



# Nova Scotia Prescription Monitoring Program

Annual Report 2019-2020

**Prescription Monitoring Program**  
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### History and Background

The Prescription Monitoring Association of Nova Scotia (PMANS) was incorporated in October 1991. In January 1992, the PMANS began operating a prescription monitoring program to monitor the prescribing and dispensing of specific narcotic and controlled drugs in Nova Scotia with the objective of curbing the overuse, misuse and diversion of these substances. Policy guidelines were established to give the program the ability to monitor specific narcotic and controlled drugs through the use of a triplicate prescription pad. Pharmacists were required through legislation to dispense these drugs only when prescribed on a triplicate prescription pad.

Although PMANS was a voluntary association, it played a vital role in identifying the need to establish a legislative framework to support the operations of a prescription monitoring program. Consequently, *The Prescription Monitoring Act* was approved in October 2004 and subsequently proclaimed along with the Prescription Monitoring Regulations in June 2005. A Prescription Monitoring Board was appointed with the legislated mandate to establish and operate a prescription monitoring program for Nova Scotia. The Administrator of the Program is Medavie Blue Cross (MBC).

The objects of the Nova Scotia Prescription Monitoring Program (NSPMP) are to promote:

- The appropriate use of monitored drugs; and
- The reduction of abuse or misuse of monitored drugs.

In conjunction with the new legislation, the Administrator implemented an on-line system to receive prescription information for the specified list of monitored drugs. This information had historically been compiled utilizing the part of the triplicate prescription pad pharmacies were required to send to the Program. By the end of 2007, all community pharmacies were submitting this information via the on-line system.

In 2012, the NSPMP launched an online application (eAccess) that enabled prescribers and pharmacists to access program data 24/7. The portal allows prescribers and pharmacists to quickly access the most recent 18 months of NSPMP patient prescribing history prior to prescribing and dispensing monitored drugs.

In 2016, NSPMP fully integrated with the provincial Drug Information System (DIS) to transmit monitored drug claim information directly to NSPMP via multiple daily extracts. Once the extract is received, the monitored drug claims information is uploaded to the NSPMP database and to eAccess.

The NSPMP has continued to evolve and advance the program operation within its mandate. There has been expansion of monitoring activities in 2018 to integrate benzodiazepines into its collection of prescription dispensing data. Work continues on the operationalization of the monitoring activities of benzodiazepines, as well as, a continued focus on opioid usage in the province.

### Overview of Current Strategic Priorities (2017-2020)

Building on its core functions (data collection, case identification and information sharing), the NSPMP will focus on improving efforts through a phased approach to achieve the current established strategic priorities:

- Effective Monitoring of Benzodiazepines
  - The NSPMP will develop and implement approaches to target cases of inappropriate prescribing of benzodiazepines, either alone or in combination with other monitored drugs.
- Improving the First Prescription
  - The NSPMP will develop interventions focused on the initiation of opioid therapy.
- Governance
  - Working with the NSPMP Board, Medavie Blue Cross, and the Nova Scotia Department of Health and Wellness, the NSPMP will develop an approach to planning and resourcing its work going forward.

### Phased Approach Overview

#### **Phase 1 (Preliminary Planning for Program Expansion):**

This phase is complete and focused on informing and developing the capacity to take on the prescription monitoring of benzodiazepines in an effective manner. Service adjustments were completed and expert review activities were completed which informed the recommendations for benzodiazepine and opioid intervention activities.

#### **Phase 2 (Assessment and Implementation):**

Requirements gathering activities and a systems analysis have been completed, based on the expert review and recommended intervention strategies. Work is in progress to configure the database to deliver reports for operational response with thresholds for case identification being evidence based and expert informed. Work will continue toward implementation of the new patient based and practice based intervention strategies.

### **Phase 3 (Final Reporting and Systems Rollout):**

Enhanced mechanisms for data analysis, trending and reporting will be completed, in addition to, key indicators for measuring program impact and evaluation processes for newly developed intervention activities.

