



**SPOR Evidence Alliance**  
Strategy for Patient-Oriented Research

**Alliance pour des données  
probantes de la SRAP**   
Stratégie de recherche axée sur le patient

Strategy for Patient-Oriented Research

**SPOR**  
Putting Patients First 

# Charting the 'New Normal' in Canadian Community Pharmacy Practice

## Scoping Review

**Date of Literature Search: 1/31/2021**

**Date of Submission: 11/10/2021**

### Prepared By:

Sears K<sup>1</sup>, Rodgers J<sup>2</sup>, Muhl C<sup>3</sup>, Elms S<sup>3</sup>, Barker JR<sup>4</sup>, Durando P<sup>5</sup>, Belbin S<sup>6</sup>, Godfrey CM<sup>1</sup>

1. Queen's Collaboration for Healthcare Quality: A JBI Centre of Excellence, Queen's University School of Nursing, Queen's University, Kingston, Canada
2. Department of Political Science, Dalhousie University, Halifax, Canada
3. Queen's University School of Nursing, Queen's University, Kingston, Canada
4. Faculty of Management, Rowe School of Business, Dalhousie University, Halifax, Canada
5. Bracken Health Sciences Library, Queen's University, Kingston, Canada
6. London School of Hygiene and Tropical Medicine, London School of Economics, London, UK

### Contact:

Kim Sears

**Email:** searsk@queensu.ca

**Suggested citation:** Sears, K. et al. (2021). Charting the 'New Normal' in Canadian Community Pharmacy Practice: Scoping Review. SPOR Evidence Alliance.



Queen's Collaboration for  
Health Care Quality

A Joanna Briggs Institute  
Centre of Excellence



SPOR Evidence Alliance  
Strategy for Patient-Oriented Research

Alliance pour des données  
probantes de la SRAP  
Stratégie de recherche axée sur le patient

Strategy for Patient-Oriented Research

SPOR  
Putting Patients First

## Land Acknowledgement(s)

SPOR Evidence Alliance operates from the St. Michael's Hospital, Unity Health Toronto which is located on the traditional land of the Huron-Wendat, the Seneca, and the Mississaugas of the Credit. Today, this meeting place is still the home to many Indigenous people from across Turtle Island.

We are grateful to have the opportunity to work on these lands.

## Funding Acknowledgement(s)

The Strategy for Patient-Oriented Research Evidence Alliance ([SPOR EA](#)) is supported by the Canadian Institutes of Health Research ([CIHR](#)) under the Strategy for Patient-Oriented Research ([SPOR](#)) initiative.

## Project Contributors

**Dr. Kim Sears**, Queen's Collaboration for Healthcare Quality: A JBI Centre of Excellence, Queen's University School of Nursing, Queen's University, Kingston, Canada, *Principal Investigator*

**Julia Rodgers**, Department of Political Science, Dalhousie University, Halifax, Canada, *Co-Investigator*

**Caitlin Muhl**, School of Nursing, Queen's University, Kingston, Canada, *Co-Investigator*

Sherri Elms, School of Nursing, Queen's University, Kingston, Canada, *Co-Investigator*

**Dr. James R. Barker**, Faculty of Management, Rowe School of Business, Dalhousie University, Halifax, Canada, *Co-Investigator*

**Paola Durando**, Bracken Health Sciences Library, Queen's University, Kingston, Canada, *Library Scientist*

**Sam Belbin**, London School of Hygiene and Tropical Medicine, London School of Economics, London, UK, *Patient Partner*

**Dr. Christina Godfrey**, Queen's Collaboration for Healthcare Quality: A JBI Centre of Excellence, Queen's University School of Nursing, Queen's University, Kingston, Canada, *Methodologist*

## Conflicts and Acknowledgements

There are no conflicts or acknowledgments to report.



**SPOR Evidence Alliance**  
Strategy for Patient-Oriented Research

**Alliance pour des données  
probantes de la SRAP**   
Stratégie de recherche axée sur le patient

Strategy for Patient-Oriented Research  
**SPOR**  
Putting Patients First 

## **Third-Party Materials**

If you wish to reuse non-textual material from this report that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is required for such use and to obtain necessary permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned material rests solely with the user.

## **General Disclaimer**

This report was prepared by Dr. Kim Sears et al. on behalf of the SPOR Evidence Alliance and COVID-END. It was developed through the analysis, interpretation and synthesis of scientific research and/or health technology assessments published in peer-reviewed journals, institutional websites and other distribution channels. It also incorporates selected information provided by experts and patient/citizen partners with lived experience on the subject matter. This document may not fully reflect all the scientific evidence available at the time this report was prepared. Other relevant scientific findings may have been reported since completion of this synthesis report.

SPOR Evidence Alliance, COVID-END and the project team make no warranty, express or implied, nor assume any legal liability or responsibility for the accuracy, completeness, or usefulness of any information, data, product, or process disclosed in this report. Conclusions drawn from, or actions undertaken on the basis of, information included in this report are the sole responsibility of the user.



## Table of Contents

---

Abbreviations and Definitions.....	iv
Abbreviations.....	iv
Key Definitions.....	iv
EXECUTIVE SUMMARY .....	vi
Patient Partner Review/Summary .....	viii
Introduction.....	1
Review Question.....	2
Inclusion Criteria.....	3
Methods.....	3
Discussion .....	12
Conclusions and Recommendations.....	13
References .....	14
Appendix I: Search Strategy .....	16
Appendix II: Information sources.....	23
Appendix III: Data Extraction Templates .....	24
Appendix IV: Characteristic of Included Studies.....	25



## Abbreviations and Definitions

### Abbreviations

MI	Medication Incidents
QRE	Quality-Related Event
PPE	Personal Protective Equipment
CPhA	Canadian Pharmacists Association
PHAC	Public Health Agency of Canada
MAiD	Medical Assistance in Dying
ACP	Alberta College of Pharmacy
APA	Alberta Pharmacists' Association
AQPP	Association Québécoise des Pharmaciens Propriétaires
BCPhA	British Columbia Pharmacy Association
CPBC	College of Pharmacists of British Columbia
CPhM	College of Pharmacists of Manitoba
NBCP	New Brunswick College of Pharmacists
NLPB	Newfoundland and Labrador Pharmacy Board
NSCP	Nova Scotia College of Pharmacists
OPA	Ontario Pharmacists Association
OCP	Ontario College of Pharmacists
OPQ	Ordre des Pharmaciens du Québec
PANL	Pharmacists' Association of Newfoundland and Labrador
PANS	Pharmacy Association of Nova Scotia
PAS	Pharmacy Association of Saskatchewan
PEICP	Prince Edward Island College of Pharmacy
PEIPA	Prince Edward Island Pharmacists Association
PM	Pharmacists Manitoba
SCPP	Saskatchewan College of Pharmacy Professionals

### Key Definitions

**Community Pharmacy:** Community pharmacy, also known as retail pharmacy, is the most common type of pharmacy that allows the public access to their medications and advice about their health.

**COVID-19:** COVID-19 is a disease caused by a new strain of coronavirus. 'CO' stands for corona, 'VI' for virus, and 'D' for disease. Formerly, this disease was referred to as '2019 novel coronavirus' or '2019-nCoV.'

**Grey Literature:** Grey literature is information produced outside of traditional publishing and distribution channels, and can include reports, policy literature, working papers, newsletters, government documents, speeches, white papers, urban plans, and so on.



SPOR Evidence Alliance  
Strategy for Patient-Oriented Research

Alliance pour des données  
probantes de la SRAP  
Stratégie de recherche axée sur le patient

Strategy for Patient-Oriented Research

SPOR  
Putting Patients First

## Abstract

**Objective:** To discover and identify the Canada-wide changes in community pharmacy practice in response to the COVID-19 pandemic and to assess what is currently being practiced within these settings.

**Introduction:** Over the last decade, safety initiatives implemented by pharmacy regulators have added to the complexity of the work. Exacerbated by the ongoing COVID-19-related changes, community pharmacies have entered a 'new normal', or an enhanced set of practices that expand the role community pharmacists play in our overall health care system.

**Inclusion criteria:** This scoping review includes primary studies (i.e., experimental, quasi-experimental, observational, and qualitative study designs) and grey literature that broadly focused on policies, regulations, and recommendations developed for Canadian community pharmacies during the COVID-19 pandemic.

**Methods:** Data sources include comprehensive searches of electronic databases (e.g., MEDLINE, Embase, PsycINFO, CINAHL, and Scopus) and grey literature (reports, policy literature, working papers, newsletters, etc.). Study abstracts and full texts were screened for eligibility by two reviewers, independently. Data extraction of relevant studies were also done independently by two reviewers. All discrepancies were addressed through further discussion or adjudicated by a third reviewer. Presentation of the extracted data focuses on descriptive frequencies and thematic analysis and the results are presented in diagrammatic or tabular form, with a narrative summary of the findings.

