



DRUG INFORMATION SYSTEM Go Live Toolkit Implementation Contact



Province of Nova Scotia
Department of Health
and Wellness

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Introduction

Welcome to the Nova Scotia Drug Information System (DIS) Pharmacy 'Go Live' Toolkit!

This Toolkit is intended for the **Banner/Chain/Corporation Implementation Contact**, and is to be used to help ensure a smooth implementation of the DIS system in your pharmacies.

The Toolkit is divided into three sections as follows. Each section is described below.

- Go Live Information & Activities
- Go Live Supporting Documents
- Reference Documents

Go Live Information & Activities

This section contains information you need to know about Go Live and the activities you need to complete before Go Live happens in the pharmacy you are assisting. Here's an overview of the contents of this section.

Roles and Responsibilities: This document outlines the various roles involved with Go Live of the DIS and describes their Go Live responsibilities, including yours.

Go Live Contacts: This document contains information for your DIS Go Live contacts; the people you will support and those you can turn to for support and guidance.

Go Live Checklist: This is your 'to do' list; it contains all of the activities you are responsible to complete before and shortly following Go Live in the pharmacy you are assisting.

Joint Service and Access Policy: This document is a confirmation agreement between your Banner/Chain/Corporation or the Pharmacy (in the case of independents and franchisees) and the Nova Scotia Department of Health and Wellness (DIS Program). It contains a policy document and three associated schedules and is intended to provide clarity on mutual responsibilities, DIS access rules, and protection of privacy; such clarity will help foster strong relationships between the Department and pharmacies in the province.

Two decisions will need to be made regarding the *Joint Service and Access Policy*:

- Which organization (Banner/Chain/Corporation or the Pharmacy) will complete and sign Schedule A – DIS Joint Service & Access Policy – Confirmation of Acceptance Form?
- Will your Banner/Chain/Corporation provide pharmacy dispensary staff with a Confidentiality Agreement for signature or will you use the form included in the joint Service and access Policy – Schedule C, Appendix A – DIS Confidentiality Agreement?

Education Overview: This document describes the DIS education approach and outlines the education requirements for all dispensary staff.

DIS Support Overview: This document describes how the pharmacies will receive support for DIS and what will happen in the event of unplanned outages.

Go Live Supporting Documents

This section contains documents you need to complete/use prior to Go Live. It also contains sample communications you may want to use for distribution to your Pharmacy Owners/Managers.

Go Live Sample Communications: These samples are provided to assist you with communication to your Pharmacy Owners/Managers. They contain the key messages that Pharmacy Owners/Managers should receive.

'Getting Your Data Ready for DIS' Information Sheet: This document outlines 'best practices' that dispensary staff should be following to ensure pharmacy data is ready for the transition to DIS.

NS DIS Statement for Pharmacy Notice of Purposes (PHIA): Under the new Personal Health Information Act (PHIA), custodians are required to prepare and make readily available a 'Notice of Purposes', which is a notice or poster describing the purpose of the custodian's collection, use and disclosure of personal health information.

This statement is for inclusion in the Pharmacy's or Pharmacy Organization's Notice of Purposes.

Pharmacy Organization Contact Information Form: This form must be completed by the Banner/Chain/Corporation Implementation Contact and returned to the Department of Health and Wellness (DIS Program) – instructions for completion and return are included on the form.

Go Live Schedule Template: This is the schedule template for use in documenting the DIS Go Live dates for your pharmacies.

Reference Documents

The Toolkit also references the following online resource documents for your information and for use by dispensary staff.

1. *Drug Information System Reference Guide* - highlights key information provided in the e-learning modules that dispensary staff will need to know for every day usage of the Drug Information System (<http://novascotia.ca/dhw/ehealth/DIS/education-resources.asp>)
2. *Pharmacy 'Go To' Guide* – includes quick reference information on the following topics:

- *Drug Information System Support: Getting Help*, which outlines the process for accessing DIS support services
- *Client and Provider Registries: Hints and Tips*, which provides practical day to day advice on using the Client and Provider Registries
- *Privacy & Consent: What You Need to Know*, which summaries important information about consent, masking and patient requests regarding information in the Drug Information System
- *Transition Guidelines*, which includes information for your dispensary staff to be aware of when your pharmacy first connects to the Drug Information System and during the timeframe when other pharmacies are being connected
- *Prescription Monitoring Program Fact Sheet*, which outlines process changes for dispensary staff resulting from being connected to the Drug Information System

Available at: <http://novascotia.ca/dhw/ehealth/DIS/connecting-to-the-system-resources.asp>

3. *DIS Bag Inserts and Brochure*: copies of the two bag inserts and the brochure for distribution to pharmacy patients are available online. Printed copies will be sent to your pharmacy. (<http://novascotia.ca/dhw/ehealth/DIS/communications-for-patients.asp>)

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Roles and Responsibilities

Ensuring a smooth implementation of the Drug Information System (DIS) and successfully realizing the benefits it will provide to dispensary staff, patients and other health care providers requires specific people carrying out specific responsibilities. This document outlines the roles and responsibilities necessary to achieve that goal.

Pharmacy System Vendor

The Pharmacy System Vendor (Vendor) is the organization that has provided the pharmacy system – the one dispensary staff uses every day for filling prescriptions for patients.

In regards to the implementation and ongoing operation of the DIS, the Vendor is responsible for the following activities.

- Perform, complete and coordinate the standard activities associated with pharmacy software upgrades (DIS will not be involved with these activities)
- Provide training to dispensary staff on how to access and enter information into DIS through the pharmacy system (to be scheduled during Go Live)
- Provide technical support to the pharmacy, either directly or indirectly through the Banner/Chain/Corporation, to ensure dispensary staff can access and enter information into DIS

Banner/Chain/Corporation (BCC) DIS Implementation Contact

The BCC DIS Implementation Contact is the individual assigned by the Banner/Chain/Corporation to help the pharmacy through the implementation of DIS. This person is the Pharmacy Owner/Manager's primary point of contact during Go Live and responsible for the following activities.

- Ensure the Pharmacy Owner/Manager is aware of their responsibilities for Go Live
- Coordinate the flow of information between the DIS Implementation Project Team and the Pharmacy Owner/Manager
- Support the Pharmacy Owner/Manager as required while they complete the activities included in their Go Live Checklist
- Provide Banner/Chain/Corporation support to the Pharmacy Owner/Manager as required during the defined 'Post Go Live' period

Drug Information Systems Project Implementation Coordinator

A member of the DIS Project Team will be the DIS Implementation Coordinator. This individual will work with you to help the pharmacy through the implementation of DIS. This person is your primary point of contact during Go Live and responsible for the following activities.

- Assist with coordinating the flow of information between the DIS Project Team and you
- Communicate DIS Go Live requirements with the pharmacy system vendor
- Check-in with you periodically to discuss progress and address concerns
- Provide you with supporting documents for communications to the Pharmacy Owner/Manager
- Ensure you are familiar with the DIS public website
- Ensure you are familiar with the DIS Support website

Pharmacy Owner/Manager

The Pharmacy Owner/Manager is the primary point of contact for the BCC Implementation Contact and the DIS Project Implementation Coordinator. They are the DIS Champion for their pharmacy and responsible for the following activities.

- Ensure dispensary staff are aware of their responsibilities for Go Live
- Coordinate the flow of information between the Banner/Chain/Corporation Implementation Contact, the DIS Project Implementation Coordinator, and the pharmacy dispensary staff
- Support staff as needed as they complete their required activities included in the Go Live Checklist
- Ensure that staff review and sign the Joint Service and Access Policy (including Schedules) as appropriate
- Ensure that dispensary staff completes the four (4) DIS online education e-learning modules prior to commencing the Vendor system training and prior to Go Live. (A sample document is provided for tracking completion by each staff member)
- Provide support to staff as required during the defined 'Post Go Live' period
- Provide feedback to the Banner/Chain/Corporation Implementation Contact regarding the Go Live process



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Pharmacy Dispensary Staff

The Pharmacy dispensary staff includes: pharmacists, pharmacy technicians, and pharmacy assistants. These are the people who will use the DIS during the process of filling a prescription.

In regards to Go Live of the DIS, the dispensary staff is responsible for the following activities.

