



Newfoundland & Labrador Pharmacy Board

Apothecary Hall
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St. John's, NL A1E 1B3

www.nlpb.ca

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Community Pharmacy Self-Assessment

GENERAL INFORMATION

Pharmacy Name: _____

Pharmacist-in-Charge: _____

Pharmacy Licence #: _____ Pharmacy Licence Displayed? Yes No

Code of Ethics Displayed? Yes No

Pharmacy Address and Other
Relevant Information:

Street Address _____ P.O. Box (if applicable) _____

City/Town _____ Postal Code _____

() _____ () _____
Phone Number Fax Number

Pharmacy Email Address _____ Pharmacy Website _____

Pharmacy Practice Management System (Software Vendor) _____

Does the pharmacy have a policy and procedure manual? Yes No

Please indicate the hours of operation for the pharmacy:

Pharmacy Hours:

MON-FRI _____
SAT _____
SUN _____
HOLIDAYS _____

Dispensary Hours (if different):

MON-FRI _____
SAT _____
SUN _____
HOLIDAYS _____

Does the pharmacy provide any of the following additional services?

- Local Delivery
- Provision of Compliance Packages
- Service to Personal Care Homes or Community Care Homes
- Service to Long-Term Care Facilities
- Extensive or Specialized Compounding including compounding of Sterile Products
- Administration of Drug Therapy by Inhalation or Injection
- Prescribing (including for minor ailments)
- Opioid Dependence Treatment Services (Buprenorphine-Naloxone or Methadone)

(If you checked "Yes" for any of these services, please complete the relevant section(s) starting on page 8)

DISPENSARY STAFF (attach additional pages, if necessary)

Name of Pharmacist-in-Charge

Registration #

In accordance with section 12.(c) of the *Pharmacy Regulations 2014*, I practice in the pharmacy for at least half of the operating hours of the pharmacy. (For a pharmacy that is open extended hours, it would be expected that the pharmacist-in-charge be present full time hours, e.g. 35-40 hrs/week)

Name

Registration #
(if applicable)

Full-Time
 Part-Time
 Relief

Please indicate this person's role:
Staff Pharmacist Pharmacy Intern Pharmacy Student Registered Pharmacy Technician Pharmacy Assistant

Name

Registration #
(if applicable)

Full-Time
 Part-Time
 Relief

Please indicate this person's role:
Staff Pharmacist Pharmacy Intern Pharmacy Student Registered Pharmacy Technician Pharmacy Assistant

Name

Registration #
(if applicable)

Full-Time
 Part-Time
 Relief

Please indicate this person's role:
Staff Pharmacist Pharmacy Intern Pharmacy Student Registered Pharmacy Technician Pharmacy Assistant

Name

Registration #
(if applicable)

Full-Time
 Part-Time
 Relief

Please indicate this person's role:
Staff Pharmacist Pharmacy Intern Pharmacy Student Registered Pharmacy Technician Pharmacy Assistant

Name

Registration #
(if applicable)

Full-Time
 Part-Time
 Relief

Please indicate this person's role:
Staff Pharmacist Pharmacy Intern Pharmacy Student Registered Pharmacy Technician Pharmacy Assistant

Name

Registration #
(if applicable)

Full-Time
 Part-Time
 Relief

Please indicate this person's role:
Staff Pharmacist Pharmacy Intern Pharmacy Student Registered Pharmacy Technician Pharmacy Assistant

- All staff members are required to wear name tags at all times.
- All non-registered support staff are properly trained and aware of the limitations of their role.
- Appropriate confidentiality agreements have been signed by all relevant pharmacy staff in accordance with the *Personal Health Information Act (PHIA)*

COMPLIANCE CHECKLIST

Please indicate compliance by checking the appropriate space below. If the pharmacy is not in compliance, please provide a comment to describe how this will be remedied prior to the assessor's visit.

