Presented by Steve Boulanger

RECENT PQAC RELATED ACTIVITY IN LTC

As many of you know there was a Budget Proviso related to long-term care pharmacies in Engrossed Substitute Senate Bill (ESSB) 6052, section 219(11) (Laws of 2015).

This Proviso required the commission to engage in a stakeholder process to develop statutory standards and protocols specific to long-term care pharmacies. It also requires the commission and Dept. of Health to recognize the applicability of medication orders in long-term care facilities and the relationships between professions in conveying chart orders to the long term care pharmacy.

Activity leading up to final report to legislature:

3 Stakeholder meeting which included representatives from a variety of areas:
1. Executive Director of the commission
2. 2 commission staff members
3. Deputy Director of the Office of Investigation and Inspection.
RECENT PQAC ACTIVITY- LTC PHARMACY

Workgroups included:
1. Pharmacy and Healthcare associations. WSPA and WHCA.
2. Long-term care associations. ASCP, WSPA LTC Academy, SCPC
3. Nursing Care Quality Assurance Commission
4. Drug Enforcement Agency
5. Local Unions.
6. DSHS

SUMMARY OF BUDGET PROVISO

Based on stakeholder testimony and commission deliberation, the commission supported moving forward for consideration the draft statutory language jointly proposed by WHCA and WSPA.

The commission believes this draft best represents the collective concerns heard through the stakeholder process.

The commission supported the use of this letter as a working template for proposing new statutes. Key Items:

- Chart orders
- Long-term care facility
- Agent of the prescriber
- Closed door long-term care pharmacy
- Administrative long-term care personnel

ENSURING THERE ARE PROCESSES FOR:

- Communicating / Transmitting chart orders to long-term care pharmacies.
- Use of E-kits and supplemental dose kits.
- The use of automated drug distribution devices (ADDD)
- Storage of prescription records
- The repackaging and dispensing of unused, returned drugs.
- Shared pharmacy services.
Should the legislature find the draft statutory language appropriate to adopt into law, the commission recommends a broad statutory approach providing structural flexibility for future technologies or accepted pharmacy practices, along with direction to the commission to develop more specific long-term care pharmacy standards in rule where appropriate.

**POAC SUMMARY TO LEGISLATURE**

**Intent**
Recognize legislative intent to regulate LTC pharmacies somewhat differently than retail or hospital pharmacies.

**DRAFT LTC STATUTE AMMENDMENTS**

**Intent**
Recognize legislative intent to regulate LTC pharmacies somewhat differently than retail or hospital pharmacies.

**DEFINITIONS**
- Define relevant care settings.
  - LTC facility includes NF, AL, and AFH
  - Hospice program includes both Medicare and state licensed hospice
- Define closed door long-term care pharmacy for purpose of reduced pharmacy tech ratio requirements.
  - Solely serving patients who reside at or are otherwise associated with LTC facilities or hospice programs.
  - Not open to general public for retail but does not preclude limited mail order or retail operations for residents of participating facilities.
Chart orders are a valid prescription when signed by the prescriber’s agent, with the prescriber’s signature to follow in accordance with good medical practice (that is, per the licensing requirements applicable to the prescriber and the facility).

Licensed staff in a LTC facility are understood to be acting as the prescriber’s agent when given a verbal order and asked to enter it into the patient’s medical record.

A pharmacy may accept and fill a prescription based on records transmitted by the LTC facility staff, including chart orders not yet signed by the prescriber and re-transmitted fax prescriptions.

LTC pharmacy may “resupply” medications where a signed chart order is continuing in effect and thus there is no new prescription as is required for a refill.

Codify the use of both e-kits and supplemental dose kits, stored in either a container or in a “device” to include an ADDD box.

Allowing shared pharmacy services in LTC pharmacies.

In first-dose and other situations where there is an immediate need for patient access, the prescription may be filled through shared pharmacy services on a satellite basis without transferring the prescription.
LTC PHARMACIES: NEW SECTION RCW 69.41

- Return and re-use of unit dose and modified unit dose blister packs is allowed.
- Tech ratio for closed door LTC pharmacies is different from retail/hospital settings. Ancillary staff performing administrative tasks do not count toward the tech side of the ratio.

NURSING HOME MEDICATION ORDERS: AMENDING RCW 74.42.230

- Allows medication order to be continuing rather than time-limited.
- Clarifies use of verbal orders.
- Nurse can transmit orders to the pharmacy by phone, fax, or e-prescription.

ELECTRONIC TRANSMISSION OF PRESCRIPTION INFORMATION: AMENDING RCW 69.41.055

- Electronic Transmission of Prescription Information: amending RCW 69.41.055
- Prescriber’s agent can e-sign and transmit electronically
For facsimile prescriptions, there is no need to print the image with the prescription number and other necessary information, as long as that information is digitally linked to the fax image in the pharmacy's electronic record-keeping system.

Exemption from use of tamper resistant pads broadened to include all LTC facilities and hospice programs, not just nursing homes.

Clarify that a chart order may be written and signed by either the prescriber or the prescriber's agent.

Exemption from use of tamper resistant pads broadened to include all LTC facilities and hospice programs, not just nursing homes.

Administrative long-term care pharmacy personnel technician means a pharmacy personnel technician in a closed door long-term care pharmacy who performs administrative tasks not associated with immediate dispensing of drugs, without regard to whether the ancillary personnel is registered under chapter 18.64A RCW. Administrative tasks include but are not necessarily limited to medical records maintenance, billing, prepackaging unit dose drugs, inventory control, delivery, and processing returned drugs, in a long-term care pharmacy or other health systems settings.
SUMMARY

If you want a copy of the full LTC Commission report email SteveB@MercuryRx.com