**Keywords:** COVID-19; community pharmacy; Canada; evidence-based; health care; implementation; knowledge translation; policy



## EXECUTIVE SUMMARY

**Objectives:** This review seeks to discover and identify the Canada-wide changes in community pharmacy practice in response to the COVID-19 pandemic and to assess what is currently being practiced within these settings. The review includes federal law, provincial regulations, professional organization bylaws, and pharmacy level policies. The research question centres on understanding the differences and implications of practices and regulations that have emerged to keep community pharmacies safe (for both customers and professionals) in Canada during the COVID-19 pandemic.

**Design:** Scoping Review

**Method:** The project began by conducting a literature search of existing research, both published and unpublished studies. Since COVID-19 did not become a Medline index term (Medical Subject Heading, or MeSH) until 2021, search results for “pandemic” and “covid” were limited to 2020-2021. All three searches were conducted on December 4, 2020. Search alerts were created to run weekly, and all subsequent search results were imported to Covidence for screening. Materials were collected through several databases, including Ovid Medline; Ovid Embase; and EBSCO CINAHL. An initial limited search of MEDLINE was undertaken to identify articles on the topic. The text words contained in the titles and abstracts of relevant articles, and the index terms used to describe the articles were used to develop a full search strategy for Medline, Embase, CINAHL with Full Text, and Web of Science. The search strategy, including all identified keywords and index terms (Appendix I), were adapted for each information source. Further, the reference lists of all included studies screened for additional studies. All identified citations were uploaded into Covidence, a systematic reviews production tool for title/abstract screening, full-text screening, data abstraction, and quality assessment. Two research team members independently reviewed the articles against the inclusion criteria for the review, with any conflicts going to a third team member an additional review. Once the pertinent articles were identified, two research team members independently extracted the relevant data (such as the aim of the study, study populations, inclusion/exclusion criteria, etc.). Each extraction was then sent to a third research team member to ensure continuity.

Once the initial literature review was complete, three team members conducted a thorough search of grey literature focused on the policy changes that have resulted from the COVID-19 pandemic. The search included both federal/national and provincial/regional professional organizations, regulatory bodies, governmental organizations, and private corporations. Targeted searching of key websites, identified by the team through an iterative process, identified non-indexed grey literature.

**Results:** Team members screened fifty-five (55) citations and considered five (5) to meet the inclusion criteria, with an additional 449 items of grey literature. Reasons for exclusion of the other citations included geographic focus (did not pertain to the Canadian context), epidemiology and public health research that excluded a pharmacy-lens, and/or the research had no mention of COVID-19. Several findings emerged from the data extraction process. In the Ontario context, pharmacists rely on regulatory bodies and professional association websites and emails as their primary source of information, yet corporate employers were found to offer better resources for communicating both internal and regulator



policies to their pharmacists (1). In the pan-Canadian context, Health Canada granted pharmacists new permissions for prescribing, including extending and renewing prescriptions (for periods beyond the durations prescribed by law) (2, 3) while simultaneously recommending that pharmacists should limit patient medication supplies to a maximum of 30 days (2, 4). Most of the studies noted that although COVID-19 updates were regularly being sent out via email by both regulatory bodies and national associations, pharmacists were either unaware of where to find or did not understand available information (1, 2, 4, 5).

All five studies that were accepted during the screening process were included.

**Conclusion:** This scoping review provides an overview on the practice and regulation changes that emerged in Canadian community pharmacies because of the COVID-19 pandemic. By reviewing both primary studies and grey literature, this review has added to the understanding of how Canadian community pharmacies incorporated rapidly evolving information into practice, while maintaining high-quality client care, as well as worker safety. Future research is needed to understand the long-term impact of the “new normal” in Canadian community pharmacies on care delivery.

**Protocol/Topic Registration:** The protocol title is registered with the National Collaborating Centre for Methods and Tools.





## Patient Partner Review/Summary

Over the last decade, pharmacists have seen an increase in the complexity of their roles, which escalated again during the COVID-19 pandemic. Researchers for this review worked to determine how communities were being kept safe during times of constantly developing policies within federal, provincial, and local levels. The findings from this review show the importance of assessing the current practices of community pharmacies to provide a basis benchmark for addressing the variations seen. With the focus on employee and client safety, it is imperative that further research is completed to develop strategies for clearer communication within the community pharmacy setting.

### *Patient Partner Lay Report*

What is the current situation?

- Community pharmacists had their role expanded during the pandemic, which has led to a 'new-normal' and increase in the complexity of their work. With the exacerbated workplace stresses from the COVID-19 pandemic, research needed to be completed to determine the current practices and how they have changed over the last two years.

What is the objective?

- This review examined at changes that have occurred to community pharmacy in Canada during the COVID-19 pandemic and how community pharmacists have adapted to these changes.
- Regulations were reviewed at the federal, provincial, professional, and local pharmacy levels to determine the implications of practice on the safety for both patients and professionals within these pharmacies.

How was the review conducted?

- Three searches were conducted on December 4<sup>th</sup>, 2020 and were conducted through multiple databases. These results were limited to articles in 2020 and 2021, as COVID-19 was not a term defined within the databases until 2021. Once all citations were found, they were uploaded to a systematic review tool and then reviewed independently by two research team members. After the initial literature review, 5 out of the 55 screened citations were found to meet the needed criteria for this review.

What did the review find?

- In the Ontario context, pharmacists found it more beneficial to receive guidance from their corporate employers. Therefore, regulatory bodies and professional association's updates were not as beneficial as desired even though these organizations were the primary source of information.
- Throughout all of Canada, there was confusion with messaging as new permissions were given for extending and renewing prescriptions, yet regulations were set to limit patient medication supplies to 30 days maximum.

Summary

- This review was initiated in 2020 to determine the 'new normal' experienced within the community pharmacy setting. This study found four themes of current practice for review: injections, medication delivery, clinical management, and controlled substances. It was found that there is unclear communication regarding regulations for staff, resulting in staff placing higher value on



**SPOR Evidence Alliance**  
Strategy for Patient-Oriented Research

**Alliance pour des données  
probantes de la SRAP**   
Stratégie de recherche axée sur le patient

Strategy for Patient-Oriented Research

**SPOR**  
Putting Patients First 

corporate employer's guidance.

### Implications

- In the future, research needs to be completed on the long-term effects of the new normal that has been created from the COVID-19 pandemic. Research also needs to address the effects of pharmacies lack of awareness of the most up to date COVID-19 information from regulatory bodies and national associations.



## Introduction

Community pharmacies are an important part of Canada's often-forgotten private health care system. Unlike Canada's inpatient pharmacies, where the organizational structure of public hospitals is tightly controlled, regulation of pharmacies is performed at a provincial level through pharmacy colleges, professional associations, and provincial regulating bodies (6). Though varying from province to province, the responsibilities of community pharmacists centre on ensuring access to and the safety of prescription and non-prescription medications. Beyond dispensing, the scope of practice for community pharmacies includes medication and drug interaction education, assessing the appropriateness of prescriptions, and monitoring the effectiveness and safety of medications. Though beyond their professional scope, community pharmacists frequently uphold customer service practices and patient engagement in terms of recommendations for non-prescription products (7).

Even prior to the COVID-19 pandemic, the responsibilities of community pharmacists consistently evolved, but these changes were inconsistent across the country. For example, while community pharmacists in Alberta have injection authority for any drug or vaccine and can order/interpret lab tests, these jurisdictional regulations are not implemented in either Ontario or British Columbia (8). Tailoring regulatory frameworks to regional peculiarities may be appropriate and can be used to accommodate to the local context; however, in the case of community pharmacy, the lack of standard operating practices makes it difficult to identify the impacts (positive or negative) arising on an ongoing basis (9).

At the best of times, safe community pharmacy practice involves highly complex decision making in high-risk situations where a high level of safety is required (7). Over the last decade, safety initiatives implemented by regulators have added to the complexity of the environment. These initiatives have included standards for expanded pharmacy offerings, on-line incident reporting, collecting, and assessing quality improvement analytics, and incorporating comprehensive safety enhancements into practice (9-11). Because these regulators operate at a provincial level, there is no single pan-Canadian approach to measure and monitor medication safety in the community setting. As a result, community pharmacy providers must navigate these complex demands, continuously designing and implementing enhanced safety practices that meet various provincial standards, with limited ability to learn from colleagues in other settings. The COVID-19 pandemic, and the profession's response to it, has exacerbated these complexities (1).

