

Pharmacy Care Clinics Improve the Care Pharmacists Can Provide

Nova Scotia piloted the implementation of community pharmacy primary care clinics across the province with pharmacists able to practice at their fullest scope. A final evaluation report released March 25, 2025, analyzed the 31 pharmacy clinics in operation as of September 30, 2024.

Patients were highly satisfied with the care they are received with almost all patients (98%) responding to the patient survey rating their satisfaction as 8 or higher out of 10. Almost all patients (98%) agreed that they would use the pharmacy clinic in the future for their care needs.

Accessing care at the pharmacy clinic appears to have diverted about 10% of patients from emergency departments (EDs) and 25% from walk-in clinics in Nova Scotia.

The BCPhA has been working with B.C.'s PharmaCare team to move forward with a Pharmacy Primary Care Clinic model in the province. The experience from other provinces has shown these clinics are an integral part of easy access to primary care.

Some pharmacy companies have already customized their pharmacies to accommodate a clinic environment to provide patients with privacy and access to services like point-of-care testing, especially for strep throat.

A Canadian study conducted on pharmacist point-of-care testing for strep throat showed that of the patients with positive results, antibiotic therapy was initiated within the same day in 68.7% of cases. In Alberta, where pharmacists have advanced prescribing authority, same-day initiation of therapy was 73.8% compared with a rate of 40.5% in other jurisdictions.

Allowing B.C.'s pharmacists to join other provinces in helping patients get immediate results and prescribe appropriate treatment frees up valuable space in other urgent care centres.

Pharmacists are pleased with the authority they have recently been given to order and interpret lab results for patients. This service is a perfect example of what type of care Pharmacy Primary Care Clinics can deliver.

Ordering and interpreting lab tests means pharmacists can help 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 of Health.



Pharmacies in B.C. rural and remote communities continue to face challenges. The government can make quick and easy changes to help improve rural pharmacy care.

Pharmacists Can Help Address Rural Health Care Needs

Recent years have demonstrated the big challenges in delivering primary care to rural and remote communities.

Two areas in which the B.C. government can make quick and easy changes that will improve rural and remote pharmacy are:

- » Modernize B.C. PharmaCare's Rural Incentive Program to mirror key elements in the physician's Rural Practice Subsidiary Agreement. Harmonize the designation of which communities are deemed rural and remote. This clarifies the communities in great need and how best to target the support pharmacists can provide.
- » Allow increased use of virtual services to support patient access to pharmacy services in remote communities.

There are currently 11 licensed telepharmacies in B.C. The College of Pharmacist of B.C.'s eligibility criteria include that a telepharmacy must be the only pharmacy in the community, that the next closest telepharmacy or community pharmacy must be at least 25 km away and that it has a licensed pharmacy technician during all operating hours. These restrictions mean that some communities are faced with lack of access.

Expanding the criteria to allow real-time digital pharmacist supervision in rural pharmacies that do not have a telepharmacy license during an emergency or unforeseen circumstance (for example a medical leave or illness or when a locum is unavailable) will allow pharmacies to continue to operate, ensuring that the patients in their community will not go without access to critical medications.



British Columbia
Pharmacy Association

B.C.'s Community Pharmacists

The B.C. Pharmacy Association (BCPhA) represents British Columbia's community pharmacies and pharmacists. 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. In fact, pharmacies serve 161 B.C. communities and often serve as the first point of contact for patients needing access to care. Over the years, B.C.'s pharmacists have taken on increasing roles in delivering accessible care to British Columbians. Consistently, British Columbians take up these offerings and want them to do more.¹



¹ A public opinion survey found that 90% of British Columbians support pharmacists offering more services. May 15, 2024. <https://www.bcpharmacy.ca/news/2024publicpoll>

² <https://vancouver.sun.com/health/local-health/bc-reports-120-increase-in-prescriptions-after-pharmacists-gain-new-powers>

³ <https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/pharmacare/initiatives/sop/monitoring-evaluation-ppmac>

⁴ B.C. pharmacists dispensed 102,654,067 prescriptions in 2024, according to Ministry of Health data.

