, 49-55 Elizabeth Avenue  
St. John's, NL A1A 1W9  
Office (709) 579-2391  
Fax (709) 579-2392  
www.nldb.ca
Hi Gerri,

Would you provide me with a deadline for submission of the name of the dentist appointed by the NL Dental Board for the Consultants Committee.

Thanks
Sandra

Sandra M. Knox
Administrator
Office of the Registrar
Newfoundland & Labrador Dental Board
Suite 204, 49-55 Elizabeth Avenue
St. John's, NL A1A 1W9
Office (709) 579-2391
Fax (709) 579-2392
www.nldb.ca
Sent with BlackBerry Work  
(www.blackberry.com)

From: Mary Slade <mary.slade@nlchi.nl.ca>  
Date: Monday, Jun 11, 2018, 1:32 PM  
To: Jennifer Collingwood <jcollingwood@panl.net>  
Subject: PPT

Mary Slade  
Director, eHealth Clinical Programs  
NL Centre for Health Information  
70 O’Leary Ave  
St. John’s NL  
A1B 2C7

t. 709-728-2261  
e. mary.slade@nlchi.nl.ca

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Pharmacy Network Advisory Committee Update

June 11th, 2018
Prescription Monitoring Program

- Officially launched January 1, 2018
- A program of the DHCS developed in conjunction with and administered by NLCHI
- Initially, will monitor prescribing and dispensing of opioids (incl. tramadol)
- PN will be the primary source of data
Prescription Monitoring Program

• Two Components:
  – Proactive: requiring prescribers and dispensers to review PN profile prior to prescribing/dispensing a monitored drug
  – Retroactive: will monitor Rxs coming through the PN for various triggers for investigation.

• Data Quality
  – Opioid prescriptions will be monitored for completeness.
Prescription Monitoring Program

• Current Status:
  – Pharmacist hired to support PMP
  – Program policies and procedures in place
  – PIA complete and submitted to OIPC
  – FAQ documents awaiting approval from DHCS
  – Centre PMP Data Analytics and Evaluation Working group
    • Evaluation
Prescription Monitoring Program

- Change Management Activities:
  - Centre’s efforts are focused on getting HealtheNL accounts set up for all prescribers
    - 1748 prescribers
      - Physicians = 1245
      - Residents = 148
      - Dentists = 174
      - NP = 181
    - Total prescribers signed up to HEALTHe NL: 1072 (61%)
    - 594 prescribers (excl. residents) remaining to sign up
Prescription Monitoring Program

To Be Completed:  
- s. 29(1)(a), s. 29(1)(c)
- Committees in place
- Approval of FAQ
- KIV:
  • Recommended mitigations to risks (i.e.. The 700+ prescribers
From: Jamie Omond
To: O'Dea, Jamie
Subject: 2018-06-15 - Prescription Monitoring Program (PMP)
Date: Friday, June 15, 2018 3:07:55 PM
PRESCRIPTION MONITORING PROGRAM (PMP) – June 30 Deadline

Notice to College Members
On behalf of NLCHI

June 15, 2018

The provincial Prescription Monitoring Program (PMP) has provided your name to the College asking for assistance in reaching you on this important matter. Their records indicate that you have not yet registered and acquired a username and password to access a patient’s online medication profile history.

Effective June 30, 2018, under the Prescription Monitoring Act, prescribers of opioids, including Tramadol, will be legislated to use HEALTHe NL to review a patient’s medication profile prior to writing a prescription. It is an offence to prescribe these drugs without first reviewing the online medication profile.

Registration Form:


Contact: Raleen Murphy at the Newfoundland and Labrador Centre for Health Information raleen.murphy@nlchi.nl.ca, office: (709) 752-6107 or cell: (709) 351-6286 to complete the registration and education process.

All College communication to its members will be by email.
It is a professional obligation for College members to read all College communications.
Thanks Alison I really appreciate this.

Hi

Sent from my BlackBerry 10 smartphone on the Bell network.

Hi Heather
We will do our very best to get this back to you today. We received final copy last Tuesday and when I asked about release date to keep timelines in check I was told June 30th so I apologize if there was a disconnect.
Alison

Alison MacLeod-Boland
Executive Council, Communications and Public Engagement
Marketing and Brand Management
Government of Newfoundland and Labrador
T 709.729.5729

Hi Alison, yes these are for the prescription monitoring program and the division would like to have them completed before the June 30, the date the prescriber regulations come into effect.

Thanks Emily
Is there a release date associated with the documents that we should be aware of to keep timelines
in check?

Alison MacLeod-Boland
Executive Council, Communications and Public Engagement
Marketing and Brand Management
Government of Newfoundland and Labrador
T 709.729.5729

From: Timmins, Emily
Sent: Monday, June 11, 2018 3:11 PM
To: Macleod-Boland, Alison
Cc: Barfoot, Scott
Subject: FAQ documents to come

Hi Alison, we have two FAQ documents that are currently with Minister Haggie for sign off. I understand Tina may have mentioned this to you previously. I understand we would look to Creative to ensure it has an appropriate look and feel to live on HCS website. Just wanted to give you a heads up.
The documents are 10 pages and 6 pages.

Emily Timmins
Media Relations Manager
Health and Community Services
Office: (709)729-6986
Cell: (709) 693-1292
Here are the changes from this morning in the Word version.
Prescription Monitoring Program

NL

Frequently Asked Questions

Information for the Public
Prescription Monitoring Program – NL supports the Provincial Government’s Opioid Action Plan to help address the growing opioid issue facing Canada and this province.

The program aims to help prescribers and dispensers – physicians, nurse practitioners, dentists, pharmacists and dispensing Registered Nurses – make the most informed decisions when choosing to prescribe or dispense a monitored drug.

The Prescription Monitoring Act governs the program and came into effect on January 1, 2018. To view a copy of the Act, please visit Prescription Monitoring Act.

Under the Act, by June 30, 2018, all prescribers and dispensers in Newfoundland and Labrador will be required to check their patient’s medication profile using the provincial electronic health record, now called HEALTHe NL, before prescribing and dispensing a monitored drug.

For more information on the Prescription Monitoring Program – NL, email info@PMPNL.ca.

For more information on HEALTHe NL, call 709-752-6006 or 1-877-752-6006 or email healthenl@nlchi.nl.ca
What is the Prescription Monitoring Program?

Prescription Monitoring Program – NL is another action of the Provincial Government’s Opioid Action Plan aimed at addressing the growing opioid issue facing Canada and this province.

The purpose of the program is to help prescribers and dispensers make the most informed decisions when choosing a monitored drug to treat a patient.

Using the provincial electronic health record, prescribers and dispensers will have access to up-to-date and accurate patient medication profiles to help inform and support the needs of their patients.

All provinces, with the exception of Quebec, have some form of a prescription monitoring program.

What health care professionals will be a part of the program?

Prescribers and dispensers as defined in the Prescription Monitoring Act will be a part of the program throughout the province including physicians, nurse practitioners, registered nurses, dentists and pharmacists.

What about veterinarians?

While veterinarians fall under the definition of prescriber, they are excluded in the regulations at this time.

How do I know what drugs are to be monitored by the Program?

Opioid medications, including tramadol, are being monitored by the program. As the program matures, other medications may be added.

When will the Prescription Monitoring Act come into effect?

The Prescription Monitoring Act came into effect on January 1, 2018.

Under the Act, by June 30, 2018, all prescribers and dispensers in Newfoundland and Labrador will be required to check their patient’s medication profile using the provincial electronic health record, HEALTHe NL, before prescribing and dispensing a monitored drug.

To view a copy of the Act, please visit Prescription Monitoring Act.
What are the benefits of the Program?

Some important public health goals that are expected from the program include an increase in the quality of patient care, greater confidence when prescribing and dispensing drugs and greater efficiency and coordination of care.

The program is also expected to lead to a decrease in drug misuse, and prevent or reduce hospitalizations and deaths related to drug misuse.

How will information from the program be used?

The information that will be generated from the program will help:
- Promote appropriate prescribing and dispensing practices;
- Provide information and education to prescribers and dispensers;
- Identify potential instances of drug abuse and misuse;
- Reduce drug abuse and misuse; and,
- Reduce the risk of addiction and death resulting from drug abuse or misuse.

The information will also be used to inform the Provincial Government on the need for further intervention services, educational programming and to evaluate the effectiveness of the program.

Why do we need the Prescription Monitoring Program?

Prescription drug abuse is an issue that impacts the lives of Newfoundlanders and Labradorians every day. It will take a collective effort to make headway to address and reduce this serious public health issue.

Prescription monitoring programs can help improve drug prescribing, lower or prevent risks related to certain drugs, and can help identify patients who may be at risk of addiction.

The program is not intended to prevent the use of prescription drugs for legitimate medical purposes. There are many reasons why certain drugs are the most appropriate treatment for a patient’s condition. The program is not meant to deter prescribers from making an informed clinical decision.

Who provides oversight of the Prescription Monitoring Program?

The Minister of Health and Community Services provides oversight of the program. A Prescription Monitoring Program Consultants Committee will be appointed by the Minister and have oversight. This Committee will make recommendations and provide a critical and clinical lens to any generated reports that require review. Administration of the program will be carried out by the Newfoundland and Labrador Centre for Health Information (NLCHI).
Can personal health information be shared with the Program?

Under the Prescription Monitoring Act, prescribers and dispensers must provide information which may include personal health information when it is requested by the administrator of the program. This requirement overrides any confidentiality provision in the Personal Health Information Act. Therefore, in complying with such a request, a prescriber or dispenser is not in violation of the Personal Health Information Act.

Can you opt out of the Prescription Monitoring Program?

No. All drug prescriptions provided by prescribers and filled in pharmacies in Newfoundland and Labrador are subject to review under the program.

Will information be shared with a regulatory authority or law enforcement?

The purpose of the program is to help prescribers and dispensers make the most informed decisions. The intention is not to police these professionals.

Prescribers and dispensers who are performing their duties as health care professionals in accordance with their regulatory guidelines and the Prescription Monitoring Act would not have personal health information related to their patients shared with their regulatory bodies.

If activities that are deemed to contravene the Prescription Monitoring Act are discovered, they would be reviewed by the Prescription Monitoring Program Consultants Committee and possibly shared with the regulatory body or law enforcement if warranted.

Will the Program capture prescriptions from another jurisdiction?

Yes. Medication profiles are maintained for all patients that have prescriptions filled in pharmacies in Newfoundland and Labrador even if they are not from the province.

If a member of the public has a concern or complaint about prescribing or dispensing habits who should they contact?

The most appropriate place to express a concern or complaint about a prescriber or dispenser would be with the regulatory bodies of those health care providers.

If a member of the public felt their concern or complaint was related to criminal activity, they could also file a report with the police.
Didn’t the province already have a prescription monitoring program?

Yes. There was a previous paper-based prescription monitoring program. Without an electronic system to capture the dispensing of prescriptions, it had limited success. Using the Pharmacy Network, a component of the provincial electronic health record, the necessary tools are in place to more successfully implement a prescription monitoring program.
From: Timmins, Emily  
To: Hanrahan, Heather D; O'Dea, Jamie  
Subject: RE: gerrie’s edits  
Date: Thursday, June 21, 2018 1:32:18 PM  
Attachments: June 21 Revised FINAL DRAFT - FAQ PMP - Prescribers and Dispensers.docx

Here is the doc in full with changes highlighted.

From: Timmins, Emily  
Sent: Thursday, June 21, 2018 1:27 PM  
To: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>; O'Dea, Jamie <JamieODea@gov.nl.ca>  
Subject: gerrie’s edits

Heather, as we just discussed, here are the “page 7” questions and revisions as I believe Gerrie means them. Please advise on accuracy.

Regional Health Authorities

Are prescribers and dispensers practicing within a hospital setting subject to the Prescription Monitoring Act?

Prescribers writing prescriptions on a Tamper Resistant Prescription Drug Pad for a monitored drug need to check the patient’s medication profile in the electronic health record prior to writing a prescription.

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In some rural and remote locations, some physicians and registered nurses can both prescribe and dispense medications, are they required to check the patient’s medication profile when prescribing or dispensing a monitored drug?

In these instances, physicians and registered nurses who have both prescribing and dispensing powers are required to check the patient’s medication profile before writing a prescription for a monitored drug. They are not required to check the medication profile again when dispensing that monitored drug.

Emily Timmins  
Media Relations Manager  
Health and Community Services  
Office: (709)729-6986  
Cell: (709) 693-1292
Prescription Monitoring Program

Frequently Asked Questions

Information for Prescribers and Dispensers
Prescription Monitoring Program – NL supports the Provincial Government’s Opioid Action Plan to help address the growing opioid issue facing Canada and this province.

The program aims to help prescribers and dispensers – physicians, nurse practitioners, dentists, pharmacists and dispensing registered nurses – make the most informed decisions when choosing to prescribe or dispense a monitored drug.

The Prescription Monitoring Act governs the program and came into effect on January 1, 2018. To view a copy of the Act, please visit Prescription Monitoring Act.

Under the Act, by June 30, 2018, all prescribers and dispensers in Newfoundland and Labrador will be required to check their patient’s medication profile using the provincial electronic health record, now called HEALTHe NL, before prescribing and dispensing a monitored drug.

For more information on the Prescription Monitoring Program – NL, email info@PMPNL.ca.

For more information on HEALTHe NL, call 709-752-6006 or 1-877-752-6006 or email healthenl@nlchi.nl.ca

To begin the registration process for HEALTHe NL, please visit - HEALTHe NL User Registration Form
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Why do we need the Prescription Monitoring Program?

