Data Integrity Policy and Guidelines

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Nova Scotia Prescription Monitoring Program

Section I

Data Integrity Policy

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1. Policy Objective

The purpose of this policy is to document the processes utilized by the Administrator to ensure data integrity in the collection, storage, analysis and reporting of information on behalf of the Program.

The Prescription Monitoring Act requires the Program to:

> (a)   To be accountable to the public for the information it collects and manages;

> (b)   To have confidence the data collection is accurate and will be effective to use and share, including information regarding the prescribing and dispensing of monitored drugs, to effectively promote the appropriate use of monitored drugs and the reduction of the abuse and misuse of monitored drugs.

2. Policy Statement

The integrity of the data collected is an integral part of the NSPMP and is required to provide those using the program with confidence that the data is accurate; therefore enabling the program and it's stakeholders in its decision-making process in the prevention of the abuse and misuse of monitored drugs.

3. Responsibilities

The Board is responsible to monitor the effectiveness of the processes put in place by the Administrator to protect data integrity.

The Administrator is responsible for implementing the guidelines included in this policy and for reporting to the Board at least annually on compliance with the policy and on any breeches which are identified.

4. Legislative Framework

The Nova Scotia Prescription Monitoring Program is bound by the Prescription Monitoring Act (Act) and its regulations and the Freedom of Information and Protection of Privacy Act (FOIPOP Act) and its regulations. Specific sections of the Act applicable to the Data Integrity Policy are cited here:

The relevant provisions (section 12) read as follows:

(1) The Minister shall appoint an Administrator.

(2) The Administrator shall

> (a)   administer the Program to assist the Board in carrying out its duties under Section 6;

> (b)   monitor prescribing practices and dispensing practices respecting the monitored drugs;

(c)   assist the Board in evaluating the effectiveness of the Program;

(d)   provide information, professional consultation and assistance to licensing authorities about the prescribing and dispensing of monitored drugs as requested by the licensing authorities;

(e)   monitor the use of monitored drugs by residents and report inappropriate use to

> (i) an appropriate law enforcement authority pursuant to subsection 23(1),
> (ii) an appropriate licensing authority pursuant to subsection 23(2), or
> (iii) a pharmacist or prescriber,

if the Administrator is satisfied that the release of such information furthers the objects of the Program;

(f)   provide reports to the Board respecting the results of the monitoring carried out pursuant to clauses (b) and (e);

(g)   provide information and professional consultation and assistance to prescribers and pharmacists respecting the prescribing and dispensing of monitored drugs;

(h)   educate prescribers and pharmacists about appropriate prescribing and dispensing of monitored drugs;

(i)   respond to inquiries from the public with respect to the Program; and

(j)   report to the Board, the Minister and licensing authorities on new and emerging prescribing patterns for monitored drugs in all or part of the Province and other jurisdictions as those patterns become known to the Administrator.

(3) For the purpose of

(a)   monitoring

> (i) prescribing practices,
> (ii) dispensing practices, and
> (iii) the use of monitored drugs; and

(b)   evaluating the effectiveness of the Program, the Administrator may collect, compile and disseminate information the Administrator considers necessary in accordance with this Act.

5. Principles

The following principles will guide the Board's oversight of this policy:

    (a)   A process for monitoring and maintaining data integrity is established by the Administrator to ensure the accuracy of information retained and released;

    (b)   The Administrator reports on the effectiveness of the policy to the Board annually.

6. Definitions

In this policy:

    (a)   "Administrator" means the agency or person designated by the Minister to administer the Program, and for the purposes of this Policy includes the Manager appointed by the Administrator or any other person employed by the Administrator.

    (b)   "Board" means the Nova Scotia Prescription Monitoring Board established by the Prescription Monitoring Act.

    (c)   "Personal information" is defined in the Program's Privacy Policy.

    (d)   "Program" means the Prescription Monitoring Program established by the Board.

7. Scope

This policy applies to

    (a)   The Administrator;

    (b)   The Board

8. Accountability

The Administrator has responsibility for the ongoing monitoring and enforcement of this Policy. Annually, the Administrator provides the Board with a report of all related activity and their outcomes.

9. Challenging Compliance

Any challenge to the Program's compliance with this policy shall be provided in writing to the Manager.

Nova Scotia Prescription Monitoring Program

Section II

Operational Guidelines for the Administrator

Definitions:

In this guideline:

(a) "Administrator" means the agency or person designated by the Minister to administer the Program, and for the purposes of this Policy includes the Manager appointed by the Administrator or any other person employed by the Administrator.