Canada's community pharmacists, as with so many health care professionals, have found themselves at the front-line of the COVID-19 crisis. Media sources are consistently reporting on COVID-related changes in pharmacy practice; however, due to provincial autonomy in regulation, implementation continues to be inconsistent across the country. Generally, professional responsibilities now include expanded patient services, limited dispensing to mitigate medication hoarding, increased monitoring of medications of abuse, changes in the management of prescriptions for controlled substances, enhanced in-store physical distancing measures, and most recently, the administration of COVID-19 tests and vaccines (2-



4). Unfortunately, there is no one national institution tasked with tracking these changes or assessing their impact on the profession or on patients.

Policy responses aimed at managing the COVID-19 crisis exhaust the resources of community pharmacies by increasing the responsibilities of pharmacists (12). Canadian pharmacists fill over \$33.9 billion worth of prescription pharmaceuticals annually (13); however, when considering the various professionals and communication channels, this mix provides the perfect storm in which pharmacists must safeguard clients from experiencing a medication-related problem. Medication incidents (MI) have been shown to not only be costly for clients, causing loss of life or harm, but cost the Canadian healthcare system an estimated \$2.6 billion per year (14). New challenges facing community pharmacies due to the COVID-19 crisis may amplify these incidents, intensifying the regulatory responses by provinces. The implementation of any new responsibilities in addition to the existing professional scope of practice fosters a more complex work environment with a potential larger margin for error.

Further still, the existence of multilateral governance in community pharmacy regulation exacerbates potential problems; pharmacists are burdened with managing provincial, professional, and national mandates as very little communication exists between each regulatory body. An already complex work environment, community pharmacists must juggle the expanded scope of practice due to COVID-19 as well as several channels of information feeding them new regulations and changes daily. The impacts of COVID-related changes, whether those be positive or negative, are difficult to identify due to local context; each provincial is experiencing the pandemic in vastly different ways. As Canada emerges from this pandemic, there will be a 'new normal' for community pharmacy practice, or an enhanced set of practices that expand the role community pharmacists play in our overall health care system; however, how this "new normal" is out pictured in each province remains unclear. With new provincial regulations unfolding to protect both pharmacists and patients, Canada is an ideal venue in which to review the changing landscape of community pharmacies.

The present review seeks to discover, identify, and chart what this emerging new normal will be for Canadian community pharmacy. The review has been conducted following JBI guidance for the conduct of scoping reviews (15).

The *population* is community pharmacies, or pharmacies out-of-hospital, with *outcomes* being a synthesis of professional practices and regulations emerging from the COVID-19 pandemic. The *study design* is a narrative qualitative analysis based on the scoping review, with a *timeframe* of 2020 to 2021.

## Review Question

What are the practices and regulations that have emerged to keep community pharmacies safe (for both customers and professionals) in Canada during the COVID-19 pandemic and what are the implications of these changes?



## Inclusion Criteria

Inclusion criteria were developed to address the participants (data), concept, and context of the scoping review.

*Participants* – The review focused on the organization level changes (professional organizations, regulators, corporations, and federal/provincial governments) and included studies addressing policies, regulations, and recommendations developed for Canadian community pharmacies. Studies that investigate changes unrelated to COVID-19 and community pharmacy have been excluded.

*Concept* – The concept explored is the ‘new normal’ of community pharmacy, or an enhanced set of practices that expand the role community pharmacists play in our overall health care system. Studies that describe changes within pharmacy unrelated to COVID-19; focus on public health generally without specific mention of pharmacy; focus on hospital pharmacies; or focus on a region outside of the Canadian provinces will be excluded. Community pharmacy, or a retail pharmacy, is defined as the most common type of pharmacy that allows the public access to their medications and advice about their health.

*Context* – Studies that focus on Canadian pharmacy organizations (regulatory, professional, or commercial) and pandemic related changes were included. For the purposes of this review, we expanded the definition of health care without locating this geographically. Geographic location is the Canadian provinces, excluding the territories. No limitations are set for cultural/sub-cultural factors.

*Types of Sources* – Peer reviewed studies were identified through a comprehensive search of electronic databases, and grey literature. All study designs were included, such as reviews of the scientific literature, including systematic reviews. Opinion pieces (e.g., editorials, commentaries, letters to the editor) and document reviews have been excluded. A limit of 2019 onwards was set to meet the inclusion criteria of COVID-19.

## Methods

The protocol was prepared in line with the JBI Manual for Evidence Synthesis: Reporting Guide for Protocols. This review is in line with the JBI Manual for Evidence Synthesis: Scoping Reviews Protocol and PRISMA ScR (15, 16).

A scoping review has been selected as the methodology because it facilitates the exploration and mapping of a broad scope of literature on an emerging concept or field.

*Search strategy* – A systematic search strategy designed to identify all relevant published studies was developed by an experienced health sciences librarian for the following databases: MEDLINE (Ovid), EMBASE (Ovid), and CINAHL (EBSCO). Another health sciences librarian reviewed the searches using the Peer Review of Electronic Search Strategies (PRESS) checklist. The search strategy, including all



index terms and keywords, was adapted for each information source. The searches retrieved studies in Canadian community pharmacy settings by searching Canadian and provincial/territorial subject headings and keywords; and in addition, by searching Canada in the citation database records' fields Investigator Affiliation (ia), Institution (in) and Grant Country (gc). Since COVID-19 did not become a Medline index term (Medical Subject Heading, or MeSH) until 2021, search results for “pandemic” and “COVID-19” were limited to 2020-2021. All three searches were conducted on December 4, 2020. Search alerts were created to run weekly, and all subsequent search results were imported to Covidence for screening.

Grey literature was searched using the online resources of various provincial and national regulatory, professional, and commercial resources.

### *Information Sources*

Information sources of interest include relevant electronic databases, grey literature sources, and web searches as listed in Appendix I and Appendix II, respectively. We also scanned references of included articles and relevant systematic reviews, and any additional sources or articles provided by knowledge users and/or identified experts in the field.

*Study Selection* – All identified citations from the search were uploaded into Covidence, an online review software, after duplicates had been removed. Two independent reviewers screened titles and abstracts using the inclusion criteria developed for the review. The full texts of potentially relevant studies were retrieved and screened in duplicate independently by two reviewers. Reasons for exclusion was recorded and reported for studies that did not meet the inclusion criteria during the screening process. Studies were screened for those in Canadian community pharmacy settings published from 2020 onward. All disagreements between reviewers at every stage of the study selection process were resolved with the involvement of a third reviewer, or through further discussion. This process was piloted prior to the beginning of the data collection process.

### *Data Extraction*

Two independent reviewers extracted all relevant data from papers included in the scoping review using a data extraction tool developed by the review team. The following are examples of the extracted data:

- General information (e.g., title, author, publication year, country in which the study conducted);
- Characteristics (e.g., aim, study design, study population, inclusion/exclusion criteria);
- Changes (e.g., standards of practice, regulations, implementing organization);

Disagreements between the reviewers were resolved with a third reviewer or through discussion. This process was piloted prior to the beginning of the data collection process. As per the PRISMA-ScR





explanation and elaboration, the risk of bias and methodological quality of included studies was not appraised (16).

### *Analysis and Presentation of Results*

The results have been displayed in a diagrammatic or tabular form using charting methods in a way that meets the stated objective of this scoping review. Descriptive frequencies and thematic analysis have been included along with a narrative summary of the findings and will be used to present how the results relate to the objectives of this review. As a result of this scoping review, gaps in the literature and areas for further research have been identified. The findings of this scoping review will be presented to all interested stakeholders, such as provincial authorities, provincial regulators, pharmacy association members, and pharmacy owners/chain senior managers.

## **Results**

The search strategy identified 55 potential studies, excluding the 103 duplicate studies. At the title and abstract screening stage, a total of 50 studies were excluded as off topic. A total of 5 studies were included in this review:

Of the 5 studies included, two (2) were qualitative research based, two (2) were commentaries, and one (1) was a systematic review (see Appendix IV) All of these were published between 2020 and 2021. Of this total set, and based upon the country of the lead author, four (4) were based in Canada and one (1) was based in Poland (which examined several countries, including Canada). All studies were in English.

