



# Nova Scotia Prescription Monitoring Program

Annual Report 2021-2022

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

The Nova Scotia Prescription Monitoring Program (NSPMP) was established in June 2005, following the proclamation of the Prescription Monitoring Act (approved in October 2004) along with the Prescription Monitoring Regulations. The legislation established a Prescription Monitoring Board to develop and operate the Program, which is currently administered by 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

Preliminary work focused on the implementation of an on-line system to receive prescription information for a specified list of monitored drugs. By the end of 2007, all community pharmacies were submitting this information via the on-line system.

In April 2012, NSPMP launched eAccess, a key program development, in response to stakeholder requirements. An online portal for prescribers and dispensers of monitored drugs, eAccess permitted access to patient monitored drug dispense information during off-peak hours.

The program's work and relationship with law enforcement has continued to be an important aspect of the NSPMP's operation including supporting patient profile requests, information sharing, and notification of charges.

The NSPMP has continued to evolve and progress the program operation within its mandate. There was an expansion of monitoring activities in 2018 to integrate benzodiazepines into its collection of prescription dispensing data. There has also been development of monitoring activities on benzodiazepines, first prescription, drugs in combination, and a continued focus on opioid usage in the province. New drug utilization reviews have been launched, and work is ongoing with prescribers through the prescriber risk scoring and practice reviews.

### Current Strategic Priorities

Building on its core functions (data collection, case identification and information sharing), the NSPMP has focused efforts toward achieving their ongoing strategic priorities:

- Effective Monitoring of Tramadol
- Improving the First Prescription
- Governance

## NSPMP Board Membership

**Ms. Beverley Zwicker, Chair**

CEO and Registrar, Nova Scotia College of Pharmacists

**Ms. Sue Smith, Vice-Chair**

CEO and Registrar, Nova Scotia College of Nursing

**Dr. Doug Mackey**

Registrar, Provincial Dental Board of Nova Scotia

**Dr. Gus Grant**

Registrar, College of Physicians and Surgeons of Nova Scotia

**Mr. Doug Bungay**

Nova Scotia College of Nursing

**Dr. James Brady**

Provincial Dental Board of Nova Scotia

**Dr. Robert Strang**

Chief Medical Officer of Health, Department of Health and Wellness

**Dr. Samuel Hickcox**

Chief of the Office of Addictions and Mental Health

**Mr. Thomas Veinot**

Nova Scotia College of Pharmacists

**Dr. Zachary Fraser**

College of Physicians and Surgeons of Nova Scotia

**Mr. Ronald Surette**

Public Member

**Ms. Sharon Johnson-Legere**

Public Member

## Strategic Outcomes

The following chart provides the status of the goals for 2021-2022:

Area	Year Outcomes (2021-2022)	Status			Comments
		Complete	In Progress	Outstanding	
Governance Review and Transition to Advisory	<ul style="list-style-type: none"> <li>Evaluation of the governance review and recommendations put forward to DHW.</li> </ul>	X			<ul style="list-style-type: none"> <li>Changes to Board operations to Advisory have been recommended and put forth into Legislation</li> </ul>
	<ul style="list-style-type: none"> <li>Work with DHW to scope changes/processes to transition.</li> </ul>	X			<ul style="list-style-type: none"> <li>Discussions are in progress with the Administrator, DHW and Board of Directors – legislation has been revised and the Board has begun transitioning to Advisory activities</li> </ul>
	<ul style="list-style-type: none"> <li>Continue discussions on a new strategic planning cycle</li> </ul>		X		<ul style="list-style-type: none"> <li>Decision was made to source a Facilitator for Strategic Planning session for Summer 2022</li> </ul>
Financial	<ul style="list-style-type: none"> <li>On an ongoing basis, the Board will be provided overview of program financials for transparency and visibility</li> </ul>	X			<ul style="list-style-type: none"> <li>With the shift of the Board from Governance to Advisory, the Board will continue to receive financial updates for visibility into financial operations of the Program</li> </ul>

