

College of Pharmacists of Manitoba

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Virtual Care Consultation Response

To whom it may concern,

Thank you for giving the College of Pharmacists of Manitoba an opportunity to provide consultation on this policy. The COVID-19 pandemic has demonstrated the need for virtual care in the provision of healthcare, however virtual care provides many unique challenges to both pharmacists and provincial pharmacy regulators. Several of such issues include data and personal health information security, the scope of virtual care and its potential cross jurisdictional nature (cross jurisdictional practice is addressed in another policy). After a review of this policy, several areas were identified that we suggest require clarity and further detail to effectively support pharmacy practice and better outline OCP expectations. Thought should also be given regarding the process or authorizing, inspecting, and listing virtual care providers.

DEFINITIONS: Virtual Care

The definition of virtual care frames the entire policy and sets the expectations of what virtual care is. This definition would benefit from expansion and further detail.

The definition does not touch on the security of the interaction. The security of a virtual interaction is of utmost importance. Texting on a personal cellphone or social media account for example are potentially unsecure platforms. In the interest in patient privacy such platforms should not be considered valid for virtual care. This demonstrates the importance of including security in the enhanced definition of virtual care.

Furthermore, the definition of virtual care references a "professional interaction" but does not elaborate or define what this means, leaving room for misinterpretation. While virtual pharmacy care means the provision of care to patients who are separated by distance, a "professional interaction" can and should occur in both virtual and traditional care settings. The professional interaction or therapeutic relationship is a planned goal-oriented covenant between the pharmacist and patient for the purpose of achieving positive health related outcomes. The therapeutic relationship is one with fiduciary responsibility. Outlining this in the virtual care definition or in a separate "professional interaction" definition would benefit the policy greatly.

Assess Appropriateness of Virtual Care Delivery

To assess the appropriateness of virtual care delivery pharmacists should understand where virtual care is being preformed, is it at the jurisdiction of the patient or the pharmacist? It would be beneficial for this distinction to be consistent among the PRAs and NAPRA.

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Further to this after reading this policy it is unclear if there are any boundaries to virtual care (ex. within Ontario or Nationally) or if out of province pharmacists can provide virtual care to Ontario patients. If out of province virtual care is permitted by Ontario pharmacists, this section would be enhanced by stating other jurisdictions PRA should be contacted to determine their requirements for virtual care.

Considerations should also be made to the limitations of the available technology and the patient's circumstances and understanding when assessing the appropriateness of virtual pharmacy care. This assessment should be done on an ongoing basis as technological and patient circumstances can change between interactions.

The policy is unclear regarding pharmacist prescribing and dispensing. The policy should clearly define this process including how to securely transmit a prescription and ensuring patient autonomy.

Maintain Privacy and Confidentiality

This section would be improved by including more patient safeguards. Pharmacists should be required to have detailed knowledge about exactly where the data obtained during a virtual visit is stored (is it a cloud-based service or local) and comply with NAPRAs statement about PHI not being stored outside of Canada.

It is agreed that identification should be checked regardless of an existing or new virtual care patient, however stronger or additional safeguards should be required when a pre-existing in person relationship does not exist prior to engaging in virtual care.

The policy recommends advising patients that they should be in a private environment; this should be a requirement.

Ensure Safe and Appropriate Environment

This section references the observation of medication. Is specific consideration given to opioid agonist therapy (OAT) as an acceptable virtual care practice. If this is acceptable, clearly define the requirements including communication with the prescriber prior to implementing virtual observation of OAT.

This section goes on further to state "Due to the instability of some network connections, registrants are advised to have a contingency plan in place to ensure that patients are able to access the pharmacy services they need if an internet connection cannot be maintained." The Pharmacist should have the obligation to be available for patient care and emergencies, the language of this section should be strengthened.

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Kind regards on behalf of the College of Pharmacists of Manitoba,

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And

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