Of the 60 total participants, pharmacists, regulated technicians, pharmacy assistants, designated managers, pharmacy owners, full-time, part-time, and locum staff were represented. Research designs included a systematic literature review, commentaries, as well as descriptive studies. Sampling methods included convenience, snowball, and purposive sampling methods. Given the small number of published literature located, these five studies will be described briefly below:

The Austin and Gregory (1) article focused on pharmacists working in large corporate settings, such as franchises and corporate chains. Utilizing snowball sampling, 21 community pharmacists were interviewed to characterize how community pharmacy in Ontario, Canada responded to the COVID-19 pandemic during Winter 2020. The findings contended that corporate employers appeared more pragmatic in the way they communicated with COVID-19 related changes to pharmacists. The resiliency of individual practitioners increased due to corporate level clarity, specificity, and practical orientation of this guidance (p. 1871). Corporate messaging was more effective at enhancing resilience than that provided by regulatory bodies. Most participants in this study reported increasing reliance upon regulatory bodies' and professional associations' websites and emails as their primary source of COVID-19 related information. However, they noted that the way in which these organizations communicated was ambiguous, and rather than providing direct guidance, the communication was in the form of basic information or links to other websites (p. 1871). Further, the community pharmacist participants stated



that receiving guidance was different from their reading, understanding, internalizing, and applying the information provided. Once again, the way in which guidance was communicated was seen as pivotally important to the way it was onboarded by pharmacists. Providing unreasonably theoretical or abstract ideas held less value than corporate directives. Ambiguity in guidance required pharmacists to interpret and apply to their specific situation/context, making directives less readable and valuable in comparison to corporate messaging which indicated how to behave, what to do, and what to say in specific situations. The latter style or mode of guidance facilitated early adoption by community pharmacy staff and proved helpful in most cases in managing practical workplace issues related to COVID-19. Unclear messaging that placed the onus of interpretation on community pharmacists contributed to increased occupational stress and burnout in relation the changing nature of practice due to COVID-19 (p. 1871-72).

One of the most important findings of this study related to roles, responsibilities, and opportunities for regulated pharmacy technicians. The province of Ontario is one of relatively few jurisdictions that has a fully regulated and defined scope of practice for pharmacy technicians. Practices that had hired regulated pharmacy technicians but had not actually established the most appropriate role for them found themselves in a highly advantageous position. Support staff could pivot rapidly away from multitasking or shared tasks towards a differentiated labour practice model, thereby enhancing resilience and improving workplace conditions for all staff (p. 1872).

In the second article by Gregory and Austin (5), the authors examined the increased dispensing workload as policies designed to prevent stockpiling or shortages reduced allowable dispensed quantities, a notable national challenge due to COVID-19 (p. 247). The study interviewed a total of 11 teams consisting of 39 individuals (pharmacists, regulated technicians, assistants, designated managers, owners, full-time, part-time and locum staff). When asked to describe experiences during the first phase of the pandemic, the teams, which included pharmacists, clearly described personal and professional fears associated with lack of information regarding the pandemic. Highlighted issues related to personal safety, lack of personal protective equipment (PPE), and lack of clear policies or practices to guide daily work (p. 247).

Merks et al. (3) identified the authorization challenges when considering the ability of pharmacists to prescribe, sell, or provide controlled substances in limited circumstances, or to transfer prescriptions for controlled substances (e.g., narcotics, controlled drugs, and benzodiazepines). The study addressed several permissions for pharmacists that enabled them: to extend and renew prescriptions (for periods beyond the durations prescribed by law); to transfer prescriptions to other pharmacists; to permit practitioners to verbally prescribe prescriptions with controlled substances; to deliver controlled substances to patients (at their homes or an alternate location) (p. 3). The authors assert the importance of communication when issuing an exemption. They recommended that there should be an obligation to provide any medication updates or information to their doctor whenever a pharmacist extends, adjusts, or replaces a medication (p. 3). Further, they recommended that prescribing systems could utilize e-mails to communicate prescribing directions between doctors and pharmacists as a means to ensure consistent patient care during the pandemic (p. 3).





Elbeddini et al. (4) investigated the issue of COVID-19 from the community pharmacy perspective, stating that the Ministry of Health in Ontario recommended that pharmacies limit patient medication supplies to a maximum of 30 days, except in special circumstances, based on pharmacist judgement. This recommendation was established to prevent stockpiling and to guarantee that all patients would have access to their medications. Because this recommendation is not mandated, it is unknown whether all pharmacies were compliant, especially due to push back from patients and the delayed enactment of the Ontario Drug Board dispensing fee compensation (p. 4), which authorized payment to pharmacists for the extra workload associated with more frequent dispensing. Although most provinces called for the 30-day medication limit, these limits were lifted at different times, with some provinces halting the practice as early as April or May 2020 (p. 4). Further, the pandemic created an environment where pharmacists assumed new responsibilities without prior training or preparation, which included conducting COVID-19 screening, handling suspected COVID-19 cases, and conducting COVID-19 testing (p. 5); however, the only information for pharmacists on how to effectively manage workload, as well as guide them to provincial resources, was generated by Canadian Pharmacists Association (CPhA) (p. 3). Another issue that arose within this study was the manner in which information was communicated. Although emails were regularly broadcast by regulatory bodies and national associations, and websites were regularly updated, there was a reported lack of awareness of such tools and claims of ambiguous communication methods. The authors conclude from these complaints, there is an obvious need to raise awareness of the available information sources as well as employ appropriate communication tools that are easy for pharmacists to access (p. 6). In this study, Canadian community pharmacists reported that although they relied heavily on information provided by regulatory bodies and professional associations to provide patient care during the pandemic, they were dissatisfied by how such information was communicated and would have liked more direction from their corporate bodies and management teams (p. 6). Exacerbating these strains, pharmacists were left out from the Ontario list of front-line workers who were eligible for the 16-week pandemic pay from April 24, 2020, until August 13, 2020 (p. 1). As a result, pharmacists often found themselves providing direct patient care without adequate PPE or danger pay, which threatened their own personal safety. These critical shortages did prompt Ontario Health to release, and regularly update, recommendations and guidelines about optimizing the supply of PPE during the pandemic (p. 2). In contrast, other forms of support, including mental health hotlines, were provided so pharmacists could share their experiences and learn new stress-management strategies (p. 3).

In the Elbeddini, Hooda, & Yang (2) article, the authors contended that pharmacists should advise patients against hoarding medications or stockpiling by adhering to a 30-day medication supply (p. 200). Further, the Registered Nurses Association of Ontario (RNAO), Ontario Medical Association (OMA) and Ontario Pharmacist Association (OPA), representing more than 110,000 health care providers, issued a joint statement addressing the use of a hydroxychloroquine/azithromycin combination for COVID-19 prophylaxis and treatment. In this statement, the group collectively advised members to be diligent in efforts to prevent blind hope from driving decisions and reminded providers of their roles as antibiotic stewards and safeguards of limited supplies of medication (p. 201). In response, Health Canada deemed these drugs eligible to be included as part of the interim order under the Food and Drugs Act allowing



Canada to import drugs (and other medical supplies) under exceptional circumstances (p. 199). Unrelated to the hydroxychloroquine/azithromycin statement, a separate temporary exception was issued, pursuant to the Controlled Drug and Substances Act, allowing pharmacists to renew and adapt a prescription for a controlled substance, including narcotics, in addition to accepting a verbal order and transferring a prescription for a controlled drug. These two factors represent only a small portion of pharmacists' contribution to mitigate health care resource depletion (p. 201).

### *Review Findings*

The grey literature search located 449 items (see Appendix IV). These findings were broken down into four themes: 1) vaccines and injections; 2) medication delivery; 3) clinical management and 4) narcotics, controlled, and targeted substances. These were adapted from COVID-END: COVID-19 Evidence Network to support Decision-making (17).

#### *Theme 1: Vaccines and Injections*

Out of the 449 items (memos, government documents, policy, etc.) that were retrieved, 37 were related to vaccines and injections. At the federal level, all records were from the CPhA (n=4). At the provincial level, 22 records were from regulatory bodies, including the Alberta College of Pharmacy (ACP) (n=1), College of Pharmacists of British Columbia (CPBC) (n=1), College of Pharmacists of Manitoba (CPhM) (n=1), New Brunswick College of Pharmacists (NBCP) (n=3), Newfoundland and Labrador Pharmacy Board (NLPB) (n=3), Nova Scotia College of Pharmacists (NSCP) (n=6), Ontario College of Pharmacists (OCP) (n=6), and Ordre des Pharmaciens du Québec (OPQ) (n=1). Nine records were from provincial governments, including New Brunswick (n=4), Manitoba (n=2), Ontario (n=1), and Saskatchewan (n=2). The remaining records were from professional organizations, including the Pharmacy Association (BCPhA) (n=1) and Pharmacists' Association of Newfoundland and Labrador (PANL) (n=1).

Within this theme, three sub-themes emerged: 1) COVID-19 vaccinations; 2) influenza vaccinations; and 3) administration of injections within the context of the COVID-19 pandemic.

