NL Electronic Health Record
Pharmacy Network User Guide

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Newfoundland & Labrador
Centre for Health Information

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NEWFOUNDLAND AND LABRADOR PHARMACY NETWORK

Introduction

This User Guide has been prepared to provide pharmacy staff with information needed to access and use the Newfoundland and Labrador Pharmacy Network (Pharmacy Network).

The Pharmacy Network is fundamental to the province's vision for an integrated electronic health record (EHR), which aims to improve health through the provision of quality health information for all residents of the province. An EHR provides individuals with a secure, private, lifetime record of their health information and care within the healthcare system. The provincial EHR, viewed through HEALTHe NL, will be available electronically to authorized NL health care providers anywhere, anytime, to support high quality care.

The Pharmacy Network includes the information of individuals, both residents and non-residents, who have presented to a Newfoundland and Labrador community pharmacy or hospital out-patient pharmacy. It enables viewing of a patient's profile when providing pharmaceutical care, and the patient's profile includes demographic information and the associated medication profile. It may include over-the-counter and natural health products, as well as clinical and allergy information from pharmacies connected to the drug information system (DIS).

The Pharmacy Network is used by community pharmacy staff to update demographic and administrative information (e.g. name, address), as well as to record and share medication information in the provincial DIS. This connection enables authorized health professionals to access medication profiles in an online, real-time environment facilitating:

- Effective decision-making regarding the potential of a new medication reacting or having a side effect when taken in combination with other medications;
- Improved patient safety with respect to known allergies;
- Faster and more informed decision making in emergency situations; and
- Improvements in the use of medications and compliance with drug therapies.

Connection to the Pharmacy Network expands the scope of the drug utilization review (DUR) beyond the pharmacy's local system to encompass all recorded Drug Identification Numbers (DINs) on the patient's Pharmacy Network medication profile.

It is important to note that the Pharmacy Network is not connected to or communicating with the Newfoundland and Labrador Prescription Drug Program (NLPDP), nor does the Pharmacy Network contain financial information.

For more information about the Pharmacy Network please visit the Newfoundland and Labrador Centre for Health Information (Centre) website:

https://www.nlchi.nl.ca/index.php/ehealth-systems/healthe-nl/pharmacy-network

This document will be reviewed annually and revised as necessary to ensure currency and usefulness. Feedback from readers is welcomed and encouraged. Suggestions for future updates can be sent to:

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PROVINCIAL ELECTRONIC HEALTH RECORD

Newfoundland and Labrador (NL) has developed a solid foundation for the development, adoption and use of the NL electronic health record. An electronic health record facilitates the sharing of data across healthcare delivery organizations and across the province and encompasses multiple point of service (POS) applications. The Newfoundland and Labrador blueprint is aligned with Canada Health Infoway to create a pan-Canadian interoperable electronic health record.

HEALTHe NL- a 'view-only' application that utilizes the Client Registry for client searching and provides authorized care providers access to clinical client information (i.e. DIS information) contained within the NL EHR. HEALTHe NL will also include other relevant clinical information like lab results, diagnostic images and select clinical records pulled in from other eHealth systems.
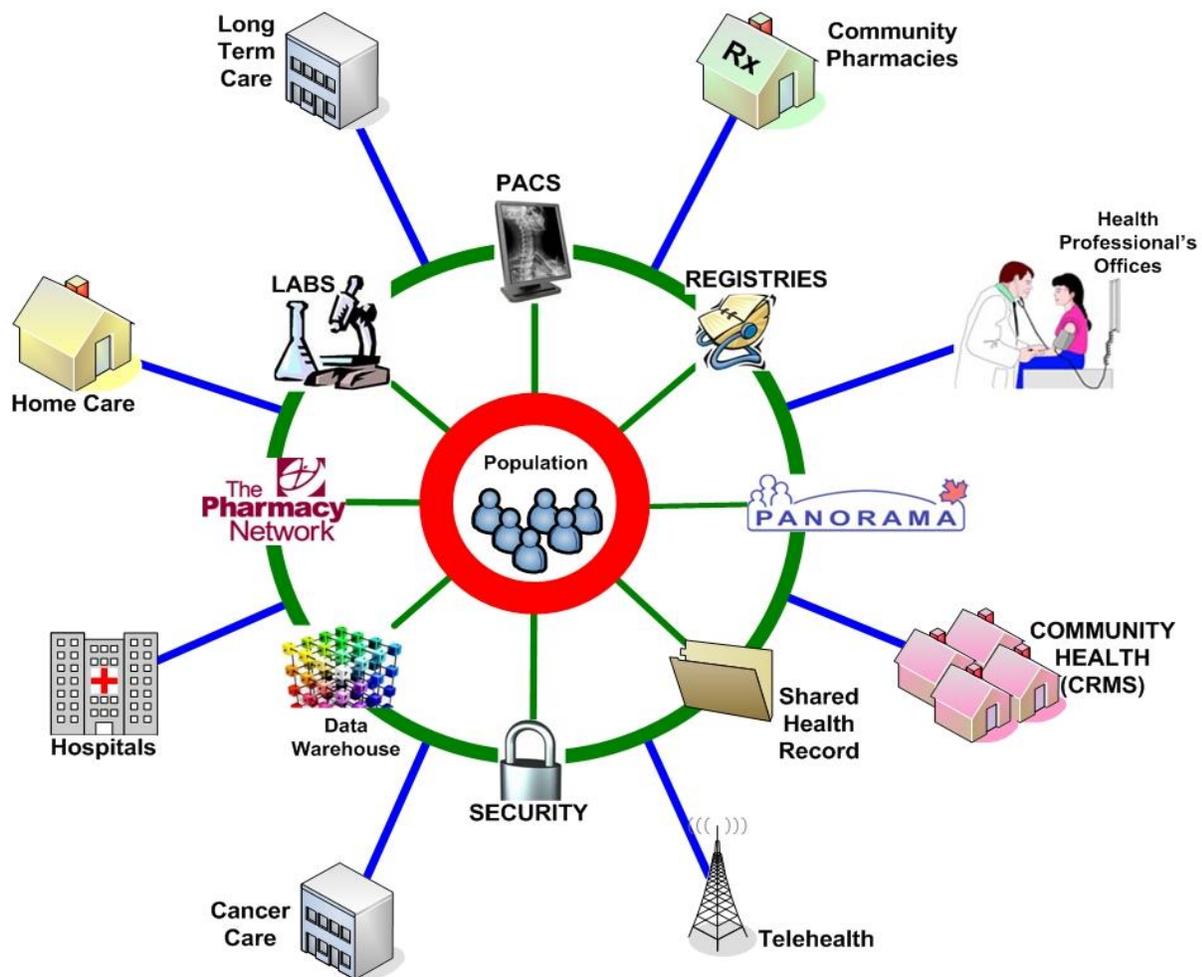
CONNECTING TO THE PHARMACY NETWORK

New Pharmacy Network users must obtain a username and password, please refer to the Pharmacy Network Education site at https://www.nlchi.nl.ca/index.php/ehealth-systems/healthe-nl/pharmacy-network

Step 1: Watch the Pharmacy Network online education material and complete the test. Access to a computer with an internet connection and printer is required when taking the test. If the Certificate of Completion is not printed at the time the online test is completed the online test must be retaken to reprint the Certificate of Completion.

