Notice from the Executive Officer

November 30, 2011

Additional Clarification Regarding the Narcotics Legislation

The *Narcotics Safety and Awareness Act, 2010* ("Act") and its regulation came into effect on November 1, 2011. In response to requests for further clarification from health care professionals, we have compiled additional questions and answers to facilitate an understanding of the new legislative requirements relating to prescriptions of monitored drugs. Please note that the questions and answers found below are intended to supplement those already available on the ministry's website. To view the complete collection of frequently asked questions, please visit: http://www.health.gov.on.ca/en/pro/programs/drugs/ons/ons_faq.aspx

To learn more about Ontario's Narcotics Strategy, please visit the ministry website at: www.ontario.ca/narcoticsstrategy

General Questions
Is there a consolidated list of drugs that I would be able to review to know which drug will be monitored under the *Narcotics Safety and Awareness Act, 2010*? Yes, the ministry has compiled a list of monitored drugs, including narcotics and controlled drugs and other monitored drugs, in order to facilitate health care providers in identifying these medications. This list is available on the ministry website at: http://www.health.gov.on.ca/en/pro/programs/drugs/ons/docs/list_monitored_drugs_pro.pdf For the authoritative list of controlled substances, it is recommended that health care providers review the drug Schedules I to V under the *Controlled Drugs and Substances Act (Canada)* at: http://laws-lois.justice.gc.ca/eng/acts/C-38.8/index.html
Does the patient identification need to have a picture? Photo identification is not required. For example, the "red and white" health card is an acceptable form of identification.
When I record the health card number, do I need to include the version code on the prescription? No, the version code is not required to be included on the prescription.
What are the requirements for "repeat" authorizations (e.g. the pharmacy faxes or calls the doctor to get a new authorization of a monitored drug that the patient has had in the past)? A "repeat" authorization represents the issuance of a new prescription of a treatment that the patient has previously had and is subject to the same requirements as those for a new prescription. For prescriptions of monitored drugs, the prescriber would need to ensure that all of the following information is recorded on the prescription: • Identification number of the patient and the type of identification used • Registration number on the certificate of registration issued to the prescriber by the

College of which he or she is a member
- Name of the person for whom the monitored drug is prescribed
- Name, strength (where applicable) and quantity of the monitored drug
- Directions for use of the monitored drug
- Name and address of the prescriber
- Date monitored drug is prescribed

Prescribers customarily issue "repeat" authorizations on prescriptions without necessarily seeing the patient at their office on each occasion. Must the prescriber now ask all patients to come in for the sole purpose of reviewing the patient's identification in order to issue a prescription repeat?

No. With respect to patient identification, the legislation requires the prescriber record on a prescription of a monitored drug the patient's identification type and number. The prescriber should exercise his/her professional judgment to determine whether to review and verify the patient's identification prior to issuing a prescription or a repeat authorization.

For pediatric patients, whose information do I need to record on the prescription (i.e., that of the child or the parent)? Do I also need to record the parent's information in order for them to obtain the monitored drug on behalf of the child?

The prescriber is required to record the identification number of the patient; in this specific example, this would be the child's information that would be recorded on the prescription. A prescriber does not need to record the parent's information.

When the prescription is being picked up by the parent from the dispenser, the dispenser is required to comply with the record keeping requirements relating to third-party pick-up of monitored drugs. For more information about third-party pick ups and record-keeping requirements, please refer to the previous Questions and Answers which are available on the ministry website at: http://www.health.gov.on.ca/en/pro/programs/drugs/ons/ons_faq.aspx

Do the new requirements apply to the palliative care setting (e.g. a hospice)?

Yes, the new requirements apply to prescriptions of monitored drugs used for palliative care, unless the patient is an in-patient in a public hospital or a prisoner or inmate as set out in the regulations.

For Prescribers

My hospital/clinic already has a reliable admission/intake process in place to record the patient's health card number. I use the health card number found on the patient's files to write/electronically generate prescriptions. Must I also ask to review and verify each patient's identification information when issuing a prescription for a monitored drug?

The legislation requires the prescriber to record on a prescription of a monitored drug the patient's identification type and number. A prescriber should exercise his/her professional discretion to determine the appropriate course of action with respect to reviewing and verifying a patient's identification.

If a prescriber has both a hospital practice and a private practice, which address should be used for the prescription?

The address used for the prescription should be the work address from which the prescription is issued.

I have omitted to include the patient's identification information and/or my college licence number on the prescription and the pharmacy is calling my hospital/office to get confirmation. Am I obligated to provide confirmation? Is it permissible for my delegate (e.g. nurse, receptionist) to perform this duty?