The first sub-theme, COVID-19 vaccinations, consisted of 22 records, which are guidance documents from regulatory bodies (n=2), professional organizations (n=2), and provincial governments (n=2); hyperlinks from regulatory bodies (n=6) and professional organizations (n=5); position statements from regulatory bodies (n=2) and professional organizations (n=2); and a policy update from the Government of Ontario (n=1). At the end of 2020, the CPhA declared the willingness and readiness of community pharmacies to support COVID-19 vaccination efforts and emphasized that community pharmacy is a critical component of an effective, equitable, and efficient COVID-19 vaccination rollout (18). This message was echoed at the provincial level, placing emphasis on pharmacy professionals' roles in informing the public about COVID-19 vaccination and addressing COVID-19 vaccine hesitancy. Some regulatory bodies have provided links to COVID-19 vaccine resources from reputable organizations, including the Public Health Agency of Canada (PHAC), Government of Canada, Government of Nova Scotia, Health Canada, and the Centre for Effective Practice. Several records pertained to the ability of community pharmacists to administer COVID-19 vaccines. Pharmacy professionals in Quebec were



granted the authority to administer the COVID-19 vaccine, which was supplemented with a guidance document from OPQ to outline measures that should be taken by pharmacy professionals administering the COVID-19 vaccine (19). Similarly, on January 13, 2021, an amendment was made to Ontario Regulation 107/96 under the Regulated Health Professions Act (RHPA), which allows pharmacists, interns, registered pharmacy students, and pharmacy technicians to administer the COVID-19 vaccine, without delegations of authority, under the condition they are engaged to do so by an organization or other entity that has an agreement with the Minister of Health (20). The Ontario College of Pharmacists supported this decision and supplemented the amendment with a guidance document to outline expectations and resources for pharmacy professionals administering the COVID-19 vaccine (21). In British Columbia, community pharmacists who were qualified to administer drugs by injection were allowed to administer COVID-19 vaccines (22), while community pharmacists in Manitoba and Alberta with authorization to administer drugs by injection could apply to provide COVID-19 vaccines (23, 24).

The second sub-theme, influenza vaccinations, consisted of 10 records, which are mostly guidance documents from regulatory bodies (n=4), provincial governments (n=4), and professional organizations (n=1), except for one policy document from Saskatchewan (n=1). The guidance documents outlined recommendations for the adjustment of influenza vaccination programs in community pharmacies during the pandemic, including screening, routine environmental cleaning, appropriate PPE, good hand hygiene, physical distancing, and use of technology to reduce contact. The policy document outlined similar measures for influenza vaccination programs. Some of the documents also emphasized that pharmacy professionals must have appropriate training relevant to their role in the influenza vaccination program (n=4). Alternative models of influenza vaccine delivery (e.g., special hours for vulnerable patients, drive-through services, mobile clinics, clinics in large venues like community halls) were also recommended (n=4). Two items noted the recommendations from National Advisory Committee on Immunization, stating that a shorter post-vaccination observation time for influenza vaccinations, between 5 to 15 minutes, may be considered during the pandemic, but only when appropriate physical distancing in post-vaccination waiting areas cannot be maintained. Finally, some documents (n=4) referred to the PHAC's guidance for influenza vaccine delivery in the presence of COVID-19. While all documents highlight the importance of influenza vaccination programs, particularly during the pandemic, the New Brunswick College of Pharmacists stand out in stating that pharmacists should use their professional judgement when deciding on the appropriateness of running influenza vaccination programs during the pandemic (25).

The third sub-theme, administration of injections within the context of the COVID-19 pandemic, consisted of 5 records, which are represented by guidance documents from regulatory bodies (n=3), professional organizations (n=1), and provincial government (n=1). All documents acknowledged that pharmacists would continue to be asked to administer injections during the pandemic, but also emphasized that pharmacists should use their professional judgement when deciding on the appropriateness of administering injections during this time. Further, most items noted that Infection Prevention and Control Canada measures should be adhered to by community pharmacies that decided to continue offering injection services, such as appropriate PPE and good hand hygiene, to reduce the risk of COVID-19



transmission (n=4). All items (n=5) highlighted that vaccination schedules may be disrupted during the pandemic and emphasized that routine vaccines with a rigid schedule (e.g., antipsychotics, medroxyprogesterone) should be prioritized, whereas scheduled vaccines that are part of a series with a wide or flexible dosing schedule should be postponed.

### *Theme 2: Medication Delivery*

From examining the theme of medication delivery, 128 items (memos, government documents, public policy, etc.) were identified. All items were published from March 2020 to January 2021. From government resources, there were 6 federal items (Health Canada) and 24 items from various provincial governments: Alberta (n=1), British Columbia (n=11), Manitoba (n=3), Newfoundland and Labrador (n=3), Nova Scotia (n=1), Quebec (n=1), and Saskatchewan (n=4). From professional organizations, there were 41 items: BCPhA (n=3), CPhA (n=21), OPA (n=6), PANL (n=8), Prince Edward Island Pharmacists Association (PEIPA) (n=1), and Pharmacists Manitoba (PM) (n=2). Further, 55 items came from regulatory bodies: ACP (n=3), CPBC (n=7), CPhM (n=3), NBCP (n=9), NLPB (n=8), NSCP (n=13), OCP (n=6), Saskatchewan College of Pharmacy Professionals (SCPP) (n=4), and Prince Edward Island College of Pharmacy (PEICP) (n=2). Corporate pharmacy represented 2 items. From this, three sub-themes emerged: 1) dispensing; 2) prescribing; and 3) professional standards or practices within the context of the COVID-19 pandemic.

The first sub-theme, dispensing, consisted of 62 items, which are represented by guidance documents (n=26), policies (n=24), position statements (n=8), and signage (n=4) from regulatory bodies (n=25), professional organizations (n=18), federal government (n=5), provincial governments (n=12), and corporate pharmacy (n=2). Most of these items (n=43) stemmed from March/April 2020 and May/June 2020 and centred around the unprecedented drug supply problems that compelled a nation-wide 30-day supply measure in mid-March, and the lifting of this restriction. Several items focused on specific drug shortages (n=16), providing guidance on alternatives or measures to prevent potential shortages. Two items centred on the temporary exemption allowing injectable drugs, previously dispensed for the purpose of providing Medical Assistance in Dying (MAiD), to be returned to pharmacy inventory.

The second sub-theme, prescribing, consisted of 40 items, which are represented by guidance documents (n=28), policies (n=8), and position statements (n=4) from regulatory bodies (n=17), professional organizations (n=17), federal government (n=1), and provincial governments (n=5). Twenty-three items focused clinically on the use of Chloroquine and hydroxychloroquine, or other treatments of COVID-19, identifying that these medications can have serious side effects. These documents advised that these drugs should be used only under the supervision of a physician. Nine items explored or explained changes to standard practices in prescribing, such as the expansion of injection authority to include all medications administered by the intramuscular and subcutaneous route and the expanded delegation powers for pharmacists, positioning pharmacies to meet the health needs of the public. The remaining items (n=7) focused on changes to obtain consent - either through fax, verbal, or email - to mitigate changes in both in-person primary care visits and contactless prescription delivery.



The final sub-theme, professional standards/practices, consisted of 26 items, which are represented by guidance documents (n=19), policies (n=6), and signage (n=1) from regulatory bodies (n=13), professional organizations (n=6), and provincial governments (n=7). Virtual care and patient consultation services within the framework of pandemic restrictions (n=18) are discussed across institutions. These items include any direction on the provision of all pharmacy services, from dispensing to counselling, as well confidentiality, from a virtual platform or distanced platform. Similarly, medication reviews (n=5) are mentioned separately from other virtual care initiatives as they allow for telephone as well as virtual processes. Finally, care within long-term care facilities (n=3) are addressed in terms of the restriction for entering facilities with vulnerable populations.

### *Theme 3: Clinical Management*

From examining the theme of clinical management, 225 items (corporate memos, government documents, public policy, etc.) were identified. All items were published from March 2020 to January 2021. From government resources, there were 19 items from various provincial governments: British Columbia (n=5), New Brunswick (n=1), Newfoundland and Labrador (n=5), Nova Scotia (n=4), Ontario (n=2), Prince Edward Island (n=1), and Saskatchewan (n=1). From professional organizations, there were 72 items: Alberta Pharmacists' Association (APA) (n=3), Association Québécoise des Pharmaciens Propriétaires (AQPP) (n=3), BCPhA (n=16), CPhA (n=22), OPA (n=4), PANL (n=6), Pharmacy Association of Nova Scotia (PANS) (n=2), PAS (n=3), and PM (n=13). Further, 105 items came from regulatory bodies: ACP (n=9), CPBC (n=7), CPhM (4), NBCP (n=12), NLPB (n=19), NSCP (n=17), OCP (n=17), OPQ (n=7), PEICP (n=2), and SCPP (n=11). Corporate pharmacy represented 29 items. From this, three sub-themes emerged: 1) closures and staffing shortages; 2) public safety; and 3) professional practice guidance.