- Review material found on the Pharmacy Network Education site and the Centre's eHealth Systems Terms and Conditions of Use;
- Receive a passing mark ≥ 70% on the test; and
- Print and sign the Certificate of Completion.

Pharmacy Network Education
https://cloud.scorm.com/sc/InvitationConfirmEmail?publicInvitationId=2a2f19e6-4ffd-4a7b-9c4f-8530d2668b43

Print and sign the certificate at the end of the training. Note: if the certificate does not print, just note completion on the Password Agreement (step 3 below).

Step 2: Complete the online PHIA (Personal Health Information Act) Training.

PHIA Training
a.) Sign up and create an account to start the PHIA training course (click 'Next' when prompted for an Employee/Student ID number).
b.) Email – Use a valid email address. Note that you will need to retrieve a confirmation code from this email address to complete account setup.
c.) Group – from the dropdown menu set the group to "Pharmacy Network Onboarding."

Once you have completed account setup, go into "Course Access" and enrol into Custodian – Direct Contact with Personal Health Information. This is the only course that needs to be completed.

Step 3: Complete, print and sign the appropriate Pharmacy Network Password Agreement. Pharmacists are required to print and sign a copy of the online Password Agreement and have it witnessed by another licensed health care provider or a NL notary public; and

Pharmacy assistants, technicians, students and cashiers (delegates) are required to print a copy of the online Password Agreement and have it signed by the pharmacist in charge of the location where they are working.

Passwords associated with pharmacy delegates are associated with a specific location; the pharmacist in charge must call the Centre to have an additional location added to, or removed from a pharmacy delegate account.

Note: If the Password Agreement is not completed and printed at the time the test is taken, it can be accessed later without having to retake the online test.

Step 4: Fax the Certificates of Completion and the completed Password Agreement to the Centre at 1-877-272-6029. Note: if you have trouble printing either of the certificates, we can confirm completion of the courses.
- The Centre will process the application and contact the end-user to provide a Personal Identification Number (PIN) and further instructions on having the user account created; and

Step 5: To obtain a username and temporary password, the Centre may contact you with a PIN, and then have you contact the Centre's Service Desk and respond to the following three security questions:

1. What is your favorite color?
2. In which city were you born?
3. What is your mother's maiden name?

The Centre's Service Desk will provide the username and temporary password for accessing the Pharmacy Network.

Step 6: Initial access to the Pharmacy Network requires the use of the provided temporary password.

Once connected to the Pharmacy Network, the user is prompted to create a permanent password.
- Password security features require a minimum of one uppercase letter, one lowercase letter, and one number and must be between 8-15 characters in length.
- The password will expire every 6 months at which time the user will be prompted to create a new one.

When you connect to the Pharmacy Network, you will begin to receive 'Broadcast Messages'. Broadcast messages are a one-way communication from the Centre to provide Pharmacy Network end users with updates on system upgrades, new pharmacy connections, etc.   Each vendor system displays these messages differently; please check with your vendor.

Vendor Education

- Additional training from the vendor is required to train pharmacy staff on new fields, screens and workflow changes in the local pharmacy system once connected to the Pharmacy Network; and
- A list of key questions to ask your vendor can be found in Appendix A.

CONSENT AND PRIVACY MANAGEMENT

The Provincial Health Information Act (PHIA) (http://www.health.gov.nl.ca/health/phia/phia_overview_june_2011.pdf) provides implied consent for use and disclosure of information related to the provision of health care. The Centre has provided custodians, such as pharmacists, who collect personal health information with brochures explaining disclosure of personal information to the Pharmacy Network. It is recommended that this information be displayed at the local pharmacy. A custodian is entitled to assume that they have an individual's continuing, ongoing implied consent to either use or disclose the information unless the custodian becomes aware that the individual has withdrawn his or her consent.

Section 39(4) (c) of PHIA authorizes custodians such as pharmacists and other private practitioners to "disclose patients' personal health information to or via an information network designated in the regulations under the Act without the consent of the data subjects". The Pharmacy Network Regulations designate the Pharmacy Network as such an information network.

As individuals are not able to opt out of having their information copied into the Pharmacy Network, the Centre has enabled individuals to restrict access to their information through consent directive functionality. Individuals are able to request that their profile be 'masked'; in such cases, a password must be provided before health care providers are able to see the masked profile. Brochures about masking a profile and the Pharmacy Network are available at connected pharmacies, and more information is on the next page.

PHIA applies to all healthcare environments and establishes rules for collection, use and disclosure of patient health information whether it is paper or electronic. The Pharmacy Network as well as vendor functionality is built to be fully compliant with PHIA. Please refer to http://www.health.gov.nl.ca/health/phia/phia_overview_june_2011.pdf.

How to Comply with Confidentiality Processes

Patient Masking (Passwords)

Patients have the right to limit the use or disclosure of their personal information by masking their Pharmacy Network profile. When a patient decides to mask their profile, the Pharmacy Network view is limited to local pharmacy content. Any patient profile data from other pharmacies will be masked to Pharmacy Network end-users, unless the password is provided.

Unmasking occurs when the patient provides the password or in an emergency 'break the glass' situation. All demographic information is viewable on the Pharmacy Network.

Patients requesting masking of their patient profile should be directed to the Centre's Service Desk at 1-877-752-6006. For additional information, please refer to the Personal Health Information Act found within the Consent and Privacy Management section of this User Guide.

Recognizing a Masked Patient Record Scenario

Vendors can identify visual cues indicating when a patient record has been masked. Each local pharmacy system interface may be designed differently.

Unmasking a Patient Record

The Pharmacy Network supports unmasking when:
- A patient or his/her authorized representative provides the patient password to an authorized end-user;
- A patient requests that a Pharmacy Network administrator remove the mask on their information; and
- One-time temporary access to masked data is required (i.e. emergency 'break the glass' scenarios). The procedure for "breaking the glass" will vary by local pharmacy system. Professional judgment is to be used to determine whether a situation warrants this action.