<b>Data Integrity/ Infrastructure</b>	<ul style="list-style-type: none"> <li>Collaborate with the Drug Information System to ensure the NSPMP receives prescription data that is accurate, timely and effectively integrated into the NSPMP System</li> </ul>	X			<ul style="list-style-type: none"> <li>NSPMP met and continues to meet regularly with the DIS to discuss and resolve issues related to data integrity.</li> </ul>
	<ul style="list-style-type: none"> <li>Introduction of the monitoring of Tramadol to take effect March 31, 2022</li> </ul>	X			<ul style="list-style-type: none"> <li>Regular meetings held with DIS for implementation. Tramadol effectively added to monitoring systems and dispenses flowing correctly.</li> </ul>
<b>Data Analysis</b>	<ul style="list-style-type: none"> <li>Ongoing evaluation of new prescriber risk scoring tool/DURs.</li> </ul>	X			<ul style="list-style-type: none"> <li>A presentation was made to the Board around the process for Drug Utilization Reviews (DURs) and Prescriber Practice Reviews (PPRs).</li> </ul>

<p><b>Information Sharing/ Stakeholder Relations</b></p>	<ul style="list-style-type: none"> <li>• Continue to incorporate best practice key messages on prescribing monitored drugs into communications with prescribers, pharmacists, and stakeholder groups.</li> <li>• Maintain and enhance, where possible, the NSPMP's relationship with law enforcement.</li> <li>• NSPMP invited to present to a variety of external stakeholder groups and educational institutions</li> </ul>	<p><b>X</b></p> <p><b>X</b></p> <p><b>X</b></p>			<ul style="list-style-type: none"> <li>• Reference to key guidelines and practice supports have been outlined in correspondence, presentations and continue to be relayed in day-to-day outreach activities.</li> <li>• NSPMP now official members of newly formed Chief of Police Association Drug Committee.</li> <li>• NSPMP presented to three large external groups in 2021-2022</li> </ul>
<p><b>Brand/ Reputation</b></p>	<ul style="list-style-type: none"> <li>• Maintain and enhance, where possible, the NSPMP relationship with law enforcement.</li> <li>• NSPMP invited to present to a variety of external stakeholder groups and educational institutions.</li> </ul>	<p><b>X</b></p> <p><b>X</b></p>			<ul style="list-style-type: none"> <li>• NSPMP presented to three large external groups in 2021-2022</li> <li>• NSPMP official members of newly formed Chief of Police Association Drug Committee.</li> </ul>

## Monitoring & Reporting Activities

### Annual Program Activity:

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

Item	2018/19	2019/20	2020/21	2021/22
Patient Profiles – Internally Generated <sup>1</sup>	225	136	61	71
Patient Profiles – eAccess Generated	23, 913	23, 057	18, 701	18, 871
Requests for Prescriber Profiles	29	16	16	3
Requests for Pharmacy Profiles	0	0	0	0
Referrals to Medical Consultant	149	79	70	25
Referrals to Pharmacist Consultant <sup>2</sup>	63	94	147	86
Referrals to Practice Review Committee <sup>3</sup>	0	9	16	13
Referrals to Licensing Authorities	7	4	2	0
Multiple Prescriber Notifications <sup>4</sup>	130	3	0	0
Drug Utilization Review Inquiries	105	75	134	188
Referrals to Law Enforcement	1	0	1	0
Requests for Patient Profiles by Law Enforcement	35	33	16	15
Notification of Charges	16	3	3	1

**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. Referrals to PRC are counted as new unique case referrals and excludes counts of previously reported ongoing open cases.
4. Multiple Prescriber Notifications were discontinued July 2018. Supporting information for prescribers remains available on eAccess.



### Activity Summary:

#### Covid-19 Pandemic

To maintain patient access to controlled substances when needed for medical treatments and to enable adherence to public health guidelines, such as self-isolation and social distancing measures, Health Canada issued exemptions under S.56 of the *Controlled Drugs and Substances Act* (CDSA) and its Regulations. These exemptions were to: permit pharmacists to extend prescriptions, permit pharmacists to transfer prescriptions to other pharmacists; and permit prescribers to issue verbal orders (i.e. over the phone) to extend or refill prescriptions. To support these changes, the Board of Directors of the NSPMP passed motions to permit pharmacists as temporary prescribers under the NSPMP, and to permit faxing of monitored drug prescriptions, to support patient and prescriber safety. The NSPMP worked collaboratively with the Drug Information System, Nova Scotia College of Pharmacists and the Department of Health and Wellness to effect the required changes. As Covid-19 and its associated challenges continued into 2021/2022, the Program continued to field questions from prescribers and pharmacists on the exceptions in place and took the following actions to communicate the ongoing support:

- Extended 5 years to facilitate continuity of services while proposed regulatory changes under CDSA are developed
- Effective October 1, 2021 – September 30, 2026
- July 26, 2021, NSPMP sent communication to DIS, authorizing the extension of pharmacists as temporary prescribers, under NSPMP, until September 30, 2026, unless either the CDSA Exemption or the corresponding Board Motion are revoked

The NSPMP continued to see a large increase in out of province registrations compared to last year, directly related to the Covid-19 pandemic and migration to Nova Scotia from other provinces as well as general immigration. The highest volume of registrants was from Ontario, New Brunswick, and Alberta. There was increased staff effort to actively contact and follow up with prescribers, and to support and process the prescriber registrations. At times this was a collaborative effort with local pharmacies.

