PHARMACY INFORMATION NETWORKS
Principles and Elements for Optimal Pharmacy Participation in the Development of Pharmacy Information Networks

Pharmacy information networks that are accessible to authorized health service providers at the point of care are an essential component of patient-centric drug information systems and ultimately more comprehensive health information systems. These networks can enhance patient health outcomes, patient safety and maximize the efficient use of health care resources.

Introduction

Pharmacy information networks foster interdisciplinary collaboration and allow health care providers to access accurate and up-to-date information, to the extent permitted by law, in order to make better informed and timely patient-care decisions. These networks can provide government and other organizations with aggregate electronic information (stripped of patient identifiers) that can be applied to population health research and rational health policy development.

To achieve the goal of comprehensive electronic health records for Canadians that include drug data, stakeholders should agree on the shared values, or principles, and required core elements that must be considered when designing, developing and implementing pharmacy information networks.

Three of Canada's national pharmacy organizations, as represented by the Canadian Association of Chain Drug Stores (CACDS), the Canadian Pharmacists Association (CPhA) and the Canadian Society of Hospital Pharmacists (CSHP), support the implementation of pharmacy information networks to facilitate the sharing of patient drug records within drug information systems, that will ultimately improve the delivery of health care to Canadians. This objective requires adoption of a coordinated and consultative approach which is critical for the successful development, implementation and sustainability of these systems.

Pharmacists, both in community and hospital, and pharmacy advocacy organizations, pharmacy regulatory bodies and corporate chain pharmacies, must play a central role in the development of these networks. By virtue of pharmacists' role in optimizing medication management and self care and as stewards of dispensing data, pharmacy organizations, hospital and community pharmacies are key decision makers with respect to investment, development and adoption of pharmacy information networks. CACDS, CPhA, CSHP and their members, therefore, must participate as primary stakeholders in the development and implementation of these systems.

In June 2005, CACDS' Board of Directors approved a document as its recommended guiding principles and elements for the sharing of community pharmacy electronic patient records as part of provincial drug information systems. Following consultation with national pharmacy organizations, this document was revised and has been adopted by CSHP and CPhA. While the environment and policies developing around these areas will continue to evolve as improved technologies and experience occurs, we have endorsed the following as the founding principles on which the associations will base their advocacy efforts in the development of these systems. This document is aligned with Canada Health Infoway's conceptual value framework for a Gen 3 Drug Information System that supports a pan-Canadian development platform and a cost-effective approach to integration and implementation.
Core Principles for Pharmacy Information Networks

**Patient Principles**

- Pharmacy information networks must facilitate patient access to care, improve patient safety and quality of care, and support population health management.

- Pharmacists, in hospital, long-term and primary care settings, must have electronic access to relevant patient information, including admission, discharge and discontinued medications, for the timely provision of the highest quality of care.

- Drug information systems should demonstrate respect for the autonomy of the individual patient in making informed decisions regarding their health and permit patient designation of their dispensing pharmacy.

- Pharmacists have a role as stewards of their patients’ drug therapy information and dispensing data. In addition, there should be respect and acknowledgement by government and all health information system “arm’s length” organizations of pharmacists’ paramount role in the provision of care and the overall medication management of the individual patient.

- Health information systems, including pharmacy information networks, must employ rigorous, stringent security measures and comply with privacy legislation to protect the confidentiality of patient information, while not constraining the ability of health care providers to access information and to practice in a patient-focused and efficient manner.

**Technology Principles**

- Adoption of a common blueprint consisting of essential technical, policy and messaging standards is necessary to ensure interoperability that supports and guides all participation. A separate, open, neutral governance body that ensures standards adoption, compliance and maintenance for the transfer of data to and from the pharmacy sector should be created.

- There must be mitigation of any financial risk to pharmacy and pharmacists through a clear definition of system requirements and processes; identification of key environmental challenges and stakeholder issues; support for one development platform; and adequate funding for development, implementation, maintenance, enhancements and refinements.

- Established capabilities of legacy systems currently used by pharmacies in the planning of and transition to interoperable pharmacy information networks must be leveraged. Drug information systems must integrate, where possible, into existing platforms, not replace or add on to systems. They should provide a clear benefit to pharmacies in operational efficiency that supports improved patient care.

- A coordinated, phased-in, change management approach, endorsed by pharmacy stakeholders, should be developed to manage system, workflow and practice changes. The impact of standards on all stakeholders with a vested interest in their use must be identified. Extensive consultation with pharmacy stakeholders, including corporate chain pharmacy and software vendors, on the development and implementation of pharmacy information networks is critical.
Elements

• Standards, common patient identifiers, common services and communications that integrate applications and allow for data access across the continuum of care and geography.

• Routine, systematic consultation, communication and regular ongoing system evaluation with pharmacists, pharmacy organizations, other health care providers, and other network users in support of ongoing quality improvement.

• Provision of timely, accurate and complete clinically relevant data.

• Thorough reviews of all relevant legislation and regulations, and the active engagement of pharmacy organizations in the development of necessary revisions.

• Appropriate network user support during system transition and launch phases, and backup systems and protocols in cases of network disconnection, system failure and data loss.

• Application of robust quality assurance programs that include audit and tracking mechanisms.

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