	Compliant			Comments
	Yes	No	N/A	
SIGNS AND POSTINGS				
Sign with pharmacy trading name is fixed to the exterior of the building				
Sign clearly defining the prescription area is posted in the interior				
Hours of operation, including "lock & leave" hours, if applicable, are posted in view at the public entrance				
Hours of operation, including "lock & leave" hours, if applicable, are posted in view at the dispensary				
Pharmacy Licence is posted in a conspicuous location				

PHYSICAL LAYOUT AND SECURITY				
Dispensary is:				
at least 9.29 square metres, including the "No Patient Access" area, but excluding the Professional Products area, patient consultation area(s) and appropriate patient waiting area				
self-contained with a lockable entrance but pharmacist is still accessible to the public				
secured with suitable alarms and motion detectors				
well-ventilated				
appropriately lighted				
clean and tidy				
The dispensary is able to be secured against entry by the public or other staff when a pharmacist or pharmacy technician is not present in the pharmacy				
Does the dispensary have a lock and leave enclosure? If so, please complete the appropriate section on page 6.				
Pharmacy has a designated area for patient consultation that ensures visual and acoustical privacy and confidentiality and that is clean, safe, and comfortably furnished for the patient.				
Pharmacy premises is secured with suitable alarms, motion detectors and cameras in suitable locations and keys/alarm codes are limited to authorized pharmacy personnel (PLEASE INDICATE WHICH STAFF MEMBERS HAVE KEYS IN THE COMMENTS)				

DISPENSARY EQUIPMENT AND SUPPLIES				
Dispensary has at least 1.2 square metres of working counter space, excluding counter space occupied by equipment				
Dispensary has:				
a secure computer system with:				
practice management software that has the capability to:				
store and report all required patient health information;				
identify each user who is granted access, control the access granted to the users, and create an accurate audit trail of access;				
scan prescriptions and other relevant patient records; and				

	Compliant			Comments
	Yes	No	N/A	
DISPENSARY EQUIPMENT AND SUPPLIES (continued)				
generate reports of prescription information chronologically and by drug name and strength, patient name, and prescriber name				
a connection to the provincial electronic health record through the Pharmacy Network				
suitable internet access to allow staff access to NLPB email as well as other electronic resources appropriate to pharmacy practice; and				
adequate backup and recovery systems in place to allow for information retrieval in the event of system failure or destruction				
printer(s) capable of printing all relevant labels and receipts as well as required reports (e.g. narcotic sales, transaction reports, patient profiles)				
suitable equipment that allows the staff to send, receive, and/or copy electronic or non-electronic documents (for example, a fax machine). Such equipment must be located in an area that preserves patient confidentiality;				
suitable equipment that allows staff to scan documents (including prescriptions and other patient records) and store them electronically (for example, a scanner);				
a refrigerator for the <u>exclusive</u> storage of drugs requiring refrigeration that meets the cold chain requirements as follows:				
a "purpose-built" or "modified" domestic refrigerator				
a thermometer that provides continuous monitoring				
a prescription balance (with a minimum sensitivity of 10mg) OR an electronic balance (with a minimum sensitivity of 10mg) AND a set of metric weights or a calibration weight				
scale is regularly calibrated in accordance with manufacturer recommendations				
a record of calibration is maintained				
a paper shredder or a service for the safe disposal of confidential information (IF THE DISPOSAL OF CONFIDENTIAL MATERIAL IS CONTRACTED OUT, PLEASE NAME THE COMPANY IN THE COMMENTS)				
a telephone that has a number listed in an appropriate telephone directory				
a sanitary sink with a supply of hot and cold water				
sanitary waste disposal				
an appropriate method to dispose of hazardous waste				
adequate shelf and storage space				
a sufficient supply of prescription and non-prescription drugs to support the professional services provided by the pharmacy				
required and recommended reference material in accordance with the <i>Standards of Pharmacy Operation</i> (see checklist on pg 13)				
suitable equipment to meet the pharmacy's needs (i.e. graduated cylinders, mortars & pestles, spatulas, counting trays, funnels, stirring rods and ointment pads)				
a sufficient amount of dispensing supplies to meet the pharmacy's needs (i.e. prescription & auxiliary labels, safety & non-safety vials, liquid medication bottles, ointment jars, distilled water)				
a policy in place to ensure that prescription and non-prescription stock is checked on a routine basis to prevent expired or soon-to-expire medication from being dispensed/sold				

