

RxA Position Statement – Virtual Care

Statement: The Alberta Pharmacists' Association (RxA) supports Virtual Care practice as an extension of in-person care by a pharmacist, where that care delivery is determined by patient choice as it relates to their unique care needs and in circumstances where the delivery of in-person care by their community pharmacist is not possible. RxA does not support virtual care practice where it is the exclusive means of providing care without corresponding in-person care provided by that same pharmacist or pharmacy team.

Background

The COVID-19 pandemic resulted in the necessary utilization of virtual care approaches to providing care where in person contact with patients was not feasible. In 2021, the Alberta Virtual Care Working Group published a report with recommendations related to Optimizing Virtual Care in Alberta¹. The multistakeholder working group developed recommendations based on principles of quality care and is supportive of virtual care as a component of all care. The committee consensus recognizes virtual care as “*A modality of all health care that uses information and communication technologies to enable health service to be employed when clinically appropriate to promote quality care.*”

Further to this, the Alberta College of Pharmacy (ACP) adopted and published new Standards of Practice for Virtual Care² on June 29, 2022, establishing a regulatory framework towards guiding the use of virtual care as an extension of in-person care provided by pharmacists and pharmacy teams.

Supporting Principles

RxA recognizes and supports the use of Virtual Care according to principles that:

- **validate the voice of the patient** and their ability and right to direct where and how they receive ongoing care from their community pharmacist of choice; and
- **establish a minimally acceptable expectation** for pharmacists and pharmacy teams to utilize technologies that facilitate the extension of care in a virtual manner under circumstances where the patient cannot, or chooses not to be physically present; and
- **describe virtual care as an extension of in-person care**, not meant to replace but to augment and supplement that already established pharmacist-patient care relationship.

Putting Principles into Practice

The Alberta Pharmacists' Association recognizes that the provision of care using virtual modalities is not new to community pharmacists in Alberta and is an important tool to augment the delivery of care. Recognizing that the regulatory framework for pharmacists in Alberta now includes the ACP Standards of Practice for Virtual Care², we believe that the following sections of the Standards may require clarity for pharmacists and pharmacy teams, to improve their ability to meet these Standards:

1. **Definition for Enabling Technology** – The definition for enabling technology includes the term “teleconference” which suggests that a phone call between a patient and a pharmacist or pharmacy team member is subject to the Virtual Care Standards and the corresponding documentation (Section 12) and disclosures (Section 10 and 11) required when providing virtual care using other means not traditionally part of community pharmacy practice.

¹ Alberta Virtual Care Working Group, Optimizing Virtual Care in Alberta. Available at: [Optimizing Virtual Care in Alberta: Recommendations from the Alberta Virtual Care Working Group](#)

² Alberta College of Pharmacy, Standards of Practice for Virtual Care. Available at: https://abpharmacy.ca/sites/default/files/Standards_Virtual.pdf

The inclusion of teleconference under this term suggests an increased burden on community pharmacy teams to meet these standards beyond current acceptable pharmacist practice which involves telephone communication with a patient.

2. **Section 5** - identifies that “A regulated member must not ordinarily provide virtual care from outside of Alberta”, however it does not identify if it is the regulated member who might be outside of Alberta or the patient, nor does it give clarity to what is considered “ordinary”. Supplemental to this, **Section 12** does not obligate the regulated member to document the physical location that the virtual care was provided from and to. Without this information, and without reciprocating virtual care agreements with other provincial colleges, we believe this will be difficult to regulate.
3. Under the heading **Access to Records and Patient Confidentiality**, the standards are silent about where a patient can gain access to their patient care records for care that are provided virtually, where the records will be physically located in Alberta, and how they can be accessed by either the patient, another pharmacist providing care, or another healthcare professional. We support patient choice in the provision of care and access to patient care records for care provided virtually must be made readily available from where that virtual care was provided.
4. **Section 3b** fails to recognize other influencing practices that may compel or incentivize virtual care over in-person care beyond just the local policies and procedures of a proprietor. We believe the regulatory framework should preclude third party payer policies that direct receipt of care by a select pharmacy, individual, or group (preferred provider network) of pharmacies beyond those that a patient would otherwise normally choose as their preferred pharmacy of choice.

Summary

The Alberta Pharmacists’ Association recognizes the value in defining and regulating the use of virtual care modalities towards the provision of quality care as an extension of practice. These principles are consistent with the Alberta Virtual Care Working Group recommendations and incorporated to some extent into the foundational elements of the ACP Standards of Practice for Virtual Care. Alberta’s community pharmacists worked diligently throughout the pandemic to meet the needs of Albertans seeking care and the use of virtual care and virtual care technologies was an integral part of their ability to do so.

As the landscape of virtual care and virtual care technologies evolves, we trust that the regulatory environment will remain nimble and responsive to the changing needs of pharmacist practice, including the ACP standards, and ensure that the principles of patient choice and quality care remain paramount to these types of patient-care interactions. We support the inclusion of virtual care as an additional modality for Albertans accessing primary care from their community pharmacist.