

Strategic Plan 2013-2016

History and Background

The Prescription Monitoring Association of Nova Scotia (PMANS) was incorporated in October 1991. In January 1992 the PMANS began operating a prescription monitoring program to monitor the prescribing and dispensing of specific narcotic and controlled drugs in Nova Scotia with the objective of curbing the overuse, misuse and diversion of these substances. Policy guidelines were established to give the program the ability to monitor the specific narcotic and controlled drugs through the use of a triplicate prescription pad. Pharmacists were required through legislation to dispense these drugs only when they were prescribed on a triplicate prescription pad.

Although PMANS was a voluntary association, it played a vital role in identifying the need to establish a legislative framework to support the operations of a prescription monitoring program. Consequently, The Prescription Monitoring Act was approved in October 2004 and subsequently proclaimed along with the Prescription Monitoring Regulations in June 2005. A Prescription Monitoring Board was appointed with the legislated mandate to establish and operate a prescription monitoring program for Nova Scotia. The objects of the Nova Scotia Prescription Monitoring Program (NSPMP) are to promote:

- the appropriate use of monitored drugs; and
- the reduction of abuse or misuse of monitored drugs.

Under the authority of *The Prescription Monitoring Act*, Medavie Blue Cross was appointed as the Administrator of the NSPMP.

In conjunction with the new legislation, the Administrator implemented an on-line system to receive prescription information for the specified list of monitored drugs. This information had historically been compiled using the part of the triplicate prescription pad which pharmacies were required to send into the program. By the end of 2007, all community pharmacies were submitting this information via the on-line system.

With the reduction in manual data entry work, the staff of the NSPMP became increasingly involved in customer service-oriented tasks and analytical processes. The services offered through the NSPMP were expanded and efforts to engage various stakeholders were initiated.

From 2009 through 2012, the NSPMP has continued to see growth in prescription volume, stakeholder usage/communication and media coverage related to increased public attention regarding prescription drug abuse and diversion. In April 2012, the NSPMP launched 24 hour e-Access for prescribers and dispensers of monitored drugs in response to their requirements for access to patient information during off-peak hours.

Communication regarding law enforcement 'Notification of Charges', based on charges related to the misuse and diversion of monitored drugs, is now provided to relevant prescribers and dispensers. In addition, the Office of the Auditor General of Nova Scotia completed an audit of NSPMP operations in May 2012.

In 2007 the Prescription Monitoring Board created statements describing its Mission, Values and Vision related to the Program's function, which were to be achieved by 2017 (Vision 2017). As part of the Board's Strategic Plan review in November 2012, the Mission, Value and Vision statements were reviewed and revised as necessary to ensure concordance between its guiding statements and the current operational elements of the program.

Additional key considerations in forming the 2013 – 2016 NSPMP Strategic Plan include recommended operational adjustments in accordance with the 2012 Auditor General's report, the review of the Drug Utilization Review committee and associated programming, the integration of data management processes with the Nova Scotia Drug Information System and continued development and implementation of a stakeholder communications plan.

Mission

The Board's mission or raison d'être is rooted in its legislated mandate which is to establish and operate a prescription-monitoring program for the Province, with the objects of promoting:

- (a) the appropriate use of monitored drugs, and
- (b) the reduction of the abuse or misuse or monitored drugs.

In addition to its monitoring activities, the Board interprets this to include:

- guiding and supporting prescribers, dispensers and the general public on the appropriate use of monitored drugs;
- collaborating and developing working partnerships with other key organizations in order to achieve the Program's mandate; and
- **sharing information** in a timely and responsive manner to support the role of others in promoting, educating, and enforcing the appropriate use of monitored drugs and the reduction of the abuse or misuse of monitored drugs.

Values

In carrying out our Mission, we:

- Act to protect public safety and support best practice in patient care, while maintaining the confidentiality of personal information;
- Respect and support healthcare and law enforcement professionals in their work;
- Serve as a resource for our stakeholders;
- Strive for innovation in our work based on industry best practice methods and processes.

Vision: The NSPMP in 2017

Reputation/Brand

By 2017, the Program will be well-known, understood and respected by healthcare providers, law enforcement and key stakeholders. It will be valued as a key resource for reliable and timely information on monitored drug use in Nova Scotia.

The general public and those holding political office will understand and support both the scope and the limits of the Program's mandate.

Finances

The Program has confirmed operational funding until 2017 through the Nova Scotia Department of Health and Wellness. The Board will continue to focus on operational effectiveness and efficiency, while evaluating potential program enhancements that may have future budget implications.