### **Governance:**

A governance review is ongoing and the Administrator, Board, and Department of Health and Wellness are working toward the most effective approach going forward. This document provides an overview of the activities that have occurred during the 2019-2020 fiscal period in terms of strategic goals, operational activity and financial reporting.

## NSPMP Board Membership

**Dr. Gus Grant, Chair**

Registrar, College of Physicians and Surgeons of Nova Scotia

**Dr. Marco Chiarot, Vice Chair**

Oral and Maxillofacial Surgeon, Citadel Oral & Facial Surgery

**Ms. Sue Smith**

Registrar & CEO, Nova Scotia College of Nursing

**Ms. Beverley Zwicker**

Registrar, Nova Scotia College of Pharmacists

**Dr. Martin Gillis**

Registrar, Provincial Dental Board of Nova Scotia

**Dr. Zachary Fraser**

Family Physician, Woodlawn Medical Clinic

**Dr. Lynn Miller**

Strategy Policy Consultant, Nova Scotia College of Nursing

**Dr. Robert Strang**

Chief Medical Officer of Health, Department of Health and Wellness

**Dr. Judith Fisher**

Manager, Drug Technology Assessment Pharmaceutical Services & Extended Health Benefits, Department of Health and Wellness

**Mr. Ronald Surette**

Public Member

## Strategic Outcomes

The following chart provides an update of the status of the goals for 2019-2020:

Area	Year Outcomes (2019-20)	Status			Comments
		Complete	In Progress	Outstanding	
<b>Governance Review</b>	<ul style="list-style-type: none"> <li>• Complete a governance review to inform best practice.</li> <li>• Evaluate and recommend a Governance Model.</li> </ul>	<b>X</b>	<b>X</b>		<p>A governance review is ongoing.</p> <p>Discussions are in progress with the Administrator, DHW and Board of Directors toward the most effective approach.</p>
<b>Financial</b>	<ul style="list-style-type: none"> <li>• On an ongoing basis, the Board will provide input regarding current program resources and make recommendations regarding any potential adjustments</li> </ul>	<b>X</b>			Board provided and continues to provide input into areas impacted by access to resources.

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<b>Business Process Excellence</b>	<ul style="list-style-type: none"> <li>• Complete a data analysis of NS Prescriber practices for monitored drugs, including benzodiazepines</li> </ul>	<b>X</b>			<p>Data analysis was completed and presented to the Board of Directors in June, 2019.</p>
	<ul style="list-style-type: none"> <li>• Complete an environmental scan regarding support of safe prescribing of opioids and benzodiazepines</li> </ul>	<b>X</b>			<p>A literature review was completed and presented to the Board of Directors in October, 2019.</p>
	<ul style="list-style-type: none"> <li>• Complete strategic plan recommendations to address program evolution, including how to incorporate Benzodiazepine monitoring and first prescriptions for acute pain.</li> </ul>	<b>X</b>			<p>Recommendations paper was completed and presented to the Board of Directors in October, 2019.</p>
	<ul style="list-style-type: none"> <li>• Letter to Regulatory Colleges requesting adoption of a standard regarding opioid initiation in acute pain</li> </ul>	<b>X</b>			<p>Letters sent to prescribing Colleges and NSCP in January, 2020.</p>
	<ul style="list-style-type: none"> <li>• Consult with the Board on the value of further stakeholder consultations via survey</li> </ul>	<b>X</b>			<p>Consultation determined that the literature review and data analysis were sufficient to inform the Strategic Plan. Annual stakeholder surveys will resume at a later time.</p>