Pharmacists should consult PHIA for information as to their responsibilities in a 'break the glass' situation. The patient should be notified if this occurs, and this action needs to be recorded on the patient's profile.

> Patients have the right to ask the Centre for a report that reflects who has accessed their profile.

When a Patient Refuses to Unmask their Record

If a patient refuses to unmask his/her record, authorized end-users accessing the Pharmacy Network should utilize professional judgment governing adequate patient care.

Storing a Patient Password

While it is not necessary or appropriate to store patient passwords, passwords can be stored with the patient's consent, as per the Personal Health Information Act. In this instance the password should be stored securely and treated as personal health information.

Resetting a Patient Password

To reset a lost or forgotten password, the patient must contact the Centre's Service Desk (at 1-877-752-6006) and respond correctly to the security questions.

PHARMACY NETWORK PROCESSES

The Pharmacy Network utilizes patient information from the Client Registry, provider information from the Provider Registry, location information from the Location Registry, and clinical (prescription) information from the DIS and the local pharmacy vendor systems.

Client Registry

The Client Registry provides unique identification of individuals who have received health care within NL. The data provided is a consolidation of information collected from pharmacies that communicate with the provincial Client Registry through their local vendor systems (i.e., Kroll, Pharmaclik RX and UBIK, Regional Health Authorities through their Meditech systems, the Client and Referral Management System (CRMS), and the Department of Health and Community Services Medical Care Plan (MCP). The Client Registry is used to retrieve and confirm client demographic information (e.g. name, address, and identification numbers). The Client Registry does not contain clinical information but enables clinical information to be linked to the correct individual within the EHR (e.g. DIS, patient chart).

When a search is initiated on patient information in the Pharmacy Network, data is retrieved from the Client Registry. If a new patient presents to your pharmacy for the first time, you can retrieve and save their information from this provincial database.

Sync each of your patients to the Client Registry on a one-time, go-forward basis when they present to the pharmacy. Verify and update patient contact information during **each** visit.

When searching the Client Registry, the correct search order is:
1. **MCP Card # only** (e.g. 329123123123) it <u>should return one record.</u>
   a. Do not include additional data (such as name) in the search.
2. **Client demographic information** (e.g. name and date of birth), which <u>may return multiple records</u>; **choose with care**.
   a. If the MCP number is not available, search using multiple patient demographic information (to distinguish the presenting 'John Doe' from multiple other 'John Doe' patients accessing healthcare within NL).
   b. When not using the MCP Card #, a multi-field search must be performed including: Name + date of birth + other options such as Gender (M - Male, F - Female) and/or postal code and/or phone number and/or street address and city.

The name field records the client's full legal name. The first, middle and last name should align with the name on the MCP card.

Name Fields:

The name field records the client's full legal name. The first, middle and last name should align with the name on the MCP card.

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If the middle name is blank or an initial, ask the client for their middle name and update (e.g. Ann replaces A). Otherwise, refrain from making changes to name fields unless they align with the MCP card.

If there is a typo on the MCP card (e.g. Mayr vs Mary) direct the client to contact MCP regarding the discrepancy. If MCP can verify the correct data against its records, it will immediately issue another card. If MCP has no record of the typo, MCP will require legal documentation to make the change.

When a person has no first name and one or more surnames, enter the phrase "NO FIRST NAME" in the FIRST NAME field and the person's single or multiple surname (s) in the LAST NAME field.

In the case of a person with a first name but no surname, enter the person's name in the FIRST NAME field and the phrase 'NO SURNAME' in the LAST NAME field.

</div>

Date of birth (DOB) and gender should also align with the data on the MCP card.

- Validate patient's DOB; if DOB discrepancies are identified, ask the patient to contact MCP to correct this information.

If no patient match is found or multiple match options are returned, request patient identification to confirm accuracy of the name, spelling and date of birth.
- Ask questions, confirm and update patient information.
  - What is your current address? What is your date of birth?
- Prompt the patient to determine if any of the following apply:
  - A nickname (Margaret vs. Peggy), middle name (James Dean vs. Dean James), multiple first names (Ann Marie) or alternative spelling of name (Jon vs. John, McDonald vs. MacDonald, Betty Ann vs. Betty-Ann); or any change to the last name (i.e. marriage or adoption).

Name should match the patient's MCP card; do **not** document nicknames (except as a note on the patient's local file).

- Do not add nicknames or non-human specimens to the Client Registry (e.g., Lucky the dog, office supplies); and
- Do not collect other data in the MCP field (e.g. policy #); this field is only for MCP number.

> If the incorrect patient is selected from the returned list, the medications dispensed are linked to the wrong patient's profile.
>
> Information displayed should always be confirmed with the patient to ensure it is accurate and updated as necessary. Duplicate or multiple records result in inaccurate medication profiles.

The **complete mailing address** should be recorded in proper format, including the city, province, postal code and country:

- Canada Post has a free postal code search tool: www.canadapost.ca

TIP: A patient's driver's license includes their address and postal code.

> Record the POSTAL CODE as ANA NAN (A = alphabetic and N = NUMERIC).
>
> If the postal code is unknown, unavailable or not yet assigned by Canada Post, use A9A 9A9.
>
> Phone numbers recorded must include the area code. If the phone number is unknown, enter as 000-000-0000. This ten digit phone number is the standardized format shared with other sources.

Correctional Centre, Shelters and Group Homes

For individuals living in group homes, shelters or are currently incarcerated, it is at the discretion of the client to provide a mailing address.   If a primary address is not provided, use the mailing address of the group home, shelter, or correctional centre.

> Do not record names of institutions in the address field (i.e. Her Majesty's Penitentiary or HMP). Only record P.O. Box 5459, Forest Road.

Out of Province Patients

When out-of-province patients require the services of a provincial pharmacy, ask whether they have ever:

- Lived in Newfoundland & Labrador?
- Received a MCP card?
- Previously received healthcare in the province?
- Presented to any NL hospital?
- Had a prescription filled in the province?

If the answer to any of the above questions is 'yes', **the patient should have an existing record within the Client Registry**.

If a search of the Client Registry has not returned a record, a new patient record needs to be added.

> - Do not record other numbers (i.e. hospital cards) in the MCP field of your local pharmacy system.
> - Do not add pets or office supply locations to the Client Registry.
> - Contact the Centre's Service Desk at 1-877-752-6006 if a duplicate or incorrect record is suspected on a valid search.

