

October 25, 2019

Nancy Lum-Wilson Registrar, Ontario College of Pharmacists 483 Huron Street Toronto ON, M5R 2R4

Dear Ms Lum-Wilson,

As the President of the Ontario Branch of the Canadian Society of Hospital Pharmacists (CSHP OF), I would like to thank you for providing the opportunity to give feedback on the draft regulatory amendments on the Expanded Scope of Practice Key Initiative.

As the voluntary organization representing pharmacy professionals in the hospital and primary care settings, we serve to advocate on behalf of our members.

Many pharmacists practicing in the hospital setting have expressed their concerns especially as they relate to the restrictions placed upon them from practicing from the current scope of practice, due to the Public Hospitals Act.

In this current Initiative, we have noticed that there will be other acts such as the Laboratory and Specimen Collection Centre Licensing Act that will have to be amended. We would encourage that this also be extended in some way to also amend the Public Hospitals Act, to accommodate changes to the pharmacists' scope of practice as they evolve over time.

Pharmacists practicing in the hospital setting have a unique environment to truly impact patient care, not only by increasing safety, but also by increasing efficiencies, something that is required in times of fiscal accountability.

We would therefore advocate that wording ensure that the following will be included in the expansion of the scope of practice that will include pharmacists practicing in the hospital setting:

- Point of Care testing to allow for timely dose adjustments, the primary example being INRs thereby allowing pharmacists to do the dosage adjustments in real time for patients on warfarin;
- Medication Reconciliation has proven to be one of the most effective means of reducing harm to patients by medications. Ensuring that there is accurate dissemination of changes to prescriptions for patients both coming into and leaving hospital has resulted in both decreased number of medication errors in admitted patients, reduced lengths of stay and reduced readmissions post discharge. Modifying the Extending & Adapting or the Public Hospitals Act to allow for hospital pharmacists to be able to implement these into their scope of practice would allow for increased rates of patients being discharged with prescriptions that align with the best possible medication discharge plan, ensuring that patients receive





- prescriptions to be dispensed by their community pharmacies, are accurate and reflect all the changes made in hospital;
- We solidly support the changes to the injection route of administration which would allow pharmacists practicing in rehabilitation and other non-acute care facilities, an increased ability to support inter-collaborative practice (e.g. the administering of medications by the intramuscular route for therapeutic purposes).

Respectfully submitted,

Debbie Merrill, BSc(Pharm), PharmD, RPh President, CSHP OB