	Compliant			Comments
	Yes	No	N/A	
RECORD KEEPING AND INFORMATION MANAGEMENT				
Pharmacy has appropriate policies in place with regard to the protection of personal health information in accordance with the <i>Personal Health Information Act</i>				
Pharmacy has a prescription filing system that is readily accessible to the dispensary staff but still capable of being secured against unauthorized access				
A backup of electronic records is performed once daily and tested for recovery on a regular basis. A copy of the backup is securely stored off-site or in a fire-proof and theft-resistant safe				
Physical patient records required by legislation, the <i>Standards of Pharmacy Operation</i> , and the Standards of Practice are retained in a secure, but readily accessible format for a minimum of 3 years after being scanned and stored electronically. (Records that have not been scanned for electronic storage must be retained for a minimum of 10 years)				
Electronic patient records, including patient profiles, patient medication profiles, and scanned copies of the records identified above are retained in a secure, but accessible format for a minimum of 10 years				
All physical and electronic records (including backups) are adequately secured to protect them from unauthorized access, theft, use, or loss. (Security measures should include appropriate physical, administrative, and technical safeguards.)				
Physical records are destroyed using an in-pharmacy shredder, a service for the safe disposal of confidential information, or by complete incineration.				
Electronic records are erased or destroyed in such a manner that the information cannot be reconstructed.				

SECURITY & ACCOUNTABILITY PROCEDURES FOR NARCOTICS & CONTROLLED DRUGS (INCLUDING BENZODIAZEPINES AND OTHER TARGETED SUBSTANCES, WHERE APPLICABLE)				
All narcotic and controlled drugs are stored in a safe or secure lockable cabinet that is appropriately anchored to the floor that will be used solely for the storage of specified medications				
A computerized or manual perpetual inventory of narcotics and controlled drugs is maintained				
Pharmacy has a policy in place to ensure a physical inventory count of narcotics and controlled drugs is performed and documented at least once every three months				
A register or log of all receipts of narcotics and controlled drugs is maintained in accordance with the Narcotic Control Regulations				
Hard copies of purchase invoices (or photocopies thereof) are retained in a readily retrievable format, filed in order by date and invoice number				
Pharmacy has a policy in place to ensure that random audits of purchase records are conducted monthly to ensure they have been accurately recorded in the Perpetual Inventory Record				
A register or log of all sales of narcotics and controlled drugs, including store-to-store transfers and provisions of "Emergency Supplies", is maintained in accordance with the Narcotic Control Regulations				
Pharmacy has a policy in place to ensure that random audits of sales records are conducted monthly to ensure they have been accurately recorded in the Perpetual Inventory Record				
Pharmacy has a system in place for prescriptions for narcotics and controlled drugs (including purchases of exempted codeine products) to be filed separately from non-narcotic prescriptions, in sequence by date and transaction number and retained in a readily retrievable, appropriately bundled and labeled format				

	Compliant			Comments
	Yes	No	N/A	
PROVINCIAL DRUG SCHEDULES				
The Professional Products area of the pharmacy is easily identifiable and in an area immediately adjacent to the dispensary under the direct supervision of a pharmacist				
The "No Public Access" area of the dispensary is easily identifiable but separated from the Professional Products area so that there is no opportunity for patient self-selection				
All Schedule III products are located in the Professional Products area				
All Schedule II products are located in the "No Public Access" area so that they can be sold only after consultation with a pharmacist				
Exempted codeine products are only sold in accordance with the <i>Standards of Practice regarding the Sale of Exempted Codeine Products</i>				
All purchases of exempted codeine products are documented on the patient profile and appropriately labeled for use by the patient				
Dimenhydrinate products are sold in accordance with the <i>NLPB Guidelines Regarding the Sale of Dimenhydrinate (Appendix C of the Guide to the Provincial Drug Schedules)</i>				