Registering Babes or Neonates:

> Enter BB OF _ or, BG OF _ (e.g. Brown, BB of MARY or Brown, BG of MARY).
>
> In the case of multiple births, the # of indicates the birth order regardless of sex (e.g. Brown, BB#1 or Mary; Brown, BG#2 or Mary; Brown, BB#3 of Mary).
>
> If a child returns for service after discharge but an MCP card has not yet been issued for the child, the child should be identified by the name provided by the parent.

Synchronizing (Syncing) and the Client Registry

Syncing occurs when a local patient record is linked to its match in the electronic health record. Pharmacy staff must sync existing patients to the Client Registry on a one-time, go-

forward basis. If you have a second local record for the same patient, merge it with the other local record.

Always search the Client Registry when you are syncing (synchronizing) new or existing patients in your local pharmacy system to the Client Registry. Search the Client Registry using _ONLY_ the MCP number whenever possible.

- The Pharmacy Network will reject transactions submitted with a pharmacy system local client identifier that has not been synced with the Client Registry.
- A prescription on the Pharmacy Network cannot be filled until the sync has been performed.

Entering Patient Demographic Information
Adding the MCP number will typically return a direct match and reduce data entry time.

A minimum data set is required to successfully sync the patient record with the Client Registry, including the following fields:
- First and last name;
- Date of birth;
- Gender;
- Complete Address: First line, city, province, country and postal code; and
- Phone number.

In order for the Pharmacy Network to perform as designed, it is important to send the postal code as part of the complete patient address. Failure to enter all of the above patient information can result in errors being received from the Pharmacy Network.

Updating the Client Registry
Pharmacy staff should verify demographic information (e.g. name, address, date of birth, telephone number) with the patient to ensure the information is up to date while ensuring the correct patient record is selected.
- Legal name, date of birth, gender and MCP number should match the information on the MCP card; and
- Pharmacy staff should validate and make corrections to the address and telephone number at the patients' request.

For corrections to legal name (e.g., recently married), date of birth, and/or gender error direct the patient to call the MCP toll-free line:

Avalon Region: **1-866-449-4459**   Outside Avalon: **1-800-563-1557**

Data elements collected by a pharmacy and subsequently sent to the Client Registry may be recorded only at the pharmacy and not exchanged within the Client Registry. E.g., MCP number will align with MCP source <u>only</u> because MCP is the source of truth for this data element. If a pharmacy records another identification key within the MCP field, it may be retained within the local pharmacy record only and not returned on a subsequent search.

Processing an Adoption

When an adoption takes place through the Department of Children Seniors and Social Development (CSSD), PNP staff are notified if the client has a record in the Pharmacy Network. PNP staff will contact connected community pharmacies where an adoptee had a prescription filled so that local records can be acted upon appropriately. Communication will take place through phone calls as well as a secure transmission process.

When contacted by PNP staff, pharmacies are expected to inactivate the patient profile in the pharmacy's local system and insert a local note indicating "Inactivated upon request of the Newfoundland and Labrador Centre for Health Information. Do not use this file as it may result in a patient confidentiality breach".

Pharmacies are requested to:
- Create a new patient profile, ONLY if the patient presents to the pharmacy.
- Contact PNP staff if they suspect the pre-adoptive identity has replaced the post-adoptive identity, or if there are any concerns regarding the adoptions record management process.

PNP staff may work with community pharmacy staff on a case by case basis for adoptions; note that there should be no link made between the pre-adoptive and post-adoptive identifies.

Pharmacy Network Program staff will forward, through registered mail or via secure managed file transfer (MFT), written documentation from the Centre stating the necessity of the actions associated with the pre-adoptive records.

In the event of an adoption disruption, Pharmacy Network Program staff will contact each applicable pharmacy Client Registry source with a record for the child under the post-adoptive name. Information to validate the adoption disruption will be communicated immediately to the pharmacy by phone, with follow up confirmation sent via the MFT process or registered mail and ensure proper management of the records is completed.

It is important to manage adoptions in a timely and specific manner; the above process will contribute to adoption management and support the future health care of the child/youth.

The above process does not apply if an adoption takes place external to the Department of Children Seniors and Social Development (CSSD). In that case, PNP staff are not notified and these adoptions are treated as an official name change only. Note: if PNP staff are notified, they will work with community pharmacy staff on a case by case basis; no link should be made between the pre-adoptive and post-adoptive identities.

Provider Registry

The Provider Registry provides unique identification of health care providers by locating an authorized health care provider's identification number (i.e. the provider's license number) as well as their licensing information.

Provider Registry data sources include: the Newfoundland and Labrador Pharmacy Board, the College of Physicians and Surgeons of Newfoundland and Labrador, the Newfoundland and Labrador Dental Board, the Association of Registered Nurses of Newfoundland and Labrador, and the Newfoundland and Labrador Optometric Board.

The Provider Registry includes a unique ID (i.e., license number) for all authorized health care providers, their associated locations of practice, as well as their licensing information. The provider number is validated against the Provider Registry. If the prescriber license number results in a local pharmacy system error, pharmacy staff should call the Centre Service Desk to investigate. Vendors will demonstrate how to perform a search on the Provider Registry to obtain the license number.

The provider license number is formatted differently when submitted for adjudication versus the Pharmacy Network purposes. The examples below highlight these differences:

MEDICAL DOCTOR	
Pharmacy Network	09876 (do not include letters)
Adjudication	P09876 (ensure the correct letter associated with the license number is included)
PHARMACIST	
Pharmacy Network	67-142 (ensure the dash is included)
Adjudication	67142
NURSE PRACTITIONER	
Pharmacy Network	14678
Adjudication	N94678
DENTIST	
Pharmacy Network	018909XXX
Adjudication	D88909 (ensure the 'D' is included)

OPTOMETRIST	
Pharmacy Network	NNNN (each 'N' represents a number from 1-9, i.e. 0602)
Adjudication	TNNNNN (each 'N' represents a number from 1-9, i.e. T00602)

Note: for Pharmacy Network, this represents their actual license number, regardless of the practitioner.

If home healthcare items are written by a healthcare professional who does not have prescribing privileges in Newfoundland and Labrador (physiotherapist for example), you must enter -the dispensing pharmacist as the prescriber in order -to place the item on the patient's profile.

If you do not find the provider:
- Insert an asterisk (*) before and after a word that is within the provider's name, (i.e. *James*) to display any matches that contain the word 'James'.
- Insert an asterisk (*) after the word, (i.e. Captain*) to display any location names that contain the first word of 'Captain'.
- If the provider search is still unsuccessful, contact your pharmacy vendor system service desk for assistance.

Note that the address information for providers may not be their location of practice.