- Data cleanup in advance of Go Live
- Distribute bag inserts and brochures to patients as per the defined distribution schedule
- Complete the four (4) DIS online education e-learning modules prior to commencing the Vendor system training and prior to Go Live
- Read section 5.3 of the Joints Service and Access Policy and sign a DIS Confidentiality Agreement
- Participate in Pharmacy System Vendor training (DIS-specific) during Go Live
- Provide feedback to Pharmacy Owner/Manager regarding the Go Live process

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Go Live Contacts


Role	Name	Contact Details	This person/role can answer questions about:
Pharmacy Owner/Manager			<ul style="list-style-type: none"> • Progress of Go Live activities • Pharmacy-specific information
DIS Project Implementation Coordinator	Judy Sampson	902-424-5943 judy.sampson@novascotia.ca	<ul style="list-style-type: none"> • Project progress • Pharmacy Go Live Toolkit • Forms • Go Live communications • Bag inserts / brochures • Education modules / reference materials • Prescription Monitoring Program (PMP) • DIS Support / Support Website
Pharmacy System Vendor			<ul style="list-style-type: none"> • Pharmacy Go Live date • Static IP Address • DIS connectivity • Method(s)/date(s) of system training


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Go Live Checklist
BCC Implementation Contact


Activities to Complete: (* (p) – prior to Go Live; (w) – within # of days after Go Live)

Activity	Timing*	Date		Comments
Meet with the DIS Project Implementation Coordinator	4-6 weeks (before first pharmacy Go Live)			DIS Project Implementation Coordinator will arrange a meeting with you to discuss your role and responsibilities and review implementation materials
Contact your pharmacy software vendor to arrange for a demo of the version of their software that is integrated with the DIS (optional)	4-6 weeks (before first pharmacy Go Live)			
Ensure <i>BCC DIS Announcement</i> communication has been distributed to the Pharmacy Owners/Managers	4-6 weeks (before first pharmacy Go Live)			To be distributed by appropriate BCC Senior Executive See Tab 3 – Go Live Supporting Documents section: <i>BCC DIS Announcement</i> sample communication
Ensure your pharmacies have access to an OPINIONS PINS subscription, either through a BCC subscription or a store subscription. Communicate this requirement to your Pharmacy Owners/Managers. (one-time activity but new stores will have to be informed)	2-4 weeks (before first pharmacy Go Live)			For your information: In addition to the PMP OPINIONS PINS provided by the Drug Information System project, additional OPINIONS PINS may need to be set up in your pharmacy software to enable transaction processing (NS Pharmacare and third parties use OPINIONS PINS) - in DIS OPINIONS PINS are used as the id for devices.

Activity	Timing*	Date		Comments
<p>See 'OPINIONS', bottom right corner of the PANS website for more information.</p> <p>https://pans.ns.ca/</p>				<p>Check with your pharmacy system vendor as they may set these up for you.</p> <p>Note: In some instances there may not be an OPINIONS PIN for a product. A generic OPINIONS PIN has been created for processing device prescriptions that do not have an OPINIONS PIN.</p>
<p>Review <i>Pharmacy Go Live Toolkit</i> – pay particular attention to the Pharmacy Owner/Manager Go Live Checklist, the 'Getting Your Data Ready for DIS' Information Sheet, and the DIS Support Overview</p> <p>The <i>Pharmacy Go Live Toolkit</i> is available online at the following address:</p> <p>http://novascotia.ca/dhw/ehealth/DIS/connecting-to-the-system-resources.asp</p> <p>Select 1. Pharmacy Organization toolkit</p>	2-4 weeks (before first pharmacy Go Live)			<p>Ensure you are familiar with the contents of the Toolkit as well as the reference documents: DIS Reference Guide, and Pharmacy 'Go-To' Guide</p> <p>Go to the following link for the DIS Reference Guide</p> <p>http://novascotia.ca/dhw/ehealth/DIS/education-resources.asp</p> <p>Scroll to the bottom of the page; the guide is located under the heading 'Resource documents'</p> <p>Go to the following link for the 'Go To' Guide:</p> <p>http://novascotia.ca/dhw/ehealth/DIS/connecting-to-the-system-resources.asp</p> <p>Click on <i>Pharmacy 'Go To' Guide</i> next the the number 2</p>
<p>Include the NS DIS Statement for Pharmacy Notice of Purposes (PHIA) in your pharmacy</p>	2-4 weeks (before first			<p>For more information on the PHIA Notice of Purposes, visit the PHIA website at the following</p>

Activity	Timing*	Date		Comments
organization's PHIA Notice of Purposes as appropriate. If this Notice of Purposes is used by your pharmacies, distribute a copy to them.	pharmacy Go Live)			address: http://novascotia.ca/dhw/phia/custodians.asp
Confirm pharmacy Go Live date with Pharmacy System Vendor (if applicable)	4-6 weeks (p)			This information is required for inclusion in the <i>Pharmacy Go Live Announcement</i> communication
Deliver <i>Pharmacy Go Live</i> Announcement communication to Pharmacy Owner/Manager	4 weeks (p)			See Tab 3 – Go Live Supporting Documents section: Pharmacy Go Live Announcement sample communication
Arrange meeting with Pharmacy Owner/Manager	2-4 weeks (p)			
Meet with Pharmacy Owner/Manager; walk-through contents of the DIS Go Live Toolkit (including Pharmacy 'Go To' Guide) – pay particular attention to the Roles & Responsibilities document and the 'Getting Your Data Ready for DIS' Information Sheet	2-4 weeks (p)			Ensure Pharmacy Owner/Manager is engaged and aware of his/her responsibilities
Confirm the requirement for the Pharmacy Owner/Manager to sign and return: <i>Schedule A – DIS Joint Service & Access Policy – Confirmation of Acceptance Form</i> and <i>Schedule</i>	2-4 weeks (p)			Signature of this document may be completed by the BCC.

Activity	Timing*	Date		Comments
<i>C – Confidentiality Agreement of the Joint Service and Access Policy.</i> If signature is required, communicate this to the Pharmacy Owner/Manager				See Tab 2 – Go Live Information & Activities section – Joint Service and Access Policy .
Return completed <i>DIS Pharmacy Organization Contact Information Form</i> to the Drug Information System Program (see Form for return instructions)	2-4 weeks (p)			See Tab 3: Go Live Supporting Documents section: DIS Pharmacy Organization Contact Information Form
Deliver <i>Go Live Activity Checkpoint</i> communication to Pharmacy Owner/Manager	3 weeks (p)			See Tab 3 – Go Live Supporting Documents section: Go Live Activity Checklist sample communication
<p>Confirm the Confidentiality Agreement form that will be signed by dispensary staff. Once confirmed communicate decisions to Pharmacy Owner/Manager and provide form if not the DIS Confidentiality Agreement form</p> <p>If using the DIS agreement, go to the DIS website for the Word version of this agreement. http://novascotia.ca/dhw/ehealth/DIS/policies.asp</p> <p>Note: These forms are to remain in the pharmacy</p>	3 weeks (p)			<i>Schedule C</i> of the <i>Joint Service and Access Policy</i> contains a <i>DIS Confidentiality Agreement</i> form (Appendix A). Your Pharmacy Organization may choose to have dispensary staff sign this document or another specific to the organization. See Tab 2 – Go Live Information & Activities section – Joint Service and Access Policy .
Work with the Vendor to schedule pharmacy connectivity test	2-3 weeks (p)			

Activity	Timing*	Date		Comments
Identify relief dispensary staff who work in the pharmacy; determine an education and training strategy for these staff members (in consultation with the Pharmacy Owner/Manager)	2 weeks (p)			If applicable based on organization model
Visit pharmacy on Go Live day	Go Live Day			Suggested
Confirm that dispensary staff Education and Training is complete	2 days (w)			Ensure that relief dispensary staff have completed the Education Modules and have been provided with system training
Meet with the Pharmacy Owner/Manager to capture 'Lessons Learned'	5 days (w)			The DIS Project Implementation Coordinator will follow up with you to discuss Lessons Learned

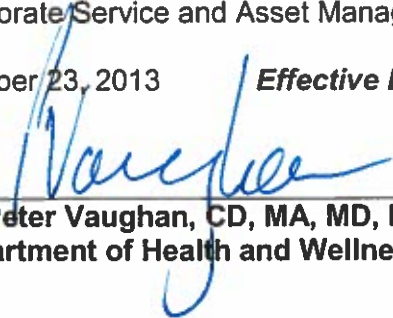
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Policy: Joint Service and Access Policy (Pharmacies and Dispensing Physician)

Originating Branch: Corporate Service and Asset Management

Original Approval Date: October 23, 2013 **Effective Date:** April 1, 2016

Approved By: 

**Dr. Peter Vaughan, CD, MA, MD, MPH, Deputy Minister,
Department of Health and Wellness**

Version #: 3

1. POLICY STATEMENT

- 1.1. The purpose of this policy is to define the requirements for access and privacy with respect to the Drug Information System (DIS) and Users of the DIS.

2. DEFINITIONS

In this policy:

- 2.1. **Client Registry (CR)** – means a component of the Nova Scotia Electronic Health Record that lists all patients and their relevant personal information and supports central storage and retrieval.
- 2.2. **Consent Directive** – means an individual's withdrawal of their consent to disclosure of their personal health information in accordance with the *Personal Health Information Act (PHIA)*.
- 2.3. **Default Provider** – means a generic identifier for a provider in the DIS when the actual provider identification information is unknown or unavailable.
- 2.4. **DHW Contractors** – persons or organizations employed by DHW under contract to provide a specific service or support e.g. Deltaware or staff of Deltaware.
- 2.5. **DIS Program** – means the Program of the Nova Scotia Department of Health and Wellness responsible for standards, funding, strategy, performance, and accountability of the DIS.
- 2.6. **DIS Support Website** – means the internet website maintained by the Information Services Support Provider for the purpose of providing information related to the support of the DIS.

