

Relevance of PIP Data Quality to Pharmacy Practice

In January 2014, the Drug Plan and Extended Benefits Branch (DPEBB) and eHealth Saskatchewan launched the PIP Quality Improvements Program (QIP) to develop a plan for continuous quality improvement. The Saskatchewan College of Pharmacy Professionals supports these efforts to improve PIP data quality.

PIP QIP analysis has identified **two key areas** of focus:

1. ***Inconsistent data entry practices are impacting patient PIP profiles for users (e.g., duplicate active prescriptions, incorrect prescription status, incomplete or inaccurate pickup date on the dispense)***

The PIP QIP team at eHealth does provide monthly statistics to larger pharmacy chains provincially. These statistics include duplicates and held prescriptions counts to help increase awareness of current trends in data quality to pharmacy managers. Managers may reach out to eHealth at piqip@ehealthsask.ca for further support in improving this data.

2. ***Not all prescriptions/dispenses are being transmitted to the PIP for capture that should be captured. These events are failed transactions.***

Note: Sending a prescription to the PIP is independent of sending a claim for automated billing to the Drug Plan (SPDP)

A **Failed Transaction Report** can be generated in the PPMS and viewed by any pharmacy staff member at any time to correct and re-submit information to the PIP. This report is a tool to ensure **daily review and resolution of failed transactions**. Please refer to your vendor software support for more details.

PIP Data Quality Relevance – Example

A PIP failed transaction resulted in a rivaroxaban prescription that was not recorded on the patient's PIP profile. The patient was taken to hospital in an emergency situation and health care providers were unable to do an accurate best possible medication history since information was missing from the PIP profile. There were several potential medication and/or clinical errors that could have harmed the patient as a result.

In December 2022, there were more than 11,000 transactions that were not recorded in the PIP by pharmacies in Saskatchewan. In other words, 11,000 prescriptions logged or dispensed did not make it onto the PIP patient profiles. This resulted in many incomplete PIP profiles, which could potentially result in patient harm. It is the pharmacy professional's responsibility to prioritize patient safety and therefore, eliminate valid failed transactions.

Why do prescriptions/dispenses fail to be captured to the PIP?

1. Manually bypassing transmission to the PIP
2. Systems not working followed by failure to retransmit messaging
3. Prescriptions for patients with masked profiles
 - Prior to processing these prescriptions, consent must be obtained from the patient to temporarily access the masked PIP profile by "breaking the glass." This consent must be applied in the PPMS to ensure that all prescriptions are transmitted to the PIP
4. Drugs not in the PIP database
 - Using the PIP's drug monograph search, confirm if the drug product is listed in the PIP drug database. If the product is listed, it must be recorded in the PIP
5. Data mismatch (e.g., month and year of birth or gender mismatch)
 - The patient information on the PPMS must match the information on their Saskatchewan health card. It must have matching last names (including hyphens and spaces), gender, month and year of birth, and health card number
6. Incorrect setup of NPNs on the PPMS

Why should pharmacy professionals care about failed transactions?

1. Improving safety and therapy decision across the province
 - Healthcare providers (e.g., pharmacists, pharmacy technicians, nurses, dentists, optometrists) are reliant on accurate/complete PIP profiles to make clinical decisions and perform medication reconciliation
 - Prescriptions missing from the PIP profile are not involved in clinical safety checking performed by the PIP application for pharmacy professionals

Reflect on the medication reconciliations you may have performed and the inaccuracy of some patient PIP profiles. Imagine how much easier medication reconciliation or medication assessments would be if all prescriptions and dispenses showed up on the PIP profile too. Incorporating continuous improvement in this area will make a difference.

2. It is part of the pharmacy professional's duty of care to the patient as legislated in *The Prescription Drugs Act*

*Every pharmacy professional is responsible for the accuracy, completeness and timeliness of the prescription information submitted to the PIP. **As stated in *The Prescription Drugs Act*, "All drugs prescribed or dispensed to persons in Saskatchewan are to be recorded in the provincial database."**

How do pharmacy professionals practically improve?

1. Make it part of the pharmacy workflow/training to ensure all prescriptions and dispenses are appropriately recorded in the PIP
2. Advocate for patient safety to the pharmacy team
3. Engage all pharmacy team members on how to prevent and manage failed transactions
4. Print and review the Failed Transaction Report (FTR) at least once a day and resolve all issues
5. Ensure NPNs are setup correctly in the software to record into PIP

Electronic health records have changed the way pharmacy professional's practice. They have the ability to access comprehensive patient information at the click of a button. All health care providers need this data to be complete and as reliable as possible. Pharmacies play a critical role filling this need in our healthcare system.

If you have any questions, or need more information contact:

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- For additional information on PIP QIP, [click here](#).