



**Neighbourhood
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Nova Scotia College of Pharmacy

Consultation on Pharmacy Staffing Level Policy (and subsequent StaffWISE Tool)

Neighbourhood Pharmacy Association of Canada

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The Neighbourhood Pharmacy Association of Canada (Neighbourhood Pharmacies) represents leading pharmacy organizations across the country, including chain, banner, grocery chains, specialty pharmacies, and mass merchandisers with pharmacies. In Nova Scotia, we advance the delivery of care through more than 300 pharmacies and their teams, that serve as integral community health hubs in urban, suburban, rural, remote and First Nations neighbourhoods.

As the Canadian association representing pharmacy operators, we act in Nova Scotia and across the country to support policy makers with the development of innovative solutions that allow pharmacies to support public health and primary care while advocating for fair and sustainable funding for community pharmacies. We collaborate with our national and jurisdictional pharmacy colleagues on areas of alignment.

On behalf of our member pharmacies in Nova Scotia, we are sharing some concerns and considerations regarding the Nova Scotia College of Pharmacy's (the College) draft *Pharmacy Staffing Level Policy*, as well as the development and implementation of the College's planned StaffWISE initiative. Our concerns can be summarized as follows:

- 1. Transparency regarding evidence of harm and calculation of the Staffing Score**
- 2. Flexibility to respond to diversity and growth of patient healthcare needs**
- 3. Timing of policy implementation on current environment of pharmacy workforce shortages**
- 4. Impact on evolution of Community Pharmacy Primary Care Clinics**
- 5. Pharmacy operator business autonomy and decision-making**

Transparency regarding evidence of harm and calculation of the Staffing Score

We understand that the establishment the *Pharmacy Level Staffing Policy* (the Staffing Policy) and the forthcoming implementation of the StaffWISE program is based on efforts by the College to address a number of issues, including data from the Nova Scotia SafetyNet-Rx program which determined a correlation between increased medication incidents and "inadequate staffing" levels. However, we would encourage the College to provide more detail around the evidence suggesting the need for the Staffing Policy or the StaffWISE program. For example, is there clear causality linking medication incidents with patient safety? Are there other elements such as audit pressures or increased administrative burden that might also be factors? Additional information confirming the rationale behind the need for regulatory action is essential to evaluating the Policy.

We further understand that the College has developed a Staffing Score, an evidence-based calculation to determine adequate staffing levels based on existing workload. However, it is unclear whether the validated research behind the Staffing Score has been disseminated transparently to the pharmacies who will be directly impacted by this new policy. We understand that the research has been submitted for publication to a peer-reviewed journal, and we do applaud this step. However, we would encourage the College to more broadly share detail on

the methodology of the calculation of the Staffing Score and all its inputs before seeking further consultation on the draft Staffing Policy. For example, the Staffing Policy appears to require pharmacy owners and managers to maintain StaffWISE data records and ‘develop a staffing plan to reasonably achieve a Staffing Score of one (1) or higher’ without providing any insight into these tools. **We believe it is unreasonable for pharmacy members to provide meaningful feedback to the College on the Staffing Policy without more information on the StaffWISE tools and processes that will be used by both the College and its members to implement and abide by the Staffing Policy.**

Flexibility to respond to diversity and growth of patient healthcare needs.

The needs of patient populations are never homogeneous. There is considerable variation in the time, effort and complexity in the care pharmacy professionals must give to their patients to optimize their medication outcomes. Pharmacy operations and practice in Canada have significant differentiation in the business models, services, workflow, infrastructure and professional teams they require to best meet the unique medication and healthcare needs of their patients. **We do not believe a one-size-fits-all Staffing Score that is based on a standardized value for workload can accurately account for the variations in pharmacy services required by different patient populations, practice environments, or operational models.**

As the College is aware, technological innovations to streamline operations, reduce medication errors and enhance patient care are also being integrated into community pharmacies. Systems that can reduce burden on pharmacy staff by automating scheduling, appointment booking, ordering or even dispensing allow pharmacists to focus more on clinical activities. Improved electronic health records, e-prescribing and even Artificial Intelligence (AI) are modernizing the way pharmacies provide care. **We encourage the College to consider how the adoption of new technologies might alter existing workforce tasks, and whether the calculation of the Staffing Score itself can adapt to workload changes.**

Timing of policy implementation on current environment of pharmacy workforce shortages

We urge the College to consider the impracticality of introducing and enforcing the Staffing Policy in community pharmacies at a time when the province is already grappling with a significant shortage of pharmacists. The current shortage of pharmacists in the province is so acute that the College recently partnered with PANS and the Nova Scotia Government to initiate international targeted recruitment strategies such as the Express Entry Draw immigration pathway to accelerate the influx of needed pharmacy human resources.

Pharmacy teams are already struggling to deliver more with less resources. The staffing level data collection, reporting, maintenance of staffing plans, staffing level reviews and scorecards represent unknown administrative burdens that will need to be absorbed by a workforce already at capacity. **Regulatory mandates imposing required levels of pharmacy staff when such staff are difficult to recruit and retain will exacerbate, rather than ameliorate, the current situation; potentially limiting access to essential medications and services for patients across Nova Scotia.**

Impact on Evolution of Community Pharmacy Primary Care Clinic Models

The province of Nova Scotia is in the midst of evaluating the success of its landmark “community pharmacy primary care clinic models”. The outcomes of this project so far have demonstrated outstanding healthcare system benefits (for example, measurable decreases in ER visits by 9%) and could potentially revolutionize how pharmacy services are delivered in the province. It is unclear how the StaffWISE tool could be applied to the particular workflows and tasks that enable pharmacies to deliver primary care services. **We are concerned the Staffing Policy might have the unintended consequence of undermining the innovative pharmacy solutions currently being put in place to enable better access to appropriate care for Nova Scotians.**

Pharmacy operator business autonomy and decision-making

As the association representing pharmacy operators, we are aligned with the College in our belief that the delivery of pharmacy services must prioritize safe and effective care for the patients we serve, responding to their healthcare needs, as well as, equitably respecting their autonomy of informed choice. We further agree all pharmacy operators have a responsibility to create working environments that support pharmacy professionals’ ability to uphold their professional integrity and professional autonomy.

However, provided all standards of care are met, Nova Scotia’s pharmacies should have the agency to operationalize the care they offer in the most efficient and cost-effective means possible. Pharmacies must be able to make business decisions that ensure the financial sustainability of their operations to continue to deliver care and services that meet the needs of their patients. **We are concerned that this Staffing Policy will limit the autonomy and the ability of pharmacy owners and managers to make informed business decisions regarding their practices. We believe it is beyond the mandate of the College to constrain pharmacies in making business decisions that support the continued viability of their operations.**

Conclusion

These concerns highlight the need **for a more flexible approach beginning with identifying best practices for safe staffing levels without imposing mandates and disciplinary measures.** It is essential to consider the current challenges faced by pharmacies and ensure that any policy changes support rather than hinder their ability to provide quality care. We and our pharmacy members welcome the opportunity to work further with the College of Nova Scotia to ensure that all pharmacies and their professionals are equipped to deliver safe, effective, patient centred care in a sustainable way.