Joint Service and Access Policy (Pharmacies & Dispensing Physician)

- 2.7. **DIS Website** – means the internet website maintained by the DIS Program for the purpose of providing information related to the DIS Program.
- 2.8. **Dispensary Staff** – means pharmacists, pharmacy technicians, pharmacy assistants, the dispensing physician, and staff of the dispensing physician.
- 2.9. **Health Card Number (HCN)** – means a unique identifier that provides access to provincial health care services in Nova Scotia.
- 2.10. **Information Services Support Provider** - means the support organization for provincial health information technology applications that facilitate health care delivery in Nova Scotia. This organization was formerly referred to as Health Information Technology Services Nova Scotia (HITS-NS). May also refer to a successor organization due to government Shared Services changes.
- 2.11. **Masking** – means the limitation of disclosure of personal health information collected by the DIS.
- 2.12. **Nova Scotia Prescription Monitoring Program (NSPMP)** – Mandatory Nova Scotia program that monitors controlled drugs under the Controlled Drugs and Substances Act (Canada).
- 2.13. **nshealth.ca** – means the private network connecting all hospital facilities in the province of Nova Scotia and the provincial data centre. It is the enabler of the health information technology applications delivered throughout Nova Scotia.
- 2.14. **Personal Health Information** – means information that custodians collect to help make decisions about an individual's healthcare. It may include information about an individual's:
- health condition, treatment and family history;
 - healthcare provider's information;
 - registration information or health card number; or,
 - substitute decision-maker
- 2.15. **Pharmacy Manager** – means the individual within a licensed pharmacy in Nova Scotia who holds the role of Pharmacy Manager as defined in the *Pharmacy Practice Regulations* under the *Pharmacy Act*.
- 2.16. **Pharmacy Software** – means an electronic application that manages prescription dispenses and other pharmacy healthcare services.
- 2.17. **Pharmacy Software Vendor** – means a company which provides and supports a pharmacy or dispensing physician with Pharmacy Software.
- 2.18. **PHIA** – means the *Personal Health Information Act*, which is Nova Scotia's health privacy law that governs how regulated health care professionals and organizations collect, use, disclose, and retain, and destroy personal health information.

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- 2.19. **Privacy and Access Office (PAO)** – Unit within the DHW that plans, develops, and implements privacy and access policies, processes, and communication initiatives to facilitate the appropriate use and protection of personal information and personal health information within the Department.
- 2.20. **User** – means an individual who is authorized to access the DIS.
- 2.21. **User Organization** – means the dispensing physician or a pharmacy whose employees access the DIS.

3. POLICY OBJECTIVES

This policy:

- 3.1. Defines the mutual responsibilities of the DIS Program and Users of the DIS and ensures they are aware of the rules associated with accessing and providing access to the DIS; and,
- 3.2. Assists in the protection of privacy with respect to the personal health information collected, used, disclosed and retained in the DIS.

4. APPLICATION

- 4.1. This policy applies to User Organizations and DHW as defined in section 2.
- 4.2. This policy does not apply to:
- a) Pharmacy software vendors
 - b) Individuals who are clients of a user organization
- 4.3. The information stored in the DIS is subject to legislation and regulations which includes the:
- Personal Health Information Act (PHIA);
 - Freedom of Information and Protection of Privacy Act (FOIPOP);
 - Personal Information Protection and Electronic Documents Act (PIPEDA);
 - Pharmacy Act and associated regulations
 - Prescription Monitoring Act;
 - Medical Act; and,
 - any other legislation relevant to the use and access of the DIS.

5. POLICY DIRECTIVES

5.1. User Connection to the DIS

Acceptance of the Policy

- 5.1.1. The *Confirmation of Acceptance Form* attached at Schedule A must be signed by the User Organization before the DIS Program provides the User Organization with access to the DIS.
- 5.1.2. If the User Organization is closing or changing ownership, it is the responsibility of the User Organization to notify the DIS Program within 30 days in advance of transfer/closing.

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Changes to the Policy

- 5.1.3. This policy shall be amended as necessary with review at least every two years.
- 5.1.4. Notification of any required changes to this policy will be made available through the DIS Website and by other electronic means no less than 60 days in advance of updating the policy.

Notice of Termination

- 5.1.5. A User Organization may terminate acceptance of this policy with 30 days' notice by sending a written notice of termination by registered mail to the DIS Program Director.

Access to the Policy

- 5.1.6. A current version of the policy will be available on the DIS Website.

Collection, Use, and Disclosure of Personal Health Information in the DIS

- 5.1.7. Collection, use, and disclosure of personal health information within the DIS will be in accordance with PHIA. Collection, use, or disclosure of personal health information within the DIS for any other purpose is strictly prohibited.

5.2. Responsibilities of the DIS Program

DIS Service and Support

- 5.2.1. The DIS Program will make all reasonable efforts to provide DIS services and support to the User Organization. Hours of support and procedures for obtaining support are available on the DIS Support Website.
- 5.2.2. The DIS Program is responsible for the support of all DIS-related software, hardware, and infrastructure that lies within the nshealth.ca network.
- 5.2.3. The Information Services Support Provider is the single point of contact for support services on behalf of the DIS Program.

DIS Support – Remote Access

- 5.2.4. The Information Services Support Provider will collaborate with User Organizations on the appropriate use of software that may be required to provide remote support for the DIS, if necessary.

Communication of Service and Support Notices

- 5.2.5. The DIS Program is responsible for ensuring timely communication of DIS-related notifications to Pharmacy Software Vendors, corporate pharmacy support groups, and User Organizations. Notifications may include or be related to:
- The timing of the maintenance window;
 - Scheduled downtime (outside the maintenance window);
 - Unscheduled downtime;
 - Persistent system issues;

Joint Service and Access Policy (Pharmacies & Dispensing Physician)

- Critical incidents and resolutions;
- System upgrades;
- Education updates;
- Updates to policies, procedures, and guidelines; and,
- Any other DIS-related event that may affect the operations of the User Organization.

5.2.6. The DIS Program shall provide reasonable notice to Pharmacy Software Vendors, corporate pharmacy support groups, and User Organizations of scheduled downtime outside of the regular maintenance window.

5.2.7. Deviations from scheduled downtimes along with status updates will be communicated to Pharmacy Software Vendors, corporate pharmacy support groups, and User Organizations.

Network Connections

5.2.8. The DIS Program will provide User Organizations with access to the DIS via static IP addresses. Where the technology is not available, it will be treated as an exception and an alternative will be determined.

Privacy of Personal Health Information in the DIS

5.2.9. DHW shall be ultimately responsible for ensuring that the privacy of the personal health information collected, used, disclosed, and retained by the DIS is maintained in compliance with PHIA.

Monitoring/Security and Privacy Breaches/Complaints

5.2.10. DHW reserves the right to monitor and audit the use of the DIS access connections and to employ any tools and applications it may deem appropriate to assist in monitoring and auditing.

5.2.11. Collection and use of DIS data will be tracked, logged, and subject to audit. All overrides of Consent Directives will also be tracked, logged, and subject to audit.

5.2.12. The DIS Program reserves the right to suspend or terminate the access of any User Organization without notice, at the sole discretion of the DIS Program, to protect the security of the nshealth.ca network and/or the privacy of the personal health information in the DIS.

5.2.13. In the event of a suspected breach of privacy or security, the DIS Program will follow the DHW Privacy Breach Protocol which may require the DIS Program to contact and collaborate with the User Organization representative responsible for privacy and security to conduct an investigation. The DIS Program should also follow the recommendations outlined in the *DIS Privacy and Security Guidelines for Best Practices*, attached to this Policy as Schedule B.

5.2.14. The PAO reserves the right to follow-up on, and investigate where necessary, any notifications or suspicions of privacy breaches, and any privacy concern with respect to the DIS.

Joint Service and Access Policy (Pharmacies & Dispensing Physician)

Integrity of Data

5.2.15. The DIS Program in collaboration with the Information Services Support Provider will ensure that processes, procedures, and controls are in place to maintain the integrity of DIS data within its custody.

DIS Program Accountabilities

5.2.16. The DIS Program shall identify one or more individuals who will be responsible for the monitoring of privacy and security of DIS data.

5.2.17. The DIS Program shall designate Users employed by or associated with the DIS Program who are authorized to access, collect, use, and disclose personal health information within the DIS. The DIS Program accepts responsibility for ensuring their authorized Users comply with this Policy and do not improperly access, use, disclose, dispose, or destroy DIS data.

5.2.18. The DIS Program shall appoint an individual employed by or associated with the DIS Program who will be responsible to manage and designate Users and User roles for DHW.

Education

5.2.19. The DIS Program is responsible to maintain education on the appropriate use of the DIS and the appropriate procedures for the collection, use, and disclosure of DIS data.

Maintaining a Public DIS Website

5.2.20. The DIS Program shall maintain a public DIS Website which shall provide information that is useful and informative to the public about the DIS Program.