Yes, this information needs to be provided by the prescriber. The prescriber or delegate may confirm this information to the dispenser verbally.

A new patient of mine is unable to provide any of the approved forms of identification? What steps should I take in this case?

In situations where a patient is unable to present any of the approved forms of identification, an exemption is permitted if the prescriber records on the prescription the reason the patient needs the monitored drug before he or she can obtain the appropriate identification. It is up to the prescriber's professional judgment to determine if the circumstance warrants this exemption.

The prescriber should inform the patient that for the exemption to apply, the patient must personally pick up the monitored drug directly from the dispenser at the pharmacy or receive directly through the pharmacy's delivery service, if applicable. The patient cannot use an agent (e.g., family member, friend, etc.) or a third party mail or courier service (e.g., Fed Ex, Kinkos, Canada Post, etc.) to pick up or deliver the monitored drug.

The dispenser would need to keep a record of the prescription which sets out the reason the patient needs to receive the monitored drug before he or she can obtain the appropriate identification.

I am a physician/dentist and get after-hours calls from patients to get emergency pain medications. Are verbal prescriptions (e.g., for Tylenol #3) still acceptable under the new legislation?

Yes. Verbal prescriptions for monitored drugs may be accepted but are subject to the new information requirements for monitored drugs – such as the patient identifier (e.g. health card) and the prescriber College registration number (e.g. CPSO number) – in addition to the existing legal requirements with respect to verbal prescriptions.

The hospital will sometimes provide several doses of a medication to the patient (e.g. several tablets of Tylenol #3) before discharging the patient. Does this information need to be reported under the *Narcotics Safety and Awareness Act, 2010*??

No. If the medication is provided to the patient while he or she is an in-patient in the hospital, the ministry would considered this situation to be the dispensing of a monitored drug to an in-patient as part of his or her treatment in a hospital; and therefore, the *Narcotics Safety and Awareness Act, 2010* would not apply in this specific case.

For Dispensers

The physician has omitted to include her college licence number and/or the patient's identification information on the prescription, but I have this information already on my pharmacy files. May I transcribe the information onto the prescription to meet the requirements?

No. The legislation requires the prescriber to record on a prescription of a monitored drug his/her college registration number and the patient's identification type and number, among other information required for a prescription, and the dispenser is required to keep a record of this information. In the event that any of the required information is missing, a written, faxed or verbal confirmation must be received from the prescriber or from his/her delegate.

I regularly deliver medications to an elderly patient. The patient resides with her husband. Would I need to ask the delivery driver to verify the identification of the person who receives the prescription monitored drug?

If the person who receives the monitored drug is the patient, and you have the identification information for the patient recorded on file, then there is no requirement for the pharmacy delivery person to verify or record the patient information upon providing the monitored drug to the patient. It is important to note that pharmacies must ensure that deliveries of prescription medications are made in a method that is both traceable and auditable as required under the *Drug and Pharmacies Regulation Act*.

If the person who receives the monitored drug **is not** the patient (e.g. the husband), then the requirements that are set out for an agent under the *Narcotics Safety and Awareness Act, 2010* applies, which includes keeping a record of the name and address of the agent, the form of identification that verifies the name and address of the agent, and the distinguishing number on the identification.

My pharmacy services long-term care homes, retirement homes and/or hospices. As part of the existing delivery process, staff at the home (e.g., the nurse) who receives the medications provides a signature to confirm receipt. What steps should the pharmacy take in order to meet the new documentation requirements with respect to monitored drugs in these cases?

Pharmacies are required to ensure that deliveries of prescription medications are made in a method that is both traceable and auditable as required under the *Drug and Pharmacies Regulation Act*. Because the staff of the home is accepting the monitored drugs on behalf of the residents, additional documentation that will be needed includes: (1) the name of the employee that receives the medication, (2) the address of the place of employment (e.g., the LTC home, retirement home, hospice), and (3) the identification type and number that confirms the receiver is an employee of the facility (e.g. employee identification number, College of Nurses of Ontario licence number, etc.). Pharmacies will need to keep this information on file. This information is collected to ensure transparency and accountability throughout the drug delivery/handling process.

A patient of mine regularly asks a taxi service to pick up medication on her behalf. Do requirements pertaining to monitored drugs received by an agent apply in this circumstance?

Yes. In this case, the patient has designated an agent to pick up her medication; as such, requirements pertaining to monitored drugs received by an agent apply. The dispenser would need to record the

information of the cab driver that picks up the monitored drug on behalf of the patient, assuming that the dispenser has on record the identification information about the patient. If the patient has not provided an identifying number to the dispenser, this method of pick up/delivery is not compliant with the regulations.