

Appendix 2:

Mapping of future opportunities for the profession of pharmacy to an overarching set of principles the profession of pharmacy should strive to achieve

Person-focused

- Explore approaches that emphasize pharmacist understanding of an individual patient's experience with medication, including positive and negative effects in order to help pharmacists work with patients to weigh risks and benefits and identify steps to increase benefit while minimizing risk.
- Support approaches that encourage a focus on those with multi-morbidity or complex polypharmacy. For example, the frail elderly with an increased need for managing complex medication regimens, including facilitating decision-making regarding when to lower doses or stop medications that may be causing more harm than benefit.
- Support activities that encourage the use of electronic pharmacy records, including records pertaining to medication use and health information such as patient signs, symptoms, vaccine history and laboratory data to help pharmacists and patients have the information needed to better manage their medications.
- Improve how pharmacists and pharmacy technicians promote health promotion. For example, vaccinations, including a focus on vaccine hesitancy to improve the uptake of vaccinations.
- Improve the provision of holistic care by linking clinical encounters, services, and activities for each individual patient (i.e., a preventative health group of activities, follow-up activities) so that care is organized, proactive, planned and followed up in a manner that is understood by the patient, can be better tailored to patient needs and can prevent or minimize drug therapy problems.

Effective

- Improve how evidence is used to inform practice and policy decisions.
- Explore opportunities to incorporate quality improvement activities or programs within the pharmacy setting, including the use of quality improvement plans within pharmacy.
- Improve the documentation of pharmacist prescribing and consultation/recommendations activities so that this can be used to evaluate the impact of pharmacist activities on health outcomes for Canadians and to facilitate knowledge sharing among health care providers.
- Explore opportunities for the enhancement of the pharmacist's scope of practice, including opportunities or mechanisms for pharmacists who wish to operate a non-traditional, non-product-oriented pharmacy to focus on specific patient care needs (e.g., medications reviews for people living with complex health needs, or opioid assessment, initiation, dose titration, and discontinuation) to stimulate new types and levels of care delivery.
- Develop professional competencies and further certification pertaining to the educational mandate of pharmacists for chronic diseases and other complex pharmacotherapy needs to better prepare pharmacists to deliver a higher level of care, recognizing that there is a debate on how to best enact pharmacist designations as advanced or specialist practitioners.

Safe

- Explore the development of an updated definition of a prescription to ensure vital information such as the reason for use, patient's goals and patient's targets and relevant lab tests (i.e., liver, renal function) are communicated where appropriate to improve everyone's understanding of what benefits and harms are expected when using a medication.
- Develop approaches that can encourage pharmacist access to, use of and safe stewardship of patient health information, including lab values.
- Develop training in specific pharmacotherapy situations, such as deprescribing or opioid management, and explore mechanisms to confirm training is completed.
- Explore opportunities for quality improvement within pharmacies to encourage more complete reporting progress on medication management indicators, improve drug safety, and reduce drug dispensing errors and harm from medications.
- Encourage development within Electronic Medical Records of the design of a "reason to prescribe / reason for use" field on EMR forms for physicians and pharmacists (i.e., to list multiple uses for one medication) and explore how to incorporate a "reason to prescribe / reason for use" field within a prescription to improve everyone's understanding of why someone is taking a medication.
- Support approaches that encourage pharmacists to assume stewardship responsibilities, such as management of biologics, antimicrobials, or opioids, to foster safe use of medications for individual patients and groups of patients.
- Support approaches that encourage pharmacists to conduct alcohol screening, deliver brief interventions and provide expertise on alcohol use disorder pharmacotherapy, such as recommending use where indicated and monitoring outcomes to reduce harm from alcohol.
- Support approaches that address how pharmacists can consider the effect of medical cannabis products within medication management activities.
- Support the inclusion of deprescribing concepts and content into quality improvement activities to improve the culture and application of deprescribing in practice.

Comprehensive/Complete

- Explore the opportunity for pharmacists to prescribe or encourage best use of medication for common ailments to improve access and health benefits in treating common ailments.
- Explore expansion of prescribing to include a specific independent prescriber designation for a greater number/types of medications to increase the opportunity for patients to receive optimal medications to improve health.
- Explore the development of a pharmacy accreditation model focused on ensuring pharmacies have processes in place to provide clinically focused chronic disease prevention and management. This may include processes for routine clinically focused communication with other health care providers, routine triage and referral, routine follow up and monitoring, routine provision of self-management education, clinically oriented documentation in a sharable format, regular patient and community engagement/ input into pharmacist services and other critical processes and activities needed. This type of model would promote internal pharmacy reorganization and better external relationships with patients and other health care providers.
- Explore how the infrastructure, training, evidence and experience of influenza vaccination influenced the ability of pharmacists to administer other vaccines and consider improvements and expansion to other vaccines nationwide.
- Support approaches that ensure medication reviews or other comprehensive care services include an assessment of health promotion/prevention needs, including immunization particularly for high risk or vulnerable populations to increase the uptake of health promotion/prevention in those populations.
- Support pharmacy management system vendors to develop documentation features that align with workflow, meet current standards of practice, and provide a comprehensive patient record to help improve the effectiveness and efficiency of pharmacist delivery of care.
- Explore how the role of pharmacy technicians can be enhanced to support medication management and health promotion activities such as identifying and approaching patients to interact with the pharmacist using standardized protocols, ensuring standardized data collection, preparing clinical documents, conducting portions of medication reconciliations and other training activities.
- Support approaches that encourage pharmacists to increase their focus on optimal management of high-risk medications (e.g., deprescribing opioids, antipsychotics, benzodiazepines, anticoagulants, insulin) by taking responsibility in monitoring, referring, managing, tapering regimens, including prescribing (adapting) to increase the benefit and reduce harms from these medications.