5.2.21. The DIS Program shall make reasonable efforts to ensure that the public DIS Website is available to the public via the internet on a 24x7x365 basis.

Maintaining a DIS Support Website

5.2.22. The Information Services Support Provider will make a DIS Support Website available which will provide useful information, notifications, and services to Pharmacy Software Vendors, corporate pharmacy support groups, and User Organizations.

5.2.23. The Information Services Support Provider will make a reasonable effort to ensure the DIS Support Website is available on a 24x7x365 basis, with the exception of scheduled downtimes, and is supported for incident resolution from Monday – Friday (excluding statutory holidays) from 8 am – 4 pm.

Confidentiality Agreement

5.2.24. DHW must sign the *Confidentiality Agreement* attached to this Policy at Schedule C.

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- 5.2.25. The DIS Program shall ensure that all Users employed by DHW who require access to the DIS also sign confidentiality agreements that address the privacy and security of any DIS proprietary information or personal health information and verifies that they have read this Policy document and all Provincial Privacy and Security Policies applicable to the access to and use of the DIS, such as:
- Government Privacy Policy (Province)
 - Joint Privacy Policy (Executive Council Office, Treasury Board Office, Office of Policy and Priorities, Chief Information Office)
- 5.2.26. The DIS Program shall ensure that all Users affiliated with DHW and DHW Contractors who require access to the DIS also sign confidentiality agreements that address the privacy and security of any DIS proprietary information or personal health information and verifies that they have read the *DIS Privacy and Security Guidelines for Best Practices*, attached to this Policy document at Schedule B.

5.3. Responsibilities of the User Organization

Dispensing

- 5.3.1. User Organizations are required to send all dispenses, only for humans, to the DIS.

Transactions Completed During Outages

- 5.3.2. User Organizations must ensure that all DIS supported transactions completed (excluding queries) during a DIS outage are sent to the DIS within a mutually agreed time frame once the system is made available, in a manner that does not unduly interfere with the User Organization's business operations.

Business Continuity Plan

- 5.3.3. User Organizations are responsible for their own business continuity plans to support their pharmacy business processes when the DIS is unavailable.

Providers

- 5.3.4. Users must ensure they use the provider's license number when dispensing prescriptions for providers licensed in Nova Scotia. A Default Provider must only be used for situations where the provider is licensed outside of Nova Scotia and is not registered with the NSPMP.

User Organization Accountabilities

- 5.3.5. Each User Organization will be responsible for the individuals and the activities of the individuals within their organization who are authorized to access, collect, use, and disclose personal health information within the DIS. Each User Organization accepts responsibility for ensuring their authorized Users comply with this Policy.
- 5.3.6. The Pharmacy Manager of each licensed pharmacy within the User Organization shall be the central point of contact for the DIS Program for all audit, privacy, security, user access and data quality related matters.

Joint Service and Access Policy (Pharmacies & Dispensing Physician)

- 5.3.7. Each User Organization may also appoint a User Organization privacy and security representative(s) who, in conjunction with the Pharmacy Manager, will be responsible for:
- Privacy and security of personal health information within the User Organization;
 - Receiving reports and communication related to any suspected or confirmed privacy breaches involving the personal health information within the User Organization; and
 - Collaborating with the PAO to investigate and contain suspected breaches of privacy or security.
- 5.3.8. Each User Organization may also appoint a User Organization approver(s) who, in conjunction with the Pharmacy Manager, will be responsible to:
- Manage the User roles for the User Organization; and
 - Verify that each User with permission to access the DIS is properly authorized for a particular role and has all necessary licenses and authorities associated with that role.
- 5.3.9. The User Organization approver, privacy and security representative, and Pharmacy Manager may be the same individual.
- 5.3.10. The User Organization shall provide the DIS Program with the contact information for approver, privacy and security representative, and Pharmacy Manager, and notify the DIS Program of any updates to the contact information.
- 5.3.11. The User Organization is responsible for providing the Information Services Support Provider with updated contact information for its locations in order to facilitate DIS support when necessary.
- 5.3.12. Where DIS data is disclosed to the User Organization through a system to system interface, the User Organization agrees to utilize Pharmacy Software that supports the defining of appropriate User roles as suggested in the *DIS Privacy and Security Guidelines for Best Practices*, attached to this Policy document at Schedule B.

Network Connections

- 5.3.13. Unless the technology is not available, User Organizations will access the DIS via static IP addresses provided by Internet Service Providers, (e.g. Bell Aliant/Eastlink).

Accuracy of Data

- 5.3.14. Each User Organization will be responsible for ensuring that any data collected and provided by the User Organization and its Users is reasonably accurate, and that the User Organization has taken reasonable steps to ensure the accuracy of data disclosed to the DIS.

Joint Service and Access Policy (Pharmacies & Dispensing Physician)

- 5.3.15. Where necessary, User Organizations will collaborate with the Information Services Support Provider to make corrections to data.
- 5.3.16. In the interest of individuals' safety, Dispensary Staff should:
- Only add an individual to the CR if an individual cannot be located; and,
 - Notify the Information Services Support Provider of any potential duplicate and non-human records that may exist or which the User Organization becomes aware, within the DIS in order that triage and data remediation take place.

Consent Directives and Overrides

- 5.3.17. In accordance with Section 17 of PHIA, the DIS program will implement a process to facilitate Consent Directives from individuals who may want to revoke consent for the DIS to disclose their personal health information. This process will mask all of the patient's DIS profile except demographic information.

There are two reasons under which authorized users can override a Consent Directive to temporarily view (un-mask) an individual's personal health information:

- When the patient is in need of healthcare and accessing the DIS will avert or minimize an imminent and significant danger to the health or safety of a patient; or,
- When the patient provides consent to override their directive.

Once a user has overridden a patient's consent directive, the patient's personal health information in SHARE may be viewed by that user. Viewing a patient's personal health information after overriding a consent directive is subject to the terms and conditions of the *Personal Health Information Act* and its regulations, this policy and all other applicable legislation, policies, procedures and guidelines.

Note: All instances of overriding a Consent Directive will be automatically flagged by the DIS for audit.

DIS Support

- 5.3.18. User Organizations are responsible for the support of all software, hardware, and infrastructure that lies outside of the nshealth.ca network.

DIS Support – Remote Access

- 5.3.19. The User Organization and the Information Services Support Provider will collaborate on the appropriate use of software that may be required to provide remote support for the DIS, if necessary.

User Training/ Education

- 5.3.20. Each User Organization is responsible to facilitate education recommended by the DIS Program within the User Organization.

Joint Service and Access Policy (Pharmacies & Dispensing Physician)

- 5.3.21. Pharmacy system specific training must be completed by all User Organization staff who will be accessing the DIS.

Confidentiality Agreements

- 5.3.22. The User Organization must sign the *Confidentiality Agreement* attached to this Policy as Schedule C.

Monitoring Access/ Security and Privacy Breaches/ Complaints

- 5.3.23. The User Organization shall monitor access of its staff to the DIS to ensure proper access, use, and disclosure of personal health information in the DIS.
- 5.3.24. The User Organization shall advise the DHW Privacy and Access Office if the User Organization becomes aware of or reasonably suspects that there has been a privacy or security breach, or if a client or other individual has raised a privacy or security concern with respect to the DIS.
- 5.3.25. The User Organization should follow the recommendations outlined in the *DIS Privacy and Security Guidelines for Best Practices*, attached to this Policy document as Schedule B.

5.4. Joint Responsibilities of DHW and the User Organization

User Access

- 5.4.1. Users must only access the DIS for the purpose of providing and supporting health care and technical support when necessary.
- 5.4.2. Users shall not access the DIS from outside Canada or transfer information from the DIS to locations/computer systems/networks outside of Canada unless prior written approval has been received from DHW.

Individual Access / Amendments to their Personal Health Information

- 5.4.3. Individuals have the right to access their personal health information stored in the DIS.
Individuals may submit requests to the PAO for a copy of their personal health information stored in the DIS.
- 5.4.4. Individuals have the right to request corrections to their personal health information stored in the DIS.
- 5.4.4..1. Where necessary and appropriate, the PAO may refer the patient to the User Organization or may consult with the User Organization which entered the data.
- 5.4.4..2. User Organizations will only make amendments to personal health information stored in the DIS after receiving consent from the subject individual.
- 5.4.4..3. The PAO retains the authority to determine what type of amendment should be made if an individual's request is not, or cannot be addressed to the satisfaction of the individual by the User Organization.

Joint Service and Access Policy (Pharmacies & Dispensing Physician)

- 5.4.5. Individuals may submit requests to the PAO for a record of user activity related to an individual's personal health information stored in the DIS.
- 5.4.6. Individuals may submit complaints to the PAO regarding the privacy of their personal health information stored in the DIS.