Out of Province Providers

Out-of-province providers are recorded using 00000 for the Pharmacy Network.
Out-of-province providers are recorded using P00000 for adjudication.

The use of five zeros is restricted to out of province providers _only_. Inappropriate, excessive or unnecessary use of this number can lead to data quality issues, so the use of this number across the Pharmacy Network is monitored.

Location Registry

Location Registry - provides unique identification of care delivery locations (e.g., pharmacies, clinics).

The Location Registry is used by the Pharmacy Network to identify care delivery locations in NL (e.g. pharmacies and clinics).

If you cannot find a location within the Location Registry, call the Centre's Service Desk at 1-877-752-6006, requesting the addition of a specific location.

Drug Information System (DIS) Requirements

Drug Information System - provides a complete summary of prescribed and dispensed drug information. The DIS assists with decisions by monitoring prescriptions against the client's

active medications and his/her personal profile. This may include over the counter medication, it may also store and provide a client's allergy information.

Each prescription should include:

- Drug name and dosage
- Prescriber
- Pharmacy (auto-populated)
- Pharmacist (auto-populated)
- Date dispensed
- Date prescribed
- Quantity dispensed
- Days' supply

- Instructions for use
- Indication for use – if available (optional field)
- Status of prescription order (pick-up) – Mandatory
- Applicable clinical notes
- Quantity remaining
- Number of refills

"HOW TO" GUIDE FOR PHARMACY PRACTICES

Filling Prescriptions

Each patient profile **should be viewed** when a prescription is filled. A patient's profile can only be viewed for a clinical purpose.

Allergies, medical conditions, and other information can be added to and viewed on the Pharmacy Network. All prescriptions, except those that are non-human (i.e., animals, office supplies) must be recorded in the Pharmacy Network.

- Vendors need to be consulted for their specific processes associated with filling prescriptions.

Pharmacies may at times process prescriptions when the patient is not present (e.g., prescription picked-up by a family member). When the patient file is created based on a prescription only:
- Query the Client Registry and accept Client Registry information if available, matching at minimum two of three key identifiers (i.e. MCP number, date of birth and/or name).

Drug and Product Databases

The Drug Product Database administered by Health Canada is available on each local pharmacy system.   For a product or device that does not have a drug identification number from Health Canada's Drug Product Database, please refer to the following databases:

1. **Natural Health Products Database** contains information about natural health products that have been issued a product license by Health Canada. Examples of products that would have a Natural Health Product Number (NPN) are Glucosamine Chondroitin, Ginkgo Biloba and Slow-K. Natural Health Products Database. Note that NPN's are not subject to DUR checks (since they have no GCNSEQNO's).

2. **OPINIONS** is a web-based database that assigns Product Identification Numbers (PINs) to products, which are usually devices that do not have DINs. Examples of products found in OPINIONS include diabetic test strips and insulin pump supplies. When recording these products pharmacy staff should identify the code as part of OPINIONS, prior to submitting to the Pharmacy Network.

Products from the OPINIONS database can be used as ingredients in a compound.
http://opinions.atlanticpharmaceutical.ca.
The OPINIONS PINs are also listed in the Atlantic Pharmaceutical Services Inc. (APSI)

3. **The Newfoundland and Labrador Pharmacy Network Product Identification Number (NLPN-PIN)** list identifies ingredients and/or medical products that do not have a DIN, PIN or NPN. Examples of items contained in the NLPN PIN list are hydrocortisone powder, Tear Gel and wrist splints.
https://www.nlchi.nl.ca/images/NLCHI_PIN_LIST.pdf

If the prescribed component is not identified on this list call the Centre's Service Desk at 1-877-752-6006. Please note:
- Proper spelling of the component, the brand name, the label name and the drug form; and
- Items added to the NLPN PIN list during this call to the Centre's Service Desk will not be subject to DUR checks.

Compound Prescriptions

When pharmacy staff enters compound medications into the Pharmacy Network, at least one ingredient of the compound is required to have a Drug Identification Number, OPINIONS Product Identification Number, Natural Health Product number or Newfoundland and Labrador Pharmacy Network Product Identification Number.

Adding Non-Prescription Drugs to Patient Profiles

If a patient asks to have a non-prescription medication recorded, the product is added to the patient's Pharmacy Network profile based on the vendor's process. The Pharmacy Network can accommodate the addition of non-prescription medications to the patient's profile as an Other Medication (e.g. over-the-counter and natural health products). This process can also be used to add medications that patients may receive from sources not connected to the Pharmacy Network (e.g. mail order pharmacies, physician samples.)

Dispensing Schedule 2 Products

As per NLPB Standards of Practice, Schedule 2 products, including exempted codeine products, have to be recorded on the patient profile with the **pharmacist** indicated as the prescriber.

Prescriptions for Third Party Billing Purposes

If an item is being processed as a prescription *only for third party adjudication purposes*, the pharmacist should be recorded as the 'prescriber'. For example, the pharmacist is identified as the prescriber when an occupational therapist provides the client with a referral.

This process should also be followed if you are adding a prescription that was prescribed by a non-authorized prescriber (e.g. dietician, physiotherapist). If the pharmacist does not wish to have their name listed as the prescriber, then the prescription cannot be added. The Pharmacy Network will only accept prescriptions from authorized prescribers.

Non-Human (Veterinarian) Prescriptions

The EHR should not include non-human prescriptions (e.g., animals, office supplies), so veterinary prescriptions should never be sent to the Pharmacy Network. Ask your vendor for training on how to record required information for a non- human specimen.

> No person should ever be intentionally flagged as an animal in order to exclude the record from the DIS; this practice would be a patient safety and data quality issue.

Erroneous Addition of Non-Human Records

If non-human records are added in error, pharmacies may be contacted by PNP staff. When these types of clinical transactions are found and can be retracted, PNP staff will:

- The Pharmacy Network team will contact the pharmacy end user and inform staff how to flag the record as an animal.
- If the local record cannot be changed to an animal or stock location, the Pharmacy Network team will ask the pharmacy to inactivate the local record

An animal deleted from the CR **cannot** have further prescriptions sent to the Pharmacy Network by the original local pharmacy vendor system. A validation error will cause a hard stop *'Retrieval of requested record failed: Error code: 'EPERM.'*

Prescription Status

A prescription's final status is "aborted" on the Pharmacy Network, with the status change of 'complete' to 'aborted' being accepted. For example, when an end user copies a prescription to create a new one, the old prescription is aborted on the Pharmacy Network.

Dispenses are validated on the total quantity prescribed, versus validation on the number of refills. A prescription status will change to "complete" when the total quantity has been dispensed and picked up.

