



Complaints Management Policy and Guideline

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NOVA SCOTIA PRESCRIPTION MONITORING PROGRAM

SECTION I

COMPLAINTS MANAGEMENT POLICY

1. Policy Objective

The purpose of this policy is to provide guidance to the Administrator in managing complaints received by the Program. The intent is to:

- (a) Deliver quality customer service by providing an efficient and transparent process to make a complaint.
- (b) Establish a framework to guide the Administrator in the management of all complaints, ensuring complaints are thoroughly documented and investigated and actions are taken in response to findings.
- (c) Ensure anonymity of the complainant, if requested.

2. Policy Statement

As a function of its work, the Nova Scotia Prescription Monitoring Program has a responsibility to provide a process by which individuals or groups can submit a complaint regarding:

- (a) The Program's operations or activities;
- (b) The prescribing, dispensing or potential abuse or misuse of monitored drugs.

This policy provides guidance to the Administrator to ensure a clear, objective process incorporating consistent and timely responses while at the same time:

- (a) Protecting the privacy of any individual to whom the information may relate; and
- (b) Releasing information only as is reasonable to achieve the objects of the Program.

3. Responsibilities

The Board is responsible to monitor the effectiveness of the processes put in place by the Administrator to manage complaints.

The Administrator is responsible for implementing the guidelines included in this policy and for reporting at least annually to the Board on compliance with the policy.

4. Legislative Framework

The Program is bound by the Prescription Monitoring Act (Act) and its regulations and the Freedom of Information and Protection of Privacy Act (FOIPOP Act) and its regulations. Specific sections of the Act applicable to the complaints management process are cited here:

The Act requires:

17 Pharmacists and prescribers shall comply with this Act and the regulations in relation to the prescribing and dispensing of monitored drugs. (2004, c. 32, s. 17)

The Act further states that the Administrator is responsible to:

12(2)(e) monitor the use of monitored drugs by residents and report inappropriate use to
(i) an appropriate law enforcement authority pursuant to subsection 23(1),
(ii) an appropriate licensing authority pursuant to subsection 23(2), or
(iii) A pharmacist or prescriber,
if the Administrator is satisfied that the release of such information furthers the objects of the Program;

The Act also provides:

18 Upon the request of the Administrator, prescribers, pharmacists or any other body or person shall provide to the Administrator any information, including medical records, the Administrator reasonably requires to achieve the objects of the Program. (2004, c. 32, s. 18)

23(1) Where the Administrator has reasonable grounds to believe that an offence has been committed contrary to the Controlled Drugs and Substances Act (Canada) or the Criminal Code (Canada) or successor legislation, information in the possession of the Administrator in respect of such offence may be communicated to the appropriate law enforcement authority by the Administrator or such person as may be designated by the Administrator.

(2) The Administrator may, at any time, file a complaint with a licensing authority regarding the activities of a member of that licensing authority if the Administrator has reason to believe that the member may be practicing in a manner that is inconsistent with the objects of the Program.

(3) Where the Administrator lays a complaint pursuant to subsection (2), the Administrator shall provide the licensing authority with all relevant information on which the complaint is based. (2004, c. 32, s. 23)

5. Principles

The following principles will guide the Board's oversight of this policy:

- (a) A complaints management process is established by the Administrator for the purpose of providing a systematic approach to accepting and examining complaints received regarding the program, prescribing, dispensing or the abuse/misuse of monitored drugs.
- (b) The Administrator will conduct its review and response to complaints in accordance with the Program's Privacy Policy and the FOIPOP Act and regulations.
- (c) Complaints regarding the Program's operations or activities are reported to the Board Chair immediately and reported to the Board on a quarterly basis.

- (d) The number of complaints referred to the Practice Review Committee, the Program's Medical Consultant, the Licensing Authority and to law enforcement is reported to the Board on a quarterly basis.
- (e) All complaints and the respective outcomes are reported in an anonymized manner to the Board annually.

