

Expanded Scope: Standards of Operation Proposed Changes and Rationale

June 2026

Note: Where there is existing text, changes are shown in red.

Original Standard	Proposed Change	Rationale
<i>Section: Terms (for consistency and clarity ; do not represent changes to expectations or standards)</i>		
Member: A regulated health professional registered with the College.	Pharmacy professional: A regulated health professional registered with the College.	This terminology is prevalent in the existing standards but has been used inconsistently with “members”. Updated language to be consistent with current and existing terminology. “Registrant” was considered, but the prevalent use of “Pharmacy Professional” in the existing standards would have required a larger scale change.
Pharmacy Services: A framework of a services that augment drug therapy, including enhanced medication related services, expanded patient care services and core dispensing services.	Pharmacy services: Patient care activities provided by a pharmacy professional within the scope of practice of pharmacy and the authorized acts of the profession, as defined in the <i>Pharmacy Act</i>.	As the practice of pharmacy evolves, it is prudent to anchor the definition of pharmacy services to the legislated scope within the Pharmacy Act
N/A (NEW)	Pharmacy Staff: all individuals who perform activities, tasks, or functions within a pharmacy or that support the operation of a pharmacy, regardless of their employment status, professional designation, or level of regulation. This includes regulated pharmacy professionals and non-regulated personnel who contribute to the delivery of pharmacy services or the functioning of the pharmacy environment.	Important for the standards to delineate between registrants (pharmacy professionals) and all staff that works in the pharmacy (assistants, clerks, janitorial staff) as some standards apply to staff versus professionals
N/A (NEW)	Equipment: Healthcare devices used for diagnosis, monitoring, or treatment over an extended period, generally requiring greater investment, ongoing maintenance, and in some cases specialized training to operate safely and effectively.	With scope changes, pharmacy professionals are asked to use more supplies and equipment, and a more deliberate differentiation between these two categories is needed, since the ways in which pharmacy professionals engage with equipment and supplies is different.
N/A (NEW)	Supplies: Consumable items intended for immediate or short-term use that support diagnosis, treatment, protection, or patient care, are typically simple to use, have limited durability, and require frequent replacement or disposal.	

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<i>Section: Governance and Legal Compliance</i>		
N/A (NEW)	Pharmacy staff are supported by policies, procedures, training, and monitoring practices to provide pharmacy services in a manner that respects a person’s dignity and abides by provincial human rights legislation.	The application of human rights legislation to the provision of pharmacy services is not well understood and an area of inquiry from registrants. This standard provides a foundation for the development of clearer guidance and resources to support staff in meeting their legal responsibilities.
N/A (NEW)	Pharmacy services are delivered in a manner that is compliant with the relevant provincial legislation on accessibility for persons with disabilities and associated regulations, including considering and accommodating the patient’s physical, cognitive, and sensory abilities; level of health literacy; and level of digital literacy, up to the point of undue hardship.	<p>Current standards in the Delivering Services section acknowledge accessibility for physical space.</p> <p>This standard recognises that operators have a legal responsibility to accommodate patients that goes beyond physical space and articulates the legal obligation to accommodate within a pharmacy operations context.</p>
The designated manager understands their role and responsibilities with respect to the accreditation and management of the pharmacy, including medication procurement and inventory management, supervision of pharmacy personnel, and required signage.	The designated manager/ hospital administrator understands their role and responsibilities with respect to the accreditation and management of the pharmacy, including medication procurement and inventory management, supervision of pharmacy personnel, and required signage.	The current Standards did not use inclusive language, and inadvertently excluded hospital pharmacy terminology. This is terminology most commonly used and understood for the person responsible for operation of a hospital pharmacy.
<i>Section: Management and Employee Relations</i>		