Prescription and Dispense Status	Format	Prescription Status Description	Dispense Status Description
Aborted	ABORTED	The prescription is no longer active.	A dispense has been reversed. (i.e. the prescription was dispensed but the patient didn't take the medication since it wasn't covered by his insurance)
Active	ACTIVE	The prescription is dispensable.	A dispense has taken place, but not marked as picked up.
Completed	COMPLETED	A prescription will be completed if either, or a combination of these situations happen: -The total prescription has been depleted and is no longer dispensable; - The prescription has expired*; - The days supply have come by.	A dispense has been marked as picked up.
Suspended	SUSPENDED	The prescription is temporary not dispensable. (i.e. A patient with an upcoming surgery to have his prescription for blood thinners suspended certain amount of time before and after surgery)	No further action can be taken in the dispense until the prescription has been released (Release refers to being available to be refilled/ dispensed again).

Retract

There are limitations associated with retracting prescriptions. Changes (or removals) required to a prescription or dispense that has been sent to the Pharmacy Network can be made (retracted) provided the record has not been viewed by an end-user at another location The "retract" functionality (removing a record such as a prescription or allergy from a patient's Pharmacy Network profile) is not linked to a specific user within the same location.

If a record cannot be removed from the Pharmacy Network (because it is not retractable):
- Put a note on the record for others users to see; and
- Abort the record.

Note: When prescriptions are logged on file, and not dispensed, any user at the location where it was logged can retract the prescription.

Drug Utilization Review

Pharmacy Network DURs are activated at the time of dispense, checking against other current dispenses on the patient's medication profile. DURs can be reviewed at any time by a pharmacist, and other clinicians can view how a particular DUR was managed.

Prescriptions are not included in future DURs when:
- The days' supply of a dispense is complete, based on the **actual date of pick up**;
- in cases where a prescription has no associated dispenses;
- the prescription has been aborted and the associated days' supply is complete;
- or the prescription is placed on hold (note that other prescriptions being filled will check against prescriptions on hold).

Information on managing DURs can be recorded when the DURs are displayed to the user; the Pharmacy Network also allows recording information on DUR management at a later time. Check with your vendor as to what is allowed on the local pharmacy system for DUR management.

The Pharmacy Network DUR checks include:

Controlled Substance	Duplicate Ingredient
Drug to Drug	Duplicate Therapy/Switchback
Drug to Known Disease	Too Late
Drug to Allergy	Too Soon

Note: Pharmacy delegates should always notify the pharmacist when a DUR notification is received from the Pharmacy Network.

Drug Utilization Review on Masked Records

The Pharmacy Network DUR includes information which has been masked. However, complete profiles are not made available unless the patient profile is unlocked using the patient password or in an emergency, i.e. 'breaking the glass'.

Pick-up Message

The pick-up message is designed to identify when a patient picks up the prescribed medication, and is what distinguishes prescriptions that should be excluded from a DUR because they have finished a medication. Prescriptions are included in DURs for one year from the original prescribed date if a pick-up is not recorded.

When the pick-up message is recorded, the Pharmacy Network will utilize the pick-up date and extend the duration of the DUR if the pick-up date is different than the dispense date. Recording the pick-up will aid in keeping DUR messages to a minimum. Not recording the pick-up means that the Pharmacy Network has not received updates associated with recorded prescriptions. Consequently, if a patient should come back for a refill, an alert DUR will display, reflecting that the previous prescription is waiting to be picked up.

Reversals

Pharmacy Network users should continue to perform reversals as per current pharmacy practice.

Discontinuations

To ensure completeness of the patient's Pharmacy Network profile, prescriptions should be aborted if a patient has stopped using the medication. Note that aborted prescriptions continue to be included in the DUR if they have an associated dispense for which the days' supply has not elapsed.

Queuing

If the Pharmacy Network is not available due to scheduled maintenance or unforeseen downtime, users will be notified by their vendor (the Centre Service Desk notifies each vendor, who will then communicate to their customers). Pharmacy Network users should continue to work off-line, entering prescriptions into the local pharmacy system until the issue is resolved and connectivity has been re-established. At that time, the local pharmacy system will submit accumulated data from the queue (the process is vendor specific).

Note: Normal operations can continue with the exception of DUR checks from the Pharmacy Network.

When the connection is re-established, Pharmacy Network users may need to check the local system queue and manage pending Pharmacy Network transactions (Client Registry duplicates, invalid providers, DURs to be managed against the entire patient profile, etc.). The notification of issues and the resolution will vary based on the workflow and pharmacy vendor system used. **Ask your vendor** for instructions on how to continue working when the Pharmacy Network is unavailable as well as how to reconnect and submit queued transactions when the Pharmacy Network has re-established connection.

Transfers

When performing a prescription transfer, Pharmacy Network users should adhere to the process outlined by the NLPB. When transferring a prescription out of your pharmacy, a

transfer message is sent to the Pharmacy Network requiring the local pharmacy vendor system to specify the transfer location.

This message will reassign ownership of the prescription and allow the receiving pharmacy to create a local copy of the prescription from the Pharmacy Network profile to their local application and create a dispense against it. The prescription will remain active on the Pharmacy Network profile but will be deactivated on the sending pharmacy's local patient profile. This prevents duplication of prescriptions on the Pharmacy Network profile as no new prescription is created.

If you are transferring a prescription to another province, the 'Out of Province' location (00000) should be selected. Do NOT use this location ID when transferring to an in-province pharmacy as this would prevent the receiving pharmacy from processing a dispense against the prescription.

Adding Clinical Notes to the Pharmacy Network

There is a difference between adding notes to a local pharmacy system (e.g. patient prefers snap cap vials) versus notes documented and shared via the Pharmacy Network. **Ask your vendor** for a demonstration; it is important to differentiate between local notes and notes that may be shared across a patient's electronic health record.

Adding Patient Allergies to the Pharmacy Network

Patient allergies can be added to the Pharmacy Network by licensed pharmacists and pharmacy delegates. Allergies may be transferred 'to' or 'from' the Pharmacy Network. **Ask your vendor** for a demonstration of this process.

VENDOR SUPPORT

Vendors make modifications as appropriate to communicate with the Pharmacy Network, and the Centre provides support to vendors to ensure that the vendor solution conforms to Pharmacy Network requirements.

> The Centre does not have the authority to mandate pharmacy vendor system design; therefore issues relating to vendor system design or workflow should be addressed with the vendor, not the Centre.