6. Definitions

In this policy:

- (a) "Administrator" means the agency or person designated by the Minister to administer the Program, and for the purposes of this policy includes the Manager appointed by the Administrator or any other person employed by the Administrator.
- (b) "Board" means the Nova Scotia Prescription Monitoring Board established by the Prescription Monitoring Act.
- (c) "Executive Committee" means a Board committee with specific responsibilities described in terms of reference approved by the Board.
- (d) "Medical Consultant" means a physician contracted by the Administrator to provide the Program with operational content expertise.
- (e) "Program" means the Prescription Monitoring Program established by the Board.
- (f) "Practice Review Committee" means a Program committee with specific responsibilities described in terms of reference approved by the Board.

7. Scope

This policy applies to

- a) The Administrator;
- b) The Board;
- c) The Executive Committee; and
- d) The Practice Review Committee

8. Accountability

The Administrator and the Board Chair have responsibility for the ongoing monitoring and enforcement of this policy.

9. Challenging Compliance

Any challenge to the Program's compliance with this policy shall be provided in writing to the Manager.

NOVA SCOTIA PRESCRIPTION MONITORING PROGRAM

SECTION II

GUIDELINES

Operational Guideline for the Administrator

Complaints Process – Program Operations or Activities

In the event that an individual (prescriber, pharmacist or member of the public) or group external to the Program has a concern regarding the Program and its operations or activities, they may file a complaint. Complaints must:

- (a) Be in writing, preferably on the attached form (Appendix A);
- (b) Provide specific details about the nature of the complaint; and
- (c) Be marked CONFIDENTIAL and addressed to the:
Manager, Nova Scotia Prescription Monitoring Program
PO Box 2200, Halifax, NS B3J 3C6

The Administrator shall apply the following process in responding to complaints about the Program's operations or activities:

- (a) Received complaints will be acknowledged in writing, and a full response provided as soon as practical. The complainant will be advised as to the estimated time required to review the complaint and respond.
- (b) The Administrator will immediately advise the Board Chair of received complaints and the Executive Committee will be involved when deemed appropriate.
- (c) The Manager or delegate will investigate the complaint and advise on the required response. In some cases further information may be requested, or a meeting arranged to discuss the complaint prior to a written response being provided.
- (d) The Administrator will advise the Board Chair when complaint resolution occurs and will provide documentation outlining the resolution and any operational changes involved.
- (e) The Administrator will report complaints regarding Program operations or activities on a quarterly basis to the Board.

Complaints Process – Specific Professional Regarding Monitored Drugs:

In the event that an individual (prescriber, pharmacist or member of the public) or group external to the Program has a concern regarding a specific prescriber or dispenser of monitored drugs, they may file a complaint. Complaints will be accepted in the following manner:

- (a) May be submitted in writing on the attached form (Appendix B);
- (b) May be given verbally to the Program Manager or the Business Support Analyst and Appendix B will be filled out by the staff member on the Complainants behalf.
- (c) Provide specific details about the nature of the complaint; and
- (d) If sent via mail it should be marked as CONFIDENTIAL and addressed to the:
Manager, Nova Scotia Prescription Monitoring Program
PO Box 2200, Halifax, NS B3J 3C6

The Administrator shall apply the following process in responding to complaints about a specific prescriber or dispenser:

- (a) Complainants will be advised that the Program will investigate the concerns involved. Due to the Program's Privacy Policy and FOIPOP, the results of the Administrator's review cannot be released. The Administrator will assure the complainant that the following steps will be taken in response to the concern:
 - (i) The Administrator will undertake a thorough review of the prescribing or dispensing pattern of the professional involved.
 - (ii) Should the Administrator identify patterns or issues of concern, the matter may be referred to the Program's Medical Consultant, the Practice and Review Committee, the professional's Licensing Authority or law enforcement.
 - (iii) Should the concern be referred to the Practice Review Committee (PRC) for further consideration, the PRC will receive anonymized details of the initial complaint, the outcome of the Administrator's review, and all available Program information regarding the prescriber's or pharmacist's practice involving monitored drugs.
 - (iv) Should the PRC identify concerns, it will determine the appropriate actions, which may include but are not limited to:
 1. Direct contact with the prescriber or pharmacist in question to request further information in relation to the noted concerns;
 2. Review of the prescriber's or pharmacist's records by the Program's Medical Consultant to further investigate any areas of concern; or
 3. Issuance of a formal complaint to the prescriber's or pharmacist's licensing authority.
 4. When there are reasonable grounds to believe there is misuse or abuse of monitored drugs, the complaint may be referred to law enforcement officials and information released which is consistent with the objects of the Program. This activity will be undertaken in accordance with the policy and guideline on working with law enforcement officials.