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<p>The pharmacy has an adequate number of qualified and trained staff to maintain the accepted standards of professional practice, and to deliver safe and effective patient care.</p>	<p>The pharmacy is staffed at all times with the number of qualified and trained staff required for pharmacy professionals to maintain the standards of practice while providing pharmacy services.</p> <p>The pharmacy workflow is managed to permit pharmacy professionals adequate time to maintain the standards of practice and to support pharmacy professional wellbeing.</p>	<p>The Board has previously acknowledged that further expanding scope of practice will only exacerbate workload concerns. Staffing and workflow requirements can be part of the solution to address workload issues. Writing out 2 separate standards that address both staffing and workflow, provides a foundation for future policy options to be explored.</p>
<p><i>Section: Pharmacy Premises</i></p>		
<p>The public areas of the pharmacy meet legislated standards for accessibility for persons with disabilities.</p>	<p>The pharmacy premises meet the requirements outlined in provincial accessibility legislation and associated regulations, to protect patients' right to access pharmacy services and the human rights of all pharmacy staff and patients.</p>	<p>Expanded scope activities are introducing more and different pharmacist-patient interactions that are beyond the counter. The pharmacy premises must be accessible as outlined in the AODA. Different AODA standards apply to different types of services providers based on size and services provided, so it's best to have operators determine which apply to their pharmacy.</p>
<p>N/A (NEW)</p>	<p>The pharmacy has a separate and distinct area for patient consultation where the provision of pharmacy services may take place without being overheard by others and which respects the privacy needs of each patient. This includes both acoustical and visual privacy, as appropriate for the pharmacy service provided and determined to be acceptable by the patient.</p>	<p>With the expansion of scope activities, there is a need to ensure that patient counselling areas go beyond 'acoustical privacy', and that visual privacy is needed to support more complex/sensitive minor ailment visits and certain expanded scope activities.</p> <p>The proposed phrasing recognizes that the level of privacy will vary based on the service provided and the preferences of the patient.</p>

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<p>There is a program to ensure the regular cleaning of the pharmacy, including all premises, furniture, equipment and appliances, and automated pharmacy systems, if any.</p>	<p>Procedures are in place that ensure appropriate infection prevention and control practices are occurring. This includes cleaning the premises, furniture, equipment and appliances, and automated pharmacy systems, if any, on a regular and as needed basis.</p>	<p>Some minor ailments proposed present additional IPAC considerations, and articulating this helps clarify the existing standard.</p>
<p>Controlled drugs and substances are stored and managed according to national guidelines and provincial requirements.</p>	<p>Controlled substances are stored and managed according to national and provincial requirements.</p>	<p>Accuracy update – articulating drugs AND substances is duplicative and unnecessary; the language of “guideline” does not add anything and confuses the fact that there are national requirements as well as provincial requirements.</p>
<p><i>Section: Delivering Services</i></p>		
<p>Pharmacy staff members receive the appropriate training to deliver specialized services, such as sterile compounding for example, and the pharmacy is constructed to address any risks to staff or the public associated with pharmacy practice.</p>	<p>Pharmacy staff are trained on operational processes and procedures commensurate with their role and the pharmacy services provided.</p>	<p>The root of this standard was that the people working in the pharmacy know the processes and procedures for how the pharmacy operates, and that this would need to reflect the level of training needed based on their role (e.g. technician vs Assistant vs Clerk).</p> <p>Specifying compounding in the original standard limits the evolution of pharmacy practice where expanded scope activities include additional considerations for procedures and how services are delivered/workflow impact. Language of "specialized services" is colloquial and does not refer to a standardized set of services.</p>
<p>All services are based on a review and assessment of patients’ circumstances and provided in order to optimize therapeutic outcomes.</p>	<p>The pharmacy workflow enables pharmacy professionals to deliver pharmacy services to patients based on a review and assessment of patients’ unique circumstances and provided in a patient-centred way to respect dignity and therapeutic outcomes.</p>	<p>Increased workload resulting from expanding scope means that workflow considerations are important to articulate, as it can act as an enabler for registrants delivering services in a way that meets standards of practice, code of ethics.</p>