#### General

In total, there have been 188 Drug Utilization Review and 13 Prescriber Practice Review inquiries. The Medical and Pharmacist Consultants have experienced higher referral volumes as a result.

Usage of the eAccess portal by prescribers to review patient drug profiles has increased slightly compared to last year yet is still lower when compared to 2019/2020. With linkage to the DIS available for a complete patient profile review, it is not unexpected that a reduction in eAccess use be noted. The NSPMP has continued to promote the value of patient history reviews prior to dispensing monitored drugs.

Interaction with Law Enforcement has remained an important element of the NSPMP’s work. This is evident in the increase in profile requests and notification of charges received. The NSPMP continues to collaborate on a case-by-case basis and identify potential opportunities to enhance promotion of NSPMP services and ensure awareness of the Program remains high amongst law enforcement. An increase in notification of suspicious behaviour was reported in 2021/2022 which resulted in a need for legal opinion with respect to sharing information. The NSPMP further enhanced its relationship with Law Enforcement by joining the Chief of Police Association Drug Committee.

### General Continued

With respect to Program Governance, 2021/2022 focused on preparing for the shift of the Board from Governance to Advisory. The Board, DHW and the Program Administrator have elected to source a facilitator to assist the group with strategic plan brainstorming. Feedback has been requested from all stakeholders and a statement of work shall be developed Summer 2022.

### Practice Review Committee (PRC)

The committee convened for four meetings. Committee members were provided an orientation to the new prescriber practice review process and risk tool. The committee has reviewed 13 Prescriber Practice Reviews.

### Media Inquiries:

During 2021/2022 the NSPMP did not receive any media requests.

### Data Reporting & Releases:

During 2021/2022 the NSPMP processed the following information requests:

Requested By	Information Request
Maria Wilson, DHW	Opioid Prescriptions Dispensed by Filled Date Quarter – All Opioids excl. Methadone/Buprenorphine, and Methadone/Buprenorphine Only – 2021-Q1 to 2021-Q4  Opioid Prescriptions Dispensed by Filled Date Quarter – Methadone and Buprenorphine separately – 2021-Q1 to 2021-Q4
Judith Fisher, DHW	Dashboard data for DHW - #Patients and #Rxs by Quarter, for opioids, stimulants, and benzodiazepines. NS Patients only. 2021/22-Q3, 2021/22 YTD, and last fiscal year 2020/21

### 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. More information is available on the website.

<http://novascotia.ca/dhw/pharmacare/drug-evaluation-alliance-of-nova-scotia.asp>

#### **General Program Overview Presentations:**

Date	Group Name
March 10, 2022	Dalhousie Nursing Class – Nurse Practitioners
March 24, 2022	Nova Scotia Practice Ready Assessment Program (NSPRAP)
March 29, 2022	Nova Scotia Health Pharmacist Prescribing Group

#### **\*New\* NS Chief of Police Association Drug Committee**

The Manager has been formally invited to join this committee with the first meeting occurring in the Spring of 2022. The mandate of this Committee is as follows:

- "To promote safer and healthier communities through proactive leadership by addressing and influencing prevention, enforcement and treatment of substance abuse".

## Program Financial Summary

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

Cost Area	Projections 2021/22 (\$)	Actual 2021/22 (\$)	Variance (\$)
Fixed Fees	\$ 1,224,475	\$ 1,224,475	\$ (0)
Variable Fees	\$ 2,807	\$ 2,817	\$ (10)
Flow Through	\$ 173,324	\$ 35,335	\$ 137,989
Strategic Plan Fees	\$ -	\$ 63,614	\$ (63,614)
<b>Total</b>	<b>\$ 1,400,606</b>	<b>\$ 1,326,241</b>	<b>\$ 74,365</b>

**Notes:**

- 1 - Fiscal 2021-22 is split year between contracts as the new PMP contract commenced June 1, 2021
- 2 - Variable fees are no longer applicable effective June 1, 2021 in the new PMP contract
- 3 - Strategic Plan fees were completed in April 2021 and incorporated into the base fixed fee for the new contract