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Prescription monitoring programs can help improve drug prescribing, lower or prevent risks related to certain drugs, and can help identify patients who may be at risk of addiction.

The program is not intended to prevent the use of prescription drugs for legitimate medical purposes. There are many reasons why certain drugs are the most appropriate treatment for a patient’s condition. The program is not meant to deter prescribers from making an informed clinical decision.

Who provides oversight of the Prescription Monitoring Program?

The Minister of Health and Community Services provides oversight of the program. An Advisory Committee will be appointed by the Minister to provide advice and recommendations. Additionally, a Prescription Monitoring Program Consultants Committee will be appointed by the Minister. It will make recommendations and provide a critical and clinical lens to generated reports which require review. Administration of the program will be carried out by the Newfoundland and Labrador Centre for Health Information (NLCHI).
Can personal health information be shared with the Program?

Under the Prescription Monitoring Act, prescribers and dispensers must provide information which may include personal health information when it is requested by the administrator of the program. This requirement overrides any confidentiality provision in the Personal Health Information Act. Therefore, in complying with such a request, a prescriber or dispenser is not in violation of the Personal Health Information Act.

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The purpose of the program is to help prescribers and dispensers make the most informed decisions. The intention is not to police these professionals.

Prescribers and dispensers who are performing their duties as health care professionals in accordance with their regulatory guidelines and the Prescription Monitoring Act would not have their information shared with their regulatory bodies.

If activities that are deemed to contravene the Prescription Monitoring Act are discovered, they would be reviewed by the Prescription Monitoring Program Consultants Committee and possibly shared with the regulatory body or law enforcement if warranted.

Will the Program capture prescriptions from another jurisdiction?

Yes. Medication profiles are maintained for all patients that have prescriptions filled in pharmacies in Newfoundland and Labrador even if they are not from the province.

If a member of the public has a concern or complaint about prescribing or dispensing activities who should they contact?

The most appropriate place to express a concern or complaint about a prescriber or dispenser would be with the regulatory bodies of those health care providers.

If a member of the public felt their concern or complaint was related to criminal activity, they could also file a report with the police.
 Didn’t the province already have a prescription monitoring program?

Yes. There was a previous paper-based prescription monitoring program. Without an electronic system to capture the dispensing of prescriptions, it had limited success. Using the Pharmacy Network, a component of the provincial electronic health record, the necessary tools are in place to more successfully implement a prescription monitoring program.

Prescribers and Dispensers

What is now expected of a prescriber when prescribing a monitored drug?

Prescribers will be required to review a patient’s medication profile in the electronic health record, HEALTHe NL, prior to prescribing a monitored drug to ensure its appropriateness.

Prescribers will also be required to check a box on the new Tamper Resistant Prescription Drug Pads (TRPP) indicating they have reviewed the patient’s medication profile.

These requirements come into effect on June 30, 2018.

What is now expected of dispensers when filling a prescription for a monitored drug?

There are no new expectations of pharmacy dispensers as they are already expected to review a patient’s medication profile in the electronic health record prior to all dispenses. They are also obligated to input prescription information in the Pharmacy Network as per their professional standards.

Dispensers are not expected to deny service to a patient if the check-box on a Tamper Resistant Prescription is not ticked. Dispensers should make clinical decisions based on their professional standards.

Dispensing physicians and nurses in rural and remote areas of the province are exempt from the requirements of dispensers as listed in the Act.
Who will sit on the Prescription Monitoring Program Consultants Committee?

The Consultants Committee review reports generated by the program and provide advice and recommendations to the Minister of Health and Community Services.

**It is expected the committee will consist of:**
- 2 physicians (at least one physician must be a family physician)
- A dentist
- A nurse practitioner
- 2 pharmacists (at least one dispenser must be a community pharmacist)

Pharmacist and prescriber representation will provide a clinical lens to the information presented by the program.

There will also be representation from the Department of Health and Community Services and NLCHI.

Are there any penalties under the Act?

Failure to comply with the Act is an offence and may result in a fine of up to $10,000 for an individual or $20,000 for a corporation.

Can a prescriber or dispenser designate someone to check a patient’s medication profile?

No, it is the responsibility of the prescriber and the dispenser to review the patient’s medication profile prior to prescribing or dispensing a monitored drug.

What changes will be made to the Tamper Resistant Prescription Drug Pad program (TRPP)?

The Tamper Resistant Prescription Drug Pad program requires that prescriptions for certain drugs, including opioids, be issued on a special tamper resistant drug pad. There are no substantive changes anticipated to this program.

**Minor changes have been made** to the actual prescription pad to denote that a prescriber has checked the patient’s medication profile prior to prescribing.

The purpose of the check-box is to act as a formal reminder to physicians that they are to check the medication profile. By signing their names to the prescription they are certifying that they have done so.

Dispensers are not expected to deny service to a patient if the check-box is not ticked. Dispensers should make clinical decisions based on their professional standards.
Additionally, as of June 30, 2018, prescriptions for tramadol will be added to the list of drugs that have to be written on a tamper resistant prescription drug pad.

What criteria will the Program use to create reports and determine if a prescriber or dispenser is complying with the Prescription Monitoring Act?

The following criteria will be used to generate reports for the program:
- Patients receiving two or more monitored drug prescriptions from two or more prescribers in a defined time period.
- Patients receiving two or more monitored drug prescriptions from two or more pharmacies in a defined time period.
- Patients on monitored drug dependence treatment who are receiving prescriptions for other monitored drugs.
- Inordinate dispensing and prescribing practices which may include dispensing or prescribing of monitored drugs for more than a 90 days supply or in excessive quantities.
- Patient names without an MCP number, who were dispensed a monitored drug.

Other activities, as deemed necessary by the Minister, may be added in the future.

Random reviews of prescriptions for monitored drugs may occur to ensure that a patient’s medication profile was accessed by both the prescriber and dispenser prior to the prescription being written or filled.

Is there a requirement to report on the prescribing habits of another prescriber?

The Prescription Monitoring Act does not contain a duty to report to the Prescription Monitoring Program. If a prescriber or dispenser has a concern it should be discussed with the prescriber or the prescriber’s regulatory body pursuant to their governing statutes.

Some health professions may have a duty to report in their own professional legislation. Those duties continue to apply and are not impacted by the Act.
Regional Health Authorities

Are prescribers and dispensers practicing within a hospital setting subject to the Prescription Monitoring Act?

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In some rural and remote locations, some physicians and registered nurses can both prescribe and dispense medications, are they required to check the patient’s medication profile when prescribing or dispensing a monitored drug?

In these instances, physicians and registered nurses who have both prescribing and dispensing powers are required to check the patient’s medication profile before writing a prescription for a monitored drug. They are not required to check the medication profile again when dispensing that monitored drug.

Are prescribers, who are administering prescriptions for monitored drugs to long-term care patients, required to check the patient’s medication profile?

Yes, prescribers are required to check the long-term care patient’s medication profile in the electronic health record before writing a prescription for a monitored drug.

Prescriptions filled for a long-term care patient are done in community pharmacies. Long-term care residents are not considered in-patients for the purposes of this program.
Provincial Electronic Health Record – HEALTHe NL

How will prescribers and dispensers review the patient medication profile?

The electronic health record, HEALTHe NL, will be the primary tool to help prescribers and dispensers review the patient’s medication profile.

HEALTHe NL is a private record of an individual’s health care information, available electronically to authorized health care professionals. It integrates information from many sources into a single, lifetime record of an individual’s key health history and care. Information is available in one place when and where it is needed.

Information contained in HEALTHe NL includes:
- Patient medication profiles from all community pharmacies province wide through the Pharmacy Network
- Known allergies and medical alerts from community pharmacies only.
- Meditech data, including dictated reports, laboratory results, diagnostic imaging and encounters.
- Information about where health services have occurred, by whom and other key clinical events such as inpatient admission.

Clinicians using the provincial electronic medical record (EMR) program, eDOCSNL, can launch HEALTHe NL from within their EMR to view their patient’s medication profile.

For information on accessing the provincial electronic health record, HEALTHe NL, please contact: 709-752-6006, 1-877-752-6006 or healthenl@nilchi.nl.ca

To begin the registration process for HEALTHe NL, please visit - HEALTHe NL User Registration Form

What is the Pharmacy Network?

The Pharmacy Network is a component of the province-wide electronic health record, HEALTHe NL, that is comprised of a real-time database of medication profiles compiled from prescriptions filled at all of the province’s community pharmacies.

Data from the Pharmacy Network will be used to help guide prescribers and dispensers in making clinical decisions regarding the prescribing/dispensing of monitored drugs. It will also be the basis for the reports generated by the Program.
Jamie

I just reviewed this version. Denise will scan back my edits questions first thing in am.

Denise just put a note in trim when you do.

H

Sent from my BlackBerry 10 smartphone on the Bell network.

Hi Heather - I’ve added the BN to TRIM and actioned you (BN-2018-00265). I’ve also attached it here for your convenience. Blair has reviewed.

Jamie
Information Note
Department of Health and Community Services

Title: Prescription Monitoring Act’s Regulatory Requirements for Prescribers

Issue: To provide a summary of action to ensure all opioid prescribers are able to comply to the regulatory requirements of the Prescription Monitoring Act by June 30, 2018.

Background and Current Status: s. 27(1)(i) s.27(2)(a)

- Provided approval for a Bill entitled An Act Respecting the Monitoring of Prescriptions in the Province to be introduced in the House of Assembly. The Bill was introduced in the House of Assembly in November 2017 and the Prescription Monitoring Act (Act) came into force on January 1, 2018.

- The Prescription Monitoring Program of Newfoundland and Labrador (PMP-NL) has been developed and is being administered by the Newfoundland and Labrador Centre for Health Information (NLCHI). PMP-NL will monitor, analyze and report information related to the prescribing, dispensing (providing a medication ordered by a prescription but does not include administering the medication) and use of monitored drugs. This information is collected in the Pharmacy Network which is a provincial database containing a record of all prescriptions filled and medications dispensed by community pharmacies in the province regardless of payment type.

- The professions authorized to prescribe controlled substances to humans (i.e., as opposed to animals) in Newfoundland and Labrador are physicians, nurse practitioners, dentists and midwives.

- The Act requires all prescribers to review the drug history of patients before writing a prescription for monitored drugs (currently opioids). Reviewing a patient’s drug history before prescribing will only be possible when the prescriber has electronic access to the patient’s medication history. Currently, this can be accomplished through the HEALTHeNL viewer which allows a prescriber to view prescriptions from the pharmacy network through a secure online portal.

- While the Act came into force on January 1, 2018, a six-month grace period was granted to prescribers to allow them time to gain access to the HEALTHeNL viewer. Prescribers of monitored drugs are required to fully comply with the Act on July 1, 2018.

- The viewer is an internet-based portal. Prescribers only require a username, a password and an internet connection to access the viewer. There is no cost to prescribers other than an internet connection. No downtime would be required to begin using the viewer other than an initial 30-minute training session. These training sessions can be viewed online at the prescriber’s convenience and does not have to be done at the time of sign up.

- Once the Act came into force NLCHI was directed to develop a plan, in consultation with HCS, to assist prescribers in gaining access to the HEALTHeNL viewer.

Analysis:

- At the start of this process, NLCHI’s change management team identified over 1000 opioid prescribers who did not have access to the HEALTHeNL viewer.

- The change management team developed a multi-focused approach to assist these prescribers to obtain access in order to comply with the Act on July 1, 2018 and have been actively working toward this goal. Their efforts are as follows:

  Awareness:
  Each prescriber has been contacted in a variety of ways, using multiple channels.
  - NLCHI has individually contacted each prescriber – phone, email, fax (barring a few that had no contact info available), in addition to proactively finding physicians while visiting acute care facilities.
o NLCHI has been working with leadership within the RHAs to distribute info to prescribers
o Newfoundland and Labrador Medical Association (NLMA) has sent out info to their membership via email on NLCHI’s behalf
o Newfoundland and Labrador Dental Association (NLDA) has sent out info to their membership via email on NLCHI’s behalf on multiple occasions.
o Association of Registered Nurses of Newfoundland and Labrador (ARRNL) has sent out info to their membership via email on NLCHI’s behalf on multiple occasions, in addition to their own proactive communications.
o HCS has issued a memo to all prescribers who have prescribed narcotics over the past five years indicating that an new tamper resistant prescription pad was being issued related to PMP. This included a reminder and contact info about need to sign up for HEALTHe NL.

o On June 15, the College of Physicians and Surgeons of Newfoundland and Labrador (CPSNL) sent an email directly to 235 outstanding physicians urging them to contact NLCHI to gain access to the viewer. This is in addition to earlier communications they sent out to their membership on behalf of NLCHI.

Sign-up Opportunities:

- The following are sign-up opportunities, open to all prescribers, that have taken place since Fall 2017:
  - Ongoing, end of month drop-in, afternoon sign on sessions at the Health Sciences Center (HSC) and St. Clares, with recent sessions also taking place at the Waterford Hospital
  - Nine evening sessions at HSC from April to June (up to June 28)
  - Two drop-in session in Carbonear in May
  - Drop in sessions in Corner Brook in November, May and June.
  - NLCHI staff travelled to HVGB and St. Anthony in April, and Port aux Basques and Stephenville in March where they held large sign up sessions.
  - NLCHI staff travelled to Mary’s Harbour, Burin and Arnold’s Cove in June for one-on-one sessions with physicians.

- There is a peer leader in Labrador City who has been signing up health professionals in that region.

- NLCHI has been utilizing Telehealth services to reach rural and remote locations to do demos and sign ups. All of coastal Labrador has been managed this way.