Longitudinal

- Encourage approaches that incorporate full scope activities into longitudinal proactive care (versus reactive care), such as recognizing when a patient's goals or targets change or when medications are having exaggerated effects due to the body's aging processes, to ensure a patient's goals, risks and needs are addressed at every stage of life.
- Develop and support approaches that focus on monitoring and follow-up activities for patients after an initial assessment is completed to ensure care can be altered or tailored based on response to taking a medication for the first time or to any medication changes that have occurred.
- Support approaches that ensure medication reviews are documented, including reason for use of a medication and made available to pharmacists, prescribers, and health care providers in order to ensure the patient/family and all members of the health care team have complete medication information and medication care plans.

Collaborative

- Develop approaches for development and documentation of care plans that are shared with other health care team members (and co-developed where relevant).
- Support opportunities to improve pharmacy health policy and practices related to use and sharing of electronic pharmacy records with other health care providers.
- Support activities that promote teamwork between pharmacists and technicians within the pharmacy.
- Encourage development of eHealth technology that is integrated with health care delivery systems.
- Support approaches that encourage intraprofessional collaboration for pharmacists across sites such as community pharmacies, family health teams, or hospitals to improve communication between patients and multiple pharmacists.

Equitable

- Support initiatives that encourage pharmacists to be able to administer immunizations to people without a provincial health insurance card; young children; and outside of community pharmacies, including residents of retirement homes or during medication review visits at home.
- Support approaches that encourage medication review activities for vulnerable patient groups.
- Support approaches that encourage the inclusion of pharmacy technicians within quality efforts.
- Support approaches to encourage pharmacists to reduce mental health and addictions related stigma, to conduct substance use screening, including alcohol, illicit drugs, and cannabis, to deliver brief interventions, and to provide expertise on substance use disorder pharmacotherapies, particularly for opioids and alcohol, by recommending use where indicated and monitoring outcomes.

Accessible

- Improve public awareness of the circumstances in which pharmacists can prescribe safely and effectively and for pharmacist-administered vaccines.
- Explore the role of the pharmacy technician in contributing to information gathering and screening, the delivery of medication reviews, influenza vaccinations, opioid management activities, and other specific roles to assist pharmacists with technical tasks.
- Improve and expand the reach of smoking cessation services.
- Explore opportunities for more pharmacies to be sites for naloxone distribution and expanding the scope of pharmacist prescribing for opioid agonist treatment (e.g., buprenorphine, methadone) for opioid use disorder, particularly in certain circumstances (i.e., improving rapid access); simultaneously supporting policies and approaches to expand access to opioid agonist treatment.
- Explore approaches to incorporate deprescribing activities within everyday pharmacy practice to identify ways for prescriptions to be adapted to taper or stop at risk medications where harm clearly outweighs benefit.
- Explore opportunities to improve the physical layout of the pharmacy to support the patient and pharmacy staff role's in medication management activities, such as the space and workflow requirements.

Integrated

- Support approaches that encourage sharing of electronic pharmacy records, including records pertaining to medication use and health information such as patient signs, symptoms, and laboratory data with patients and other health care providers/organizations.
- Improve linkages between pharmacists and the Patient's Medical Home as part of an integrated care system.
- Explore the development of a pharmacy accreditation model focused on ensuring pharmacies have processes in place to provide clinically focused chronic disease prevention and management. This may include processes for routine clinically focused communication with other health care providers, routine triage and referral, routine follow up and monitoring, routine provision of self-management education, clinically oriented documentation in a sharable format, regular patient and community engagement/ input into pharmacist services and other critical processes and activities needed. This type of model would promote internal pharmacy reorganization and better external relationships with patients and other health care providers. (note: also listed in comprehensive/ complete section above; it is repeated because it is an important opportunity to consider and is related to both principles).
- Support development of documentation guidelines about what to provide to other health care providers for each pharmacy-based consultation, including individualized recommendations regarding modifications, care plan, and transmittal via e-health technologies.
- Support approaches that improve pharmacist access to and ability to interpret relevant data in order to provide optimal medication management.
- Support activities that promote teamwork between pharmacists and technicians within the pharmacy.

+ Not disease oriented⁷⁰

* Comprehensive as it relates to drug therapy

** Some future opportunities are repeated as they relate to more than one professional goal

Appendix to: Dolovich L, et al. Pharmacy in the 21st century: enhancing the impact of the profession of pharmacy on people's lives in the context of health care trends, evidence and policies. *Can Pharm J* (Ott) 2019;152(1). DOI: 10.1177/1715163518815717.