College to inspect hospital pharmacies

On July 22, 2014 the government of Ontario reintroduced legislation that, if passed, will give the Ontario College of Pharmacists the authority to license and inspect hospital pharmacies throughout Ontario.

These changes will allow the College to conduct regular inspections of hospital pharmacies to ensure they meet practice standards and legislation — consistent with the College's current oversight of community pharmacies and drug preparation premises (DPPs).

The proposed Safeguarding
Health Care Integrity Act (Bill 21)
provides the College with the authority to license
and inspect pharmacies within public and private
hospitals, in the same manner it currently licenses and
inspects community pharmacies. It also provides the
College with the ability to:

- Enforce licensing requirements with regard to hospital pharmacies
- Make regulations to establish the requirements and standards for licensing, operation and inspection of hospital pharmacies
- Extend the College's oversight to other institutional pharmacy locations in the future, as appropriate



The College is currently working on regulations to support the Safeguarding Health Care Integrity Act (Bill 21), which outline the specifics for the inspection of hospital pharmacies. The draft regulations will be circulated for stakeholder consultation and then approved by College Council before submission to government.

As another step toward preparing for the expanded authority to inspect hospital pharmacies, the College has drafted an initial version of the hospital pharmacy inspection criteria. The criteria was developed with input from practicing hospital pharmacists and pharmacy technicians and will be used in pilot inspections over the coming months. It is divided into three main categories:

- 1. Standards currently mandated by legislation
- 2. Emerging standards
- 3. Organizational/collaborative standards.

The pilot inspections — which have already begun — allow the College to gather feedback and continue to evolve the criteria to fit hospital practice.

The College's hospital practice advisors are planning to visit all of Ontario's hospital pharmacy sites by the end of 2015. The first visit will be a baseline assessment and will take approximately one day. A pre-assessment package will be sent to the hospital pharmacy ahead of the visit and some materials must be completed and returned to the College prior to the assessment. College practice advisors will spend the day working with pharmacy staff members, those involved in the medication management system, and the senior team discussing pharmacy processes and procedures, and touring the facility. Should any problems in the pharmacy or medication management system be identified, the practice advisor will work with the team to mentor and coach them on how to rectify the problems as soon as possible.

BACKGROUND

In response to the 2013 incident of alleged chemotherapy under-dosing in four Ontario hospitals and one in New Brunswick, the government commissioned Dr. Jake Thiessen to do an independent review and produce a report — a Review of the Oncology Underdosing Incident — which was released to the public by the Minister of Health and Long-Term Care on August 7, 2013.

The report included 12 recommendations
— subsequently endorsed by government
— intended to prevent future chemotherapy incidents and mitigate identifiable risks. Five of Dr. Thiessen's recommendations look to the College and/or the National Association of Pharmacy Regulatory Authorities (NAPRA) for leadership in implementation.

Dr. Thiessen's recommendation number 12 suggested that the College license all pharmacies operating within Ontario's clinics or hospitals. In response, the government introduced draft legislation that provides the College with the authority to license and inspect hospital pharmacies throughout Ontario.

The draft legislation — *Bill 117: Enhancing Patient Care and Pharmacy Safety Act* — was initially introduced in October 2013 but did not pass before the dissolution of the legislature in the spring of 2014. The legislation was reintroduced without changes in July 2014 as part of the proposed *Safeguarding Health Care Integrity Act* (Bill 21).