- NLCHI has been conducting ongoing one-on-one sessions and demos either in physician or dental clinics or through WebEx video conferencing, FaceTime connection, Telehealth.

Promotion/Education:

NLCHI has participated in a number of info sessions including:

- MUN Med Office of Professional Development CME presentation on HEALTHe NL – Continuing Medical Education credits were available for participants.
- Eastern Health pediatric rounds focused on PMP-NL and the requirements of opioid prescribers on July 1, 2018.
- ARNNL provincial presentation focused on PMP-NL and the requirements of opioid prescribers on July 1, 2018.
- NLMA’s AGM on June 2, 2018 focussed on the requirements of opioid prescribers on July 1, 2018.

Training

- In addition to in-person demos, NLCHI also offers the option of viewing online training videos as a self-directed option for health professionals who want to use HEALTHe
NL. This has been communicated broadly with our target audiences. Anyone who has an internet connection can utilize these videos to receive the same information available in the live demos. Links to these videos are available on NLCHI’s website, and the videos are hosted on YouTube which ensures they are readily accessible.

- The following table provides a summary HEALTHeNL access as of June 21, 2018:

<table>
<thead>
<tr>
<th></th>
<th>% Signed on to HEALTHeNL</th>
<th># Remaining</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician</td>
<td>91% (of opioid prescribers)</td>
<td>186 (opioid prescribers)</td>
</tr>
<tr>
<td></td>
<td>84% (of all licenced physicians)</td>
<td>201 (includes all licenced physicians)</td>
</tr>
<tr>
<td>Nurse Practitioner</td>
<td>89%</td>
<td>17</td>
</tr>
<tr>
<td>Dentist</td>
<td>59%</td>
<td>70</td>
</tr>
<tr>
<td>Resident</td>
<td>53%</td>
<td>63</td>
</tr>
</tbody>
</table>

- The following table illustrates the regional distribution of the remaining 185 opioid prescribing physicians:

<table>
<thead>
<tr>
<th>Region</th>
<th># Outstanding Physicians</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eastern Health</td>
<td>133</td>
</tr>
<tr>
<td>Central Health</td>
<td>6</td>
</tr>
<tr>
<td>Western Health</td>
<td>30</td>
</tr>
<tr>
<td>Labrador-Grenfell</td>
<td>17</td>
</tr>
<tr>
<td>Total</td>
<td>186</td>
</tr>
</tbody>
</table>

- Through discussion and collaboration with the NLDA and ARRNL, NLCHI is confident that all dentists and nurse practitioners who wish to prescribe monitored drugs now have access to the HEALTHeNL viewer, or are aware of the requirements. The figures in the above table are based on total number of dentists and nurse practitioners in the province, these remaining individuals have been identified as not having prescribed an opioid. There are many dentists and nurse practitioners who do not prescribe opioids so these numbers are misleading.

- As HEALTHeNL is an internet-based program, there is no software that can be sent to the remaining prescribers via mail. Prescribers can register for HEALTHeNL access and watch training videos online at their own convenience, without assistance from NLCHI. However, in order for them to gain access to the viewer they must make contact with NLCHI so that their identity can be verified. The HEALTHeNL viewer provides access to personal health information. Access to such information can not be given without first verifying the account holder. Ensuring the identity is verified is essential for privacy and security.

- Ultimately the onus is on prescriber to respond to the multiple messages they have received regarding the requirements of the Prescription Monitoring Program. Once a prescriber initiates contact with NLCHI they can gain access to the HEALTHeNL viewer within minutes.

**Action Being Taken:**
- NLCHI is in the process of individually contacting each of the outstanding opioid prescribing physicians by telephone.
- NLCHI’s change management team has a number of afternoon and evening drop in sessions scheduled over the next week, including five in the St. John’s region
- Clinical Adoption Specialists in Central, Western and Labrador are actively tracking down physicians in those regions to sign them on to the viewer.
- A “Frequently Asked Questions” document is being finalized and will be sent to all professional associations and regulatory bodies on June 22 to distribute to their membership. This document fully explains the requirements of prescribers under the Prescription Monitoring Act.
• NLCHI have determined which of the outstanding physicians are salaried with one of the RHAs. Teams are working with RHA officials to ensure these physicians meet the June 30 deadline.

• On June 20, CPSNL sent a notice to all physicians stating that if they do not have access to the HEALTHeNL viewer by July 1 they must make alternate arrangements for any patient requiring a monitored substance.

• NLCHI’s change management team reports a high volume of calls from prescribers over the past 72 hours and expect this to continue up until the June 30 deadline.

Prepared/Approved by: J. O’Dea/

Ministerial Approval: Received from Hon. [Minister’s Name] (type out)

Signature

June 21, 2018
Hi

The Prescriber and Dispenser FAQs are attached with Edits from Gerrie Smith integrated. Sorry it took a while to get a couple of questions tidied up.

Gerrie suggestions are below some only impact the creative version, so you won’t find those changes in the attached.

Heather

From: Smith, Gerrie
Sent: Thursday, June 21, 2018 10:52 AM
To: O’Dea, Jamie <JamieODea@gov.nl.ca>; ‘Blair Medd’ <Blair.Medd@nlchi.nl.ca>
Cc: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>; Timmins, Emily <EmilyTimmins@gov.nl.ca>
Subject: RE: PMP FAQ’s

I’ve reviewed the FAQs for Prescribers and Dispensers and for ease of reference, I will set out all of my comments even though some are the same as my comments on the Public document.

- 2nd paragraph of shaded box – I think it should be “registered nurses” and not “Registered Nurses”. s. 29(1)(a)
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I hope this helpful. However, I’m will be out of the office as of lunchtime until Tuesday. Given the significance of these documents, I believe a careful and thorough review needs to be conducted before they are published and distributed. Unfortunately, I won’t have an opportunity to review any revisions until I get back on Tuesday.

Gerrie

Gerrie Smith, LL.B
Legislative Consultant
Dept of Health and Community Services
(709) 729-2560 (t)
gerriesmith@gov.nl.ca

From: O’Dea, Jamie
Sent: Thursday, June 21, 2018 10:26 AM
To: ‘Blair Medd’ <Blair.Medd@nlchi.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>
Cc: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>; Timmins, Emily <EmilyTimmins@gov.nl.ca>
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Ok thank you Blair – Emily can you adjust the document based on Gerrie’s edits. Thanks

From: Blair Medd <Blair.Medd@nlchi.nl.ca>
Sent: Thursday, June 21, 2018 10:21 AM
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Cc: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>; O’Dea, Jamie <JamieODea@gov.nl.ca>; Timmins, Emily <EmilyTimmins@gov.nl.ca>
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Sent: June 21, 2018 10:07 AM
To: Blair Medd <Blair.Medd@nlchi.nl.ca>
Cc: Heather Hanrahan <HeatherHanrahan@gov.nl.ca>; O’Dea, Jamie <JamieODea@gov.nl.ca>
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Hi Blair, I've just reviewed the FAQs for the public. Please see my comments in the email below. Gerrie

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Cc: Timmins, Emily <EmilyTimmins@gov.nl.ca>  
Subject: RE: PMP FAQ's

I’m reviewing now. I do have a few comments. Give me 30 mins to finish up.

Gerrie Smith, LL.B  
Legislative Consultant  
Dept of Health and Community Services
From: Hanrahan, Heather D  
**Sent:** Thursday, June 21, 2018 9:31 AM  
**To:** Macleod-Boland, Alison <AlisonMacleod-Boland@gov.nl.ca>; O'Dea, Jamie <JamieODea@gov.nl.ca>  
**Cc:** Timmins, Emily <EmilyTimmins@gov.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>  
**Subject:** RE: PMP FAQ's

Gerrie

Jamie and I are ok have you reviewed?

H

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**Sent:** Thursday, June 21, 2018 9:25 AM  
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**Cc:** Timmins, Emily <EmilyTimmins@gov.nl.ca>  
**Subject:** RE: PMP FAQ's

If there are no issues the files sent yesterday can be placed online.  
Alison

Alison MacLeod-Boland  
Executive Council, Communications and Public Engagement  
Marketing and Brand Management  
Government of Newfoundland and Labrador  
T 709.729.5729

From: O'Dea, Jamie  
**Sent:** Thursday, June 21, 2018 9:22 AM  
**To:** Macleod-Boland, Alison; Hanrahan, Heather D  
**Cc:** Timmins, Emily  
**Subject:** RE: PMP FAQ's

I have reviewed – No concerns.

From: Macleod-Boland, Alison  
**Sent:** Wednesday, June 20, 2018 4:04 PM  
**To:** Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>  
**Cc:** Timmins, Emily <EmilyTimmins@gov.nl.ca>; O'Dea, Jamie <JamieODea@gov.nl.ca>  
**Subject:** PMP FAQ's
Hi Heather
Here are the two FAQ’s. I have reviewed once but if you team could take a good look and make sure
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Thank you
Alison

Alison MacLeod-Boland
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Marketing and Brand Management
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“This email and any attached files are intended for the sole use of the primary and copied
addressee(s) and may contain privileged and/or confidential information. Any distribution, use
or copying by any means of this information is strictly prohibited. If you received this email in
error, please delete it immediately and notify the sender.”
Prescription Monitoring Program

NL

Frequently Asked Questions

Information for Prescribers and Dispensers

Newfoundland Labrador
Prescription Monitoring Program – NL supports the Provincial Government’s Opioid Action Plan to help address the growing opioid issue facing Canada and this province.

The program aims to help prescribers and dispensers – physicians, nurse practitioners, dentists, pharmacists and dispensing registered nurses – make the most informed decisions when choosing to prescribe or dispense a monitored drug.

The Prescription Monitoring Act governs the program and came into effect on January 1, 2018. To view a copy of the Act, please visit Prescription Monitoring Act.

Under the Act, by June 30, 2018, all prescribers and dispensers in Newfoundland and Labrador will be required to check their patient’s medication profile using the provincial electronic health record, now called HEALTHe NL, before prescribing and dispensing a monitored drug.

For more information on the Prescription Monitoring Program – NL, email info@PMPNL.ca.

For more information on HEALTHe NL, call 709-752-6006 or 1-877-752-6006 or email healthenl@nlchi.nl.ca

To begin the registration process for HEALTHe NL, please visit - HEALTHe NL User Registration Form
What is the Prescription Monitoring Program?

Prescription Monitoring Program – NL is another action of the Provincial Government’s Opioid Action Plan aimed at addressing the growing opioid issue facing Canada and this province.

The purpose of the program is to help prescribers and dispensers make the most informed decisions when choosing a monitored drug to treat a patient.

Using the provincial electronic health record, prescribers and dispensers will have access to up-to-date and accurate patient medication profiles to help inform and support the needs of their patients.

All provinces, with the exception of Quebec, have some form of a prescription monitoring program.

What health care professionals will be a part of the program?

Prescribers and dispensers as defined in the Prescription Monitoring Act will be a part of the program throughout the province including physicians, nurse practitioners, registered nurses, dentists and pharmacists.

What about veterinarians?

While veterinarians fall under the definition of prescriber, they are excluded in the regulations at this time.

How do I know what drugs are to be monitored by the Program?

Opioid medications, including tramadol, are being monitored by the program. As the program matures, other medications may be added.

When will the Prescription Monitoring Act come into effect?

The Prescription Monitoring Act came into effect on January 1, 2018.

Under the Act, by June 30, 2018, all prescribers and dispensers in Newfoundland and Labrador will be required to check their patient’s medication profile using the provincial electronic health record, HEALTHe NL, before prescribing and dispensing a monitored drug.

To view a copy of the Act, please visit Prescription Monitoring Act.
What are the benefits of the Program?

Some important public health goals that are expected from the program include an increase in the quality of patient care, greater confidence when prescribing and dispensing drugs and greater efficiency and coordination of care.

The program is also expected to lead to a decrease in drug misuse, and prevent or reduce hospitalizations and deaths related to drug misuse.

How will information from the program be used?

The information that will be generated from the program will help:
- Promote appropriate prescribing and dispensing practices;
- Provide information and education to prescribers and dispensers;
- Identify potential instances of drug abuse and misuse;
- Reduce drug abuse and misuse; and,
- Reduce the risk of addiction and death resulting from drug abuse or misuse.

The information will also be used to inform the Provincial Government on the need for further intervention services, educational programming and to evaluate the effectiveness of the program.

Why do we need the Prescription Monitoring Program?

Prescription drug abuse is an issue that impacts the lives of Newfoundlanders and Labradors every day. It will take a collective effort to make headway to address and reduce this serious public health issue.

Prescription monitoring programs can help improve drug prescribing, lower or prevent risks related to certain drugs, and can help identify patients who may be at risk of addiction.

The program is not intended to prevent the use of prescription drugs for legitimate medical purposes. There are many reasons why certain drugs are the most appropriate treatment for a patient’s condition. The program is not meant to deter prescribers from making an informed clinical decision.

Who provides oversight of the Prescription Monitoring Program?

The Minister of Health and Community Services provides oversight of the program. An Advisory Committee will be appointed by the Minister to provide advice and recommendations. Additionally, a Prescription Monitoring Program Consultants Committee will be appointed by the Minister. It will make recommendations and provide a critical and clinical lens to generated reports which require review. Administration of the program will be carried out by the Newfoundland and Labrador Centre for Health Information (NLCHI).
Can personal health information be shared with the Program?

Under the Prescription Monitoring Act, prescribers and dispensers must provide information which may include personal health information when it is requested by the administrator of the program. This requirement overrides any confidentiality provision in the Personal Health Information Act. Therefore, in complying with such a request, a prescriber or dispenser is not in violation of the Personal Health Information Act.