6. POLICY GUIDELINES

N/A

7. ACCOUNTABILITY

- 7.1. For the purpose of the administration of this policy, accountability is delegated to the Deputy Minister of Health and Wellness.
- 7.2. The Senior Executive Director of Corporate Service and Asset Management, or designate, has responsibility for ongoing monitoring and enforcement of this policy.

8. MONITORING / OUTCOME MEASUREMENT

- 8.1. The DIS Program Director will monitor the implementation, performance, and effectiveness of this policy.

9. REPORTS

N/A

10. REFERENCES

- 10.1. *Personal Health Information Act (PHIA)*
- 10.2. *Freedom of Information and Protection of Privacy Act (FOIPOP)*
- 10.3. *Personal Information Protection and Electronic Documents Act (PIPEDA)*
- 10.4. *Pharmacy Act* and associated regulations
- 10.5. *Prescription Monitoring Act*
- 10.6. *Medical Act*

11. APPENDICES

- 11.1 Schedule A – Drug Information System Joint Service & Access Policy (Pharmacies and Dispensing Physician) – Confirmation of Acceptance Form
- 11.2 Schedule B – Drug Information System Privacy and Security Guidelines for Best Practices
- 11.3 Schedule C – Drug Information System Confidentiality Agreement (Pharmacies and Dispensing Physician)
- 11.4 Appendix A - Employee Confidentiality Form

12. VERSION CONTROL

Version Control:	Version 3, April 1, 2016 – Updates including administrative amendments, additional responsibilities
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for Pharmacy Managers, changes to the roles of Privacy and Security Representatives, and clarification of the consent override functionality.

Version 2, July 4, 2014, Administrative Amendments, replaces all previous versions.

Suspected or confirmed privacy breaches are now reported to the Privacy and Access Office, and the privacy contact for each party is now provided to the DIS Program.

13. INQUIRIES

- 13.1. DIS Program Director
DIS Program
Nova Scotia Department of Health and Wellness
Tel. (902) 424-7270
Fax (902) 428-2446
Email DIS@novascotia.ca



Schedule A
Drug Information System Joint Service and Access Policy
(Pharmacies and Dispensing Physician)
Confirmation of Acceptance

By signing below, I confirm that I have reviewed and accepted the attached Department of Health and Wellness, Drug Information System (DIS), Joint Service and Access Policy (Issue: October 23, 2013).

Notification of any required changes to this policy will be made available through the DIS website (<http://novascotia.ca/dhw/dis>) and by other electronic means no less than 60 days in advance of updating the policy. A current version of the policy will be available on the DIS website.

This confirmation of acceptance may be terminated by the User Organization(s) with 30 days' notice by sending a written notice of termination by registered mail to the DIS Program Director, 44-1894 Barrington Street, Halifax, NS, B3J 2A8.

User Organization: _____

Authorized Signature: _____

Printed Name and Title: _____

Address: _____

City: _____ Province: _____

Postal Code: _____ Email Address: _____

Phone: _____ Fax: _____

Alternate Contact (if applicable): _____

Alternate Phone (if applicable): _____

Date: _____

Completed confirmation of acceptance forms must be faxed to: 1 (902) 407-3020.

Schedule B

Drug Information System Privacy and Security Guidelines for Best Practices

1. Purpose

- 1.1. The purpose of this guideline document is to provide users of the Drug Information System (DIS) with recommended practices to help maintain the confidentiality, integrity, and availability of information collected, used, disclosed, and retained by the DIS.

2. Recommended Security Safeguards

User ID and Passwords

- 2.1. Pharmacy Software User ID's should be uniquely identifiable.
- 2.2. Passwords should be at least 8 characters long.
- 2.3. Passwords should contain characters from at least two of the following classes:
- English upper case letters A, B, C, ...Z
 - English lower case letters a, b, c, ...z
 - Westernized Arabic numerals 0, 1, 2, ... 9
 - Non-alphanumeric characters { } [], . , ° ; : ' " ? \ ` ~ ! # \$ % ^ & * () _ - + =
- 2.4. Passwords should not be constructed using only the following:
- Username or User ID
 - Any of the user's names
 - Names of family, pets, friends
 - Email addresses or part thereof
 - Words found in a dictionary
 - Birthday, address, phone numbers
 - Cities
 - Company name and derivatives
 - Letter patterns like QWERTY, ZXCVBN
 - Computer terms
 - Any of the above preceded or followed by a digit (e.g., 1Halifax or Halifax1)
- 2.5. User accounts should be locked-out after 3-10 logon attempts. The lock-out can be permanent or temporary. Temporary lock-outs should be at least one hour.
- 2.6. Users should change their password at least every 120 days.
-

- 2.7. Users should use a different password each time the password is changed. Pharmacy software systems should remember at least the previous 5 passwords and prevent the user from re-using them.
- 2.8. System and application default passwords should be replaced with strong passwords using the elements described in clauses 2.2 thru 2.4.
- 2.9. Administrator accounts should require strong passwords.
- 2.10. Guest accounts should be disabled.
- 2.11. Access to password files should be restricted.
- 2.12. Users should be reminded of the following regarding their passwords:
 - Don't reveal your password to anyone. This includes your boss, secretary, administrative assistant, family members, helpdesk staff, and co-workers while on vacation.
 - Don't use the same passwords for work and personal use (e.g. Facebook, Hotmail).
 - Don't talk about your password in front of anyone.
 - Don't reveal your password over the phone to anyone.
 - Don't reveal your password in an email message.
 - Don't hint at the format of your password.
 - Don't write your password down.
 - Don't store your password in your office, near your computer or on your computer or phone.
 - Don't reveal your password on questionnaires or security forms.
 - Don't use the "remember password" feature that your browser or some other applications have.

Workstation Controls

- 2.13. Users should take reasonable precautions to ensure that, if confidential information is displayed on a computer screen, the information is not visible to any person not authorized to view the information.
- 2.14. Where practical, users should not leave computers unattended when personal health information is accessible. Computers should be configured to enable screen locking when the system is idle or unattended. This screen lock should require a password to reactivate the screen.
- 2.15. Users should be restricted from saving, copying, or moving any files containing personal health information to their computer hard drive or other medium, e.g. a CD/DVD or USB key.

- 2.16. Operating system security patches should be applied to all computers in a timely fashion.
- 2.17. Virus protection software should be installed on all computers in the pharmacy and should be configured to receive automatic updates of virus definition files.
- 2.18. Host based firewalls (e.g. Windows firewall) should be enabled on workstations and only applications that are necessary for business should be allowed.
- 2.19. Portable computers such as laptops/notebooks should be fitted with physical lockdown devices. These devices are similar to bicycle locks for portable computers.
- 2.20. Personal use of the Internet should be discouraged from workstations which connect to the DIS.

User Roles

- 2.21. User accounts in the Pharmacy Software systems should be role-based.
- 2.22. User Roles should be mapped to authorized levels of access to personal health information.

Access Logs

- 2.23. All access to personal health information stored in the DIS is logged and all users of the DIS should be made aware of this.
- 2.24. Access logs should be reviewed regularly to ensure reasonable access to data by authorized users only and to review login and logout attempts including failed attempts. This review function may be automated using tools that search log files and report defined suspicious activity on an ongoing basis.

Audit

- 2.25. Privacy and security audits of pharmacy software systems should be carried out annually or more frequently.
- 2.26. Audits should include the analysis of privacy and security controls and the access to and use of pharmacy software systems.

Networking

- 2.27. A firewall should be implemented to protect the network within the User Organization.
- 2.28. An analysis should be conducted to identify any weaknesses and vulnerabilities related to any wireless networks used by the User Organization and mitigations should be identified and implemented where necessary.
- 2.29. The User Organization should take all reasonable and practicable steps to ensure that all devices connected to the nshealth.ca network use the most up-to-date firewall and anti-virus software and that virus definition patterns are kept current.
- 2.30. User Organizations should work with their Internet Service Provider to ensure internet connections are of sufficient bandwidth to support efficient access to the DIS and any other internet access requirements they may have.

3. Recommended Privacy Safeguards

Confidentiality Agreements

- 3.1. User Organizations and Pharmacy Software Vendors should maintain copies of confidentiality agreements signed by staff who require access to the DIS.

Patient Consent

- 3.2. Dispensing staff should ensure that personal health information obtained from the DIS is not disclosed outside the patient's circle of care without consent of the patient or the patient's substitute decision-maker.

New Patients

- 3.3. Dispensing staff should obtain the Health Card Number (HCN) or equivalent whenever possible from the patient for encounters that result in queries to the DIS. Searching for a patient by HCN (or equivalent) is the most effective way to locate the patient in the Client Registry.
- 3.4. Only add an individual to the Client Registry (CR) if an individual cannot be located.

Service Desk

- 3.5. Calls to a service desk and resulting service desk tickets should not include personal health information.

- 3.6. Where necessary, personal health information should be sent to support staff via secure methods only (e.g. secure email, secure file transfer).

Privacy Breaches

- 3.7. In addition to audit logs, a record should be maintained of every privacy and security breach that may have occurred in the DIS and this record should include details of all corrective procedures taken to diminish the likelihood of future privacy and security breaches.