(b) "Board" means the Nova Scotia Prescription Monitoring Board established by this Act.

(c) "Licensing authority" means the College of Physicians and Surgeons, the College of Pharmacists, or the Provincial Dental Board.

(d) "Patient Profile" means the overall history of an individual's dispensed prescriptions for monitored drugs.

(e) "Personal information" is defined in the Program's Privacy Policy.

(f) "Program" means the Prescription Monitoring Program established by the Board.

(g) "PRC" means the Practice Review Committee appointed by the Board

(h) "NSCP" means Nova Scotia College of Pharmacists

(i) "Investigator" means person from the NSCP responsible for pharmacy audit

(j) "NSR" means the Narcotic Sales Report

(k) "HCN" means Health Card Number

Data Integrity Initiatives

The Administrator performs various processes to ensure the NSPMP data is accurate. The following is an explanation of the initiatives which the program completes and the frequency of each process.

Prescription Process Audit

The following audit process is to ensure that the data submitted on-line by pharmacies reflects the written information on the original prescription for monitored drugs and adheres to the requirements for submission of claims through the Nova Scotia Prescription Monitoring Program (NSPMP) on-line system:

1. At a minimum of once every two years the NSPMP will perform a prescription process audit on each community pharmacy. The NSPMP will notify the pharmacy in writing to request a copy of the pharmacy's Narcotic Sales Report (NSR) for a specific period of time. The time period requested will be dependent on the average number of duplicate submissions for that individual pharmacy based on monthly transactions and may include any time frame within the last full 12 months. The pharmacy will have three (3) business days to submit the NSR to the Program. The following are the average ranges of transactions submitted to the NSPMP by the pharmacy and the time period of narcotic prescriptions which will be requested by the NSPMP for audit purposes:

    - 20 or <   narcotic submission per month = 6 months of narcotic prescriptions
    - 20 – 50   narcotic submission per month = 3 months of narcotic prescriptions
    - 50 – 100 narcotic submission per month = 2 months of narcotic prescriptions
    - 100 or > narcotic submissions per month = 1 month of narcotic prescriptions

2. For each pharmacy, the NSR will be reviewed by the Administrator. The staff will review 25% of the report (up to a max of 50 lines) randomly; verify that each prescription listed on the report is in the NSPMP database. Once this review is completed, the Administrator will then request that the pharmacy submit copies to the Program for 50% of the prescriptions reviewed for monitored drugs, listed on the Narcotic Sales Report.

    (a) The Pharmacy will be provided with a list of the identified prescriptions in written format with a request to submit a copy of the original duplicate form on file to the Program within five (5) business days.

    (b) The Administrator, upon receipt, will perform an audit review of all data entry points of the script to ensure that what was written by the prescriber was correctly reported to the Program when dispensed.

    (c) Each script will be reviewed. Scores will be calculated based on the number of prescriptions requested. 2 points will be deducted for scripts not submitted by the pharmacy through the PMP on-line system and 0.5 points will be deducted for data entry errors. The overall score will be calculated out of 100%. The pass score is greater than/equal to 90%.

    (d) A store that fails to submit a copy of the original duplicate form requested during the audit process will automatically fail the initial audit and require a secondary audit to be completed in the process outline in section 2(f)(i) of this Policy.

    (e) It is expected that pharmacies will submit 100% of all duplicate prescriptions filled at their location. In accordance with the *PMP Regulations*, as of December 1, 2007, pharmacists and pharmacies shall provide information to the Administrator in electronic form through the on-line system. If a pharmacy fails to submit 10% or higher of the prescriptions listed on the NSR through the on-line system, the Program may require a secondary audit to be completed in the process outlined in section 2 (f)(i) of this Policy.

    (f) Any pharmacy that receives an overall score of less than 90% will undergo a secondary audit.

(i) A NSR will be requested for a time period different from the first audit process by the Administrator. The staff will review 25% of the report (up to a max of 50 lines) randomly; verify that each prescription listed on the report is in the NSPMP database.

(ii) Once this review is completed, the Administrator will then request that the pharmacy submit copies to the Program for 50% of the prescriptions reviewed for monitored drugs, listed on the Narcotic Sales Report;

(iii) The Pharmacy will be provided with a list of the identified prescriptions in written format with a request to submit a copy of the original duplicate form on file to the Program within five (5) business days; and

(iv) The Administrator, upon receipt, will perform an audit review of all data entry points of the script to ensure that what was written by the prescriber was correctly reported to the Program when dispensed.

