Dispensing for the Partial Filling of a Prescription by Licensed Practical Nurses Employed in Regional Health Authorities

2022





### **ABOUT THIS DOCUMENT**

This interpretative document provides direction related to the authorities and processes for dispensing for the partial filling of prescriptions by LPNs employed in Regional Health Authorities.

#### **DISPENSING DEFINED**

Section 2(e) of the Pharmacy Act (2012) states that "dispense means to provide a substance or item ordered by prescription but does not include the administration of that substance or item to a person or animal". The Pharmacy Act (2012) identifies dispensing as an act of the practice of pharmacy. The Pharmacy Act also states that dispensing can be a practice for an LPN in the course of their duties when practising with the approval and under the general supervision of a Regional Health Authority.

Dispensing

Not

Dispensing

Taking medications from their original source package, and packaging, labelling, and giving to the client for the client to take at a later time.

The following common medication practices are considered administering, or supplying medications, but are not considered to be dispensing:

- Administering medications to a client from a stock supply.
- Administering medications to a client prepared by a pharmacy.
- Obtaining the medication for the client and giving that medication to the client to be directly taken/used.
- Filling a mechanical aid or alternative container from the client's own blister pack or prescription bottle to facilitate self-administration or administration by a caregiver.
- Repackaging and labeling medications from a client's own supply.
- Providing clients upon discharge, or leave from an institution, with medications that have been prepared for the client by Pharmacy.
- Repackaging and/or providing of medications after they have been dispensed by a pharmacy.

# PARTIAL FILLING OF A PRESCRIPTION DESCRIBED

Partial filling of a prescription means **dispensing** a quantity of medication which is less than the total amount prescribed. The purpose for an LPN to partially fill a prescription is to dispense to the client the necessary medications for the time periods needed until a pharmacy or pharmacy services are reasonably available.



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## SCOPE OF PRACTICE STATEMENT

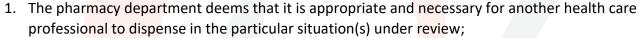
The Pharmacy Act (2012)<sup>1</sup> authorizes dispensing by LPNs, when the LPN is practising with the approval and under the general supervision of a Regional Health Authority.

At this time, CLPNNL grants authority for dispensing for the partial filling of a prescription to be included into the scope of practice<sup>2</sup> for LPNs practicing within an RHA. For an LPN to engage in this practice, they must be authorized by their RHA employer to include this competency in their practice, and they must adhere to the professional expectations for dispensing, as outlined below.

# CRITERIA TO BE CONSIDERED BEFORE AN LPN IN AN RHA SETTING DISPENSES MEDICATION

The decision about whether the LPN scope of practice in the RHA setting includes dispensing for partial filling of a prescription is the responsibility of the RHA with whom the LPN is employed. The RHA should consider several factors and give written approval/authorization prior to the LPN incorporating this role into their practice.

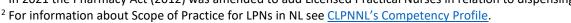
The following criteria should be considered before an LPN is given the responsibility for dispensing for the partial filling of a prescription:



- 2. In-house pharmacy services are not available;
- 3. There is no immediate access to a community pharmacy service; and,
- 4. There is an urgency to dispense the medication.

While LPNs may be required to engage in dispensing for the partial filling of a prescription, RHA policies should ensure that, primarily, dispensing remains the responsibility of pharmacy. LPNs who include dispensing for the partial filling of a prescription in their role require access to appropriate education, supervision, policies, reference materials and necessary systems to ensure medications are dispensed safely and in accordance with accepted standards. In addition, employer policies, procedures, and quality assurance mechanisms should be developed in consultation with pharmacy services within the RHA. The RHA should ensure that LPNs have access to a pharmacist/pharmacy service for consultation as required.

Policies should address all aspects of documentation and/or communication required between the dispensing LPN and the Pharmacy department. Policies should also identify areas where exceptions to standards occur, for example, the use of properly labeled envelopes to hold a 12-hour portion of a prescription rather than the use of a child resistant container as required.



<sup>&</sup>lt;sup>1</sup> In 2021 the Pharmacy Act (2012) was amended to add Licensed Practical Nurses in relation to dispensing.

# PROFESSIONAL EXPECTATIONS FOR DISPENSING FOR THE PARTIAL FILLING OF A PRESCRIPTION

LPNs who include dispensing for the partial filling of a prescription in their practice must carry out this role in accordance with their standards of practice, their code of ethics, the expectations related to medication management, and according to employer policies.

The following CLPNNL requirements for LPNs dispensing medications for the partial filling of a prescription are informed by the Newfoundland and Labrador Pharmacy Board (NLBP) Standards of Pharmacy Operations – Community Pharmacy, (2022).

- 1. When LPNs dispense a small quantity of a medication (partial filling of a prescription) the following information must be clearly visible on the medication packaging:
  - the Hospital/Health Centre name;
  - the client's first and last name;
  - dispensing date;
  - the drug name, quantity and strength of the drug;
  - directions for use;
  - identification of the practitioner prescribing the medication (full name, or first initial and full last name); and,
  - the initials of the LPN dispensing the medication.
- 2. All medications must be dispensed in child-resistant containers unless:
  - i) the prescriber, the patient, or the patient's representative directs otherwise;
  - ii) in the professional judgment of the LPN, it is not advisable to use a child-resistant package; or,
  - iii) a child-resistant package is not suitable because:
    - of the physical form of the drug;
    - the manufacturer's packaging is designed to improve patient compliance; or
    - the patient has requested the use of special customized compliance packaging for their prescriptions in accordance with NLPB's Standards for the Provision of Compliance Packages.
- 3. Where a child-resistant container is not utilized, a notation to that effect must be documented on the patient record.



### REFERENCES AND RESOURCES

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