	<ul style="list-style-type: none"> <li>Complete an analysis and subsequent project plan to assess, develop, build and implement technology solutions for reporting, systems upgrades to support the new reporting and intervention strategies. Submit to DHW for approval.</li> </ul>	X			Project plan was submitted to DHW and approved, March 25, 2020.
<b>Programs and Services</b>	<ul style="list-style-type: none"> <li>Advocate and facilitate support for education and research that meets the objects of the Program and/or measure its effectiveness.</li> </ul>	X			Ongoing support continues to be provided based on stakeholder requests. Requests have been received from Dalhousie, CPSNS and others.
<b>Human Resources and Infrastructure</b>	<ul style="list-style-type: none"> <li>On an ongoing basis, the Board will provide input regarding current program resources and make recommendations regarding any potential adjustments</li> </ul>	X			Board provided and continues to provide input into areas impacted by access to resources (i.e. Pharmacist Consultant)
<b>Stakeholder Relations</b>	<ul style="list-style-type: none"> <li>Align communications with current programming priorities (i.e. Benzodiazepine Monitoring, First Prescription)</li> </ul>		X		Key messages regarding best practice are being integrated into presentations, resource information and the development of new Prescriber Profile Packages.

### Comments on the Status of the Third Year of the Strategic Plan

From 2019-2020, the NSPMP has continued to move forward in advancing work via expert review and data analysis toward best practice monitoring of opioids and benzodiazepines (including the first prescription), in addition to, completing some evaluation of the Board Governance Structure. The following summarizes key programming outcomes in 2019-20 that have informed the development of the 2021 Business Plan.

#### **Benzodiazepine Monitoring and First Prescription**

To support the planned expansion of monitoring activities to include benzodiazepines, expert and other reviews were conducted, to validate the current practice landscape and develop meaningful performance metrics to support the new strategic priorities.

The expert review sessions involved engagement with health professionals and their input on best practice approaches for prescribing opioids/benzodiazepines, first prescription and Program engagement.

These results were considered, in conjunction with a literature review, NSPMP data analysis, peer-reviewed literature, standards issued by provincial regulatory bodies, provincial drug formularies, and prescribing guidelines, to produce a Strategic Plan Recommendations report.

The Strategic Plan Recommendations report contained recommendations addressing legislation, regulation and standards, education initiatives, as well as, multi-pronged initiatives. These recommendations were received and supported by the Board.

Letters of request to adapt/support a standard on initiation of opioid therapy in acute pain were sent to the prescribing Colleges and to the Nova Scotia College of Pharmacists (NSCP). NSCP responded in support and will work collaboratively with the College of Physicians and Surgeons of Nova Scotia.

#### **Practice Review Committee (PRC)**

In 2018, case referrals were put on hold while work shifted to focus on revising the processes in preparation for case volume increases with expanding monitoring activities relating to the incorporation of benzodiazepines. The NSPMP staff worked proactively to make changes to the case preparation/summary templates and nine cases have been reviewed since June, 2019. To support ongoing work, the committee also provided feedback regarding enhancements made to the Prescriber Reports that will support the new Prescriber Risk Tool and subsequent practice reviews.

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### Monitoring & Reporting Activities

#### Annual Program Activity:

Overall Program activities compared to the previous fiscal years outlined below.

Item	2016/17	2017/18	2018/19	2019/20
Patient Profiles – Internally Generated <sup>1</sup>	1167	993	225	136
Patient Profiles – eAccess Generated	39,256	28,968	23, 913	23, 057
Requests for Prescriber Profiles	65	33	29	16
Requests for Pharmacy Profiles	0	0	0	0
Referrals to Medical Consultant	200	182	149	79
Referrals to Pharmacist Consultant <sup>2</sup>	n/a	n/a	63	94
Referrals to Practice Review Committee	19	28	0	9
Referrals to Licensing Authorities	16	9	7	4
Multiple Prescriber Notifications <sup>3</sup>	1317	1123	130	3
Drug Utilization Review Inquiries	237	76	105	75
Referrals to Law Enforcement	1	0	1	0
Requests for Patient Profiles by Law Enforcement	183	79	35	33
Notification of Charges	30	30	16	3

**Notes:** 1. Generation of Patient Profiles decreased with discontinuation of some reports.

2. The NSPMP Pharmacist Consultant role was introduced on Oct 17, 2018.

3. Multiple Prescriber Notifications were discontinued July, 2018. Supporting information for prescribers remains available on eAccess.