Can you opt out of the Prescription Monitoring Program?

No. All drug prescriptions provided by prescribers and filled in pharmacies in Newfoundland and Labrador are subject to review under the program.

Will information be shared with a regulatory authority or law enforcement?

The purpose of the program is to help prescribers and dispensers make the most informed decisions. The intention is not to police these professionals.

Prescribers and dispensers who are performing their duties as health care professionals in accordance with their regulatory guidelines and the Prescription Monitoring Act would not have their information shared with their regulatory bodies.

If activities that are deemed to contravene the Prescription Monitoring Act are discovered, they would be reviewed by the Prescription Monitoring Program Consultants Committee and possibly shared with the regulatory body or law enforcement if warranted.

Will the Program capture prescriptions from another jurisdiction?

Yes. Medication profiles are maintained for all patients that have prescriptions filled in pharmacies in Newfoundland and Labrador even if they are not from the province.

If a member of the public has a concern or complaint about prescribing or dispensing activities who should they contact?

The most appropriate place to express a concern or complaint about a prescriber or dispenser would be with the regulatory bodies of those health care providers.

If a member of the public felt their concern or complaint was related to criminal activity, they could also file a report with the police.
Didn't the province already have a prescription monitoring program?

Yes. There was a previous paper-based prescription monitoring program. Without an electronic system to capture the dispensing of prescriptions, it had limited success. Using the Pharmacy Network, a component of the provincial electronic health record, the necessary tools are in place to more successfully implement a prescription monitoring program.

Prescribers and Dispensers

What is now expected of a prescriber when prescribing a monitored drug?

Prescribers will be required to review a patient's medication profile in the electronic health record, HEALTHe NL, prior to prescribing a monitored drug to ensure its appropriateness.

Prescribers will also be required to check a box on the new Tamper Resistant Prescription Drug Pads (TRPP) indicating they have reviewed the patient’s medication profile.

These requirements come into effect on June 30, 2018.

What is now expected of dispensers when filling a prescription for a monitored drug?

There are no new expectations of pharmacy dispensers as they are already expected to review a patient’s medication profile in the electronic health record prior to all dispenses. They are also obligated to input prescription information in the Pharmacy Network as per their professional standards.

Dispensers are not expected to deny service to a patient if the check-box on a Tamper Resistant Prescription is not ticked. Dispensers should make clinical decisions based on their professional standards.

Dispensing physicians and nurses in rural and remote areas of the province are exempt from the requirements of dispensers as listed in the Act.
Who will sit on the Prescription Monitoring Program Consultants Committee?

The Consultants Committee review reports generated by the program and provide advice and recommendations to the Minister of Health and Community Services.

It is expected the committee will consist of:
- 2 physicians (at least one physician must be a family physician)
- A dentist
- A nurse practitioner
- 2 pharmacists (at least one dispenser must be a community pharmacist)

Pharmacist and prescriber representation will provide a clinical lens to the information presented by the program.

There will also be representation from the Department of Health and Community Services and NLCHI.

Are there any penalties under the Act?

Failure to comply with the Act is an offence and may result in a fine of up to $10,000 for an individual or $20,000 for a corporation.

Can a prescriber or dispenser designate someone to check a patient’s medication profile?

No, it is the responsibility of the prescriber and the dispenser to review the patient’s medication profile prior to prescribing or dispensing a monitored drug.

What changes will be made to the Tamper Resistant Prescription Drug Pad program (TRPP)?

The Tamper Resistant Prescription Drug Pad program requires that prescriptions for certain drugs, including opioids, be issued on a special tamper resistant drug pad. There are no substantive changes anticipated to this program.

Minor changes have been made to the actual prescription pad to denote that a prescriber has checked the patient’s medication profile prior to prescribing.

The purpose of the check-box is to act as a formal reminder to physicians that they are to check the medication profile. By signing their names to the prescription they are certifying that they have done so.

Dispensers are not expected to deny service to a patient if the check-box is not ticked. Dispensers should make clinical decisions based on their professional standards.
Additionally, as of June 30, 2018, tramadol will be added to the list of drugs that have to be written on a tamper resistant prescription drug pad.

**What criteria will the Program use to create reports and determine if a prescriber or dispenser is complying with the Prescription Monitoring Act?**

The following criteria will be used to generate reports for the program:
- Patients receiving two or more monitored drug prescriptions from two or more prescribers in a defined time period.
- Patients receiving two or more monitored drug prescriptions from two or more pharmacies in a defined time period.
- Patients on monitored drug dependence treatment who are receiving prescriptions for other monitored drugs.
- Inordinate dispensing and prescribing practices which may include dispensing or prescribing of monitored drugs for more than a 90 days supply or in excessive quantities.
- Patient names without an MCP number, who were dispensed a monitored drug.

Other activities, as deemed necessary by the Minister, may be added in the future.

Random reviews of prescriptions for monitored drugs may occur to ensure that a patient’s medication profile was accessed by both the prescriber and dispenser prior to the prescription being written or filled.

**Is there a requirement to report on the prescribing habits of another prescriber?**

The Prescription Monitoring Act does not contain a duty to report to the Prescription Monitoring Program. If a prescriber or dispenser has a concern it should be discussed with the prescriber or the prescriber’s regulatory body pursuant to their governing statutes.

Some health professions may have a duty to report in their own professional legislation. Those duties continue to apply and are not impacted by the Act.
Regional Health Authorities

Are prescribers and dispensers practicing within a hospital setting subject to the Prescription Monitoring Act?

The requirements for prescribers in an outpatient hospital setting are the same as for community prescribers. They are required to write prescriptions for monitored drugs on a Tamper Resistant Prescription Drug Pad and they must check the patient’s medication profile in the electronic health record prior to writing the prescription.

If a monitored drug is prescribed and administered as a part of an inpatient’s treatment plan while in a hospital, prescribers are NOT required to check the patient’s medication profile. Inpatients do not receive more than the required dose at any given time so the risk of abuse or misuse of opioids is quite low.

In some rural and remote locations (i.e.: coastal Labrador), some physicians and registered nurses can both prescribe and dispense medications, are they required to check the patient’s medication profile when prescribing or dispensing a monitored drug?

In these instances, physicians and registered nurses who have both prescribing and dispensing powers are required to check the patient’s medication profile before writing a prescription for a monitored drug. They are not required to input information regarding the dispensing into the Pharmacy Network. Dispensing information from registered nurses is retroactively entered into the Pharmacy Network by the RHA.

Are prescribers, who are administering prescriptions for monitored drugs to long-term care patients, required to check the patient’s medication profile?

Yes, prescribers are required to check the long-term care patient’s medication profile in the electronic health record before writing a prescription for a monitored drug.

Long-term care residents are not considered in-patients for the purposes of this program.
**Provincial Electronic Health Record – HEALTHe NL**

**How will prescribers and dispensers review the patient medication profile?**

The electronic health record, HEALTHe NL, will be the primary tool to help prescribers and dispensers review the patient’s medication profile.

HEALTHe NL is a private record of an individual’s health care information, available electronically to authorized health care professionals. It integrates information from many sources into a single, lifetime record of an individual’s key health history and care. Information is available in one place when and where it is needed.

Information contained in HEALTHe NL includes:

- Patient medication profiles from all community pharmacies province wide through the Pharmacy Network
- Known allergies and medical alerts from community pharmacies only.
- Meditech data, including dictated reports, laboratory results, diagnostic imaging and encounters.
- Information about where health services have occurred, by whom and other key clinical events such as inpatient admission.

Clinicians using the provincial electronic medical record (EMR) program, eDOCSNL, can launch HEALTHe NL from within their EMR to view their patient’s medication profile.

For information on accessing the provincial electronic health record, HEALTHe NL, please contact: 709-752-6006, 1-877-752-6006 or healthenl@nlchi.nl.ca

To begin the registration process for HEALTHe NL, please visit - HEALTHe NL User Registration Form

**What is the Pharmacy Network?**

The Pharmacy Network is a component of the province-wide electronic health record, HEALTHe NL, that is comprised of a real-time database of medication profiles compiled from prescriptions filled at all of the province’s community pharmacies.

Data from the Pharmacy Network will be used to help guide prescribers and dispensers in making clinical decisions regarding the prescribing/dispensing of monitored drugs. It will also be the basis for the reports generated by the Program.
Here you go.

Alison

Alison MacLeod-Boland
Executive Council, Communications and Public Engagement
Marketing and Brand Management
Government of Newfoundland and Labrador
T 709.729.5729

---

From: Hanrahan, Heather D
Sent: Friday, June 22, 2018 2:46 PM
To: Macleod-Boland, Alison; Timmins, Emily
Cc: O'Dea, Jamie; Smith, Gerrie; 'Blair Medd'
Subject: RE: PMP FAQ's

Yes all word doc.

H

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Sent: Friday, June 22, 2018 2:29 PM
To: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>; Timmins, Emily
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Subject: RE: PMP FAQ's

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The designer that worked on this project is off today so I will need to get another designer to take over.

Alison MacLeod-Boland
Executive Council, Communications and Public Engagement
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T 709.729.5729
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Alison

will we have these back this afternoon?

Heather

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Subject: FW: PMP FAQ's

Hi

The Prescriber and Dispenser FAQs are attached with Edits from Gerrie Smith integrated. Sorry it took a while to get a couple of questions tidied up.

Gerrie suggestions are below. Some only impact the creative version, so you won’t find those changes in the attached.

Heather

---

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Cc: Timmins, Emily <EmilyTimmins@gov.nl.ca>
Subject: RE: PMP FAQ's

I’m reviewing now. I do have a few comments. Give me 30 mins to finish up.

Gerrie Smith, LL.B
Legislative Consultant
Dept of Health and Community Services
(709) 729-2560 (t)
gerriesmith@gov.nl.ca

From: Hanrahan, Heather D
Sent: Thursday, June 21, 2018 9:31 AM
To: Macleod-Boland, Alison <AlisonMacleod-Boland@gov.nl.ca>; O'Dea, Jamie <JamieODea@gov.nl.ca>
Cc: Timmins, Emily <EmilyTimmins@gov.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>
Subject: RE: PMP FAQ's

Gerrie

Jamie and I are ok have you reviewed?

H

From: Macleod-Boland, Alison
Sent: Thursday, June 21, 2018 9:25 AM
To: O'Dea, Jamie <JamieODea@gov.nl.ca>; Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>
Cc: Timmins, Emily <EmilyTimmins@gov.nl.ca>
Subject: RE: PMP FAQ's

If there are no issues the files sent yesterday can be placed online.
Alison

Alison MacLeod-Boland
Executive Council, Communications and Public Engagement
Marketing and Brand Management
Government of Newfoundland and Labrador
T 709.729.5729

From: O'Dea, Jamie
Sent: Thursday, June 21, 2018 9:22 AM
To: Macleod-Boland, Alison; Hanrahan, Heather D
Cc: Timmins, Emily
Subject: RE: PMP FAQ’s

I have reviewed – No concerns

From: Macleod-Boland, Alison
Sent: Wednesday, June 20, 2018 4:04 PM
To: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>
Cc: Timmins, Emily <EmilyTimmins@gov.nl.ca>; O'Dea, Jamie <JamieODea@gov.nl.ca>
Subject: PMP FAQ’s

Hi Heather
Here are the two FAQ’s. I have reviewed once but if you team could take a good look and make sure its correct.

Thank you
Alison

Alison MacLeod-Boland
Executive Council, Communications and Public Engagement
Marketing and Brand Management
Government of Newfoundland and Labrador
T 709.729.5729

“This email and any attached files are intended for the sole use of the primary and copied addressee(s) and may contain privileged and/or confidential information. Any distribution, use or copying by any means of this information is strictly prohibited. If you received this email in error, please delete it immediately and notify the sender.”
Prescription Monitoring Program – NL
Information for Prescribers and Dispensers
Frequently Asked Questions and Answers

Prescription Monitoring Program – NL supports the Provincial Government’s Opioid Action Plan to help address the growing opioid issue.

The program aims to help prescribers and dispensers – physicians, nurse practitioners, dentists, pharmacists and dispensing registered nurses – make the most informed decisions when choosing to prescribe or dispense a monitored drug.

The Prescription Monitoring Act governs the program and came into effect on January 1, 2018. To view a copy of the Act, please visit Prescription Monitoring Act.

Under the Act, by June 30, 2018, all prescribers and dispensers in Newfoundland and Labrador will be required to check their patient’s medication profile using the provincial electronic health record, now called HEALTHe NL, before prescribing and dispensing a monitored drug.

For more information on the Prescription Monitoring Program – NL, email info@PMPNL.ca.

For more information on HEALTHe NL, call 709-752-6006 or 1-877-752-6006 or email healthenl@nlchÍ.nl.ca

To begin the registration process for HEALTHe NL, please visit – HEALTHe NL User Registration Form

**Q** What is the Prescription Monitoring Program?

**A** Prescription Monitoring Program – NL is another action of the Provincial Government’s Opioid Action Plan aimed at addressing the growing opioid issue.

The purpose of the program is to help prescribers and dispensers make the most informed decisions when choosing a monitored drug to treat a patient.

Using the provincial electronic health record, prescribers and dispensers will have access to up-to-date and accurate patient medication profiles to help inform and support the needs of their patients.

All provinces, with the exception of Quebec, have some form of a prescription monitoring program.

**Q** What health care professionals will be a part of the program?

**A** Prescribers and dispensers as defined in the Prescription Monitoring Act will be a part of the program throughout the province including physicians, nurse practitioners, registered nurses, dentists and pharmacists.