Complaints Process – Abuse or Misuse of Monitored Drugs:

In the event that an individual (prescriber, pharmacist, member of the public) or group external to the Program has a concern regarding an individual or group relating to the abuse or misuse of monitored drugs, they may file a complaint. Complaints will be accepted in the following manner:

- (a) May be submitted in writing on the attached form (Appendix C);
- (b) May be given verbally to the Program Manager or the Business Support Analyst and Appendix C will be filled out by the staff member on the Complainants behalf.
- (c) Provide specific details about the nature of the complaint; and
- (d) If sent via mail it should be marked as CONFIDENTIAL and addressed to the:
Manager, Nova Scotia Prescription Monitoring Program
PO Box 2200, Halifax, NS B3J 3C6

The Administrator shall apply the following process in responding to received complaints of suspected misuse or abuse of monitored drugs:

- (a) Complainants will be advised that the Program will investigate the concerns involved. Due to the Program's Privacy Policy and FOIPOP, the results of the Administrator's review cannot be released. The Administrator will assure the complainant that the following steps will be taken in response to the concern:
 - (i) The Administrator will undertake a thorough review of all Program information relevant to the received complaint. Should the Administrator's review confirm patterns of concern regarding an individual patient's profile with regards to monitored drugs, the following actions may be taken:
 1. Direct contact with the prescribers or pharmacists working with the individual, to gain further information in relation to the noted concerns;
 2. A review the patient's profile of monitored drugs by the Program's Medical Consultant to further investigate any areas of concern;
 3. Contact with the individual's primary prescriber may be initiated by the Administrator or the Medical Consultant to attempt to address the issue;
 4. When there are reasonable grounds to believe there is misuse or abuse of monitored drugs, the Administrator may contact appropriate law enforcement officials and release information consistent with the objects of the Program. This activity will be undertaken in accordance with the policy and guideline on working with law enforcement officials
 - (i) Should the Administrator identify patterns or issues of concern in relation to prescribers or pharmacists, the matter may be referred to the Program's Medical Consultant, the Practice and Review Committee, the professional's Licensing Authority or law enforcement.

- (ii) Should the complaint be referred to the PRC, for further review of the specific prescriber or pharmacist in relation to the complaint, the PRC will receive anonymized details of the initial complaint, the outcome of the Administrator's review, and all available Program information regarding the prescriber's or pharmacist's practice involving monitored drugs. Should the PRC identify concerns, they will determine the appropriate actions, which may include:
1. Direct contact with the prescriber or pharmacist in question to request further information in relation to the noted concerns;
 2. Review of the prescriber's or pharmacist's records by the Program's Medical Consultant to further investigate any areas of concern; or
 3. Issuance of a formal complaint to the prescriber's or pharmacist's licensing authority.
 4. When there are reasonable grounds to believe there is misuse or abuse of monitored drugs, the complaint may be forwarded to the appropriate law enforcement officials and information released which is consistent with the objects of the Program. This activity will be undertaken in accordance with the policy and guideline on working with law enforcement officials.

Definitions

In this guideline:

- (a) "Law enforcement" defined within the Prescription Monitoring Act to include the following:
 - *policing, including criminal-intelligence operations,*
 - *investigations that lead or could lead to a penalty or sanction being imposed, and*
 - *Proceedings that lead or could lead to a penalty or sanction being imposed.*
- (b) "Licensing authority" means the College of Physicians and Surgeons, the College of Pharmacists, the Provincial Dental Board or the College of Registered Nurses of Nova Scotia.
- (c) "Manager" means the individual appointed as the Manager by the Administrator pursuant to s. 12(4) of the Prescription Monitoring Act.
- (d) "Patient Profile" means the overall history of an individual's dispensed prescriptions for monitored drugs.
- (e) "Personal information" is defined in the Program's Privacy Policy.