### **Activity Summary:**

NSPMP advanced its monitoring activities in 2019-20 to prepare for and begin the active monitoring of benzodiazepines and concurrent benzodiazepine and opioid prescribing. NSPMP had the addition of a Pharmacist Consultant to aid with case review and to provide added support for prescribers and pharmacists. Workflow processes are being reviewed to ensure efficiency of monitoring activities involving the Pharmacist and Medical Consultants.

There were fifty-five initial benzodiazepine drug utilization case reviews completed. Reviews focused on patient and public safety and risk mitigation strategies.

Drug Utilization Reviews of all drugs classes continued to be conducted regularly, with 75 cases identified that exceeded Program thresholds.

The Practice Review Committee reviewed nine new cases. One case was referred to the College of Physicians and Surgeons of Nova Scotia, two cases are in progress and six cases were closed.

Usage of the eAccess portal by prescribers to review patient drug profiles prior to prescribing monitored drugs has remained steady over the past two years. This signals prescribers remain vigilant and use available practice tools when making decisions on prescribing medications for their patients.

Law Enforcement requests remain steady; however, there has been a decline in recent years as a result of the need for reasonable grounds to be demonstrated. Program staff continues to work with police to educate on a case by case basis. The Program remains willing and able to support local law enforcement.

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### Data Reporting & Releases:

During 2019-20 the NSPMP processed the following information requests:

Requested By	Information Request
College of Physicians and Surgeons of Nova Scotia (CPSNS), Director of Communications and Policy	Data for CPSNS 2019 Annual Report - general opioid prescribing trends, number of HCN's with a first opioid prescription, number of patients receiving methadone or buprenorphine/naloxone, 2017-2019.
Dalhousie University	Summary data for patients who received concurrent opioid and benzodiazepine prescriptions, by age range, 2017-2019.
Dalhousie University	Summary of products included in research study, with indication of immediate release vs. controlled release.
Department of Health & Wellness	Summary data for opioid prescriptions dispensed by filled date quarter.
Department of Health & Wellness	Summary data for opioid prescribing by dentists and oral surgeons, 2017-2019.
Department of Health & Wellness	Summary data for opioids, stimulants, and benzodiazepines dispensed.
Department of Health & Wellness	Summary of opioids dispensed by fiscal year and DIN, 2007/08-2018/19. Summary of opioids dispensed by fiscal year, 2007/08-2018/19.

### Media Inquiries:

During 2019-20 the NSPMP received the following media requests:

Requested By	Information Requests
Nancy King/Cape Breton Post	Dispensing volumes for Hydromorphone, Oxycodone, Methadone & Buprenorphine, by Pharmacy County (2016 to 2018).
The Coast	Summary data for methadone and buprenorphine/naloxone utilization (2015-2019).

## Community Involvement & Education

The following is a summary of community and provincial initiatives in which NSPMP staff members were involved:

### Drug Evaluation Alliance of Nova Scotia (DEANS):

The Manager and Pharmacist Consultant of the NSPMP are members of the DEANS Management Committee. The focus of which is to contribute to the health of Nova Scotians by encouraging appropriate drug use.

### General Program Overview Presentations:

Date	Group Name	Number of Participants
Apr 2019	Yukon Government	10
Dec 2019	DEANS Meeting	12

**Note: Two presentation requests from CPSNS and Dalhousie School of Pharmacy in Q4 were impacted by COVID-19.**

## Program Financial Summary

The NSPMP fiscal year results are noted in the table below.

NSPMP Cost Area	Projections 2019/20 (\$)	Actual 2019/20 (\$)	Variance (\$)
Fixed Fees	708,240	708,240	-
Variable Fees	71,045	64,501	6,544.31
Flow Through (line charges)	-	-	-
Flow Through (Board and Committee Expenses)	14,000	8,524	5,476.01
<b>Total</b>	<b>793,285</b>	<b>781,265</b>	<b>12,020.32</b>