**Q** What about veterinarians?

**A** While veterinarians fall under the definition of prescriber, they are excluded in the regulations at this time.

**Q** How do I know what drugs are to be monitored by the program?

**A** Opioid medications, including tramadol, are being monitored by the program. As the program matures, other medications may be added.
Q  When will the Prescription Monitoring Act come into effect?

A  The Prescription Monitoring Act came into effect on January 1, 2018.

Under the Act, by June 30, 2018, all prescribers and dispensers in Newfoundland and Labrador will be required to check their patient’s medication profile using the provincial electronic health record, HEALTHe NL, before prescribing and dispensing a monitored drug.

To view a copy of the Act, please visit Prescription Monitoring Act.

Q  What are the benefits of the program?

A  Some important public health goals that are expected from the program include an increase in the quality of patient care, greater confidence when prescribing and dispensing drugs and greater efficiency and coordination of care.

The program is also expected to lead to a decrease in drug misuse, and prevent or reduce hospitalizations and deaths related to drug misuse.

Q  How will information from the program be used?

A  The information that will be generated from the program will help:
- Promote appropriate prescribing and dispensing practices;
- Provide information and education to prescribers and dispensers;
- Identify potential instances of drug abuse and misuse;
- Reduce drug abuse and misuse; and,
- Reduce the risk of addiction and death resulting from drug abuse or misuse.

The information will also be used to inform the Provincial Government on the need for further intervention services, educational programming and to evaluate the effectiveness of the program.

Q  Why do we need the Prescription Monitoring Program?

A  Prescription drug abuse is an issue that impacts the lives of Newfoundlanders and Labradorians every day. It will take a collective effort to make headway to address and reduce this serious public health issue.

Prescription monitoring programs can help improve drug prescribing, lower or prevent risks related to certain drugs, and can help identify patients who may be at risk of addiction.

The program is not intended to prevent the use of prescription drugs for legitimate medical purposes. There are many reasons why certain drugs are the most appropriate treatment for a patient’s condition. The program is not meant to deter prescribers from making an informed clinical decision.

Q  Who provides oversight of the Prescription Monitoring Program?

A  The Minister of Health and Community Services provides oversight of the program. An Advisory Committee will be appointed by the Minister to provide advice and recommendations. Additionally, a Prescription Monitoring Program Consultants Committee will be appointed by the Minister. It will make recommendations and provide a critical and clinical lens to generated reports which require review. Administration of the program will be carried out by the Newfoundland and Labrador Centre for Health Information (NLCHI).
Can personal health information be shared with the program?
A Under the Prescription Monitoring Act, prescribers and dispensers must provide information which may include personal health information when it is requested by the administrator of the program. This requirement overrides any confidentiality provision in the Personal Health Information Act. Therefore, in complying with such a request, a prescriber or dispenser is not in violation of the Personal Health Information Act.

Can you opt out of the Prescription Monitoring Program?
A No. All drug prescriptions provided by prescribers and filled in pharmacies in Newfoundland and Labrador are included in this program.

Will information be shared with a regulatory authority or law enforcement?
A The purpose of the program is to help prescribers and dispensers make the most informed decisions. The intention is not to police these professionals.

Prescribers and dispensers who are performing their duties as health care professionals in accordance with their regulatory guidelines and the Prescription Monitoring Act would not have their information shared with their regulatory bodies.

If activities that are deemed to contravene the Prescription Monitoring Act are discovered, they would be reviewed by the Prescription Monitoring Program Consultants Committee and possibly shared with the regulatory body or law enforcement if warranted.

Will the program capture prescriptions from another jurisdiction?
A Yes. Medication profiles are maintained for all patients that have prescriptions filled in pharmacies in Newfoundland and Labrador even if they are not from the province.

If a member of the public has a concern or complaint about prescribing or dispensing activities who should they contact?
A The most appropriate place to express a concern or complaint about a prescriber or dispenser would be with the regulatory bodies of those health care providers.

If a member of the public felt their concern or complaint was related to criminal activity, they could also file a report with the police.

Didn't the province already have a prescription monitoring program?
A Yes. There was a previous paper-based prescription monitoring program. Without an electronic system to capture the dispensing of prescriptions, it had limited success. Using the Pharmacy Network, a component of the provincial electronic health record, the necessary tools are in place to more successfully implement a prescription monitoring program.
Prescribers and Dispensers

Q What is now expected of a prescriber when prescribing a monitored drug?

A Prescribers will be required to review a patient’s medication profile in the electronic health record, HEALTHe NL, prior to prescribing a monitored drug to ensure its appropriateness.

Prescribers will also be required to check a box on the new Tamper Resistant Prescription Drug Pads (TRPP) indicating they have reviewed the patient’s medication profile.

These requirements come into effect on June 30, 2018.

Q What is now expected of dispensers when filling a prescription for a monitored drug?

A There are no new expectations of pharmacy dispensers as they are already expected to review a patient’s medication profile in the electronic health record prior to all dispenses. They are also obligated to input prescription information in the Pharmacy Network as per their professional standards.

Dispensers are not expected to deny service to a patient if the check-box on a Tamper Resistant Prescription is not ticked. Dispensers should make clinical decisions based on their professional standards.

Dispensing physicians and nurses in rural and remote areas of the province are exempt from the requirements of dispensers as listed in the Act.

Q Who will sit on the Prescription Monitoring Program Consultants Committee?

A The Consultants Committee review reports generated by the program and provide advice and recommendations to the Minister of Health and Community Services.

It is expected the committee will consist of:
- 2 physicians (at least one physician must be a family physician)
- A dentist
- A nurse practitioner
- 2 pharmacists (at least one dispenser must be a community pharmacist)

Pharmacist and prescriber representation will provide a clinical lens to the information presented by the program.

There will also be representation from the Department of Health and Community Services and NLCHI.

Q Are there any penalties under the Act?

A Failure to comply with the Act is an offence and may result in a fine of up to $10,000 for an individual or $20,000 for a corporation.

Q Can a prescriber or dispenser designate someone to check a patient’s medication profile?

A No, it is the responsibility of the prescriber and the dispenser to review the patient’s medication profile prior to prescribing or dispensing a monitored drug.
Q What changes will be made to the Tamper Resistant Prescription Drug Pad program (TRPP)?

A The Tamper Resistant Prescription Drug Pad program requires that prescriptions for certain drugs, including opioids, be issued on a special tamper resistant drug pad. There are no substantive changes anticipated to this program.

Minor changes have been made to the actual prescription pad to denote that a prescriber has checked the patient’s medication profile prior to prescribing.

The purpose of the check-box is to act as a formal reminder to physicians that they are to check the medication profile. By signing their names to the prescription they are certifying that they have done so.

Dispensers are not expected to deny service to a patient if the check-box is not ticked. Dispensers should make clinical decisions based on their professional standards.

Additionally, as of June 30, 2018, tramadol will be added to the list of drugs that have to be written on a tamper resistant prescription drug pad.

Q What criteria will the program use to create reports and determine if a prescriber or dispenser is complying with the Prescription Monitoring Act?

A The following criteria will be used to generate reports for the program:

- Patients receiving two or more monitored drug prescriptions from two or more prescribers in a defined time period.
- Patients receiving two or more monitored drug prescriptions from two or more pharmacies in a defined time period.
- Patients on monitored drug dependence treatment who are receiving prescriptions for other monitored drugs.
- Inordinate dispensing and prescribing practices which may include dispensing or prescribing of monitored drugs for more than a 90 days supply or in excessive quantities.
- Patient names without an MCP number, who were dispensed a monitored drug.

Other activities, as deemed necessary by the minister, may be added in the future.

Random reviews of prescriptions for monitored drugs may occur to ensure that a patient’s medication profile was accessed by both the prescriber and dispenser prior to the prescription being written or filled.

Q Is there a requirement to report on the prescribing habits of another prescriber?

A The Prescription Monitoring Act does not contain a duty to report to the Prescription Monitoring Program. If a prescriber or dispenser has a concern it should be discussed with the prescriber or the prescriber’s regulatory body pursuant to their governing statutes.

Some health professions may have a duty to report in their own professional legislation. Those duties continue to apply and are not impacted by the Act.
Regional Health Authorities

Q In some rural and remote locations (i.e.: coastal Labrador), some physicians and registered nurses can both prescribe and dispense medications, are they required to check the patient’s medication profile when prescribing or dispensing a monitored drug?

A In these instances, physicians and registered nurses who have both prescribing and dispensing powers are required to check the patient’s medication profile before writing a prescription for a monitored drug. They are not required to input information regarding the dispensing into the Pharmacy Network. Dispensing information from registered nurses is retroactively entered into the Pharmacy Network by the RHA.

Q Are prescribers and dispensers practicing within a hospital setting subject to the Prescription Monitoring Act?

A The requirements for prescribers in an outpatient hospital setting are the same as for community prescribers. They are required to write prescriptions for monitored drugs on a Tamper Resistant Prescription Drug Pad and they must check the patient’s medication profile in the electronic health record prior to writing the prescription.

If a monitored drug is prescribed and administered as a part of an inpatient’s treatment plan while in a hospital, prescribers are NOT required to check the patient’s medication profile. Inpatients do not receive more than the required dose at any given time so the risk of abuse or misuse of opioids is quite low.

Q Are prescribers, who are administering prescriptions for monitored drugs to long-term care patients, required to check the patient’s medication profile?

A Yes, prescribers are required to check the long-term care patient’s medication profile in the electronic health record before writing a prescription for a monitored drug.

Long-term care residents are not considered in-patients for the purposes of this program.

Provincial Electronic Health Record – HEALTHHe NL

Q How will prescribers and dispensers review the patient medication profile?

A The electronic health record, HEALTHHe NL, will be the primary tool to help prescribers and dispensers review the patient’s medication profile.

HEALTHHe NL is a private record of an individual’s health care information, available electronically to authorized health care professionals. It integrates information from many sources into a single, lifetime record of an individual’s key health history and care. Information is available in one place when and where it is needed.

Information contained in HEALTHHe NL includes:
- Patient medication profiles from all community pharmacies province wide through the Pharmacy Network
- Known allergies and medical alerts from community pharmacies only.
- Meditech data, including dictated reports, laboratory results, diagnostic imaging and encounters.
- Information about where health services have occurred, by whom and other key clinical events such as inpatient admission.
Clinicians using the provincial electronic medical record (EMR) program, eDOCSNL, can launch HEALTHe NL from within their EMR to view their patient’s medication profile.

For information on accessing the provincial electronic health record, HEALTHe NL, please contact: 709-752-6006, 1-877-752-6006 or healthenl@nlchi.nl.ca

To begin the registration process for HEALTHe NL, please visit – HEALTHe NL User Registration Form

**What is the Pharmacy Network?**

The Pharmacy Network is a component of the province-wide electronic health record, HEALTHe NL, that is comprised of a real-time database of medication profiles compiled from prescriptions filled at all of the province’s community pharmacies.

Data from the Pharmacy Network will be used to help guide prescribers and dispensers in making clinical decisions regarding the prescribing/dispensing of monitored drugs. It will also be the basis for the reports generated by the program.
From: Hanrahan, Heather D
Sent: Friday, June 22, 2018 2:23 PM
To: Patey, Earl M. <epatey@gov.nl.ca>
Cc: O'Dea, Jamie <JamieODea@gov.nl.ca>; Timmins, Emily <EmilyTimmins@gov.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>; 'Blair Medd' <Blair.Medd@nlchi.nl.ca>
Subject: FW: June 21 Revised FAQs PMP

Earl

Here are the public FAQs they are website ready.

Heather

From: Timmins, Emily
Sent: Friday, June 22, 2018 1:35 PM
To: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>; O'Dea, Jamie <JamieODea@gov.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>
Cc: Williams, Tina (HCS) <TinaWilliams@gov.nl.ca>
Subject: FW: June 21 Revised FAQs PMP

The public pdf attached here should have the changes from yesterday. The Prescribers and Dispenser once does not.

From: Macleod-Boland, Alison
Sent: Thursday, June 21, 2018 12:55 PM
To: Timmins, Emily <EmilyTimmins@gov.nl.ca>; Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>; O'Dea, Jamie <JamieODea@gov.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>
Subject: June 21 Revised FAQs PMP

Here you go.
Alison

Alison MacLeod-Boland
Executive Council, Communications and Public Engagement
Marketing and Brand Management
Government of Newfoundland and Labrador
From: Timmins, Emily
Sent: Thursday, June 21, 2018 12:08 PM
To: Macleod-Boland, Alison
Subject: FW: June 21 Revised FINAL DRAFT - FAQ PMP - General Public.docx

HI Alison, here is the word version of the general public document for you to work with.

Emily

From: Hanrahan, Heather D
Sent: Thursday, June 21, 2018 12:04 PM
To: Timmins, Emily <EmilyTimmins@gov.nl.ca>
Cc: O'Dea, Jamie <JamieODea@gov.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>
Subject: PW: June 21 Revised FINAL DRAFT - FAQ PMP - General Public.docx

Emily

I am good with content this can go back to Alison.

Heather

From: Timmins, Emily
Sent: Thursday, June 21, 2018 11:57 AM
To: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>
Subject: June 21 Revised FINAL DRAFT - FAQ PMP - General Public.docx
Prescription Monitoring Program – NL
Information for the Public
**Frequently Asked Questions and Answers**

Prescription Monitoring Program – NL supports the Provincial Government’s Opioid Action Plan to help address the growing opioid issue.

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---

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If a member of the public felt their concern or complaint was related to criminal activity, they could also file a report with the police.

Q: Didn't the province already have a prescription monitoring program?