NON-STERILE COMPOUNDING				
Areas dedicated to compounding are clean, sanitary and orderly. Premises permit effective cleaning of all surfaces and are designed to prevent contamination of medication and the inadvertent addition of extraneous material to the medication				
Equipment used for compounding is:				
situated in an area that permits it to function in accordance with its intended use. Equipment should be operated in a manner that prevents contamination				
easily and routinely cleaned to minimize the potential for contamination				
suitable for the preparation of the desired compound				
kept clean, dry, and protected from contamination during storage to prevent the addition of extraneous materials				
Equipment used for measuring and weighing is calibrated, if appropriate, on a regularly scheduled basis and documentation showing proof of calibration and servicing is maintained in the pharmacy records				
Pharmacy has policy in place detailing the minimum requirements for health and hygienic behavior of individuals performing compounding activities including, but not be limited to suitable dress (e.g. gowns, masks, gloves, footwear); hand hygiene; and health conditions and open lesions				
Only ingredients with a standard designation such as BP (British Pharmacopeia), USP (United States Pharmacopeia) or NF (National Formulary) are used for compounding				
If ingredients without a standard designation must be used, only those with either a valid lot number and beyond-use-date (date of receipt is recorded if the expiry date is not available); or a Certificate of Analysis are used for compounding				
Ingredients are stored in a manner that prevents the alteration to the potency, purity, and physical characteristics of the raw material				

	Compliant			Comments
	Yes	No	N/A	
NON-STERILE COMPOUNDING (continued)				
Written compounding records are available to enable the pharmacist to ensure that all compounded products can be replicated in formulation and production; and retrieved in the event of a recall or adverse event. These records include:				
Written formula used				
Record of stepwise instructions				
Name, lot number, and expiry of all raw materials				
Quantity required and quantity actually weighed				
Date of preparation and expiry				
Initials/signature of compounder and/or pharmacist responsible for the preparation and checking				
Pharmacists that compound or delegate compounding activities to technical staff have the knowledge and skills to be responsible for the preparation of the product.				
Pharmacists use their professional judgment when deciding whether they have the expertise to compound a specific product and are aware of good compounding principles and practices.				
Pharmacists unable to compound a drug product for the patient refer the patient to a pharmacist with the ability to prepare the product.				
When preparing and dispensing compounded products, pharmacists:				
gather sufficient information to make knowledgeable decisions regarding the formulation and process of the compounding including accessing formulations from a reputable source such as a peer-reviewed published journal or, if no formulation is available, develop a formula using their knowledge of pharmacology, chemistry, and therapeutics.				
determine whether or not the product should be compounded in a sterile manner				
determine whether or not the ingredients require specialized handling and storage				
ensure the quality and accuracy of the ingredients				
determine the equipment needed to compound the product				
ensure the compounding area is clean, sanitary, and orderly				
prepare the product in a logical, safe, and pharmaceutically elegant manner				
package the product to ensure the stability of the product and proper patient use				
ensure the product is labelled in accordance with the SOPO-Community including all active ingredients and relative strengths as well as a beyond-use date for the product				
document the required information to maintain accurate records				
counsel individuals on the appropriate use of the compounded product as well as how to properly store the product				

ADDITIONAL SERVICES

Please complete the appropriate section(s) below, if applicable (as indicated on page 1). If the pharmacy is not in compliance, please provide a comment to describe how this will be remedied prior to the assessor's visit.

	Compliant			Comments
	Yes	No	N/A	
LOCK AND LEAVE				
The lock and leave enclosure is constructed in such a way to physically and securely separate the dispensary from the rest of the pharmacy				
When the lock and leave enclosure is secured, only pharmacists or registered pharmacy technicians may enter the dispensary for any reason.				
If prescriptions are available for patient pick-up when the lock and leave enclosure is secured and the pharmacist is not present, the following requirements ARE MET:				
All storage considerations are taken into account including breakage and refrigeration				
The patient's confidentiality is protected at all times by ensuring the outer package contains only the patient's name and address				
All patients who pick up these prescriptions receive proper and sufficient counseling				
A documented paper trail of all prescriptions picked up, including signatures of the recipients or their designated agent, is retained in the pharmacy				

