



## Emergency Exemptions for Prescribing Authority

### 1. Purpose:

The laws in Saskatchewan allow pharmacists to prescribe drugs under certain circumstances, where they are trained to do so. These circumstances and the associated restrictions and conditions are outlined in the Saskatchewan College of Pharmacy Professionals (SCPP) Regulatory Bylaws (Part K – Prescribing of Drugs).

In August 2019, these bylaws were changed to allow the Registrar to waive some of the restrictions and conditions in extraordinary circumstances, when it is in the public interest to do so. The new bylaws expand the prescriptive authority for pharmacists, in extraordinary circumstances. These bylaws do not limit or reduce a pharmacist's current prescribing authority. The extraordinary circumstances to which the new bylaws apply may affect a large patient population or a smaller sized patient population. Under these extraordinary circumstances, the Registrar may authorize pharmacists to prescribe:

- Quantities that exceed the limits in the bylaws;
- When the most previous prescription was issued by a pharmacist; or,
- When an active patient-practitioner (e.g. Physician, Registered Nurse - Nurse Practitioner) relationship no longer exists.

This policy outlines the criteria and circumstances that the Registrar will use in this decision.

### 2. Policy:

These bylaw amendments provide the College with greater flexibility to address extraordinary circumstances that temporarily impede the continuity of care for patients in Saskatchewan. They also promote interdisciplinary collaboration, by enabling the College to respond when concerns are raised by other health care providers.

2.1. Extraordinary Circumstances - For the purposes of clause 10(5) of the new bylaws, “extraordinary circumstances” include, but are not limited to:

- 2.1.1. When the patient is unable to obtain a new prescription from an authorized practitioner before running out of medication, due to extenuating circumstances in which the original prescriber is not available and has not made coverage arrangements to maintain patient care;
- 2.1.2. Subject to consultation with affected regulatory bodies, to continue a patient who is stable on a Schedule I drug at the same dose and duration, excluding Prescription Review Program drugs, when their physician is not available to provide care for an undetermined period and has not made coverage arrangements to maintain patient care;

- 2.2. Criteria that will Guide Exemptions: For the purposes of clause 10(6) of the new bylaws, the following criteria will guide exemptions authorized by the Registrar:
- 2.2.1. That which is in the best interests of the public;
  - 2.2.2. The urgency of the situation and the need for a timely decision;
  - 2.2.3. Precedents that may apply;
  - 2.2.4. The exemption is compatible with one or more of Council's values for the SCPP;
  - 2.2.5. Promotes interdisciplinary collaboration;
  - 2.2.6. Other alternatives have been examined and none of which are feasible; and
  - 2.2.7. The Ministry of Health and other interested parties have been consulted and there is a preponderance of support in the public interest.

### **3. Procedure:**

- 3.1 Requests for prescribing exemptions may come to the SCPP Registrar from:
  - 3.1.1 Any other regulatory body with justification supporting the request. In this circumstance, the SCPP Registrar will collaborate with the Registrar of the regulatory body of the authorized practitioner to whom the extenuating circumstances apply; or
  - 3.1.2 Pharmacists expressing reasonable grounds to believe an exemption would apply.
- 3.2 In accordance with clause 10(6) of the bylaws the Registrar will:
  - 3.2.1 Document situations in which these prescribing exemptions were granted, the rationale used to support these decisions, and any other amendments that may be required to administer the bylaws as intended;
  - 3.2.2 Communicate the exemptions to affected stakeholders including any limitations or restrictions; and
  - 3.2.3 Report these exemptions to Council for monitoring.

### **4. Related Resources:**

Prescriptive Authority:  
<https://www.saskpharm.ca/site/profprac/presauthority?nav=sidebar>

### **5. Authority:**

See Appendix A "Saskatchewan Gazette" or Government of Saskatchewan website:  
<https://pubsaskdev.blob.core.windows.net/pubsask-prod/113387/G1201935.pdf>

## APPENDIX A

2122

THE SASKATCHEWAN GAZETTE, AUGUST 30, 2019

---

*The Pharmacy and Pharmacy Disciplines Act* [subclauses 14(2)(i) and 23(3)(a) and subsection 15(1)]

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS — REGULATORY BYLAW  
AMENDMENTS

