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May 23, 2021

Ontario College of Pharmacists 483 Huron Street Toronto, ON M5R 2R4

Re: Neighbourhood Pharmacy Association of Canada submission on proposed Virtual Care Policy

To whom it may concern,

The Neighbourhood Pharmacy Association of Canada (Neighbourhood Pharmacies) appreciates this opportunity to respond to the proposed Virtual Care Policy that will clarify the responsibilities of pharmacists providing care using virtual technologies.

Neighbourhood Pharmacies represents Canada's leading pharmacy organizations, including chain, banner, long-term care, specialty pharmacies, grocery chains, and mass merchandisers with pharmacies. We advocate for pharmacies' role in caring for Canadians, both behind and in front of the counter. We aim to advance sustainable healthcare for all stakeholders by leveraging close to 11,000 pharmacies conveniently located in virtually every community throughout the country – and over 4,500 community locations in Ontario.

Proposed Policies and Recommendations

While virtual care is different from a technological perspective, it is the same as face-to-face care in many aspects. For this reason, we urge the College to avoid making the policy more complicated than necessary and to limit the proposed policy to those aspects of virtual care which are truly unique. Likewise, the use of the telephone has been a part of pharmacy practice for many, many years and policies already exist which cover this long-standing practice. The proposed policy strikes a good balance in recognizing the aspects of virtual care which are new and the current standards which govern pharmaceutical care.

The current policy is silent on the subject of technology platforms for the provision of virtual care, allowing pharmacists and pharmacies the flexibility to select technology that best meet the needs of patients and their practice. We urge the College to maintain this feature of the policy throughout the consultation and drafting process.

The type of technology employed will be a key criteria for determining the appropriateness of providing virtual care. Therefore, we recommend the additional phrase (in italics) to the language of the policy. "Registrants must determine whether virtual care *and the manner in which it is delivered (e.g., videoconferencing, email, etc.)* is a suitable method of care delivery for the patient interaction...".

As part of the Cross-Jurisdictional Policy, the pharmacist is required to confirm the patient's location. Naturally, this would also apply in the case of Virtual Care. For greater clarity, we recommend that the virtual care policy stipulate that the pharmacist must confirm the identity and location of the patient. The policy should allow the pharmacist to use reasonable discretion when confirming the identity of the patient. In many cases there will already be an established relationship between the patient and pharmacist, and the technology may support easy visual recognition.

We note that the proposed policy states that "...informed consent is received <u>explicitly</u> from the patient...", whereas the *Personal Health Information Protection Act, 2004* (PHIPA) uses the word "expressly". We suggest that the College use the same language as PHIPA to describe the same concept.

Conclusion

Neighbourhood Pharmacy Association of Canada is generally supportive of the proposed policy, however, we recommend three minor changes to provide greater clarity. Registrants should consider the technology employed when determining the appropriateness of virtual care. The policy should clarify that the registrant may use "reasonable discretion" when confirming the identity of the patient and that the policy use language consistent with the *Personal Health Information Protection Act* when describing consent.

Please do not hesitate to contact me at <u>shanna@neighbourhoodpharmacies.ca</u> should you have any questions, comments, or concerns.

Thank you,

Sandra Hanna, RPh Chief Executive Officer Neighbourhood Pharmacy Association of Canada