The first sub-theme, closures and staffing shortages, consisted of 33 items, which are represented by guidance documents (n=10), policies (n=9), hyperlinks (n=5), signage (n=5) from regulatory bodies (n=23), professional organizations (n=7), provincial governments (n=3), and corporate pharmacy (n=1). Most of these items (n=19) were published from March to and June 2020, focusing on community pharmacy temporary closures or changes to hours of operation due to COVID-19 (n=19). The remaining items focused staffing during the pandemic (n=14), providing guidance on how to staff during the pandemic as well as list of relief workers. It should be noted that some of these documents provided public access to personal contact information for community pharmacy workers, including their phone number and email.

The second sub-theme, public safety, consisted of 93 items, which are represented by guidance documents (n=40), policies (n=3), signage (n=33), and hyperlinks (n=17) from regulatory bodies (n=40), professional organizations (n=35), corporate pharmacy (n=12) and provincial governments (n=5). 29 items focused on wearing a mask or PPE (either guidelines or distribution channels). A further 45 items centered on infection control, including proper hand washing protocols, cleaning guidelines, social distancing requirements, and COVID-19 screening for customers. The remaining items (n=18) focused on professional obligations in preventing the spread of COVID-19, such as emergency preparedness resources, employee infection/protection procedures, and hand sanitizer compounding guidelines.





The final sub-theme, professional practice guidance, consisted of 99 items, which are represented by guidance documents (n=42), exceptions (n=4) policies (n=6), hyperlinks (n=47), position statement (n=1), consult services (n=2) and signage (n=1) from regulatory bodies (n=42), professional organizations (n=30), corporate pharmacy (n=16), and provincial governments (n=11). Most of these items (n=54) centered on general practice resources, or FAQs, for professionals during the pandemic. A further 25 items highlighted asymptomatic testing availability in community pharmacies. Extensions and exemptions (n=5) focused mostly on CPR/first aid, but also included private counseling rooms as well as disaster relief programs. Three items discussed mental health and wellbeing supports for pharmacists during the pandemic. Finally, nine items addressed ethical concerns, such as duty to report communicable disease; three items focused on business continuation plans.

#### *Theme 4: Narcotics, Controlled, and Targeted Substances*

The final theme consisted of 59 items. In 2020 the federal government exempted pharmacists from select sections of the Controlled Drugs and Substances Act (CDSA), the Food and Drug Regulations (FDR), and the Benzodiazepines and Other Targeted Substances Regulations (BOTSR).(26) Four guidance documents were developed to assist pharmacists with the implementation of these changes.(27-30) Nationally, the Canadian Pharmacists Association produced four Practice Resources and one summary table. At the provincial level 48 items were identified; Alberta College of Pharmacy (n=3), British Columbia Pharmacist's Association (n=1), College of Pharmacists of British Columbia (n=3), the College of Pharmacists of Manitoba (n=2), New Brunswick College of Pharmacists (n=2), Newfoundland and Labrador Pharmacy Board (n=2), Nova Scotia College of Pharmacists (n=6), Ontario College of Pharmacists (n=8), Ontario Pharmacists' Association (n=1), Pharmacy Association of Newfoundland and Labrador (n=1), Prince Edward Island College of Pharmacists (n=5), Saskatchewan College of Pharmacy Professionals (n=5), Institut universitaire sur dépendances (n=1), the Centre for Addiction and Mental Health (n=1), and the Governments of British Columbia (n=2), Newfoundland and Labrador (n=1), and Nova Scotia (n=4).

Within the larger theme of Narcotics, controlled, and targeted substances there were five sub-themes; 1) Verbal prescriptions, 2) Transfers between pharmacies, 3) Extensions, 4) Modifications of dose or dosage form, and, 5) Opioid Agonist therapy.

## **Discussion**

Several findings emerged from the data extraction process. In the Ontario context, pharmacists rely on regulatory bodies and professional associations websites and emails as their primary source of information, yet corporate employers were found to offer better guidance and provided more comprehensive communication of policies to their pharmacists (Austin & Gregory, 2021). In the pan-Canadian context, Health Canada granted pharmacists new permissions for prescribing, including extending and renewing prescriptions (for periods beyond the durations prescribed by law) (Merks et al., 2020; Elbeddini, Hooda, & Yang, 2020) while simultaneously recommending that pharmacies should limit patient medication supplies to a maximum of 30 days (Elbeddini et al., 2020; Elbeddini, Hooda, & Yang,



2020). Most of the studies noted that although COVID-19 updates were regularly being sent out via email by both regulatory bodies and national associations, there was a lack of awareness of the available information within pharmacies (Austin & Gregory, 2021; Austin & Gregory, 2020; Elbeddini et al., 2020; Elbeddini, Hooda, & Yang, 2020).

From the grey literature, it is evident that all groups developed policies to keep staff and customers safe and to try to keep supplies available for all. Though the rapidity of the changes was as a measure for the protection of public health, when considering the sheer number of policies being sent to or that were accessible by community pharmacists, there needs to be oversight surrounding the communication of information and changes. Many industries had to adapt quickly during the pandemic, but the changes within pharmacy have tangible or legal consequences to pharmacists carrying out their regular duties. Current practices of information sharing require pharmacists to sift through repetitive, jargon-filled documents housed on multiple platforms; this is not conducive to either public health promotion or patient safety. Rather, the lack of consistency in the communication of changes opens the potential for error and places an unnecessary onus of responsibility onto an already overburdened profession. Instead, there needs to be a system that funnels all these changes into one central repository where policies can be shared and adapted to provincial or local context. Further, though the COVID-19 pandemic is not over, it is vital to learn from what we have experienced so far as a means to better streamline information and increase preparedness. This task is made more difficult if decision-makers do not have all relevant information readily available.

Given the changing role and scope of practice for pharmacists, it is important to look at outcomes for both patients and the pharmacy team to ensure that workloads are manageable and that the quality of medication delivery remains high. Previously, the role of pharmacists was one of dispensing and consulting related to medications; however, now it has evolved to dispensing, consulting, administering injections, managing increased customer traffic and workplace anxieties, and providing public health information – to name just a few tasks. Although evolution in all professions can be expected, it is important to assess if all these new roles are a realistic expectation to burden on any industry during a pandemic, or realistically at any time. It has been shown that workload is a contributing factor to medication errors and near misses (31); therefore, it is vital that we consider and monitor the consequences of this “new normal”.

## Conclusions and Recommendations

This scoping review provides an overview on the practice and regulation changes that emerged in Canadian community pharmacies because of the COVID-19 pandemic. By reviewing both primary studies and grey literature, this review has added to the understanding of how Canadian community pharmacies incorporated rapidly evolving information into practice, while maintaining high-quality client care, as well as worker safety. Future research is needed to understand the long-term impact of the “new normal” in Canadian community pharmacies on care delivery.



## References

1. Austin Z, Gregory P. Resilience in the time of pandemic: the experience of community pharmacists during COVID-19. *Research in Social and Administrative Pharmacy*. 2021;17(1):1867-75.
2. Elbeddini A, Hooda N, Yang L. Role of Canadian pharmacists in managing drug shortage concerns amid the COVID-19 pandemic. *Canadian Pharmacists Journal/Revue des Pharmaciens du Canada*. 2020;153(4):198-203.
3. Merks P, Jakubowska M, Drelich E, Świeczkowski D, Bogusz J, Bilmin K, et al. The legal extension of the role of pharmacists in light of the COVID-19 global pandemic. *Research in Social and Administrative Pharmacy*. 2021;17(1):1807-12.
4. Elbeddini A, Botross A, Gerochi R, Gazarin M, Elshahawi A. Pharmacy response to COVID-19: lessons learnt from Canada. *Journal of Pharmaceutical Policy and Practice*. 2020;13(1):1-8.
5. Gregory PAM, Austin Z. COVID-19: How did community pharmacies get through the first wave? *Canadian Pharmacists Journal / Revue des Pharmaciens du Canada*. 2020;153(5):243-51.
6. Jones EJ, MacKinnon NJ, Tsuyuki RT. Pharmaceutical care in community pharmacies: practice and research in Canada. *Annals of Pharmacotherapy*. 2005;39(9):1527-33.
7. Mossialos E, Courtin E, Naci H, Benrimoj S, Bouvy M, Farris K, et al. From “retailers” to health care providers: transforming the role of community pharmacists in chronic disease management. *Health policy*. 2015;119(5):628-39.
8. Bhatia S, Simpson SH, Bungard T. Provincial Comparison of Pharmacist Prescribing in Canada Using Alberta's Model as the Reference Point. *Can J Hosp Pharm*. 2017;70(5):349-57.
9. Halsall D, Noyce PR, Ashcroft DM. Characterizing healthcare quality in the community pharmacy setting: insights from a focus group study. *Research in Social and Administrative Pharmacy*. 2012;8(5):360-70.
10. Ashcroft D, Morecroft C, Parker D, Noyce P. Likelihood of reporting adverse events in community pharmacy: an experimental study. *BMJ Quality & Safety*. 2006;15(1):48-52.
11. Boucher A, Ho C, MacKinnon N, Boyle TA, Bishop A, Gonzalez P, et al. Quality-related events reported by community pharmacies in Nova Scotia over a 7-year period: a descriptive analysis. *CMAJ open*. 2018;6(4):E651.
12. Parkhurst C, Singh Purewal G, Donyai P. Community pharmacy and COVID-19—the unsung heroes on our high streets. *Journal of Patient Experience*. 2020;7(3):282-4.
13. Brandt J, Shearer B, Morgan SG. Prescription drug coverage in Canada: a review of the economic, policy and political considerations for universal pharmacare. *Journal of Pharmaceutical Policy and Practice*. 2018;11(1):28.
14. Hohl CM, Nosyk B, Kuramoto L, Zed PJ, Brubacher JR, Abu-Laban RB, et al. Outcomes of emergency department patients presenting with adverse drug events. *Annals of emergency medicine*. 2011;58(3):270-9. e4.
15. Peters MD, Godfrey C, McInerney P, Munn Z, Tricco AC, Khalil H. Chapter 11: scoping reviews (2020 version). *JBI manual for evidence synthesis*, JBI. 2020;2020.
16. Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, et al. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *Bmj*. 2021;372.
17. Forum MH. COVID-END: COVID-19 Evidence Network to support Decision-making 2021 [Available from: <https://www.mcmasterforum.org/networks/covid-end>].
18. Association CP. COVID-19 vaccine and pharmacy readiness—Recommendations from CPhA and neighbourhood pharmacies 2020 [Available from: <https://www.pharmacists.ca/cpha>].