LOCAL DELIVERY				
All storage considerations are taken into account including breakage and refrigeration				
The patient's confidentiality is protected at all times by ensuring the outer package contains only the patient's name and address				
Patients requesting delivery of prescriptions to a person other than themselves are asked to provide the pharmacy with written delegation of authority for that person to act as the patient's agent in accordance with the Standards.				
All patients to whom prescriptions are delivered receive proper and sufficient counseling				
A documented paper trail of all prescriptions delivered, including signatures of the recipients or their designated agent, is retained in the pharmacy				

PROVISION OF COMPLIANCE PACKAGES				
The patient and/or patient caregiver is counseled on the unique nature of the package, including how to properly use and store the package				
All compliance packages are appropriately labeled so that all drugs in the package may be readily identified				
Pharmacy has a system in place to ensure that an appropriate record of each package is retained in a easily retrievable format				

SERVICE TO LONG-TERM CARE FACILITIES				
Please indicate how many long term care facilities are currently serviced by your pharmacy				
Please indicate how many long term care beds are currently serviced by your pharmacy				
Pharmacy has developed a Policy and Procedure manual regarding medications and the pharmacy services provided to the facility, a copy of which has been provided to the facility				

	Compliant			Comments
	Yes	No	N/A	
SERVICE TO PERSONAL CARE HOMES OR COMMUNITY CARE HOMES				
Please indicate how many personal care homes or community care homes are currently serviced by your pharmacy				
Please indicate how many personal care home or community care home beds are currently serviced by your pharmacy				
Pharmacy has developed a Policy and Procedure manual regarding medications and the pharmacy services provided to the home, a copy of which has been provided to the home				
A pharmacist visits and audits the medication room or storage area at the home at least once annually				
Resident medication reviews are conducted at least annually				
Pharmacists provide inservicing to all personal care home staff regarding correct medication usage, storage, administration and recording procedures				

EXTENSIVE OR SPECIALIZED COMPOUNDING INCLUDING COMPOUNDING OF STERILE PRODUCTS				
Please describe the types of extensive or specialized compounding performed by the pharmacy				
All pharmacists engaging in these specialized areas are knowledgeable and appropriately trained (please note training in the comments section)				
Pharmacy follows established standards for the preparation of these specialized products in accordance with a recognized source (e.g. Canadian Society of Hospital Pharmacists)				

ADMINISTRATION OF DRUG THERAPY BY INHALATION OR INJECTION				
ALL pharmacists that administer drug therapy by inhalation or injection have successfully completed an approved education program and are authorized by the Board to participate in such services				
The operational standards outlined in the <i>Standards of Practice</i> ARE MET including:				
The location where injections are administered is designed and laid out to allow for all inhalations and injections to be provided in a private patient care environment that is clean, safe, and comfortably furnished for the patient.				
This injection location allows for suitable post-therapy observation and be equipped with all necessary emergency support equipment and supplies that may be required (e.g. appropriate drugs, resuscitator bag, ice/cold compresses)				
The pharmacy's Policy and Procedure Manual includes a section on the administration of drugs by inhalation or injection that covers, at a minimum, drug storage and handling procedures, documentation procedures, post-inhalation or -injection monitoring options, emergency protocols, and universal precautions.				
All pharmacy staff have access to the references required by the Standards				
The practice standards outlined in the <i>Standards of Practice</i> ARE MET including:				
ALL documentation required by the Standards, including prescriptions, forms, and communications, is retained in a readily accessible format for a minimum of 10 years.				