A: Yes. There was a previous paper-based prescription monitoring program. Without an electronic system to capture the dispensing of prescriptions, it had limited success. Using the Pharmacy Network, a component of the provincial electronic health record, the necessary tools are in place to more successfully implement a prescription monitoring program.
From: Blair Medd [mailto:Blair.Medd@nlchi.nl.ca]
Sent: Tuesday, June 26, 2018 1:05 PM
To: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>; Mary Slade <mary.slade@nlchi.nl.ca>
Cc: O'Dea, Jamie <JamieODea@gov.nl.ca>
Subject: RE: update briefing note

Heather, I updated the note and tried to clear up the table re: number of physicians/opioid prescribers.

Blair

From: Hanrahan, Heather D [mailto:HeatherHanrahan@gov.nl.ca]
Sent: June 26, 2018 12:12 PM
To: Blair Medd <Blair.Medd@nlchi.nl.ca>; Mary Slade <mary.slade@nlchi.nl.ca>
Cc: O'Dea, Jamie <JamieODea@gov.nl.ca>
Subject: update briefing note
Importance: High

Blair and Mary

Can you both review before 2pm and provide any comment.

You can see there are still questions on the numbers of physicians

Jamie

I know you are at negotiations but if you can have a check over- both Gerrie and I have been through this this am and a few questions left.

Heather

“This email and any attached files are intended for the sole use of the primary and copied addressee(s) and may contain privileged and/or confidential information. Any distribution, use or copying by any means of this information is strictly prohibited. If you received this email in error, please delete it immediately and notify the sender.”
Information Note  
Department of Health and Community Services

**Title:** Requirements of Prescribers, under the Prescription Monitoring Act, to review a patient's medication profile before prescribing a monitored drug.

**Issue:** To provide a summary of action to ensure all opioid prescribers are able to comply with the requirement to review a patient’s medication profile before prescribing a monitored drug by June 30, 2018, as legislated by the Prescription Monitoring Act.

**Background and Current Status:**
- The Prescription Monitoring Program of Newfoundland and Labrador (PMP-NL) has been developed and is being administered by the Newfoundland and Labrador Centre for Health Information (NLCHI). PMP-NL will monitor, analyze and report information related to the prescribing, dispensing (providing a medication ordered by a prescription but does not include administering the medication) and use of monitored drugs. This information is collected in the Pharmacy Network, which is a provincial database, containing a record of all prescriptions filled and medications dispensed by community pharmacies in the province regardless of payment type.
- The professions authorized to prescribe controlled substances to humans (i.e., as opposed to animals) in Newfoundland and Labrador are physicians, nurse practitioners, dentists and
- The Act requires all prescribers to review the drug history of patients before writing a prescription for monitored drugs (currently opioids). Reviewing a patient's drug history before prescribing will only be possible when the prescriber has electronic access to the patient's medication history. Currently, this can be accomplished through the HEALTHeNL viewer which allows a prescriber to view prescriptions from the Pharmacy Network through a secure online portal.
- While the Act came into force on January 1, 2018, the requirement for prescribers to view a patient’s medication profile comes into force on June 30, 2018. This six-month grace period was granted to prescribers to allow them time to gain access to the HEALTHeNL viewer. Prescribers of monitored drugs are required to fully comply with the Act on June 30, 2018.
- The viewer is an internet-based portal. Prescribers only require a username, a password and an internet connection to access the viewer. There is no cost to prescribers other than an internet connection. No downtime would be required to begin using the viewer other than an initial 30-minute training session. These training sessions can be viewed online at the prescriber’s convenience and does not have to be done at the time of sign up.
- Once the Act came into force NLCHI was directed to develop a plan, in consultation with HCS, to assist prescribers in gaining access to the HEALTHeNL viewer.

**Analysis:**
- At the start of this process, NLCHI’s change management team identified over 1000 opioid prescribers who did not have access to the HEALTHeNL viewer.
- The change management team developed a multi-focused approach to assist these prescribers to obtain access in order to comply with the Act on June 30, 2018 and have been actively working toward this goal. Their efforts are as follows:

**Awareness:**
- Each prescriber has been contacted in a variety of ways, using multiple channels.
  - NLCHI has individually contacted each prescriber – phone, email, fax (barring a few that had no contact info available), in addition to proactively finding physicians while visiting acute care facilities.
o NLCHI has been working with leadership within the RHAs to distribute info to prescribers.

o Newfoundland and Labrador Medical Association (NLMA) has sent out info to their membership via email on NLCHI's behalf.

o Newfoundland and Labrador Dental Association (NLDFA) has sent out info to their membership via email on NLCHI's behalf on multiple occasions, the latest of which occurred on June 20.

o Association of Registered Nurses of Newfoundland and Labrador (ARNNL) has sent out info to their membership via email and on NLCHI's behalf on multiple occasions, in addition to their own proactive communications. They plan to send a final reminder next week on June 25.

o HCS has issued a memo to all prescribers who have prescribed narcotics over the past five years indicating that a new tamper resistant prescription pad was being issued related to PMP. This included a reminder and contact info about need to sign up for HEALTHeNL.

o On June 15, the College of Physicians and Surgeons of Newfoundland and Labrador (CPSNL) sent an email directly to 235 outstanding physicians urging them to contact NLCHI to gain access to the viewer. This is in addition to earlier communications they sent out to their membership on behalf of NLCHI.

o On June 20, CPSNL sent a notice to all physicians stating that if they do not have access to the HEALTHeNL viewer by July 1 they must make alternate arrangements for any patient requiring a monitored substance.

**Sign-up Opportunities:**

- The following are sign-up opportunities, open to all prescribers, that have taken place since Fall 2017:
  - Ongoing, end of month drop-in, afternoon sign on sessions at the Health Sciences Center (HSC) and St. Clares, with recent sessions also taking place at the Waterford Hospital.
  - Nine evening sessions at HSC from April to June (up to June 28)
  - Two drop-in sessions in Carbonear in May.
  - Drop in session in Corner Brook in November, May and June.
  - NLCHI staff travelled to HVGB and St. Anthony in April, and Port aux Basques and Stephenville in March where they held large sign up sessions.
  - NLCHI staff travelled to Mary's Harbour/Englinton, Burn and Arnold's Cove in June for one-on-one sessions with physicians.

- There is a peer leader in Labrador City who has been signing up health professionals in that region.

- NLCHI has been utilizing Telehealth services to reach rural and remote locations to do demos and sign ups. All of coastal Labrador has been managed this way.

- NLCHI has been conducting ongoing one-on-one sessions and demos either in physician or dental clinics or through WebEx video conferencing, FaceTime connection, Telehealth.

**Promotion/Education:**

- NLCHI has participated in a number of info sessions including:
  - MUN Med Office of Professional Development CME presentation on HEALTHeNL – Continuing Medical Education credits were available for participants.
  - Eastern Health pediatric rounds focused on PMP-NL and the requirements of opioid prescribers for July 1, 2018.
  - ARNNL provincial presentation focused on PMP-NL and the requirements of opioid prescribers for July 1, 2018.
  - NLMA's AGM on June 2, 2018 focussed on the requirements of opioid prescribers for July 1, 2018.
A "Frequently Asked Questions" document has been finalized and will be sent to all professional associations and regulatory bodies on June 22 and June 25 to distribute to their membership. This document fully explains the requirements of prescribers under the Prescription Monitoring Act.

Training

In addition to in-person demos, NLCHI also offers the option of viewing online training videos as a self-directed option for health professionals who want to use HEALTHeNL. This has been communicated broadly with our target audiences. Anyone who has access to the internet can view these videos to receive the same information available in the live demos. Links to these videos are available on NLCHI's website, and the videos are hosted on YouTube which ensures they are readily accessible.

The following table provides a summary HEALTHeNL access as of June 21, 2018:

<table>
<thead>
<tr>
<th></th>
<th>Total Number</th>
<th>% Signed on to HEALTHeNL</th>
<th># Remaining</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physicians</td>
<td>1251 (275 opioid prescribers)</td>
<td>1052 (262 opioid prescribers)</td>
<td>199 (includes all licensed physicians)</td>
</tr>
<tr>
<td>Nurse Practitioners</td>
<td>155</td>
<td>139 - 90%</td>
<td>116</td>
</tr>
<tr>
<td>Dentists</td>
<td>170</td>
<td>116 - 68%</td>
<td>54</td>
</tr>
<tr>
<td>Residents</td>
<td>163</td>
<td>97 60%</td>
<td>66</td>
</tr>
</tbody>
</table>

The following table illustrates the regional distribution of the remaining 199 opioid prescribing physicians:

<table>
<thead>
<tr>
<th>Region</th>
<th># Outstanding Physicians</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eastern Health</td>
<td>123</td>
</tr>
<tr>
<td>Central Health</td>
<td>5</td>
</tr>
<tr>
<td>Western Health</td>
<td>148</td>
</tr>
<tr>
<td>Labrador-Grenfell</td>
<td>134</td>
</tr>
<tr>
<td>Total</td>
<td>1559</td>
</tr>
</tbody>
</table>

Through discussion and collaboration with the NLDA and ARNNL, NLCHI is confident that all dentists and nurse practitioners who wish to prescribe monitored drugs now have access to the HEALTHeNL viewer, or are aware of the requirements. The figures in the above table are based on total number of dentists and nurse practitioners in the province, these remaining individuals have been identified as not having prescribed an opioid. There are many dentists and nurse practitioners who do not prescribe opioids.

As HEALTHeNL is an internet-based program, there is no software that can be sent to the remaining prescribers via mail. Prescribers can register for HEALTHeNL access and watch training videos online at their own convenience, without assistance from NLCHI. However, in order for them to gain access to the viewer they must make contact with NLCHI so that their identity can be verified. The HEALTHeNL viewer provides access to personal health information. Access to such information can not be given without first verifying the account holder. Ensuring the identity is verified is essential for privacy and security.

Ultimately the onus is on prescriber to respond to the multiple messages they have received regarding the requirements of the Prescription Monitoring Program. Once a prescriber initiates contact with NLCHI they can gain access to the HEALTHeNL viewer within minutes.
Action Being Taken:

- NLCHI is in the process of individually contacting each of the outstanding opioid prescribing physicians and residents by telephone.
- NLCHI’s change management team has a number of afternoon and evening drop-in sessions scheduled over the next week, including five in the St. John’s region.
- Clinical Adoption Specialists in Central, Western, and Labrador are actively tracking down physicians in those regions to sign them on to the viewer.
- NLCHI have determined which of the outstanding physicians are salaried with one of the RHAs. Teams are working with RHA officials to ensure these physicians meet the June 30 deadline. The VP of Medicine in each RHA will receive provided on June 27 with the list of outstanding physicians to contact directly.
- NLCHI’s change management team reports a high volume of calls from prescribers over the past 72 hours and expect this to continue up until the June 30 deadline.
Hi – Please find attached a blurb on PMP-NL for use on the website.

Jamie
The Prescription Monitoring Program – NL is another action being implemented by the Provincial Government as part of the Opioid Action Plan to help address the growing opioid issue facing Canada and this province.

The purpose of the program is to help prescribers and dispensers – for example, physicians, nurse practitioners, dentists and pharmacists – make the most informed decisions when choosing to prescribe or dispense a drug.

Through the program, prescribers and dispensers will have access to up-to-date and accurate patient medication profiles to help inform and support the needs of their patients.

The Prescription Monitoring Program – NL’s primary goal is to support health care practitioner when making a decision to prescribe or fill an opioid prescription.

For further information on Prescription Monitoring Program – NL, please contact info@PMPNL.ca
Tina make this change.

H

Sent from my BlackBerry 10 smartphone on the Bell network.

From: O'Dea, Jamie
Sent: Thursday, June 28, 2018 3:23 PM
To: Hanrahan, Heather D; Williams, Tina (HCS); Smith, Gerrie
Subject: RE: Thursday's PMP Update

Yes ARNNL

From: Hanrahan, Heather D
Sent: Thursday, June 28, 2018 3:13 PM
To: O'Dea, Jamie <JamieODea@gov.nl.ca>; Williams, Tina (HCS) <TinaWilliams@gov.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>
Subject: Re: Thursday's PMP Update

H.

Sent from my BlackBerry 10 smartphone on the Bell network.

From: O'Dea, Jamie
Sent: Thursday, June 28, 2018 3:10 PM
To: Williams, Tina (HCS); Hanrahan, Heather D; Smith, Gerrie
Subject: RE: Thursday's PMP Update

Looks fine to me

From: Williams, Tina (HCS)
Sent: Thursday, June 28, 2018 3:05 PM
To: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>; O'Dea, Jamie <JamieODea@gov.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>
Subject: RE: Thursday's PMP Update
How do these look? I will put in TRIM once I have incorporated your comments. These are still too long, but I think they capture the points that Karen S mentioned to me yesterday. Let me know ASAP.

**KEY MESSAGES**

Health and Community Services

**Prescription Monitoring Program**
June 28, 2018

**Summary:**
The Prescription Monitoring Act governs the provincial Prescription Monitoring Program which came into effect on January 1, 2018. Under the Act and effective June 30, all prescribers and dispensers are required to check a patient’s medication profile using the provincial electronic health record HEALTHe NL before prescribing and dispensing a monitored drug.

**Anticipated Questions:**
- What is the benefit of being connected to HEALTHe NL?
- What help was provided to get everyone connected in time?
- Is everyone who should be connected to HEALTHe NL?
- What about those who are not connected to HEALTHe NL?

**Key Messages:**

- Drug use, overdose and death are happening in our communities. This has brought together all levels of government, community partners and health care providers to find effective ways to address it. Newfoundland and Labrador’s Prescription Monitoring Program is another initiative under the Provincial Government’s Opioid Action Plan to help address the growing opioid issue in this province.