Printed Information

- 3.8. If it is necessary to print reports and listings of data from the DIS that may include personal health information these should only be printed, displayed, stored, and reviewed in restricted, secured locations to which only authorized users have access.

Schedule C
Drug Information System Confidentiality Agreement
(Pharmacies and Dispensing Physician)

The Nova Scotia Department of Health and Wellness and the User Organization agree that each Party shall:

- a) Not use, disclose, reproduce or otherwise make available, proprietary information (including firewall, network or host configurations) provided by the other Party to any person, firm or enterprise (other than each Party's employees or agents who have a need to know such information for the purposes of the Agreement), unless specifically authorized in writing to do so by the other Party;
- b) Exercise all due care and diligence and take all reasonable precautions to prevent any unauthorized collection, use, disclosure, retention, destruction or disposal of any Drug Information System (DIS) proprietary information or personal health information;
- c) Ensure that each staff member who requires access to the DIS also signs a confidentiality agreement similar to the one attached to this schedule at Appendix A, that addresses the privacy and security of any DIS proprietary information or personal health information and verifies that the staff member has read Section 5.3 of the DIS Joint Service and Access Policy and associated DIS Privacy and Security Guidelines for Best Practices; and,
- d) Keep confidential all data and other information which comes into their possession pursuant to, or as a result of, or in the performance of this Agreement and shall not divulge such information to any third party without the prior written consent of the other, during the term of this Agreement and after termination.

Notwithstanding the above, DIS information may be disclosed by the Parties to the extent required or permitted by law, including but not limited to the *Freedom of Information and Protection of Privacy Act*, S.N.S. 1993, c. 5 ("FOIPOP") and the *Personal Health Information Act*, S.N.S. 2010, c. 41 ("PHIA").

SIGNED in the presence of	)	HER MAJESTY THE QUEEN in right of the Province of Nova
_____	)	Scotia as represented in this behalf by the Department of
Witness	)	Health and Wellness
	)	Signatory Name: _____
	)	Title: _____
	)	Signature: _____ Date: _____
)	
	)	USER ORGANIZATION
_____	)	Organization Name: _____
Witness	)	Signatory Name: _____
	)	Title: _____
	)	Signature: _____ Date: _____

Completed confidentiality agreement forms must be faxed to: 1 (902) 407-3020.



Appendix A

Employee Confidentiality Agreement

Privacy of Personal Health Information

The Drug Information System (DIS) Program of the Department of Health and Wellness (DHW) along with *<Name of User Organization>* are committed to the protection of the privacy of patients' personal health information. All *<Name of User Organization>* users authorized to access the DIS are responsible for protecting the confidentiality of all patients' personal health information that is collected, used, disclosed, retained or disposed in the course of his/her work or association with the *<Name of User Organization>*. Authorized users of *<Name of User Organization>* are therefore required to sign this pledge of confidentiality:

Pledge of Confidentiality

I hereby pledge to hold in confidence all matters that come to my attention while working in *<Name of User Organization>* or during my association with *<Name of User Organization>*. I will observe and comply with the Joint Service and Access Policy of the DIS Program of the DHW and all policies of *<Name of User Organization>*. Except when I am legally authorized or required to do so as part of my job/association, I will not access or disclose or give to any person any information that comes to my knowledge or possession by reason of having access to the DIS.

I understand my obligations to keep personal health information confidential survives any association with *<Name of User Organization>*.

I acknowledge that any breach of confidentiality or inappropriate use of information obtained through access to the DIS may result in disciplinary action including dismissal and/or a report to my professional regulatory body.

Signature: _____

Date: _____

Name (please print): _____

Signature of Witness: _____

Date: _____

Name of Witness (please print): _____

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Education Overview

Learning activities for dispensary staff of pharmacies (pharmacists, pharmacy technicians and pharmacy assistants) about the Drug Information System is organized into two types of complementary activities:

1. Online Education Modules - provided by the Drug Information System project; and
2. System Software Training – provided by pharmacy software vendors.

The online education modules are intended to provide information that will not be included in the specific pharmacy vendor system software training about the Drug Information System. This education will supplement, not replace, the software training.

Pharmacy CEUs

For pharmacists, this course has been accredited for **2 Continuing Education Units** by Continuing Pharmacy Education, College of Pharmacy, Dalhousie University. File number **CED-2013-373** should be recorded in the pharmacist's Professional Development Record (PDR).

E-learning modules

The main component of education about the Drug Information System for dispensary staff is provided through four e-learning modules that are easily accessed through the use of computers. These e-learning modules may be completed at the person's own pace and are available 24 hours a day, 7 days a week on the Department of Health and Wellness website (<http://novascotia.ca/dhw/ehealth/DIS/education-resources.asp>). All modules are self-contained and each will take approximately 20 - 30 minutes to complete. The modules are designed to be completed sequentially but can be accessed and completed in any order.

Descriptions of modules

Here is a brief description of each module:

Module 1: Introduction to the Nova Scotia Drug Information System

- The Drug Information System as a component of the Nova Scotia Electronic Health Record System
- Benefits, functions and users of the Drug Information System
- Involvement of pharmacy professionals in development of Drug Information System
- Integration of the Drug Information System with the Nova Scotia Prescription Monitoring Program

Module 2: Privacy and Confidentiality

- Introduction to the *Personal Health Information Act (PHIA)*
- Definitions of terms found in *PHIA* (personal health information, custodians and agents)
- Consent requirements for the collection, use and disclosure of information in the Drug Information System



- Masking and accessing masking personal health information
- Patient requests regarding records

Module 3: Client and Provider Registries

- Functions of the Client and Provider Registries
- Best practices when accessing and searching the Client Registry
- Possible patient safety issues if there are multiple records or if select wrong record in Client Registry
- Types of data in Provider Registry
- Function of Default Provider option in Provider Registry

Module 4: Functions of the Drug Information System

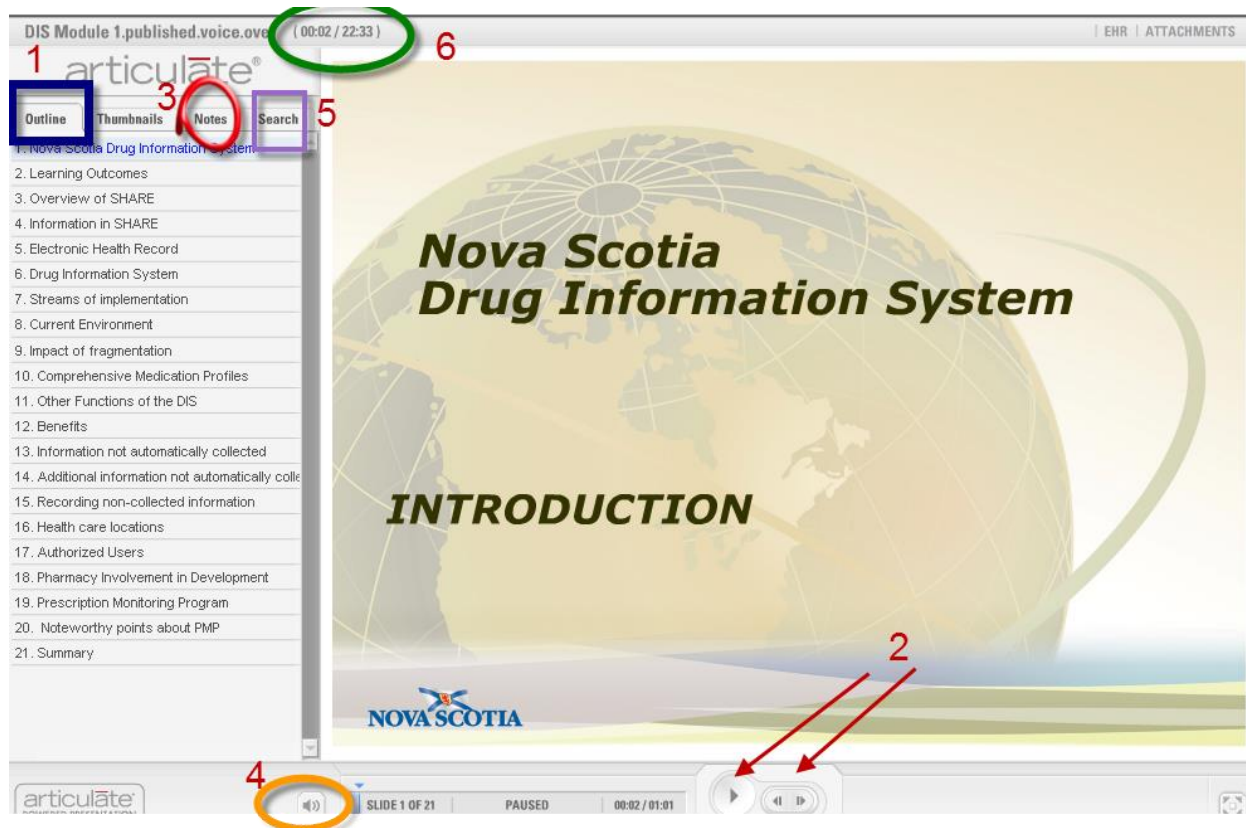
- Importance of entering complete and accurate data in Drug Information System
- Requirements for processing prescription orders and dispenses
- Distinguish between allergies, intolerances and adverse reactions
- Types of information recorded in the Drug Information System related to Other Medications, Immunizations and Patient Notes

Each module has voice recorded content and is meant to be listened to as well as watched / interacted with. For those who do not have access to speakers or a computer that supports the interactivity, each module is also available in a printable pdf format. Instructions for using the e-learning module software (Articulate) are provided below.