GENERAL RESPONSIBILITIES

Appropriate use of medication profile information and any other personal health information is governed by the Personal Health Information Act and the NLPB Pharmacy Standards of Practice, Policies and Guidelines. Proper use of the Pharmacy Network is also outlined on the Password Agreement signed by all Pharmacy Network users.

Patients have the right to request a transcript of who accessed their medication profile. Patient requests should be directed to the Centre's Service Desk at 1-877-752-6006.

RESPONSIBILITIES OF THE NL CENTRE FOR HEALTH INFORMATION

The Newfoundland and Labrador Centre for Health Information is responsible for maintaining and supporting the following services of the Pharmacy Network:

- Health Information Network (HIN) (private network access directly from the local pharmacy vendor system to the Pharmacy Network);
- Drug Information System;
- Client Registry;
- Provider Registry; and
- Location Registry.

The following services are not the responsibility of, nor supported by, the Centre:

- Adjudication systems;
- Pharmacy local vendor system (Point of Service System));
- Internet access (other than Pharmacy Network connectivity);
- Local personal computer issues; and
- Local printing/printer issues.

RESPONSIBILITIES OF THE REGISTERED PHARMACIST IN CHARGE

Relocation and Renovations

While adhering to NL Pharmacy Board requirements for a change of location the registered pharmacist-in-charge should contact the Centre's Service Desk at 1-877-752-6006 and:

- Provide notification of the change in location; and
- Identify pharmacy delegates associated with the new location.

To ensure a seamless transition for pharmacy staff, it is important to contact the Centre Service Desk (1-877-752-6006) at least eight weeks prior to the move to ensure re-connection to the Pharmacy Network.

New Pharmacies

When a new pharmacy is connecting, the pharmacist-in-charge and/or business owner of the pharmacy should contact the Centre's Service Desk at 1-877-752-6006:

- Eight weeks in advance, to obtain a connection to the Health Information Network; and
- Identify the pharmacy delegates working within the pharmacy.

The pharmacist-in-charge and/or business owner must ensure all pharmacy staff at the new location has:

- Completed the Pharmacy Network Education program (including the testing component) and printed and signed the Certificate of Completion;
- Printed the PHIA Certificate of Completion
- Printed, completed and signed the Password Agreement; and
- Faxed required information to the Centre at 1-877-272-6029
  - The Centre will provide user access to the Pharmacy Network

Pharmacy Closures

While adhering to NLPB requirements for terminating pharmacy operations, the registered pharmacist-in-charge and/or business owner must contact the Centre's Service Desk at 1-877-752-6006 and:

- Identify the pharmacy delegates that will no longer be associated with that pharmacy location; and
- Request direction regarding any equipment on-site that is associated with the Pharmacy Network.

Staff Turnover

When pharmacy delegates are leaving or joining a pharmacy it is the responsibility of the pharmacist-in-charge to notify the Centre's Service Desk at 1-877-752-6006.

DATA QUALITY

The primary purpose of the Pharmacy Network is to improve patient safety by providing clinical information important for the delivery of enhanced care for patients. Data quality is essential to providing reliable information; therefore data quality issues are proactively addressed and monitored on an ongoing basis.

Pharmacy Network Reports

PNP staff generate and process Pharmacy Network data quality and performance reports regularly. PNP staff liaise with key contacts at pharmacies to provide a duplicate report for review, feedback and resolution.

TROUBLESHOOTING

Pharmacy Network users can check the status of the Pharmacy Network by calling 1-877-752-6006.

While all efforts are made to ensure smooth operation of the NL EHR, technical problems may arise. If you encounter problems please contact either the Centre Service Desk or the pharmacy's local system vendor service desk. Please review below (Tier 1 vs. 2) and place the call appropriately for faster service.

Vendor Technical Support (Tier 1):

When technical issues occur, a pharmacy must first contact the pharmacy's local vendor service desk. Vendor service desk staff will initiate troubleshooting to determine if the issue stems with the local pharmacy system.

If the local pharmacy system is ruled out as the cause, the vendor service desk will initiate contact with the Centre's Service Desk. The Centre's Service Desk is comprised of the appropriate IT staff and the Pharmacy Network support team. The Centre's Service Desk may be reached by phone at 1-709-752-6006 or 1-877-752-6006 or via email at service@nlchi.nl.ca.

Centre's Service Desk Support (Tier 2):

The Centre's Service Desk is available at 1-877-752-6006 at service@nlchi.nl.ca and meets pharmacy needs year-round, 24 hours a day, for:
- Pharmacy Network username and passwords;
- Pharmacy Network connections (HIN);
- NLPN PINs;
- Patient password requests; and
- Patient report requests.

All other inquiries and/or issues should first be directed to the local pharmacy vendor.

System Maintenance

Regularly scheduled maintenance or upgrades are routinely performed on the Pharmacy Network application/service. The Centre reserves Sundays between 10:00 P.M. to 6:00 A.M. (Monday). For scheduled maintenance as needed on the Drug Information System, Health Information Network and the Client and Provider Registries.

Unscheduled System Issues

Unplanned outages occur when technical interruptions (e.g., power outages, hardware/software failures) happen outside scheduled and approved maintenance times. During an unplanned outage, the Centre communicates and works directly with pharmacy system vendors to coordinate problem solving efforts. Local pharmacy systems are designed to allow Pharmacy Network users to continue to operate during an outage and receive information updates via email.

In the event of an unplanned outage Pharmacy Network users should consult with:

- Their pharmacy system vendor to diagnose (and potentially resolve) the problem; and
- The Centre Service Desk *after* consulting with their vendor

During any Pharmacy Network outage:
- DURs are unavailable; the patient's profile on the Pharmacy Network cannot be accessed; and
- All pharmacy transactions are queued until the Pharmacy Network is online.

Username or Password Issues

If a username or password is forgotten and a reset is required:
- Contact the Centre's Service Desk at 1-877-752-6006 or service@nlchi.nl.ca;
- Callers must verify their identity by responding correctly to two of three security questions that were answered during the registration process. When successful, the Centre Service Desk will provide the caller with a temporary password; and
- The system will then prompt the user to create a new, self-chosen password.

If the caller cannot answer two of the three questions, he/she will be prompted to re-register.

A locked password occurs after ten unsuccessful attempts have been made to log in. Users must contact the Centre's Service Desk (steps above) to obtain a new password.

Passwords expire after 180 days. After 180 days, users of the Pharmacy Network are prompted to change their password. Users must contact the Centre's Service Desk (steps above) to obtain a new password.