- Through HEALTHe NL, prescribers and dispensers can complete a quick, confidential online review of a patient’s full medication history. This will help prescribers and dispensers make informed decisions, both through their own clinical assessment and the patient’s medication history, when choosing to prescribe an opioid.

- Since coming into effect on January 1, NLCHI has worked diligently to help individuals get access to HEALTHe NL. For example:
  - NLCHI made individual telephone calls and sent individual emails;
  - Information was sent out through the four RHAs;
  - Information was sent out through the NLMA, NLDA and RNU-NL;
  - Information was sent out through the department; and,
Numerous information sessions were held at various health care facilities across the province and these actually started last fall.

- To date, nearly 90% of all prescribers and dispensers have access to HEALTHeNL. Approximately 91% of physicians have access to HEALTHeNL.

- For those who are not yet connected, NLCHI will continue to work with you to get you connected to HEALTHeNL. NLCHI can be reached at 709-752-6006, 1-877-752-6006 or via email healthenl@nlchi.ca. Assistance will be available over the weekend. This is not a difficult process. Connection can be easily completed in about 30 minutes.

- We have to recognize that prescription drug abuse, especially opioids, is a real issue impacting the lives of Newfoundlanders and Labradorians every day. It will take a collective effort to make headway in reducing and addressing this very serious and real public health issue.

**Prepared by:** HCS Communications

**Approved by:**

Tina Williams
Director of Communications
Department of Health and Community Services
Government of Newfoundland and Labrador
709-729-1377
[TinaWilliams@gov.nl.ca](mailto:TinaWilliams@gov.nl.ca)

---

**From:** Hanrahan, Heather D  
**Sent:** Thursday, June 28, 2018 2:38 PM  
**To:** O’Dea, Jamie; Williams, Tina (HCS)  
**Subject:** Re: Thursday's PMP Update

Yes I think km for premier different than HOA.

H

Sent from my BlackBerry 10 smartphone on the Bell network.

---

**From:** O’Dea, Jamie  
**Sent:** Thursday, June 28, 2018 2:28 PM  
**To:** Williams, Tina (HCS); Hanrahan, Heather D  
**Subject:** RE: Thursday's PMP Update

Yes sorry – when I did my version it was very bare bones because I thought it had to stick to one page with only 5 bullets. I was trying to fit what the Premier needed to know in that limit. I’ll know for next time!
From: Williams, Tina (HCS)
Sent: Thursday, June 28, 2018 2:23 PM
To: O'Dea, Jamie <JamieODea@gov.nl.ca>; Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>
Subject: RE: Thursday's PMP Update

I just checked in and am making changes outside of TRIM and will advise when I am done. It’s a bit long.

Tina Williams
Director of Communications
Department of Health and Community Services
Government of Newfoundland and Labrador
709-729-1377
TinaWilliams@gov.nl.ca

From: O'Dea, Jamie
Sent: Thursday, June 28, 2018 2:20 PM
To: Hanrahan, Heather D; Smith, Gerrie; Williams, Tina (HCS)
Subject: RE: RE: Thursday's PMP Update

I can’t edit the doc because it is checked out but for the highlighted areas:

- While I believe the number of total prescribers is under 90%, the number of physicians is 91%. You may want to include both
- Yes, NLCHI can still reach out to physician’s next week

Jamie

From: Hanrahan, Heather D
Sent: Thursday, June 28, 2018 2:04 PM
To: Smith, Gerrie <GerrieSmith@gov.nl.ca>; Williams, Tina (HCS) <TinaWilliams@gov.nl.ca>
Cc: O'Dea, Jamie <JamieODea@gov.nl.ca>
Subject: RE: Thursday's PMP Update

Great thanks Gerrie.

H

From: Smith, Gerrie
Sent: Thursday, June 28, 2018 2:04 PM
To: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>; Williams, Tina (HCS) <TinaWilliams@gov.nl.ca>
Cc: O'Dea, Jamie <JamieODea@gov.nl.ca>
Subject: RE: Thursday's PMP Update
Importance: High
Doc-38033 has now been updated. Tina, I think you can start your review but you’ll note that there are a couple of highlighted areas which needs Jamie’s input. Jamie, you should review as well for content. I’m just going to run out quickly to grab a sandwich and I’ll be right back should you have any questions.

Gerrie Smith, LL.B
Legislative Consultant
Dept of Health and Community Services
(709) 729-2560 (t)
gerriesmith@gov.nl.ca

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From: Hanrahan, Heather D
Sent: Thursday, June 28, 2018 2:00 PM
To: Williams, Tina (HCS) <TinaWilliams@gov.nl.ca>
Cc: Smith, Gerrie <GerrieSmith@gov.nl.ca>; O’Dea, Jamie <JamieODea@gov.nl.ca>
Subject: RE: Thursday's PMP Update

Gerrie?

H

From: Williams, Tina (HCS)
Sent: Thursday, June 28, 2018 1:59 PM
To: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>
Cc: Smith, Gerrie <GerrieSmith@gov.nl.ca>; O’Dea, Jamie <JamieODea@gov.nl.ca>
Subject: RE: Thursday's PMP Update

Are these good for me to review now or am I still holding?

Tina Williams
Director of Communications
Department of Health and Community Services
Government of Newfoundland and Labrador
709-729-1377
TinaWilliams@gov.nl.ca

From: Williams, Tina (HCS)
Sent: Thursday, June 28, 2018 1:10 PM
To: Hanrahan, Heather D  
Cc: Smith, Gerrie; O'Dea, Jamie  
Subject: RE: Thursday's PMP Update

Ok. Let me know when they are ready for my review.

Tina Williams  
Director of Communications  
Department of Health and Community Services  
Government of Newfoundland and Labrador  
709-729-1377  
TinaWilliams@gov.nl.ca

From: Hanrahan, Heather D  
Sent: Thursday, June 28, 2018 1:07 PM  
To: Williams, Tina (HCS)  
Cc: Smith, Gerrie; O'Dea, Jamie  
Subject: Fw: Thursday's PMP Update  
Importance: High

Tina

When the KMS get to you can you add below that NLCHI are available through the weekend to connect anyone.

Not sure if you want to include contact info of not. But important to say they are available.

H

Sent from my BlackBerry 10 smartphone on the Bell network

From: Blair Medd <Blair.Medd@nlchi.nl.ca>  
Sent: Thursday, June 28, 2018 1:02 PM  
To: Hanrahan, Heather D; Lawrence Alteen  
Subject: RE: Thursday's PMP Update

Raleen has been making herself available to anyone any day as required, even going so far as to meet an out of town physician in a waiting room when he came in for his own medical appointment. She will be standing by this weekend.

Our service desk is also available 24/7 and can set up an account and contact Raleen as required.

Raleen’s contact info has been widely shared and contact info for the service desk is printed on the first and last page of the PMP FAQ for prescribers.
Here it is again if needed:
For more information on HEALTHe NL, call 709-752-6006 or 1-877-752-6006 or email healthenl@nlchi.nl.ca

My plan is to share this contact info to our broad stakeholder groups in case there is any troubleshooting or last minute requests.

Blair

From: Hanrahan, Heather D [mailto:HeatherHanrahan@gov.nl.ca]
Sent: June 28, 2018 12:54 PM
To: Blair Medd <Blair_Medd@nlchi.nl.ca>; Lawrence Alteen <lawrence.alteen@easternhealth.ca>
Subject: Re: Thursday's PMP Update

Will you have people on the ground through the weekend to connect people?

H

Sent from my BlackBerry 10 smartphone on the Bell network.

From: Blair Medd
Sent: Thursday, June 28, 2018 12:53 PM
To: Hanrahan, Heather D; Lawrence Alteen
Subject: RE: Thursday's PMP Update

We stressed the June 30 deadline and need for them to get access asap. Also that the Dept was asking.

Blair

From: Hanrahan, Heather D [mailto:HeatherHanrahan@gov.nl.ca]
Sent: June 28, 2018 12:51 PM
To: Blair Medd <Blair_Medd@nlchi.nl.ca>; Lawrence Alteen <lawrence.alteen@easternhealth.ca>
Subject: Re: Thursday's PMP Update

Thank you. Have you added them to get back by end of day?

H

Sent from my BlackBerry 10 smartphone on the Bell network.

From: Blair Medd
Sent: Thursday, June 28, 2018 12:49 PM
To: Hanrahan, Heather D; Lawrence Alteen
Subject: RE: Thursday's PMP Update

This request to MUN Med with the list has been made. Asking them to identify any residents no longer active/out-of-province.

Blair

From: Hanrahan, Heather D [mailto:HeatherHanrahan@gov.nl.ca]
Sent: June 28, 2018 12:37 PM
To: Blair Medd <Blair.Medd@nlchi.nl.ca>; Lawrence Alteen <lawrence.alteen@easternhealth.ca>
Subject: RE: Thursday's PMP Update

Good to know

Can we give the outstanding list to post grad today and ask they remove anyone who is gone?

H

From: Blair Medd [mailto:Blair.Medd@nlchi.nl.ca]
Sent: Thursday, June 28, 2018 12:34 PM
To: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>; Lawrence Alteen <lawrence.alteen@easternhealth.ca>
Subject: RE: Thursday's PMP Update

Just to note, we have all the new residents in the province now on HEALThe NL. That is a process and relationship we have ongoing with MUN MED.

The ones on our remaining list could be a combination of things I mentioned below.

Blair

From: Hanrahan, Heather D [mailto:HeatherHanrahan@gov.nl.ca]
Sent: June 28, 2018 12:18 PM
To: Lawrence Alteen <lawrence.alteen@easternhealth.ca>
Cc: Blair Medd <Blair.Medd@nlchi.nl.ca>
Subject: Fw: Thursday's PMP Update

Larry

Related to my last email bit more from Blair on the resident piece.

H
Sent from my BlackBerry 10 smartphone on the Bell network.

From: Blair Medd <Blair.Medd@nlchi.nl.ca>
Sent: Thursday, June 28, 2018 12:12 PM
To: Hanrahan, Heather D; Smith, Gerrie; O'Dea, Jamie
Cc: Raleen Murphy; Mary Slade; Richard Coombs; Stephen Clark; Gillian Sweeney
Subject: RE: Thursday's PMP Update

The list is being pulled now.

Raleen has come across a number of residents who are working in family practice settings and there are many cases where those clinics are on our eDOCS EMR, which means they have access to HEALTHe NL through the EMR. Again, not something we would know without coming across the examples. So we don’t know how many that situation may apply to.

There are also instances where they were a resident when we developed the list, but now may have either finished and left the province, or are completing their residency in another province. It is a fluid group.

This group of residents are all getting the same messages as everyone else.

Over the past two weeks we have signed up about 60 new residents.

Blair

---

From: Hanrahan, Heather D [mailto:HeatherHanrahan@gov.nl.ca]
Sent: June 28, 2018 12:03 PM
To: Blair Medd <Blair.Medd@nlchi.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>; O'Dea, Jamie <JamieODea@gov.nl.ca>
Cc: Raleen Murphy <Raleen.Murphy@nlchi.nl.ca>; Mary Slade <mary.slade@nlchi.nl.ca>; Richard Coombs <Richard.Coombs@nlchi.nl.ca>; Stephen Clark <stephen.clark@nlchi.nl.ca>; Gillian Sweeney <Gillian.Sweeney@nlchi.nl.ca>
Subject: Re: Thursday's PMP Update

Blair

I will need a list of the 108 by region, Community and area of practice.

Are we sure we are not concerned re the residents? Their number is not moving a lot.

H

Sent from my BlackBerry 10 smartphone on the Bell network.

From: Blair Medd
Here is where we currently stand, with calls coming in to the team and a final evening session tonight at the HSC. 108 physicians who have prescribed opioids still remain. However, as we are learning, there may be some exceptions in the list (ie physicians who are retiring, on mat leave, currently out of the province, or a locum who was here for a period and currently not in the province – we refine the list as we learn these things)

I will send the RHA physician lists to the respective VPs.

We all so send the list or 108 to CPSNL and ask if they can send out another message.

Blair

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>Signed on</th>
<th>Remaining Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physicians</td>
<td>1261</td>
<td>1153</td>
<td>108</td>
</tr>
<tr>
<td>Residents</td>
<td>164</td>
<td>102</td>
<td>62</td>
</tr>
<tr>
<td>Nurse Practitioners</td>
<td>158</td>
<td>145</td>
<td>13</td>
</tr>
<tr>
<td>Dentists</td>
<td>175</td>
<td>136</td>
<td>39</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1758</strong></td>
<td><strong>1536</strong></td>
<td><strong>222</strong></td>
</tr>
</tbody>
</table>

Breakdown of physicians and residents as of June 28, 2018
11:00am per RHA

<table>
<thead>
<tr>
<th>RHA</th>
<th>Remaining</th>
</tr>
</thead>
<tbody>
<tr>
<td>WH</td>
<td>5</td>
</tr>
<tr>
<td>LGH</td>
<td>5</td>
</tr>
<tr>
<td>CH</td>
<td>5</td>
</tr>
<tr>
<td>EH</td>
<td>93</td>
</tr>
<tr>
<td>Residents</td>
<td>62</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>170</strong></td>
</tr>
<tr>
<td><strong>Just physicians</strong></td>
<td><strong>108</strong></td>
</tr>
</tbody>
</table>

From this 108, 64 are RHA employees, below is the breakdown per RHA and the list with names per RHA is attached.

