



British Columbia
Pharmacy Association

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B.C.'s Pharmacists Continue to fill the Gaps in Health Care

The B.C. Pharmacy Association (BCPhA) represents British Columbia's community pharmacies and pharmacists. In this province, there are more than 4,100 registered community pharmacists working at more than 1,400 community pharmacies in communities large and small across the province.

As we have seen since the pandemic, pharmacists are often the first point of contact for patients needing access to health care. Since the start of the public health emergency on March 17, 2020, when doctors' offices were closed, pharmacies stayed open – with teams building physical barriers, implementing home delivery, and employing other methods to keep people safe – while continuing to deliver care, dispense needed medications, and answering patients' questions.

Since then community pharmacists across the province have worked hard to keep the public safe and worked to ensure no patient went without their medications or an immunization for COVID-19 or influenza.

The BCPhA thanks the Ministry of Health for the work it has done in the past year in helping British Columbians stay safe during the COVID-19 pandemic and influenza season as well as remaining responsive to the primary care crisis the province is facing.

B.C. pharmacists are proud of the work they have done in serving as a key health care provider during the COVID-19 pandemic and onwards.

Growth of Pharmacists filling the gaps since COVID-19

Community pharmacists were uniquely positioned to help the province in deploying the largest mass vaccination campaign in history. Since 2009, B.C.'s community pharmacists have played an increasingly important role in delivering publicly funded vaccinations against influenza, pneumococcal disease, measles, pertussis, and COVID-19.

In spring 2021, B.C.'s community pharmacists began helping with the COVID-19 vaccination campaign, first by quickly mobilizing in less than a week to begin administering the majority of B.C.'s AstraZeneca COVID-19 vaccines. In the past two years, that role has grown to having community pharmacists take on the majority of the province's COVID-19 booster campaign.

In 2022, community pharmacies administered more than 2.5 million COVID-19 vaccinations, including non-mRNA alternatives, and administered more than 1.2 million influenza

vaccinations during the 2022-2023 fall flu campaign, showing that British Columbians continue to have strong confidence in receiving essential vaccinations from pharmacists.

Additionally in 2022, community pharmacies became a convenient location for British Columbians needing rapid-antigen test kits free of charge. Last year, more than 30.1 million COVID-19 test kits were sent to the 1,400 pharmacies participating in B.C.

The province made great strides in creating a centralized provincial immunization system, which made booking appointments easier for the public while increasing vaccination uptake. The system also helped to prioritize high risk groups and centralized vaccination records in one system across different health-care settings, including public health and pharmacies. During the pandemic, pharmacists were quick to sign on and use this new system to support the vaccination campaign.

With the uptake of this system and pharmacists' increasing role in immunizations, pharmacists are well positioned to support the province's cancer strategy which aims to eliminate cervical cancer in B.C. by 2033. To support this, the province plans to increase the uptake of HPV vaccines in the next three years, moving from the current figure of 66 per cent uptake to a national target of 90 per cent vaccination uptake (2 doses or more) before individuals reach the age of 17.

B.C.'s pharmacists can begin by helping those adolescents who have missed their HPV vaccines through the school-based program, or those who feel more comfortable getting their HPV vaccine outside of school. Pharmacies offer a convenient, accessible, and private location for families to bring their school-aged children to receive their HPV vaccine.

Pharmacists are ready and willing to be part of eliminating cervical cancer in the province in the next decade.

Helping in the primary care crisis

B.C. is facing a primary care crisis. More than 1 million British Columbians are without a family doctor, and the shortage of family physicians has been ongoing for nearly 20 years. On Sept. 29, 2022, B.C.'s Minister of Health announced the launch of B.C.'s health human resources strategy, which included optimizing the scope of practice for health-care professionals so they can practice at their fullest scope.

As part of this announcement, pharmacists were given the ability to administer more medications via injection or intranasally and adapt and renew a broader range of medications. This change, which went into effect Oct. 14, 2022, also opened the ability for pharmacists to renew prescriptions for patients taking mental health medications and those with substance

use disorders. It also addressed helping patients without a regular primary care prescriber get access to the medications they need when they need it.