⁵ Bank of Canada Inflation Calculator, <https://www.bankofcanada.ca/rates/related/inflation-calculator/>

⁶ <https://uwaterloo.ca/news/media/pharmacists-prescribing-minor-ailments-will-save-health-care>

Pharmacy Care Clinics

Accessing care at the pharmacy clinic appears to have diverted about **10% of patients from emergency departments (EDs)** and **25% from walk-in clinics** in Nova Scotia.

Patients were **highly satisfied** with the care they received at pharmacy care clinics. In a survey, almost all patients (98%) responded with a satisfaction rating of 8 of higher out of 10.



Immunizing British Columbians

In 2009 during the H1N1 pandemic, B.C.'s pharmacists were given the authority to administer injections for immunizations. That year, pharmacists provided 31,751 flu vaccines. Since then, numbers of flu shots delivered by pharmacists have grown exponentially, with community pharmacists providing more than 1 million flu vaccines annually since 2021 and more than 5.7 million COVID-19 vaccines.

Reducing the Burden on Primary Care – Renewing and Prescribing Medications

In the fall of 2022, pharmacists were given the ability to renew a wider range of medications and for longer periods of time. This change was part of a plan to address the ongoing challenge of doctor shortages in the province, allowing patients whose doctors were retiring or who did not have a family doctor.

Early results showed a 120 per cent increase in the number of prescriptions renewed or adapted by B.C. pharmacists after the 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.”²

Assessing and Prescribing Minor Ailments and Contraceptives

In June 2023, B.C. pharmacists began to assess and prescribe for contraceptives and 21 minor ailments such as simple urinary tract infections, pink eye and cold sores. In the first year, pharmacists delivered more than 431,000 assessments to more than 312,000 patients.³ The top five conditions being allergies, UTIs, contraception, dermatitis, and pink eye.

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

Pharmacists have continued to take on more to help ensure the health and safety of British Columbians. Community pharmacies are a key part in delivering HPV vaccine to those who have missed a dose or who are now eligible as well as delivering the Measles, Mumps, and Rubella vaccine to those who may need it.



Pharmacists provide access avoiding visits to primary care physicians and emergency departments.

Pharmacists prescribing for MACS has saved at least **\$5 million** in the first year.

Ensuring an Accessible and Sustainable Community Pharmacy Network in BC

B.C.'s pharmacists are proud of the work they are doing serving as a key health care provider and practicing at a fuller scope that reflects their extensive training and education. However, they are doing this while continuing to deliver existing pharmacy services including dispensing more than 100 million prescriptions a year.⁴

Financial Sustainability is Under Threat

The foundational dispensing fee has remained at \$10 since July 2011. It is unprecedented to think that any health-care worker would not have an increase in their primary remuneration in nearly 14 years. The Bank of Canada estimates that the value of \$10 in 2010 is now \$14.10.⁵

Calling the funding for a patient's primary interaction with their pharmacist a “dispensing fee” is a misnomer. It is an interaction fee that covers the technical preparation of the prescription, navigation of drug coverage, counselling, and engagement with the pharmacist and pharmacy team. Increasingly, as pharmacists fill gaps in primary care, engagement with their patients is more robust.

The BC Pharmacy Association has made a proposal to increase the dispensing fee over a three-year period, which by the end of the period, would result in a fee that would better enable pharmacies to remain financially sustainable, especially in these turbulent times.

Pharmacists Provide Cost Savings to Government

As has been seen with immunizations in community pharmacies and with the Minor Ailment and Contraceptives service (MACS), pharmacists provide access at a reduced cost – avoiding visits to primary care physicians and emergency departments. In the new MACS program the fee paid to pharmacists is below that of a basic office visit to a physician – with minimum savings in the first year of the program being \$5 million. A study by the University of Waterloo showed that pharmacists prescribing for minor ailments could save the province of Ontario up to \$42 million a year.⁶ These are important savings that can be directed to other needs within the health-care system.