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Joint Statement: Long Term Care – Authorized Prescriptions

The Saskatchewan College of Pharmacy Professionals (SCPP), the College of Registered Nurses of Saskatchewan (CRNS) and the College of Physician and Surgeons of Saskatchewan (CPSS) have a mutual concern regarding verbal orders generated from Long Term Care (LTC) Facilities. The pharmacist may only accept a verbal or faxed original order written and signed by an authorized prescriber e.g. physician, NP, dentist, etc. A pharmacist may not accept a verbal or faxed written order (transcribed) from a nurse.

Background

Resident care within LTC facilities is provided by many different Health Care Professionals (HCP). Some of the care is provided by an HCP via direct interaction with the resident while other care is provided via phone consultations.

It is important to understand how LTC facilities fit within the Saskatchewan Health Authority (SHA) and the community. If publicly funded, LTC facilities are operated by the SHA and affiliates as per The Provincial Health Authority Act and standards of care are established by Accreditation Canada and Professional Regulatory Authorities. SHA establishes contracts with community pharmacies to ensure reliable and consistent medication provision and professional services. In general, residents of LTC facilities are considered to be living in their own home. LTC facilities are not hospitals or extensions of hospitals. They are separate entities that have different regulatory requirements. In hospitals there are policies and procedures that govern how care is provided including how verbal orders are to be handled. The legislation, policies and procedures for hospitals do not apply to LTC facilities. Therefore, how a verbal order is handled within a LTC facility has different requirements.

Legislation

Provincially, each regulatory body has legislation which indicates who may provide and receive verbal orders/authorizations/prescriptions including:

Physicians:

CPSS Regulatory Bylaws Part C – Practice Standards, 17.1 Minimum Standards for Written and Verbal Medication Prescriptions Issued by Physicians, including:

(n) All verbal prescription must be communicated directly between a physician and a licensed pharmacy professional, as permitted by the Saskatchewan College of Pharmacy Professionals, as opposed to agents for either licensed professional.

This means that all verbal prescriptions must be communicated directly between a physician and a licensed pharmacy professional, as permitted by the Saskatchewan College of Pharmacy Professionals, as opposed to agents for licensed professionals. This means that when a physician issues a verbal order in a LTC home, they must ensure that the prescription is directly communicated to a licensed pharmacy professional, rather than through intermediaries such as nursing staff.

The CPSS and the SPCP accept electronic, written, and verbal modes of transmission for prescriptions, provided that they meet the specified requirements to ensure the accuracy, authenticity, and security of the transmitted information, as stipulated in the CPSS Regulatory Bylaw 17.1 and meet the requirements of the SPCP.

Registered Nurses:

A practitioner (physician, NP, dentist) may provide a verbal order or authorization to a Registered Nurse (RN) to provide medication or care to a resident of a LTC facility.

The RN is not authorized under legislation to provide a verbal order (prescription) to a pharmacist unless they are designated as an “authorized prescriber” [RN(AAP) or NP] per CRNS bylaws and under provincial legislation [The Drug Schedules Regulations](#), 1997 section 1.2

1.2 For the purposes of clause 2(t) of the Act, the following health care professionals are prescribed as practitioners:

(a) registered nurses who are entitled pursuant to *The Registered Nurses Act*, 1988 to practise:

(i) in the nurse practitioner category; or

(ii) in the general category with additional authorized practice;

[Guideline for Prescribing Medication](#) (crns.ca) provides additional information.

Pharmacists:

A pharmacist cannot accept a verbal order from an RN in a LTC facility unless that HCP is an “authorized prescriber” e.g. RN(AAP) or NP as included in

subsection c.01.041(1)(a) of the Food and Drugs Regulations

C.01.041 (1) No person shall sell a prescription drug unless

(a) they are entitled under the laws of a province to dispense a prescription drug and they sell it in that province under a verbal or written prescription that they received;

and the Narcotic Control Regulations subsection 31(2)(b)

(b) if the pharmacist has received a written order or prescription for the narcotic that is signed and dated by a practitioner and has verified the signature of the practitioner, if it is not known to them;

As per the SCPP legislation “prescription” means an authorization given by a *practitioner* directing that a stated amount of any drug or mixture of drugs specified in it be dispensed for the person or animal named in the authorization.”

Some Misconceptions

A practitioner has up to seven days to “sign” a verbal order at the LTC facility which can then be faxed to the pharmacy.

Fact - A verbal order must be provided to the pharmacy professional by an authorized practitioner.

A facsimile transmission of an order from the long-term care facility which was transcribed by the facility’s nursing staff is a ‘written order’ that may be filled by the pharmacist.

Fact - A faxed order must be signed by an authorized practitioner as per the [Electronic Transmission of Rx](#).

In summary, a pharmacist may only accept a verbal or faxed original order written and signed by an authorized prescriber e.g. physician, NP, dentist, etc. The pharmacist may not accept a verbal or faxed written order (transcribed) from a nurse. In addition to complying with legislation, regulatory bylaws and standards, RNs are expected to adhere to employer policies and advocate for their development if there are identified gaps.