(g) Based on the results of both audits, an overall score will be calculated.

(h) If data submission concerns remain after the secondary audit such as an overall score (based on two audits) of less than 90%, failure of the pharmacy to submit a copy of the original duplicate, or an unacceptable percentage of prescriptions which have not been submitted to the NSPMP, then the Program may choose to conduct another review after a 6-month time period or refer the matter to the Nova Scotia College of Pharmacists as a formal complaint.

(i) Each pharmacy will be notified in writing of the results of the audit(s).

(j) The Administrator will track the outcomes of the audit process per store and report to the Board annually on the outcomes.

Registration Audit

1. This process is intended to provide assurance of the accuracy of the Programs registration information. This includes prescriber registration, pharmacist registration and pharmacy registration.

2. The Administrator will ensure that ongoing review of the registration information, address information, contact information and status information is up to date for the Program. The accuracy of registration information will continue on an ongoing basis through the following operational Program responsibilities:

   (a) Initial prescriber, pharmacist and pharmacy registration process;

   (b) Duplicate prescription pad ordering process;

   (c) Updates to registration information based on out of province moves or changes in prescribing privileges;

   (d) Change in pharmacy ownership or new pharmacy registration; and

   (e) Change in prescribers address.

Duplicate Pad Audit

This process is intended to provide assurance concerning the security of duplicate prescription pads issued to prescribers and the status of issued pads to maintain reasonable availability of duplicates per prescriber.

1. Each time duplicate prescriptions are requested by a prescriber, the Program staff will review existing prescriptions issued to the prescriber and review the status of these pads with the prescriber. This review will ensure that a prescriber has a reasonable amount of duplicates for his/her practice.

Nova Scotia Generic (NSG) Health Card Number Audit

A report is run on a weekly basis to identify patients who have had claims submitted with a Nova Scotia Generic Health Card Number (HCN) in an attempt to match those individuals with an accurate NS HCN or an out-of province HCN on file with the Program. These identified and matched claims are then reversed to ensure that all narcotic prescriptions are captured under the patient history. The process is as follows:

1. Pharmacies that do not have a patient HCN will often enter the prescription using the NSG HCN;

2. The Program staff will run a report to identify claims where the NSG HCN has been used;

3. The report will be cross referenced with the patient information within our Prescription Monitoring Program system; and

4. If a NS HCN or an out-of province number is identified which matches (based on name, date of birth, gender, moved to and from dates, etc.) the patient on the NSG report, then the prescription (claim) can be reversed and re-entered using the patient's correct HCN.

Patient Link Audit

On a quarterly basis a Patient Linking report is sent to Program staff from the Monitoring and Health Information department. This report identifies profiles of patients with both an out-of-province health card number and a Nova Scotia health card number. The staff will review the report and verify the HCN information in MSI Information. Once verified (by comparing name, date of birth, gender, moved to and from dates, etc.), eligible HCNs will be linked in the Program's system so that future reporting will reflect prescriptions filled using either HCN.

Annual Disaster Recovery

The Administrator, Medavie Blue Cross, has a defined and documented disaster recovery plan which is tested annually.

Medavie Blue Cross has two CLASS A data centers which meet and exceed Federally Designated "Protected B" criteria. These Data Centers are in two separate physical geographical areas in New Brunswick and Nova Scotia. Both Data Centers have redundant access to electrical power (UPS and

Diesel Power Generators) and have been placed on the emergency list of the local power utilities to ensure priority re-establishment of power in cases of interruption.

Using these two Data Centers, we are able to replicate data/databases. We currently replicate our mission critical databases. Our Disaster Recovery infrastructure undergoes thorough testing on a yearly basis to ensure our environments are current and to validate performance levels and system stability.

The results are reported annually to the Nova Scotia Prescription Monitoring Board and the Department of Health.

Business Resumption

The Administrator, Medavie Blue Cross, has a defined and documented business resumption plan for each business area that is reviewed and updated annually. The plan outlines each department's potential process failures and the triggers for each. A strategy is outlined in detail for resuming the key business processes.

The plan includes:

1. Responses for Crisis situations - extraordinary measures taken only in the event of a crisis;

2. Disaster responses - extraordinary measures taken only in the event of a disaster; and

3. Complete or partial lose of Medavie's Dartmouth Facility including: Data Centre, IT Infrastructure, IT Operations, PC Support and/or Maintenance Team.

The results are reported annually to the Nova Scotia Prescription Monitoring Board and the Department of Health.