In fact, provincial numbers released earlier this year showed a 120 per cent increase in the number of prescriptions renewed or adapted by B.C. pharmacists since these changes went into effect. According to reports, “nearly 60,000 prescriptions were renewed or modified by pharmacists in January 2023, more than double the monthly average of about 27,200 in the year before the changes.”¹

Additionally, as part of B.C.’s health human resources strategy, B.C. joined nine other provinces in Canada in which pharmacists can prescribe for minor ailments (21 in B.C.) and is just one of four provinces where pharmacists can prescribe for contraception.

On June 1, 2023, when this change went into effect, more than 1,100 of the 1,400 community pharmacies in B.C. offered this service. And on the first day, pharmacists performed nearly 1,000 assessments for minor ailments at 439 community pharmacies across the province,² with the top five conditions being allergies, UTIs, contraception, dermatitis, and pink eye.³

These assessments were easily handled by pharmacists, taking these individuals out of backlogged emergency departments and urgent primary care centres, allowing staff to focus on more urgent and critical cases.

As health-care systems struggle across the country, there are more ways that B.C. can continue to build on the success of pharmacist prescribing and adaptations.

While prescription adaptations and renewals have increased, uptake of these services could be even greater with the ability for pharmacists to order lab tests. Doing so provides important clinical information for pharmacists to safely ensure patients who don’t have a primary care prescriber can get important renewals of their chronic medications for up to two years, as authorized by the recent prescription changes supported by the Ministry.

For example, a patient with hypothyroidism, who has been historically stable on levothyroxine, needs a renewal of their medication, but may not have had a lab test of their thyroid stimulating hormone (TSH) to ensure their medication is at the appropriate dosage. A patient may not have had this test done because they do not have a primary care provider. While B.C. pharmacists have access to lab tests through CareConnect, they do not have the ability to order them.

¹ <https://vancouver.sun.com/health/local-health/bc-reports-120-increase-in-prescriptions-after-pharmacists-gain-new-powers>

² BC Pharmacare newsletter Edition 23-006: June 6, 2023

³ Ibid.

Allowing pharmacists to order these tests would streamline care for patients and improve timely access to care and the medications they need.⁴

Currently, pharmacists in Alberta, Manitoba, Quebec, New Brunswick, PEI, and Nova Scotia all have the ability to order lab tests.^{5 6}

As we have seen through COVID-19 and the recent changes in scope of practice and increased service, pharmacists remain an essential link for patients when access to a primary care provider is not possible.

One of the other areas where pharmacists can continue to help fill the gaps in access to primary care is allowing for point-of-care testing (POCT). Point-of-care testing is different than laboratory blood tests. It is testing done at the site where a patient presents rather than visiting a different lab location site.

Technology has grown significantly in the past number of years, and as evidenced through COVID-19, point-of-care tests are easy to administer and provide immediate results allowing care providers to provide the appropriate treatment.

For example, point-of-care tests for group A streptococcal (GAS) infection have been conducted in pharmacies in other areas, and research shows allowing pharmacists to administer these tests can be cost-effective and efficient alternatives to microbiology labs and doctors' office visits.⁷ Additionally point-of-care testing for step throat helps in proper antibiotic use, which in turn helps against antibiotic resistance and, therefore, is good for public health.⁸

In July 2022, pharmacists in Ontario were given the ability perform certain point-of-care tests to help patients manage their chronic diseases. These include tests for glucose, hemoglobin A1C (HbA1C), lipids, and prothrombin time and International Normalized Ratio (PT/INR).⁹

B.C.'s pharmacists can join other provinces in helping patients get immediate results and freeing up valuable space in other urgent care centres.

⁴ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6739653/>

⁵ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4025886/>

⁶ https://www.pharmacists.ca/cpha-ca/assets/File/cpha-on-the-issues/ScopeofPractice_Jan_2023.pdf

⁷ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7693205/>

⁸ Ibid.