Under the authority of clauses 14(2)(i) and 23(3)(a) of *The Pharmacy and Pharmacy Disciplines Act*, subsection 9.1(1) of *The Drug Schedules Regulations, 1997* and in accordance with subsection 15(1) of *The Pharmacy and Pharmacy Disciplines Act*, the regulatory bylaws of the Saskatchewan College of Pharmacy Professionals are amended as follows:

(1) That section 10 of Part K of the regulatory bylaws be repealed and replaced with:

**“PART K – PRESCRIBING OF DRUGS**

**“General Provisions**

**10(1)** Except as provided in subsections 10(4), (5) and (6) of Part K, and notwithstanding any other provision of this bylaw no licensed pharmacist may:

- (a) prescribe a drug unless prior to exercising such authority the licensed pharmacist has reviewed the patient’s medication history in the Pharmaceutical Information Program;
- (b) except with the express authority of a practitioner, which authority may be communicated orally, in writing or otherwise, prescribe a supply of a drug that will exceed the lesser of the quantity equivalent to the amount last prescribed to the patient by the practitioner or one hundred (100) days’ supply of that drug, at the dosage level and frequency prescribed by the licensed pharmacist; or
- (c) prescribe a drug in circumstances where the most previous prescription for that drug, or a therapeutic substitution for a drug, was issued by a licensed pharmacist.

(2) A licensed pharmacist may only prescribe a drug pursuant to the authority conferred pursuant to this bylaw if:

- (a) the licensed pharmacist reasonably believes that the prescription decision of the licensed pharmacist has been consented to, in accordance with the following:
  - (i) in the context of services provided within a Public Health Care Institution, the licensed pharmacist reasonably believes that the prescription decision of the licensed pharmacist has been consented to in accordance with the bylaws or policies of the Public Health Care Institution regarding consent; or
  - (ii) in the context of a practice outside of a Public Health Care Institution, the licensed pharmacist reasonably believes, after the making of inquiries that are reasonable in the circumstances, that the prescription decision of the licensed pharmacist has been consented to:
    - (A) by the patient, if the licensed pharmacist has a reasonable basis to believe that the person has the capacity to make an informed health care decision;

(B) by a person appointed as the patient's personal guardian or the patient's co-decision maker pursuant to *The Adult Guardianship and Co-decision-making Act*;

(C) by the patient's parent or legal guardian, if the licensed pharmacist has a reasonable basis to believe that the person does not have the capacity to make an informed health care decision by reason of the patient's infancy; or

(D) by the patient's spouse, if the patient does not have the capacity to make an informed health care decision and that no person has been appointed as the patient's co-decision maker or personal guardian has been appointed;

(b) the licensed pharmacist has successfully completed the training requirements as stipulated by Council; and

(c) for prescribing authority other than that stipulated in subsection 9(1) of Part K, the licensed pharmacist reasonably believes, after the making of inquiries that are reasonable in the circumstances, that there exists an active relationship between the practitioner and the patient.

(3) Nothing in these bylaws permits a licensed pharmacist to delegate the licensed pharmacist's prescribing authority.

(4) Where the licensed pharmacist is unable to access the patient's medication history in the Pharmaceutical Information Program and is unable to make a record therein because the patient is not a resident of Saskatchewan, the licensed pharmacist may prescribe a drug to the patient in accordance with these bylaws upon the making of inquiries, that are reasonable in the circumstances, into the patient's medication history.

(5) If in the opinion of the Registrar extraordinary circumstances exist which demonstrate that it is in the public interest to do so, the Registrar may authorize pharmacists to prescribe:

(a) a supply of a drug which exceeds the amount in clause 10(1)(b) of Part K without the express authority of a practitioner;

(b) a drug without complying with clause 10(1)(c) of Part K; or

(c) a drug without complying with clause 10(2)(c) of Part K.

(6) The Registrar shall specify the limitations or restrictions on such authorization conferred pursuant to subsection 10(5) of Part K".

CERTIFIED TRUE COPY:

Jeana Wendel, Registrar,

Saskatchewan College of Pharmacy Professionals

Date: June 19, 2019.

APPROVED BY:

Honourable Jim Reiter,

Minister of Health

Date: August 20, 2019.