Evaluation of e-learning

An evaluation form for the e-learning modules is provided on the DIS website (<http://novascotia.ca/dhw/ehealth/DIS/education-resources.asp>). Evaluation of and feedback about the education modules is very valuable and will inform future sessions and possibly the content of other documents.

Instructions for using the e-learning module software (Articulate)



This is a screen shot of the first slide of the first module and is typical of what you will see when you first open a Drug Information System e-learning module.

1. You will note there are 21 slides in this particular module and the title of each slide is listed under the tab “Outline” (indicated by the blue rectangle).
2. To pause, advance or return to a previous slide, click on the areas indicated by the red arrows. You can also move to each slide by clicking the slide title under the Outline tab.
3. To view the speaker notes while watching the presentation, click on the “notes” tab as indicated by the red circle.
4. The voice recording should start immediately once the module opens to the first slide. The volume can be adjusted by using your own computer settings or by clicking on the little speaker icon circled in orange here.

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5. To search for a word or phrase within the module, click on the “search” tab in the purple rectangle (next to the “notes” tab)
6. To determine the amount of time the module will take to view and to monitor how much time it has taken thus far, see the area at the top of the slide circled in green.



DIS Support Overview

There are three key groups responsible for providing the pharmacy with support for the Drug Information System (DIS):

- The Banner/Chain/Corporation's Technical Support Team (if they have one)
- The Pharmacy System Vendor
- The DIS Support Team

If dispensary staff is experiencing an issue with the DIS, they are to contact:

1. The Banner/Chain/Corporation's Technical Support Team (if they have one)
2. The Pharmacy System Vendor (if their organization does not have a Technical Support Team)

These groups will work to resolve their issues and will contact DIS Support on their behalf if required. **Pharmacies and Pharmacy Organizations will never contact the DIS Support Team directly.**

Note: if it is suspected that a patient's privacy has been breached, the pharmacy is to contact the Department of Health and Wellness – Privacy and Access Office at **1-855-640-4765**.

DIS Support Team

The DIS Support Team is a specialized group of people who have both the clinical and technical knowledge required to resolve DIS issues. To do this, they will work with the appropriate resources as required, including the Banner/Chain/Corporation's Technical Support Team, the Pharmacy System Vendor, dispensary staff, and the DIS Software Vendor.

The DIS Support Team members are employees of the Nova Scotia Health Authority (NSHA) a support service for the Department of Health and Wellness. Please be aware that the phone number provided for DIS support will be answered as 'Health IT Service Desk'.

The Health IT Service Desk is open to log calls for the DIS Support Team 24/7/365. DIS Support Team business hours are Monday – Friday, 8am to 4pm. However, high severity issues that arise outside of these hours will be addressed by the Team as follows: weekdays - until 10 pm; weekends - 8 am to 10 pm.

DIS Outages

The maintenance window for the Drug Information System (DIS) is currently **Wednesday from 12:30 am - 8:00 am**. The DIS may be unavailable during this time. Maintenance to the DIS will be performed during this time where possible.

If the DIS is unexpectedly unavailable, the DIS Support Team will contact the pharmacy by fax and/or email as indicated on the *Pharmacy Contact Information Form*.



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If the DIS is unavailable for a prolonged period, the store(s) and support organizations will receive regular status updates. The DIS Support Team will also provide an explanation for unexpected outages including steps that will be taken to prevent the outage in the future.



Communications Overview

The DIS Project Team has developed a Go Live Communications Framework which outlines the key messages to be delivered to Pharmacy Owners/Managers and dispensary staff. In addition, the Team has created supporting sample communications for use by the BCC Implementation Contact and the Pharmacy Owners/Managers.

The Go Live Communications Framework is included in this document. It contains the communications events/activities that must occur prior to Go Live, as well as the objectives, key messages and distribution timing of each.

As the BCC Implementation Contact **you are responsible to communicate a number of key messages to the Pharmacy Owner/Manager** about DIS and about Go Live in their pharmacy. You are also responsible to ensure that the Pharmacy Owner/Manager has received a DIS announcement from the Banner/Chain/Corporation which introduces your role.

To assist you with this, two communications have been prepared for your use. Feel free to deliver these communications using whatever method works best but please ensure the context and content of the messages is not changed.

Here is an overview of each communication.

Pharmacy Go Live Announcement

The purpose of this communication is to announce the Go Live date of DIS in the pharmacy and to indicate that a meeting will be scheduled - page 1. The remaining pages are intended to provide the Pharmacy Owner/Manager with an overview of DIS.

Go Live Activity Checkpoint

The purpose of this communication is to remind the Pharmacy Owner/Manager of the key activities that should have occurred or be underway at this time. It also confirms your next meeting date with the Pharmacy Owner/Manager.

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Go Live Communications Framework

<i>Event/Activity</i>	<i>Target Audience</i>	<i>Responsibility</i>	<i>Timing</i>	<i>Objective</i>	<i>Key Messages</i>
		BCC Senior Executive			
Banner/Chain/Corporation DIS Announcement File name: BCC DIS Announcement	Pharmacy Owners / Managers	Appropriate Banner/Chain/Corporation Senior Executive	4 - 6 weeks prior to Go Live	<ul style="list-style-type: none"> Awareness of NS DIS and BCC's participation Introduction of BCC Implementation Contact Requirement for Assistance from Pharmacy Owners / Managers 	<ul style="list-style-type: none"> BCC supports NS DIS BCC Go Live schedule has been determined Role of BCC Implementation Contact Next Steps
		BCC Implementation Contact			
Pharmacy Go-Live Announcement	Pharmacy Owner/Manager	Banner/Chain/Corporation Implementation Contact	4 weeks prior to Go Live	<ul style="list-style-type: none"> Awareness of Go-Live Date Immediate Next Steps 	<ul style="list-style-type: none"> What is the Drug Information System What's in it for dispensing staff/patients

					<ul style="list-style-type: none"> • <i>What's going to happen next</i> • <i>What do I need to do</i>
<p>Go-Live Activity Checkpoint</p> <p><i>File name:</i> Go-Live Activity Checkpoint</p>	Pharmacy Owner/Manager	Banner/Chain/Corporation Implementation Contact	3 weeks prior to Go-Live	<ul style="list-style-type: none"> • <i>Reminder to Continue to Action the Go-Live Checklist</i> 	<ul style="list-style-type: none"> • <i>Go-Live is drawing near</i> • <i>Important activities to complete on your Go-Live Checklist</i> • <i>Ensure Dispensing Staff have received Pharmacy Go-Live Announcement</i> • <i>Ensure 'Coming Soon' Bag Inserts are being distributed</i>
		Pharmacy Owner/Manager			
<p>Pharmacy Go-Live Announcement</p> <p><i>File name:</i> Pharmacy Go Live Announcement_Staff</p>	Dispensary Staff	Pharmacy Owner/Manager	4 weeks prior to Go-Live	<ul style="list-style-type: none"> • <i>Awareness of Go-Live Date</i> • <i>Immediate Next Steps</i> 	<ul style="list-style-type: none"> • <i>What is the Drug Information System</i> • <i>What's in it for dispensary staff/patients</i> • <i>What's going to happen next</i> • <i>What do I need to do</i>



Health and Wellness

Nova Scotia Drug Information System

<p>Education and Training Announcement</p> <p><i>File name:</i> <i>Education and Training Announcement_Staff</i></p>	<p><i>Dispensary Staff</i></p>	<p><i>Pharmacy Owner/Manager</i></p>	<p><i>2-3 weeks prior to Go-Live</i></p>	<ul style="list-style-type: none"> • <i>Education and Training Approach</i> • <i>Completion Expectations</i> 	<ul style="list-style-type: none"> • <i>How will Education and Training occur</i> • <i>How do I access the Education materials</i> • <i>When should I complete the Education materials</i>
<p>Ready for Go-Live Checkpoint</p> <p><i>File name:</i> <i>Ready for Go Live Checkpoint_Staff</i></p>	<p><i>Dispensary Staff</i></p>	<p><i>Pharmacy Owner/Manager</i></p>	<p><i>2 weeks prior to Go-Live</i></p>	<ul style="list-style-type: none"> • <i>Reminder of Key Activities</i> 	<ul style="list-style-type: none"> • <i>Ensure Education materials have been completed before Go-Live</i> • <i>Sign and return Confidentiality Agreement</i> • <i>On Go-Live day, a new bag insert and brochure will be available for distribution</i>

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Health and Wellness

Nova Scotia Drug Information System

Distribution Date: 4-6 weeks prior to Go Live [BCC DIS Announcement]

To: Pharmacy Owners/Managers

From: Appropriate BCC Senior Executive

Subject: Nova Scotia Drug Information System and [Banner/Chain/Corporation Name]

Hello,

You may have heard that the Nova Scotia Department of Health and Wellness is working towards the implementation of a provincial Drug Information System. The Drug Information System will allow authorized health care providers - such as pharmacists, doctors, dentists, nurse practitioners, optometrists, and midwives - to access, manage, share and protect patients' medication information.