[ca/function/utilities/pdf-server.cfm?thefile=/cpha-on-the-issues/COVID-VaccinePharmacyReadiness\\_EN.pdf](https://www.cpha-on-the-issues/COVID-VaccinePharmacyReadiness_EN.pdf).

19. Québec OdPd. COVID-19: Mesures sanitaires applicables à la vaccination en pharmacie. 2020.
20. CONTROLLED ACTS under Regulated Health Professions Act,, Government of Ontario(2021).
21. Pharmacists OCo. Administration of COVID-19 vaccine by pharmacy professionals 2021 [Available from: <https://www.ocpinfo.com/regulations-standards/practice-policies-guidelines/administration-of-covid-19-vaccine-by-pharmacy-professionals/>].
22. Association BCP. Notice to members: Community pharmacy and COVID-19 vaccines. 2021 [Available from: <https://www.bcpharmacy.ca/news/notice-members-community-pharmacy-and-covid-19-vaccines>].
23. Manitoba Go. COVID-19 vaccine: Questions and answers. . 2020.
24. Pharmacy ACo. Pharmacists needed to administer COVID-19 vaccine. 2020.
25. Brunswick GoN. Questions and answers for providers: Influenza vaccine delivery in the presence of COVID-19. 2020.
26. Government of Canada. Subsection 56(1) class exemption for patients, practitioners and pharmacists prescribing and providing controlled substances in Canada. October 1, 2020.
27. Government of Canada. Frequently asked questions: Subsection 56(1) class exemption for patients, practitioners and pharmacists prescribing and providing controlled substances in Canada during the coronavirus pandemic [updated April 21, 2021; cited July 22, 2021. Available from: <https://www.canada.ca/en/health-canada/services/health-concerns/controlled-substances-precursor-chemicals/policy-regulations/policy-documents/section-56-1-class-exemption-patients-pharmacists-practitioners-controlled-substances-covid-19-pandemic/frequently-asked-questions.html>].
28. Government of Canada. Prescription management by pharmacists with controlled substances under the Controlled Drugs and Substances Act and its regulations [updated April 1, 2021; cited July 21, 2021. Available from: [https://www.canada.ca/en/health-canada/services/health-concerns/controlled-substances-precursor-chemicals/policy-regulations/policy-documents/prescription\\_management\\_pharmacists\\_controlled\\_substances.html](https://www.canada.ca/en/health-canada/services/health-concerns/controlled-substances-precursor-chemicals/policy-regulations/policy-documents/prescription_management_pharmacists_controlled_substances.html)].
29. Government of Canada, Office of Controlled Substances. Requirements for chain of signatures in light of COVID-19. March 20, 2020.
30. Government of Canada, Office of Controlled Substances. COVID-19 – Update to requirements for post-consumer returns containing controlled substances. September 14, 2020.
31. Sears K, O'Brien-Pallas L, Stevens B, Murphy GT. The relationship between the nursing work environment and the occurrence of reported paediatric medication administration errors: a pan canadian study. J Pediatr Nurs. 2013;28(4):351-6.



## Appendix I: Search Strategy

The final searches were conducted on December 4, 2020

Database(s): Ovid MEDLINE(R), Ovid MEDLINE(R) Daily and Epub Ahead of Print, In-Process & Other Non-Indexed Citations - 1946 to Present

*Search Strategy:*

#	Searches	Results
1	covid*.mp.	76670
2	Pandemics/	43924
3	pandemic*.mp.	83452
4	2 or 3	83452
5	limit 4 to yr="2020 - 2021"	58953
6	1 or 5	79939
7	Pharmacies/	8054
8	pharmacy.mp.	65170
9	pharmacies.mp.	16941
10	Pharmacists/	17177
11	pharmacist*.mp.	38717
12	Pharmacy Technicians/	752
13	or/7-12	89674
14	exp Canada/	161041



15	canad*.mp.	177486
16	canada.ia,in,gc.	777685
17	alberta.mp.	13205
18	british columbia.mp.	14695
19	manitoba.mp.	5178
20	new brunswick.mp.	1544
21	(newfoundland and labrador).mp. [mp=title, abstract, original title, name of substance word, subject heading word, floating sub-heading word, keyword heading word, organism supplementary concept word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms]	1692
22	northwest territor*.mp.	729
23	nova scotia.mp.	3736
24	nunavut.mp.	637
25	ontario.mp.	43543
26	prince edward island.mp.	634
27	quebec.mp.	20516
28	saskatchewan.mp.	4037
29	yukon.mp.	718
30	or/14-29	914239
31	6 and 13 and 30	26



Database(s): **Embase Classic+Embase** 1947 to 2020 December 03

Search Strategy:

#	Searches	Results
1	Coronavirus infection/	12635
2	coronavirus.mp.	97148
3	covid*.mp.	76330
4	pandemic/	46290
5	pandemic*.mp.	76306
6	1 or 2 or 3 or 4 or 5	139208
7	limit 6 to yr="2020 - 2021"	84365
8	"pharmacy (shop)"/ or mail order pharmacy/ or online pharmacy/ or specialty pharmacy/	4545
9	pharmacy.mp.	139647
10	pharmacies.mp.	20834
11	pharmacist/ or clinical pharmacist/ or community pharmacist/	81107
12	pharmacist*.mp.	106346
13	pharmacy technician/	2164
14	or/8-13	199343
15	exp Canada/	197565
16	health canada/	144
17	canad*.mp.	303655



18	15 or 16 or 17	310993
19	7 and 14 and 18	15

Search ID#	Search Terms	Search Options	Last Run Via	Results
S14	S3 AND S10 AND S13	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - CINAHL	15
S13	S11 OR S12	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - CINAHL	128,972
S12	"canad**"	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - CINAHL	98,472
S11	(MH "Canada+")	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases	103,826



			Search Screen - Advanced Search Database - CINAHL	
S10	S4 OR S5 OR S6 OR S7 OR S8 OR S9	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - CINAHL	48,144
S9	(MH "Pharmacy Technicians")	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - CINAHL	902
S8	(MH "Pharmacist Attitudes")	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - CINAHL	1,171
S7	(MH "Pharmacists")	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search	15,918



			Database - CINAHL	
S6	"pharmacies"	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - CINAHL	8,172
S5	"pharmacy"	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - CINAHL	38,533
S4	(MH "Pharmacy, Retail")	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - CINAHL	7,026
S3	S1 OR S2	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - CINAHL	28,450



S2	covid*	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - CINAHL	28,450
S1	(MH "COVID-19")	Expanders - Apply related words; Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - CINAHL	10,818