⁹ <https://opatoday.com/point-of-care-testing/>

Pharmacists' role in the opioid crisis

The statistics on deaths in B.C. associated with the opioid overdose crisis continue to be staggering.

The BC Pharmacy Association has been in many discussions with the Ministry of Health and Ministry of Mental Health and Addictions about pharmacist-initiated opioid agonist treatment (OAT).

In 2018, the Ministry of Health showed great leadership when it partnered with the BC Pharmacy Association (BCPhA) to develop the most comprehensive Opioid Agonist Therapy (OAT) training program for pharmacists in Canada. Our Association's objective was to ensure that B.C.'s pharmacists have a level of expertise and understanding of opioid use disorder that allows them to provide optimal patient-centered care and that training is in line with that required by prescribers. Any pharmacy that dispenses OAT must have pharmacists and technicians who have successfully completed the training to dispense these medications.

Since 2018, we have trained more than 5,100 pharmacists and technicians in British Columbia. In our view, this level of expertise enables pharmacists to take on a much greater role in the care of patients with opioid use disorder.

Changes made in October 2022 that allowed pharmacists to adapt and renew more medications included the ability for pharmacists to renew a prescription for OAT as permitted under a section 56 exemption to the *Controlled Drugs and Substances Act*, which means patients can continue to be provided the same treatment for a limited time until they can see a prescriber.

However, there are still hurdles in the legislation that do not allow for adaptations (changing a dose and/or regimen) of a patient's OAT prescription. Allowing pharmacists to change a dose or complete missing information, for example, when there are prescription errors or omissions, would avoid preventable delays in treatment, especially in situations when prescribers are unavailable for immediate consult. We believe that if these hurdles were removed, it would further improve the experience of patients on OAT and avoid unnecessary frustrations that can impact patient care.

Our proposal also calls for a collaborative approach to increasing patient access to OAT through pharmacist-initiated prescribing. We propose building on the expertise and training pharmacists have, thereby creating new capacity in the province's response to this devastating public health crisis.

We also know that harm reduction is another piece of combatting the crisis. One area of this is prescribed safer supply, which includes access to prescribed medications like opioids, stimulants, and benzodiazepines as alternatives to the toxic street drug supply for individuals

who are at a higher risk for overdose. We are aware that safer supply can be the first step to help patients move away from dangerous street drugs and move them toward greater support.

The BC Pharmacy Association supports the government's approach in pursuing safer supply as a risk mitigation strategy, and we believe pharmacists can be part of this. However, we ask that work be done to create clinical guidelines and treatment protocols for safer supply that both prescribers and pharmacists can use.

Another harm reduction strategy employed is providing drug checking services like drug testing kits, which check for illicit street drugs. Currently, health authorities may offer testing strips for drugs such as fentanyl or benzodiazepines. Not all drug testing strips may be available for take-home but can be found only at select on-site testing locations. This limits accessibility to individuals across the province.

There are more than 1,400 community pharmacies across British Columbia serving 158 communities, both urban and rural. While there have been a few pilot projects in select community pharmacies for take-home drug test strips, it has not been deployed en masse to allow for much wider access and availability to any individual no matter where they live.

Pharmacies can easily be an access point for British Columbians to anonymously pick up drug testing strips, much like the province's COVID-19 rapid antigen testing kits made available to anyone who needed it.

Using the same concept, these kits could be deployed rapidly using pharmacy's supply chain expertise.

Conclusion

B.C.'s community pharmacists continue to fill the gaps in health care -- from public health to primary care. As British Columbia has expanded the scope of pharmacists, patients are accessing them to help meet their needs in getting medication renewals, prescriptions for minor ailments and contraception and vaccinations.

When pharmacists are asked to step in to help, they will readily serve their communities. As the province looks to continue to provide better access to care, pharmacists are able to provide more services to fill important health-care needs of British Columbians.