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<p>Documentation and record-keeping requirements are established and all of the required records are kept and maintained.</p>	<p>Procedures are in place that enable pharmacy professionals to document the care and services provided in a timely and consistent manner, and include:</p> <ul style="list-style-type: none"> • Training requirements for how to use the pharmacy’s records management system • Protocols regarding who must document, the information that must be documented, and options for managing delays in documenting information 	<p>Expanded scope activities will result in more documentation. The College is aware that documentation is an area of concern among registrants’ practice. This revision more clearly articulates that procedures need to be established to enable more timely and consistent documentation. This is complementary, but different, from the documentation requirements that are articulated in the Standards of Practice and the Documentation Guidelines. This standard is about operations and how operators need to create the conditions for documentation, including training on the system that pharmacy uses.</p>
<p>N/A (NEW)</p>	<p>The pharmacy has the clinical decision support tools, reference databases, and patient health information sufficient to allow pharmacy professionals to exercise independent authority within their scope of practice to provide patient care.</p>	<p>As scope expands to include more complex minor ailments and activities, pharmacies must be required to ensure they provide their pharmacy professionals with all the tools and resources and technology needed to do their job well.</p> <p>There are existing policy documents that further articulate the need for decision-support tools, references and patient info.</p>
<p><i>Section: Equipment and Technology</i></p>		
<p>The equipment and technology used in the provision of pharmacy services safeguard the health, safety and wellbeing of patients, the public and staff.</p>	<p>The equipment, supplies, and technology used in the provision of pharmacy services safeguard the health, safety and wellbeing of patients, the public and staff.</p>	<p>New equipment being introduced to the pharmacy environment with this expansion of scope. Operations team noted a need to distinguish equipment and supplies.</p>
<p>The pharmacy has the appropriate layout, equipment and technology to support practice.</p>	<p>The pharmacy has the appropriate equipment, supplies, and technology to support the delivery of pharmacy services.</p>	<p>“Layout” removed as it does not relate to the topic of equipment and technology, and instead is already captured in the existing standards under the Pharmacy Premises section</p>

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<p>The pharmacy has the facilities, systems and equipment needed to meet the requirements established in legislation, and to safeguard the health, safety and wellbeing of patients and the public, including:</p> <ul style="list-style-type: none"> • Facilities for washing utensils and sterilizing equipment; • Specialized equipment for the practice of pharmacy; • Adequate work space; • Hand-washing facilities for employees; • Secure and temperature appropriate storage facilities. 	<p>The pharmacy has the facilities, systems and equipment needed to meet the requirements established in legislation, and to safeguard the health, safety and wellbeing of patients and the public, including:</p> <ul style="list-style-type: none"> • Facilities for washing utensils and sterilizing equipment; • The necessary equipment for the pharmacy services provided; • Workspaces that are adequate and appropriate for the services provided; • Hand-washing facilities for employees; • Secure and temperature appropriate storage facilities. 	<p>The word "specialized equipment" was not clear, and therefore changed to "necessary equipment"</p> <p>More description was needed to what "adequate work space" entailed.</p> <p>As the service options expand, the standards may only apply to a pharmacy based on the services provided. Specifying this here allows operators to identify the type of equipment needed or the workspace needed to provide a service.</p>
<p>Equipment is calibrated and certified as required and supported by documentation.</p>	<p>Procedures are in place to facilitate the safe and effective use of equipment and supplies, in accordance with their intended purpose, and includes:</p> <ul style="list-style-type: none"> • Maintenance, calibration, and certification of equipment as per manufacturer instructions or other supporting documentation • Documentation of equipment maintenance, calibration, and certification is available and readily retrievable 	<p>As pharmacy professionals use more and different equipment and supplies, with expanded scope of practice, like lab and POCT equipment and supplies, otoscopes, the standards need to be more robust. It was found that the current standard statement was not clear on what "supported by documentation" meant: documentation that informs the calibration/certification process; and, documentation that the calibration/certification has occurred.</p>
<p>Section: Information Management</p>		
<p>The pharmacy has an established schedule for the retention, retrieval and destruction of information.</p>	<p>Procedures are in place for the management of patient records, including an established schedule for the retention, retrieval and destruction of information.</p>	<p>It was identified that the current standard as written is perhaps inadequate. The pharmacy should have more than simply a schedule in place, but also procedures in place to manage patient records. Robust patient records management will be important as workload increases due to expanded scope.</p>