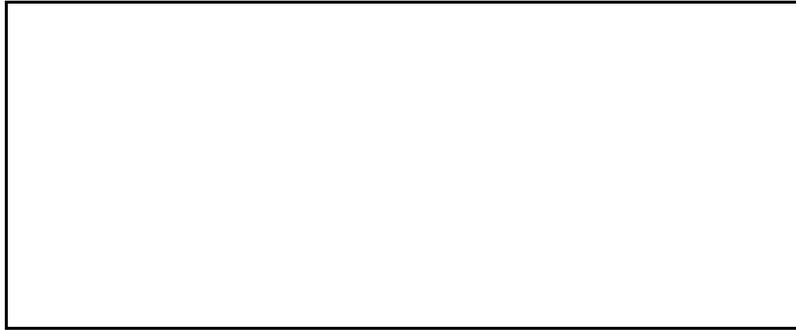
	Compliant			Comments
	Yes	No	N/A	
PRESCRIBING (INCLUDING FOR MINOR AILMENTS)				
ALL pharmacists that will prescribe have successfully completed the required orientation program and are authorized by the Board to participate in such services				
The operational standards outlined in the <i>Standards of Practice</i> ARE MET including:				
The location is designed and laid out to allow for all patient consultations to be provided in a private patient care environment that is clean, safe, and comfortably furnished for the patient.				
The practice standards outlined in the <i>Standards of Practice</i> ARE MET including:				
ALL documentation required by the Standards, including prescriptions, forms, and communications, is retained in a readily accessible format for a minimum of 10 years.				

OPIOID DEPENDENCE TREATMENT SERVICES				
Please indicate how many patients currently receive methadone for opioid dependence				
Please indicate how many patients currently receive buprenorphine-naloxone for opioid dependence				
ALL pharmacists (including relief) that are participating in opioid dependence treatment services have successfully completed an approved education program and are authorized by the Board to participate in such services				
The operational standards outlined in the <i>Standards of Practice</i> ARE MET including:				
The pharmacy is registered with the Board as a site for opioid dependence treatment				
Pharmacy is designed and laid out to allow for all pharmacist-patient discussions, witnessed doses and the provision of take home doses to take place in an area of visual and acoustical privacy that is clean, safe, and comfortably furnished for the patient				
The pharmacy is prepared to accommodate a daily dosing requirement for patients and maintains the necessary hours to do so				
The pharmacy's Policy and Procedure Manual includes a section on the provision of medications for the treatment of opioid dependence				
All pharmacy staff have access to the references required by the Standards				
The practice standards outlined in the <i>Standards of Practice</i> ARE MET including:				
ALL pertinent information and documentation is collected prior to administering opioid dependence treatment to a patient (verbal discussion occurs with physician regarding patient treatment agreement, a written physician-pharmacist agreement is received, history from previous pharmacy is obtained, if applicable)				
Verbal discussion occurs with patient about terms and expectations of opioid dependence treatment services and a patient-pharmacist agreement is in place prior to administering opioid dependence treatment and as needed thereafter				

	Compliant			Comments
	Yes	No	N/A	
OPIOID DEPENDENCE TREATMENT SERVICES (continued)				
Methadone and buprenorphine-naloxone (including prepared doses for patients) are stored in a secure location at all times (i.e. during hours of operation and when the pharmacy is closed for business)				
ALL doses that require witnessing of ingestion are witnessed by a PHARMACIST; authorized take-home doses are given directly to the patient by a PHARMACIST; ALL administration activities are accurately recorded in a patient's Administration Log				
ALL methadone doses are prepared using an unflavoured, commercially-prepared 10 mg/mL solution and doses are measured using a device that has an accuracy of +/- 0.1 mL				
ALL documentation required by the Standards, including prescriptions, forms, and communications, is retained in a readily accessible format for a minimum of 10 years.				

PRESCRIPTION LABELS

Please attach a copy of a de-identified REGULAR prescription label:



Please attach a copy of a de-identified MULTI-INGREDIENT (i.e. COMPOUND) prescription label:



If applicable, please attach a copy of a de-identified METHADONE WITNESSED DOSE prescription label:



If applicable, please attach a copy of a de-identified METHADONE TAKE-HOME DOSE prescription label (including required auxiliary):



REFERENCE LIBRARY

Pharmacies are REQUIRED to have access to at least one reference from each of the following categories:

Category	Versions	Please select (circle or underline) the reference your pharmacy has available	Y/N
Canadian Compendium	current year's edition	Compendium of Pharmaceuticals & Specialties (CPS)	
Complementary/ Alternative/ Natural Health	current edition or within the last 4 years	AltMedDex® System, Lexi-Natural Products, Natural Medicines Comprehensive Database, The Review of Natural Products	
Drug Interactions	current year's edition or previous year's edition with continuous updates	Drug Interactions Analysis & Management, Drug Interaction Facts, Drug-Reax® System, Evaluations of Drug Interactions, Lexi-Drug Interactions	
General Drug Information Reference	current edition or next to current edition	AHFS Drug Information, Drug Facts & Comparisons, DrugDex® System, Lexi-Drug Information	
Medical Dictionary	within the last 10 years	<i>Dorland's, Mosby's, Stedman's, Tabor's</i> or any equivalent professional medical dictionary	
Minor Ailments	current edition	BOTH Compendium of Therapeutics for Minor Ailments (formerly Patient Self-Care) AND Compendium of Products for Minor Ailments (formerly Compendium of Self-Care Products)	
Pediatrics	within the last 4 years	Lexi-Pediatric and Neo-Natal Dosage Handbook, Sick Kids Drug Handbook and Formulary	
Pregnancy and Lactation	within the last 3 years	Drugs in Pregnancy and Lactation, <i>Briggs</i> , Lexi-Pregnancy and Lactation	
Therapeutics	within the last 4 years	Applied Therapeutics: The Clinical Use of Drugs, <i>Koda-Kimble</i> , Clinical Pharmacy and Therapeutics, <i>Walker</i> , <i>Compendium of Therapeutic Choices</i> , Pharmacotherapy: A Pathophysiologic Approach, <i>DiPiro</i> , Textbook of Therapeutics: Drug & Disease Management, <i>Helm</i>	
Regulatory Information	current access to the NLPB website including the NLPB Pharmacy Practice Manual, newsletters and advisories		
Pharmacy Professional Journals	current subscriptions to at least three relevant pharmacy journals (e.g. Canadian Pharmacists Journal, Pharmacy Practice+, The Pharmacist's Letter)		

The following references are also RECOMMENDED for all pharmacies:

Category	Please select (circle or underline) the reference your pharmacy has available	Y/N
Compounding	Sick Kids Pharmacy Compounding Service website (http://www.sickkids.ca/pharmacy/compounding-service/index.html)	
Geriatrics	Lexi-Geriatric Dosage Handbook	
Lactation	LactMed website (toxnet.nlm.nih.gov/cgi-bin/sis/htmlgen?LACT), Medications and Mother's Milk (www.ibreastfeeding.com), Motherisk website (www.motherisk.org)	
Pharmacology	Basic & Clinical Pharmacology, <i>Katzung</i> , Goodman & Gillman's The Pharmacological Basis of Therapeutics, <i>Brunton</i>	
Other	Clinical Handbook of Psychotropic Drugs, <i>Bechlibnyk-Butler</i> , Lexi-Infectious Diseases, Remington: The Science and Practice of Pharmacy, Sanford Guide to Antimicrobial Therapy	

REFERENCE LIBRARY (continued)

The following additional references are REQUIRED for pharmacies participating in specific practice areas:

Category	References	Y/N
For pharmacies providing administering drug therapy by inhalation or injection	Canadian Immunization Guide (www.phac-aspc.gc.ca/im/professionals-professionnels-eng.php)	
	Newfoundland and Labrador Immunization Manual (www.health.gov.nl.ca/health/publichealth/cdc/health_pro_info.html#immunization)	
For pharmacies providing opioid dependence treatment services	College of Physicians and Surgeons of Newfoundland and Labrador Methadone Maintenance Treatment Standards and Guidelines (www.cpsnl.ca)	
	Health Canada Best Practices: Methadone Maintenance Treatment (www.hc-sc.gc.ca/hl-vs/pubs/adpapd/methadone-bp-mp/index-eng.php)	
	Opioid Agonist Maintenance Treatment, 3rd edition (http://store-camh.myshopify.com/collections/english-anglais/products/p6500)	
	Clinical Practice Guideline (knowledgex.camh.net/primary_care/guidelines_materials/Documents/buprenorphine_naloxone_gdlns_2012.pdf)	

WORKFLOW CHECKLIST

Please complete the following checklist to assess the safety, effectiveness and efficiency of the workflow in your pharmacy. The checklist will be further discussed during the onsite assessment.