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APPENDIX A – 'ASK YOUR VENDOR'

	Ask Your Vendor Checklist
Connection Questions:	
	Is there a vendor user manual for the local pharmacy system? E.g., Direction for pharmacy staff to sort the medication summary by date and/or make other changes to the local pharmacy default settings
	How will pharmacy staff know they are connected to and exchanging information with the Pharmacy Network?
	Is there a difference in Pharmacy Network transactions when logging in as a pharmacist or a pharmacy delegate?
	Can pharmacy staff record the reason they are accessing/requesting information from the Pharmacy Network?
	How does pharmacy staff manage multiple sessions (e.g., switch screens)?
Security, Passwords and Patient Masking Questions:	
	What is included in the local pharmacy vendor Help Desk support agreement? E.g., contact information, hours of service, and are there additional fees associated with 'after hours' service calls?
	How does pharmacy staff change their temporary password for accessing the Pharmacy Network?
	How does pharmacy staff change their Pharmacy Network password?
	How does pharmacy staff change their vendor system password?
	How will pharmacy staff know (e.g., visual cue) that a record is masked in their vendor system?
	What is the process to 'break the glass' for a masked patient?
Patient information / Client Registry General Questions:	
	What are the changes to existing pharmacy vendor system workflows, with the addition of the Client Registry? E.g., Are there best practices, new screens and fields that should be applied while processing a prescription?
	How is the Client Registry searched and how is the correct patient selected?

	How is a patient added to the Client Registry?
	How is an out of province patient added (e.g., s/he does not have an MCP number)?
	How and what local pharmacy system patient information are updated by the Client Registry?
	What is the process to upload information from the local pharmacy system (e.g., change of mailing address) to the Pharmacy Network?
	When a patient does not exist in the local pharmacy system but does exist in the Client Registry, how does pharmacy staff copy Client Registry data to the local pharmacy system rather than having to re-type all of the patient data?
	If two different patient records are identified as belonging to the same patient, what is the process to 'merge' (i.e. combine) those patient records?
	If it is apparent that two merged patient records have been combined in error; what is the process to 'unmerge' those patient records?
Provider Questions:	
	How is a search performed on the Provider Registry to obtain a provider license number?
	How many provider license number fields have to be populated for adjudication and the DIS?
	Does the provider information vary if multiple provider license number fields have to be populated?
	How is an out-of-province provider added?
Prescriptions and DIS Questions:	
	What information is required on a new patient 'add'?
	What is the process for filling a prescription?
	How is a new prescription copied from an old prescription when the old prescription is dated prior to the date of connection to the Pharmacy Network and, therefore, not on the DIS?
	What is the process to retract a prescription/dispense?
	How are transfers of prescriptions completed?
	What is the 'pick up' process?
	How is a 'pick up' reversed?
	Are there any vendor specific processes associated with filling prescriptions?

	How is a non-prescription medication recorded in the local pharmacy system?
	How are prescriptions for a doctor's bag/clinic recorded?
	How is an observation added? How is an observation viewed?
	How is an allergy added?
	How is an allergy viewed on the Pharmacy Network?
	How is an allergy transferred to and/or from the Pharmacy Network?
	What are the new screens and fields to be populated, and what are the changes to existing workflows when filling prescriptions, with the addition of the Pharmacy Network?
Queuing Questions:	
	How does pharmacy staff continue working in the local pharmacy system when the DIS is unavailable?
	How does pharmacy staff send a transaction that was refused by the DIS without reversing third party adjudication?
	What is queuing?
	What is the role of pharmacy staff when managing queued transactions?
	How does pharmacy staff submit queued transactions when the DIS has re-established connection?
	How does queuing work if there is a failed transaction in the Pharmacy Network?
	How will the local pharmacy system upload transactions to the Pharmacy Network after planned or unplanned downtime?
	How is a batch transaction performed?
Drug Product Database Questions:	
	What is the difference between a device PIN (OPINIONS), a NLPN PIN, and a Pseudo DIN?
	How are items entered in the Pharmacy Network that may require the use of different codes versus third party adjudication?
	Are the OPINIONS Database numbers (i.e. PIN numbers) pre-loaded?
	How is a drug utilization review (DUR) managed? E.g., Can a local pharmacy system manage a DUR after the associated dispense has been completed?
Non-human prescriptions	
	What information and workflow is required to record veterinary prescriptions?

	What information and workflow is required to record office supplies?
Communication Questions:	
	How are broadcast messages viewed?
	How are broadcast messages saved and/or deleted?
	How does pharmacy staff record and differentiate between local notes and Pharmacy Network notes that may be made available to the patient upon request to the Centre.

APPENDIX B - EASY ACCESS CONTACTS

HEALTHe NL
https://healthenl.ca/

NL Centre for Health Information Service Desk
service@nlchi.nl.ca
1-877-752-6006

NL Pharmacy Board
http://www.nlpb.ca/

Natural Health Products Database
http://webprod.hc-sc.gc.ca/lnhpd-bdpsnh/index-eng.jsp

Newfoundland & Labrador Pharmacy Network Password Agreements
https://www.nlchi.nl.ca/index.php/ehealth-systems/healthe-nl/pharmacy-network

OPINIONS
http://opinions.atlanticpharmaceutical.ca/

Personal Health Information Act, (PHIA) SNL 2008, C. P-7.01 and regulations
http://assembly.nl.ca/Legislation/sr/statutes/p07-01.htm

Personal Information and Protection of Electronic Documents Act (PIPEDA) 2000, C. 5, P-8.6, and regulations
http://laws-lois.justice.gc.ca/eng/acts/P-8.6/index.html

Pharmacy Network Education and Training Materials
https://www.nlchi.nl.ca/index.php/ehealth-systems/healthe-nl/pharmacy-network

Pharmacy Network PIN List
https://www.nlchi.nl.ca/images/NLCHI_PIN_LIST.pdf

Pharmacy Act, SNL2012, P-12.2 and regulations;
http://assembly.nl.ca/Legislation/sr/statutes/p12-2.htm

APPENDIX C – ADOPTION LETTER

Dear   :

This letter represents official documentation from the Centre for Health Information, and pertains to the process of addressing an adoptee's files in your local system.

Recognize that it is important to manage adoptions in a timely and specific manner; and by following the process as identified by Pharmacy Network Program staff, the process will contribute to adoption management and support the future health care of the child/youth.

Please ensure the patient **(patient name, DOB)** is inactivated in the pharmacy's local system and insert a local note indicating "Inactivated upon request of NLCHI. Do not use this file as it may result in a patient confidentiality breach".

Please store this information in a confidential and secure location. If you need to contact the Centre pertaining to this adoption, please call 1-877-752-6006 and provide the following **ticket #: IM**

Regards,

_____
Program Manager, Pharmacy Network