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On behalf of the prescribers in Ontario Long Term Care home, this letter is a response to proposed changes in the regulations that affect the payment of pharmacists in long term care homes. OLTCC represents the prescribers—medical doctors (MD) and nurse practitioners (NP)—in long term care.

The purpose of this letter is to support the role of the clinical pharmacist in the long term care home. Reduction in funding will impact safety of long term care residents. Reduction in pharmacy funding will also offload tasks to other frontline workers. A capitation payment system must recognize differences in patient needs and care settings.

The Value Statement of OLTCC is: “We believe a dedicated, collaborative, inter-professional team with Physician leadership provides the highest quality, comprehensive evidence-based medical care for LTC residents.” Clinical pharmacists are an important member of the collaborative, inter-disciplinary team.

Medication management in long term care is complex. The majority of frail, elderly residents have cognitive impairment and may require several medications to manage many co-morbid conditions. The clinical pharmacist provides medication reconciliation on admission and with other transfers of care.

The quarterly and annual MedsCheck LTC, done by the clinical pharmacist, assures the prescribers, and others on the interdisciplinary team, that medications are safe and appropriate. The MedsCheck review identifies possible adverse effects, appropriate monitoring, drug interactions and deprescribing. Deprescribing is the planned and supervised process of dose reduction or stopping a medication, an essential component of medication management.

The clinical benefits of current medication reviews (MedsCheck) include reduction in falls, fractures, delirium and other adverse events. These outcomes promote resident safety and reduces transfers to the emergency departments and admissions to hospital. The clinical pharmacist is an essential partner in reducing Hallway Healthcare.

The proposed capitation method of payment should not be seen as means to promote deprescribing. Medications are prescribed by the MDs and NPs in the long term care. Deprescribing programs should target the prescriber. Examples of proven initiatives for deprescribing are reduction benzodiazepine and antipsychotic use, and antibiotic stewardship.

A capitation system needs to recognize the heterogeneity of the long term care population. Residents who are in transitional care, convalescent care, high priority access beds and end-of-life care will require greater involvement of the clinical pharmacist. Thus, the payment scheme must recognize the individual resident's medical needs.

Reduction in pharmacy services will impact nursing and other resources in the home. The clinical pharmacist works with nursing to maintain a safe and efficient electronic medications administration record (eMAR). They assist in the safe storage and recording of medication. Their role includes safe clinical monitoring, such as in anticoagulation, and ongoing staff education. Reduction in the role of the clinical pharmacist will not only impact resident safety but also offload responsibilities to the already strained frontline providers.

OLTCC was Participant in the Public Inquiry into the Safety and Security of Residents in the Long Term Care Home System. The final report was released on July 31, 2019 and addresses improved medication management in the LTC homes. (Volume 3, chapter 17, pages 71 – 131) The report specifically addresses that the clinical pharmacist optimizes resident care. "A greater presence of pharmacists in the LTC homes could also support optimization of medication management to improve health outcomes for LTC resident'. Pharmacist-led medication reconciliations are faster and more likely to result in the modification and/or discontinuation of medications. They also free up nurse time..." (page 108)

In summary, the clinical pharmacist provides an essential role for interdisciplinary and collaborative care in long term care. Funding needs to sustain their role and prevent the offloading of tasks to others. OLTCC will continue advocate for the safety of our residents in long term care so that they receive excellent care.

Yours sincerely,



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