	Yes	No	N/A	COMMENTS
Does the pharmacy have designated work areas for order entry, packaging, checking, and counseling and prescription pick-up?				

ORDER ENTRY				
	Yes	No	N/A	COMMENTS
Is the entry area relatively free of distractions, noise and clutter?				
Is basic patient information obtained for every patient before dispensing a prescription? (full name, DOB, address, telephone number(s), gender, insurance information, physician's name, allergies, current medications, vitamins, OTC's, medical conditions, pregnancy, smoking status, etc.)?				
Is a standard process in place to ensure medications are dispensed to the correct patient (verifying by address/phone #/ DOB/MCP)?				
Is the clinical indication for each medication dispensed noted to determine appropriateness and to distinguish between medications with look-alike names?				
Is a system in place at entry to screen and detect drugs to which a patient is allergic?				
Is a system in place at entry to screen prescription orders against the current patient profile for potential contraindications, interactions, duplications and appropriateness of frequency and dose?				
Are insurance or pricing issues identified at the entry station?				
Are clinically significant computer warnings reviewed by a pharmacist even when a technician initially enters prescriptions in to the computer?				
Are all of the above considered when giving a patient a realistic wait time?				
Is a system in place to prioritize prescription orders?				
Is a system in place to organize prescriptions by patient?				

PACKAGING PROCESS				
	Yes	No	N/A	COMMENTS
Are dispensing products easily accessible during packaging?				
Is an automated bar code verification system used to verify the pharmacy stock used matches the prescription?				
Are DIN's manually checked and signed off?				
Are prescriptions packaged referencing the prescription order itself AND the computer-generated label together?				
Do staff members use gloves or proper hand washing when handling loose oral solid products and prior to compounding products?				
Are only clean dispensing devices used for preparation?				
When dispensing prescriptions, do assistants and pharmacists work with one drug at a time and affix the label to the corresponding prescription container before working on the next prescription?				

PRESCRIPTION CHECKING PROCESS				
	Yes	No	N/A	COMMENTS
When checking prescriptions, do pharmacists review prescription orders for completeness?				
Are prescriptions checked by referencing the prescription order itself AND the computer-generated label together?				
When checking prescriptions, do pharmacists assess one order at a time and complete check for each medication dispensed before working on the next prescription order?				
At the time of checking, does the pharmacist review for potential contraindications? Drug interactions? Duplicate therapies?				
Are prescription clarifications and interventions properly documented on the prescription order and/or the patient profile?				
Are refill medications checked against the original prescription order?				
Does the pharmacist assess compliance when providing refills?				
Does the pharmacist address problems with compliance that pose risks to the patient or can affect the efficacy of the medication?				

PRESCRIPTION PICK-UP				
	Yes	No	N/A	COMMENTS
Is prescription check-in separated from prescription counseling?				
For pick-up of refilled medications, are vials opened and each refill medication shown to the patient for verification of appearance?				
Is a system in place to alert pharmacists of the need for counseling on new medications or communications to deliver when a patient comes in to pick up a prescription?				
Does the pharmacist provide counseling to patients/caregivers to educate them about the name of the drug, its purpose, prescribed dose, directions for use, the expected benefits and potential risks, and important safety concerns, before dispensing all new medications?				
Does the pharmacist inquire about the patient's understanding of the purpose of new medications and refills and are patient questions/concerns?				
When dispensing oral liquid medications, is a proper measuring device provided and the patient/caregiver shown how to use it?				
Are patients instructed on the proper use of devices provided by the pharmacy? (blood glucose monitors, spacers for inhalers, etc.)				
If someone other than the patient picks up a prescription, is every effort made to contact the patient directly for counseling?				
Is up-to-date useful written information provided to patients about prescriptions that they are receiving?				
Are all counseling activities documented on the patients profile and/or original hardcopy?				

DISTRACTIONS				
	Yes	No	N/A	COMMENTS
Do pharmacy staff members have assigned roles during a shift to manage each stage of prescription processing, phone calls, patient questions, etc.?				
Is a system in place to prioritize patient questions along with prescription orders?				
Does patient counseling take place in a suitable private area with minimal distractions?				