<table>
<thead>
<tr>
<th>RHA</th>
<th>Remaining</th>
</tr>
</thead>
<tbody>
<tr>
<td>EH</td>
<td>54</td>
</tr>
</tbody>
</table>
For your reference, June 27, 2018 (11:20am) numbers are shown below

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>CH</td>
<td>3</td>
</tr>
<tr>
<td>WH</td>
<td>2</td>
</tr>
<tr>
<td>LGH</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>64</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Remaining</th>
</tr>
</thead>
<tbody>
<tr>
<td>RHA</td>
<td>64</td>
</tr>
<tr>
<td>EH</td>
<td>3</td>
</tr>
<tr>
<td>CH</td>
<td>3</td>
</tr>
<tr>
<td>WH</td>
<td>11</td>
</tr>
<tr>
<td>LGH</td>
<td><strong>81</strong></td>
</tr>
</tbody>
</table>

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Gerrie, Jamie,

We have had a physician request a list of the drugs that are covered under PMP. Richard pulled together the attached list and lead statement. Can you review and let me know if you are ok with this? Would like to be able to share with the team and that physician in particular today.

Thanks,

Blair

Blair Medd  
Director of Communications and eHealth Change Leadership  
Newfoundland and Labrador Centre for Health Information

Blair.Medd@nlchi.nl.ca  
W: 709-752-6111  
C: 709-631-0995

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As per the regulations, monitored drugs are defined in the Prescription Monitoring Program NL (PMP-NL) as opioids listed in schedule 1 of the Controlled Drugs and Substances Act (Canada) AND tramadol. The following is a list of commonly used drugs that are captured by this definition. Note this is not an exhaustive list as new drugs, or newly-marketed brands of drugs, can become available at any time. If the medication you are prescribing contains an opioid, then it is subject to the laws of the Prescription Monitoring Act.

<table>
<thead>
<tr>
<th>Drug Name</th>
<th>Some Common Trade Names</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buprenorphine</td>
<td>Butrans, Suboxone</td>
</tr>
<tr>
<td>Butorphanol tartrate</td>
<td>Torbugesic, Torbutrol</td>
</tr>
<tr>
<td>Codeine</td>
<td>222, 282, 292, generic AC&amp;C products, generic acetaminophen with codeine products, Atasol-15, Atasol-30, Co-Actifed, Codeine Contin, Fiorinal C1/4, Fiorinal C1/2, Robaxisal C1/4, Robaxisal C1/2, Robitussin AC, Tylenol #2, Tylenol #3, Tylenol #4, generics</td>
</tr>
<tr>
<td>Diphenoxylate</td>
<td>Lomotil</td>
</tr>
<tr>
<td>Fentanyl / Fentanyl Citrate</td>
<td>Duragesic MAT, generics</td>
</tr>
<tr>
<td>Hydrocodone bitartrate</td>
<td>Dalmacol, Dimetane Expectorant DC, Hycodan, Novahistex DH, Novahistine DH, Tussionex, generics</td>
</tr>
<tr>
<td>Hydromorphone HCL</td>
<td>Dilaudid, Hydromorph Contin, Hydromorph IR, Jurnista, generics</td>
</tr>
<tr>
<td>Meperidine HCL (pethidine)</td>
<td>Demerol, generics</td>
</tr>
<tr>
<td>Methadone</td>
<td>Metadol, Methadose</td>
</tr>
<tr>
<td>Morphine (HCL and Sulfate)</td>
<td>Kadian, M-Eslon, M.O.S., MS-Contin, MSIR, Statex, generics</td>
</tr>
<tr>
<td>Oxycodone HCL</td>
<td>Endocet, OxyNEO, Oxy-IR, Percocet, Percodan, Supeudol, Targin, generics</td>
</tr>
<tr>
<td>Pentazocine (HCL and Lactate)</td>
<td>Talwin</td>
</tr>
<tr>
<td>Tapentadol</td>
<td>Nucynta CR</td>
</tr>
<tr>
<td>Tramadol HCL</td>
<td>Zytram XL, Tridural, Ralivia, Ultram, Durela, Tramacaet, generics</td>
</tr>
</tbody>
</table>
Jamie

Loop back when cleared with NLMA.

H

From: Williams, Tina (HCS)
Sent: Tuesday, July 10, 2018 10:12 AM
To: Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>; Smith, Gerrie <GerrieSmith@gov.nl.ca>
Cc: O'Dea, Jamie <JamieODea@gov.nl.ca>; 'Blair Medd' <Blair.Medd@nlchi.nl.ca>
Subject: RE: FAQs - prescribers and dispensers

I can request that these changes be made to the online document. Please advise when I am good to do so.

Tina Williams
Director of Communications
Department of Health and Community Services
Government of Newfoundland and Labrador
709-729-1377
TinaWilliams@gov.nl.ca

From: Hanrahan, Heather D
Sent: Wednesday, July 04, 2018 4:52 PM
To: Smith, Gerrie; Williams, Tina (HCS)
Cc: O'Dea, Jamie; 'Blair Medd'
Subject: RE: FAQs - prescribers and dispensers

I am good with changes. Might be an idea to run past NLMA. Jamie can you do this with Jamie perhaps?

H

From: Smith, Gerrie
Sent: Wednesday, July 04, 2018 12:03 PM
To: Williams, Tina (HCS) <TinaWilliams@gov.nl.ca>
Cc: O'Dea, Jamie <JamieODea@gov.nl.ca>; 'Blair Medd' <Blair.Medd@nlchi.nl.ca>; Hanrahan, Heather D <HeatherHanrahan@gov.nl.ca>
Subject: FAQs - prescribers and dispensers

Hi Tina,
Since the FAQs were distributed, the NLMA has raised a concern with the Answer to Question 3 “Will information be shared with a regulatory authority or law enforcement”? found on page 4.

While we don’t believe that the document needs to be re-distributed, we are thinking that we could make a change to the online version that I understand is currently posted on the Dept’s website.

Furthermore, there is one inconsistency and one typo which we may also wish to fix if we are prepared to make the above noted change.

On page 6, question 1, third paragraph in the Answer – I believe “physicians” should be replaced with “prescribers”.

I’ve copied Jamie, Blair and Heather as they may have some comments on the changes I am suggesting. Also, I’m not sure if we should run the proposed language by the NLMA before we post any change.

I’m happy to discuss.

Thanks.

Gerrie

Gerrie Smith, LL.B
Legislative Consultant
Dept of Health and Community Services
(709) 729-2560 (t)
gerriesmith@gov.nl.ca

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Hi Gerrie – please see below and attached RE: NB Pharmacy Act

Jamie

From: Clark, Patricia  
Sent: Friday, July 13, 2018 3:39 PM  
To: O'Dea, Jamie <JamieODea@gov.nl.ca>  
Cc: Clark, Patricia <pclark@gov.nl.ca>  
Subject: RE: PMP FAQ

Here is what Leanne sent. She wants to have a chat next week.

Trish

From: O'Dea, Jamie  
Sent: Friday, July 13, 2018 3:32 PM  
To: Clark, Patricia  
Subject: FW: PMP FAQ

Hi – just a reminder to look at the NB Act. Gerrie’s going to do some messaging up for us for Wednesday.

Jamie

From: Smith, Gerrie  
Sent: Friday, July 13, 2018 3:29 PM  
To: O'Dea, Jamie <JamieODea@gov.nl.ca>  
Subject: RE: PMP FAQ

No problem. I’ll follow up with Trish on the NB Act as I’d like to have a look at that to see if there is anything we can incorporate into HCS’ position. Enjoy your weekend.

Gerrie

Gerrie Smith, LL.B  
Legislative Consultant  
Dept of Health and Community Services  
(709) 729-2560 (t)  
gerriesmith@gov.nl.ca

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From: O’Dea, Jamie
Sent: Friday, July 13, 2018 1:00 PM
To: Smith, Gerrie <GerrieSmith@gov.nl.ca>
Subject: RE: PMP FAQ

Ok—Could I leave this with you to go back to Jonathan and then update Tina and give her the go ahead to make whatever edits you and Jonathan agree on?

I’ll also check my email for the PANL information you are going to forward. We are meeting with them Wednesday morning. If you have any questions on Monday or Tuesday you can ask Trish.

Thanks,
Jamie

From: Smith, Gerrie
Sent: Thursday, July 12, 2018 3:27 PM
To: O’Dea, Jamie <JamieODea@gov.nl.ca>
Subject: RE: PMP FAQ

Gerrie Smith, LL.B.
Legislative Consultant
Dept of Health and Community Services
(709) 729-2560 (t)
gerriesmith@gov.nl.ca

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From: O’Dea, Jamie
Sent: Thursday, July 12, 2018 2:39 PM
To: Smith, Gerrie <GerrieSmith@gov.nl.ca>
Subject: FW: PMP FAQ

Hi - this is the response from NLMA regarding the changes to the FAQ. Do you have any issues with Jonathan’s suggestion?

Jamie

From: Jonathan Carpenter <JCarpenter@nlma.nl.ca>
Sent: Thursday, July 12, 2018 2:36 PM
To: O’Dea, Jamie <JamieODEa@gov.nl.ca>
Subject: RE: PMP FAQ

Hi Jamie,

Thank you for the edit and for the opportunity to review it. We felt it was a substantial improvement, but we would like to request adhering more closely to the Act itself if possible using the following formulation:

Let me know what you think.

Thanks,
Jonathan

Jonathan Carpenter, ABC* | Director, Communications & Public Affairs
Newfoundland and Labrador Medical Association
*Accredited Business Communicator

From: O’Dea, Jamie [mailto:JamieODEa@gov.nl.ca]
Sent: Thursday, July 12, 2018 12:23 PM
To: Jonathan Carpenter <JCarpenter@nlma.nl.ca>
Subject: RE: PMP FAQ

Hi Jonathan - I was wondering if you had a chance to review the new wording for the FAQ. We are eager to make these changes so if you could get back to me by the end of the day it would be
appreciated.

Thanks,
Jamie

From: O'Dea, Jamie
Sent: Tuesday, July 10, 2018 10:45 AM
To: 'Jonathan Carpenter' <ICarpenter@nlma.nl.ca>
Subject: PMP FAQ

Hi Jonathan,

We are in the process of making edits to the PMP FAQs based on your feedback. Currently the paragraph in question (on page 4) reads:

s. 29(1)(a)

We have reworded to instead say:  s. 29(1)(a)

Please let me know if you have any concerns with the new wording.

Thanks,
Jamie

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Hi Trish: We have two Acts & Regs for our two drug plans.

New Brunswick Prescription Drug Program:

New Brunswick Drug Plan (implemented May 2014): - no reference to NBPA

I’d like to talk to you to give you some background. The wording in our “old” drug plan Act/Reg is very old. We did not include any reference in the Act/Reg for our “new” drug plan.

Leanne

---

From: Clark, Patricia [mailto:pclark@gov.nl.ca]
Sent: July-12-18 9:36 AM
To: Jardine, Leanne (DH/MS)
Cc: Clark, Patricia
Subject: NB Pharmaceutical Services Act

Hi Leanne, s. 30(1)(a), s. 29(1)(a)

Cheers
Trish

************************************************

Patricia Clark
Manager - Program Policy and Professional Services
Department of Health and Community Services
Newfoundland and Labrador

Phone: (709) 729-1623
Email: pclark@gov.nl.ca

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Thank you Mr. O’Dea for your reply. It seems that with time we are hearing less issues surrounding the use of old pads than we had previously. However, I did receive one recently from a St John’s pharmacy concerning [redacted] and one just minutes ago regarding [redacted] out of the Carbonear hospital.

As you can appreciate this leads to undue hardships and delays in treatment for these patients as NLPDP has made the stance that these prescriptions should not be accepted as is.

1) If a doctor does not use the new pad or does not fill out the unique aspects of the new pad are we unable to fill the prescription?

The new Tamper Resistant Prescription Drug Pads that have been issued include a check-box where prescribers can indicate that they have reviewed the patient’s medication profile. Pharmacists are not expected to enforce this aspect of the pad. Random reviews of prescriptions for monitored drugs may occur to ensure that a patient’s medication profile was accessed by both the prescriber and dispenser prior to the prescription being filled.

The new pad must be used effective June 30, 2018. Any prescriptions written on the old pad after this date should not be filled.

Thank you,

From: O’Dea, Jamie [mailto:JamieODea@gov.nl.ca]
Sent: Wednesday, July 11, 2018 4:28 PM
To: [redacted]@sobeyspharmacy.com
Cc: ‘Melanie Healey’<mhealey@nlpb.ca>, ‘npatten@nlpb.ca’<npatten@nlpb.ca>, [redacted]@sobeys.com
Subject: FR EXT ---- Response to TRPP inquiry

Good Afternoon,

I am writing in response to [redacted] email dated July 5 regarding TRPP pads.

As you are aware, as of July 1 any health care provider prescribing opioids (including tramadol) must check the patient’s drug profile in the Electronic Health record and record that they have done so on the new TRPP pads by checking the box on the new pads. This requirement was communicated to all prescribers several times through multiple channels in the weeks and months leading up to this deadline.

The Department of Health’s Pharmaceutical Services Division did a mass mail out of new TRPP pads to any provider who had ordered pads since 2014. Anyone not on this list was informed, well ahead of the deadline, that they would need to order pads through the normal procedures. There is no backlog or shortage of new prescription pads. We have been couriering pads to anyone who has requested them and they have been received in a very timely manner. There are no barriers which would prevent a prescriber from receiving new TRPP pads if
they wish to have them.

If you would like to pass along the names of the physicians in question we would be happy to reach out to them and resolve this issue.

If you would like more information on the Prescription Monitoring program please visit the following link for answers to some Frequently Asked Questions.

Kindest Regards,

Jamie O’Dea
Director Pharmaceutical Services Division
Government of Newfoundland and Labrador

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