We have been working closely with the Department on this very important initiative and have now identified our schedule for making the new system available to dispensary staff in our Pharmacies.

In addition, to ensure our Pharmacies are ready for the system as scheduled, we have identified [Name] as our 'Implementation Contact'. [Name] will work with you and the Department to ensure the necessary Go Live activities are completed on time in your Pharmacy.

You'll hear from [Name] well in advance of your Go Live date. At that time you'll hear more about the Nova Scotia Drug Information System and the next steps required for its implementation.

In the meantime, if you'd like to learn more about the Drug Information System go to www.novascotia.ca/dhw/dis.

Thank you.

Regards,

Appropriate BCC Senior Executive

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Health and Wellness

Nova Scotia Drug Information System

Distribution Date: 4 weeks prior to Go Live [Pharmacy Go Live Announcement]

To: Pharmacy Owner/Manager

From: BCC DIS Implementation Contact

Subject: Nova Scotia Drug Information System – Go Live Date

Hello,

I'm writing today to let you know that your pharmacists and dispensary staff will begin using the Nova Scotia Drug Information System on **[enter day and date here]**. We refer to this date as your 'Go Live' date.

As you've already heard, the Drug Information System (DIS) is an electronic system that allows authorized health care providers - such as pharmacists and dispensary staff, doctors, dentists, nurse practitioners, optometrists, and midwives - to access, manage, share and protect patients' medication information. More information about DIS is included below for your information; as well, here is the link to their website: www.novascotia.ca/dhw/dis.

What's going to happen next?

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I need to meet with you **within the next 2 weeks** to provide a little more background, to review the activities that must be completed before your Go Live date, and to answer any questions you may have. I expect this meeting will take approximately 1.5 hours.

What do you need to do?

Please respond to this email **within the next 2 days** indicating two possible meeting times.

In the meantime, if you have any questions please let me know.

Thank you for supporting this very important initiative.

Regards,

BCC DIS Implementation Contact

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Health and Wellness

Nova Scotia Drug Information System

Distribution Date: 3 weeks prior to Go Live [Go Live Activity Checkpoint]

To: Pharmacy Owner/Manager

From: BCC DIS Implementation Contact

Subject: DIS Go Live Checkpoint

Hello,

DIS Go Live is just [3 to 5] weeks away. I wanted to take this opportunity to remind you of the key activities that should now have occurred or be underway in your pharmacy.

- The *Pharmacy Go Live Announcement* has been delivered to your pharmacists and dispensary staff
- Your pharmacists and dispensary staff are confirming and updating patients' demographic information as outlined in the *Pharmacy Go Live Announcement*
- You have or are in the process of:
 - Acquired/acquiring at static IP address from your Internet Service Provider
 - Completed/completing the *Pharmacy Contact Information Form*
 - Signed/signing the appropriate schedules of the *Joint Service and Access Policy*
- You are preparing to communicate the DIS education and training details to your pharmacists and dispensary staff

What's going to happen next?

We are scheduled to meet again on [day/date/time]. Please review your *Go Live Checklist* before our meeting to familiarize yourself with the upcoming key activities for Go Live.

In the meantime, if you have any questions please let me know.

Regards,

BCC DIS Implementation Contact

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Getting Your Data Ready for DIS

Based on experiences in other provinces, we've learned that there are some "best practices" for collecting patient demographics that you should begin following now to ensure a smooth transition to DIS.

Do...

- ❖ Update and confirm your patient's information with each visit including:
 - Name (record full legal name and confirm that their name has not changed)
 - Address
 - Phone Number
 - Date of Birth

Do Not...

- ❖ Input nick names
- ❖ Enter other data into the Health Card Number fields. These fields are only to be used for the Nova Scotia Health Card, Military, RCMP or other provincial health card identifiers
- ❖ Enter other data in the patient demographic fields that does **not** pertain to the field

Based on Go Live experience in Nova Scotia, here are some other data cleanup activities that will help with the transition.

- *Enter OPINIONS PINS for devices*

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Nova Scotia Drug Information System Statement for Pharmacy Notice of Purposes (PHIA)

Statement:

We are obligated under the law to disclose your information to the provincial Drug Information System. For more information about this system, go to www.novascotia.ca/dhw/dis.

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Pharmacy Contact Information Form (v3 – July 28, 2015)
Nova Scotia Drug Information System
Instructions for Completion

The purpose of this form is to provide the Department of Health and Wellness (DHW) with information required to:

- set your pharmacy up on the Drug Information System
- provide your pharmacy with DIS support
- identify the individual(s) in your organization responsible for privacy, security and access as outlined in sections 5.3.5 and 5.3.7 of the Joint Access and Security Policy (JSAP). *

[* **Note:** If your pharmacy is affiliated with a Banner, Chain or Corporation, this information has already been provided to DHW – please **do not complete** this section of the form.]

Fax the completed form to: **(902) 407-3020**. Any future changes to the information contained on this form may be faxed to the same number.

Please include the following information on the form.

Company Name	The name of your Banner, Chain or Corporation
Pharmacy Name & Store Number	The name and store number (if applicable) of your pharmacy. This information will be required when contacting DIS Support
License Number	Your pharmacy license number
Pharmacy Owner	The name of the pharmacy owner
Pharmacy Manager	The name of your pharmacy manager
Pharmacy Manager Email Address	The email address for your pharmacy manager
Pharmacy Telephone Number(s) (extension(s) if applicable)	The telephone number or numbers for the DIS Support Team to use when support is required. If there is a specific extension(s) for the dispensary, please include it.
Pharmacy Fax Number	The number for the DIS Support Team to use to send a fax to you
Pharmacy Email Address(es)	The email address or addresses for the DIS Support Team to use to send an email to you

Preferred Contact Method (check all that apply)	<input type="checkbox"/> Fax <input type="checkbox"/> Email The contact method(s) you would prefer the Drug Information Support Team to use in the event of an outage
Pharmacy Civic Address	Your pharmacy's street address
Pharmacy Mailing Address	Your pharmacy's mailing address
Pharmacy Hours	The hours of operation of your pharmacy dispensary
Average Rx Fill per Week	The average number of prescriptions filled per week
Pharmacy Software Vendor	The name of your pharmacy software vendor
Target Go Live Date	Your Go Live date
Static IP Address	Your Static IP Address
Speed Test Download and Upload Speeds	The speeds recorded when you ran the test http://www.speakeasy.net/speedtest – select New York The purpose of this test is to provide DIS Support with your internet upload and download speeds prior to connecting to DIS
Wireless (Yes or No)	Please indicate whether or not you have wireless connectivity in your pharmacy

Privacy, Security and Access Contact(s) – Section 5.3.5 and 5.3.7 of the JSAP

Privacy & Security Contact Name	The person responsible for privacy and security of personal health information within the organization
Privacy & Security Contact Phone Number	The phone number of the person responsible for privacy and security of personal health information within the organization
Privacy and Security Contact Email Address	The email address of the person responsible for privacy and security of personal health information within the organization
User Access Contact Name	The person responsible to manage user roles for the organization
User Access Contact Phone Number	The phone number of the person responsible to manage user roles for the organization

User Access Contact Email Address	The email address of the person responsible to manage user roles for the organization
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Pharmacy Contact Information Form (v3 – July 28, 2015)
Nova Scotia Drug Information System

Company Name	
Pharmacy Name & Store Number	
License Number	
Pharmacy Owner	
Pharmacy Manager	
Pharmacy Manager Email Address	
Pharmacy Telephone Number(s) (extension(s) if applicable)	
Pharmacy Fax Number	
Pharmacy Email Address(es)	
Preferred Contact Method (check all that apply)	<input type="checkbox"/> Fax <input type="checkbox"/> Email
Pharmacy Civic Address	
Pharmacy Mailing Address	
Pharmacy Hours	
Average Rx Fill per Week	
Pharmacy Software Vendor	
Target Go Live Date	

Static IP Address	
Speed Test Download and Upload Speeds	
Wireless (Yes or No)	

Privacy, Security and Access Contact(s) – Section 5.3.5 and 5.3.7 of the JASP

Privacy & Security Contact Name	
Privacy & Security Contact Phone Number	
Privacy and Security Contact Email Address	
User Access Contact Name	
User Access Contact Phone Number	
User Access Contact Email Address	

For Office Use Only:

Geographically in DHA:	
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