NOVA SCOTIA PRESCRIPTION MONITORING PROGRAM

SECTION III

Appendix A

Complaint Form - Program Operations or Activities

COMPLAINT FORM – PROGRAM OPERATIONS OR ACTIVITY

Individual Submitting Complaint:

Name:

Profession (if applicable):

Address:

Telephone No:

COMPLAINT:

Please describe with as much detail as possible, what event or events led to the filing of this complaint. Your description and any attachments should include appropriate dates and any documentation you feel is relevant to this issue. Detailed information will assist the Program in their review of the matter.

PLEASE TYPE OR PRINT:

I HEREBY DECLARE AND AFFIRM that this complaint is true and correct to the best of my knowledge, information and belief.

Date:

Signature of
Complainant:

Please Print Name:

PLEASE MAIL OR FAX COMPLAINT TO:

Manager - Nova Scotia Prescription Monitoring Program

PO Box 2200, Halifax, NS B3J 3C6

Fax 1-902-481-3157

No emails please – the NSPMP Privacy Policy does not support transmission of confidential information via the internet.

Appendix B

Complaint Form - Specific Professional Regarding Monitored Drugs

COMPLAINT FORM – SPECIFIC PROFESSIONAL

Professional Group:	<input type="checkbox"/> Dentist	<input type="checkbox"/> Physician	<input type="checkbox"/> Pharmacist	<input type="checkbox"/> Nurse Practitioner
Professional Involved:				
Full Name:				
Address:				
License No (if known):				
Individual Submitting Complaint:				
Name:				
Profession (if applicable):				
Address:				
Telephone No:				
Patient Information (if different from above and related to a specific individual)				
Full Name:				
Address:				
Telephone No:				
COMPLAINT:				
Please describe with as much detail as possible, what event or events led to the filing of this complaint. Your description and any attachments should include appropriate dates and any documentation you feel is relevant to this issue. Detailed information will assist the Program in its review of the matter.				
PLEASE TYPE OR PRINT:				
I HEREBY DECLARE AND AFFIRM that this complaint is true and correct to the best of my knowledge, information and belief.				
Date:		Signature of Complainant or Staff Member:		
		Please Print Name:		
The complainant has been advised that results of the Administrator's review cannot be release due to the Program's Privacy Policy and FOIPOP. <input type="checkbox"/> Signature: _____				
PLEASE MAIL OR FAX COMPLAINT TO:				
Manager - Nova Scotia Prescription Monitoring Program				
PO Box 2200, Halifax, NS B3J 3C6				
Fax 1-902-481-3157				
<i>No emails please – the NSPMP Privacy Policy does not support transmission of confidential information via the internet.</i>				

Appendix C

Complaint Form - Misuse/Abuse of Monitored Drugs

COMPLAINT FORM – ABUSE OR MISUSE REPORT

Individual Involved: Dentist Physician Pharmacist Nurse Practitioner Member of Public

Individual Information:

Full Name:	
Address:	
License No (if known/applicable):	

Individual Submitting Complaint:

Name:	
Profession (if applicable):	
Address:	
Telephone No:	

COMPLAINT:

Please describe with as much detail as possible, what event or events led to the filing of this complaint. Your description and any attachments should include appropriate dates and any documentation you feel is relevant to this issue. Detailed information will assist the Program in its review of the matter.

PLEASE TYPE OR PRINT:

I HEREBY DECLARE AND AFFIRM that this complaint is true and correct to the best of my knowledge, information and belief.

Date:		Signature of Complainant or Staff Member:	
		Please Print Name:	

The complainant has been advised that the results of the Administrator’s review cannot be released due to the Program’s Privacy Policy and FOIPOP: Signature: _____

PLEASE MAIL OR FAX COMPLAINT TO:

Manager - Nova Scotia Prescription Monitoring Program
 PO Box 2200, Halifax, NS B3J 3C6
 Fax 1-902-481-3157

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