Business Process Excellence

In order to achieve our desired outcomes for our programs and services, stakeholder relations and reputation by 2017, we must excel in the following business processes:

- **Governance** our Board and committee structure must effectively and efficiently govern the Program's organization;
- **Interventional Reporting** conduct best practice based reviews of prescribing patterns and trends that support the Program's mandate and the work of its stakeholders;

- **Research** support research, in fields related to our mandate, that will support the measurement of Program outcomes and provide information that can be shared with stakeholders:
- **Communications and Relationship Management** the objects of our Program will only be achieved in partnership with others and through sharing information with key program stakeholders;
- Securing and Managing Appropriate Resources we will maintain a skilled, knowledgable and efficient team of staff to carry out the work of the Program.

Programs and Services

In 2017, the Prescription Monitoring Board's programs and services will support:

- 24-hour access to the information needed by prescribers and dispensers to achieve the objects of the Program;
- The continued transfer of prescription data from the Nova Scotia Drug Information System to the NSPMP database;
- Opportunities to respond to advances in e-health;
- The elimination of the duplicate prescription pad system;
- Drug utilization research;
- Stakeholder use of the website for general information on monitored drug trends, data, issues on the horizon and available education programs;
- Linkage with educational providers delivering interventions related to the prescribing and use of monitored drugs;
- Collaboration among jurisdictions to achieve the objects of the Program.

Human Resources and Infrastructure

The Program has confirmed human resources and infrastructure funding in place until 2017 through the Nova Scotia Department of Health and Wellness. The Board will continue to evaluate programming to ensure that allocated resources remain appropriate in order to implement best practice approaches to trend/data analysis, reporting, research, program evaluation, policy development, communications planning/management.

Relationships with Key Stakeholders

In 2017, the Prescription Monitoring Program will have fostered and developed mature relationships with all key stakeholders.

The Program will facilitate linkages among prescribers, dispensers, law enforcement, Addiction Services, researchers, educators and other stakeholders who have an interest in promoting the appropriate use and reducing the abuse and misuse of monitored drugs. By working with its key stakeholders, the mandate of the Program will be met.

Three-Year Outcomes

In order to achieve the Program's vision for itself for 2017, the Board identified the following desired outcomes for the three-year period from 2013/14 to 2015/16:

Area	Outcomes			
AI Ca	2013/14	2014/15	2015/16	
Reputation/Brand	Complete annual stakeholder survey and evaluation through an external service provider for efficiency and improved analytics. Finalize communications plan with targeted activities including key messaging and community outreach.	Implement adjustments to communication activities giving consideration to survey responses.	Continue stakeholder survey and adjust communications activities as necessary.	
Finances	On an ongoing basis, the Board will provide input regarding current program resources and make recommendations regarding any potential adjustments for the 2018 contract and beyond.	On an ongoing basis, the Board will provide input regarding current program resources and make recommendations regarding any potential adjustments for the 2018 contract and beyond.	Continue to support any budgeting or resource adjustments based on recommendations.	

Area	Outcomes			
	2013/14	2014/15	2015/16	
Business Process Excellence	Complete Auditor General's recommendations with 2013 completion dates. Work with the Drug Utilization Review (DUR) and Multiple Prescriber Report (MPR) Working Group to complete report re-design. Implement/manage changes related to data/program integration with the NS Drug Information System (DIS). Complete a policy review to ensure all process adjustments related to the implementation of the DIS are reflected.	Complete Auditor General's recommendations with 2014 completion dates. Implement program adjustments for the DUR and MPR activities. Complete programming adjustments related to the elimination of the duplicate prescription pad.	Conduct a review of adjustments made to DUR and Multiple Prescriber programming to ensure Program effectiveness.	
Programs and Services	Complete Auditor General's recommendations with 2013 completion date. Pursue CME and CPE accreditation for community NSPMP presentations to increase attendance from physicians and pharmacists. Complete assessment of value-added data services to enhance stakeholder access to information and monitoring analysis.	Complete Auditor General's recommendations with 2014 completion date. Advocate and provide support for the measurement of Program effectiveness (i.e. research collaboration).	Review opportunities for e-Access enhancements to ensure optimal support for prescribers and dispensers.	

Area	Outcomes			
	2013/14	2014/15	2015/16	
Human Resources and Infrastructure	On an ongoing basis the Board will consider industry best practices and resources potentially required to support the operation of the Program.	On an ongoing basis the Board will consider industry best practices and resources potentially required to support the operation of the Program.	Board to make recommendations regarding any potential adjustments for the 2018 contract and beyond.	
Relationship with Key Stakeholders	Align communications plan with the approach for meetings, conferences & workshop attendance (i.e. key messages, outcomes etc) Participate in National PMP strategy development and working groups where appropriate	Based on survey results and ongoing evaluation, adjust and continue communication with key stakeholders through meetings, conferences & workshop attendance. Incorporate law enforcement representatives into annual survey. Participate in National PMP strategy development and working groups where appropriate	Conduct an evaluation of overall communications activities to support the identification of priorities for future years. Participate in National PMP strategy development and working groups where appropriate	