## Appendix II: Information sources

Electronic databases (platform)	<ul style="list-style-type: none"><li>• MEDLINE (Ovid)</li><li>• EMBASE (Ovid)</li><li>• CINAHL (EBSCO)</li></ul>
Grey literature sources	<ul style="list-style-type: none"><li>• College of Pharmacists of British Columbia</li><li>• British Columbia Pharmacy Association</li><li>• Alberta College of Pharmacists</li><li>• Alberta Pharmacists Association</li><li>• Saskatchewan College of Pharmacy Professionals</li><li>• Pharmacists Association of Saskatchewan</li><li>• College of Pharmacists of Manitoba</li><li>• Pharmacists Manitoba (Professional Assn)</li><li>• Ontario College of Pharmacists</li><li>• Ontario Pharmacists Association</li><li>• Ordre des Pharmaciens du PQ</li><li>• Association québécoise des pharmaciens propriétaires</li><li>• New Brunswick College of Pharmacists</li><li>• New Brunswick Pharmacists' Association</li><li>• Pharmacists' Association of Newfoundland and Labrador</li><li>• Newfoundland &amp; Labrador Pharmacy Board</li><li>• Nova Scotia College of Pharmacists</li><li>• Pharmacy Association of Nova Scotia</li><li>• Prince Edward Island Pharmacists Association]</li><li>• Prince Edward Island College of Pharmacy</li><li>• Health Canada</li><li>• Government of Canada</li><li>• Canadian Agency for Drugs and Technologies in Health</li><li>• ISMP Canada</li><li>• National Association of Pharmacy Regulatory Authorities</li><li>• Canadian Pharmacists Association</li><li>• Corporate community pharmacy resources (e.g., <a href="https://corporate.shoppersdrugmart.ca">https://corporate.shoppersdrugmart.ca</a>)</li></ul>



## Appendix III: Data Extraction Templates

### Electronic Databases

<i>General Information</i>	
Study ID	
Title	
Lead Author	
Country in which the study was conducted	
Notes on origin country	
<i>Characteristics of Included Studies</i>	
Aim of study	
Study design	
Start date	
End date	
Study funding sources	
Possible conflicts of interest	
<i>Participants</i>	
Population description	
Inclusion criteria	
Exclusion criteria	
Method of recruitment	
Total number of participants	
<i>Results</i>	
Standard of practice regulatory changes	
Provincial pharmacists' association practice changes	
Government changes	

### Grey Literature

Organization Type	
Organization	
Document Type	
Topic	
Document	
Date	
URL	
Comments	
Expiry	



## Appendix IV: Characteristic of Included Studies

### Electronic Databases

Title	Lead Author	Year	Study Country	Aim of Study	Participants	Research Design	Findings
Resilience in the time of pandemic: The experience of community pharmacists during COVID-19	Austin, Z.	2021	Canada (Ontario)	The objective of this research was to characterize how community pharmacy in Ontario (Canada) responded to the COVID-19 pandemic of winter/spring 2020, in particular in understanding what factors may influence or predict resiliency of individual practitioners and their workplaces.	Community Pharmacists (21 total)	Qualitative research (Convenience and snowball sampling methods)	<p>Changes to Standard of Practice: Finding trustworthy sources of information was facilitated by computer skills and confidence (see (a) above), but beyond information, facts, or evidence, what pharmacists reported they needed was actual how-to guidance on managing rapidly evolving problems. Pharmacists working in large corporate settings noted that corporate employers appeared more pragmatic in the way they communicated with front-line employees, and the clarity, specificity and practical orientation of this guidance was in contrast to (and more helpful in enhancing resilience than) that provided by regulatory bodies (p. 1871).</p> <p>Changes by Provincial Pharmacists' Associations: Most participants in the study reported increasing reliance upon regulatory bodies and professional associations websites and emails as their primary source of information, but simultaneously noted that the way in which these organizations communicated was ambiguous and not focused on actual guidance but simply provision of information or links to other websites. Participants in this study also noted that being "sent" guidance was different than actually reading, understanding, internalizing, and applying it. Once again, the way in which guidance was communicated was seen as pivotally important to the way it was on-boarded by pharmacists: unreasonably theoretical or abstract ideals framed as "principles" which required pharmacists'</p>



Title	Lead Author	Year	Study Country	Aim of Study	Participants	Research Design	Findings
							<p>interpretation and application to their specific situation/context was seen as less readable and valuable than clear directives telling pharmacists how to behave, what to do, and what to say in specific situations. This style or mode of guidance facilitated early adoption by pharmacy staff and proved helpful in most cases in managing practical workplace issues contributing to occupational stress and burnout (p. 1871-72).</p> <p><b>Government Changes:</b> One of the most important findings of this study relates to roles, responsibilities, and opportunities for regulated pharmacy technicians. Ontario, Canada is one of a relatively few jurisdictions that has fully regulated and defined a scope of practice for pharmacy technicians. Practices that had hired regulated pharmacy technicians but had not actually established the most appropriate role for them found themselves in a highly advantageous position to pivot rapidly away from multitasking towards a differentiated labour practice model, thereby enhancing resilience and improving workplace conditions for all staff. (p. 1872).</p>
Pharmacy response to COVID-19: lessons learnt from Canada	Elbeddini, A.	2020	Canada	To identify and summarize opportunities for improvement in pharmacy as learnt from the pandemic's first wave.	n/a	Commentary	<p><b>Changes to Standard of Practice:</b> To tackle this issue from the community pharmacy perspective, the Ministry of Health recommended pharmacies to limit patient medication supplies to a maximum of 30 days except in special circumstances based on pharmacist judgement. This recommendation was established to prevent stockpiling and to guarantee all patients have access to their medications. Despite this call for pharmacies, it remained a "recommendation" and it is</p>



Title	Lead Author	Year	Study Country	Aim of Study	Participants	Research Design	Findings
							<p>unknown whether all pharmacies were compliant, especially due to push back from patients and the delayed enactment of ODB dispensing fee compensation (p. 4). Although most provinces called for the 30-day medication limit, many lifted the limitation at different times, with some provinces lifting the limit as early as April and May. During the pandemic pharmacists took on new responsibilities without prior training or preparation, which included conducting COVID-19 screening, handling suspected COVID-19 cases, and finally most recently conducting COVID-19 testing (p. 5).</p> <p>Changes by Provincial Pharmacists' Associations: [Info-graph] generated by CPhA that provide information for pharmacists on how to effectively manage workload as well as guide them to provincial resources (p. 3). Another issue that arose was the way information was being communicated. Although emails were regularly being sent out by regulatory bodies and national associations, and websites were regularly updated, there was a reported lack of awareness of such tools and claims of ambiguous communication methods. There is thus a need to raise awareness of the available information sources as well as employ appropriate communication tools that are easy for pharmacists to access (p. 6). Canadian community pharmacists reported that although they relied heavily on information provided by regulatory bodies and professional associations to provide patient care during the pandemic, they are dissatisfied by how such information was communicated and would</p>



Title	Lead Author	Year	Study Country	Aim of Study	Participants	Research Design	Findings
							<p>have liked more direction from their corporates and workplaces.</p> <p>Government Changes: [Pharmacists] have even been left out from Ontario's own list of front-line workers who were eligible for the 16-week pandemic pay from April 24, 2020 until August 13, 2020 (p. 1). As a result, pharmacists often found themselves providing direct patient care without adequate PPE, which threatened their own personal safety. Such critical short age has prompted Ontario Health to release, and regularly update, recommendations and guidelines about optimizing the supply of PPE during the pandemic (p. 2). Other forms of mental health support can also include hotlines that are accessible to HCPs 24/7 so they can chat and share their experiences, anonymous mental-health helplines and stress-management workshops where HCPs can get together to share and learn new stress-management strategies (p. 3).</p>
Role of Canadian pharmacists in managing drug shortage concerns amid the COVID-19 pandemic	Elbeddini, A.	2020	Canada	n/a	n/a	Brief / Case Report	<p>Changes to Standard of Practice: Pharmacists should advise patients against hoarding medications or stockpiling by adhering to a 30-day medication supply (p. 200).</p> <p>Changes by Provincial Pharmacists' Associations: On March 23, 2020, the Registered Nurses' Association of Ontario (RNAO), Ontario Medical Association (OMA) and Ontario Pharmacist Association (OPA), representing more than 110,000 health care providers, issued a joint statement addressing the use of a hydroxychloroquine / azithromycin combination for COVID-19 prophylaxis and treatment. In this statement,</p>



Title	Lead Author	Year	Study Country	Aim of Study	Participants	Research Design	Findings
							<p>the group collectively advised members to be diligent in our efforts to not let blind hope drive decisions and reminded providers of their roles as antibiotic stewards and safeguards of limited supplies of medication (p. 201).</p> <p>Government Changes: In response to the COVID-19 pandemic, Health Canada has deemed these drugs eligible to be included as part of the interim order under the Food and Drugs Act allowing Canada to import drugs (and other medical supplies) under exceptional circumstances (p. 199). Recently, Health Canada issued a temporary exception, pursuant to the Controlled Drug and Substances Act, allowing pharmacists to renew and adapt a prescription for a controlled substance, including narcotics, in addition to accepting a verbal order and transferring a prescription for a controlled drug. This is only a small portion of what pharmacists can contribute to mitigate health care resource depletion (p. 201)</p>
COVID-19: How did community pharmacies get through the first wave?	Gregory, P.	2020	Canada (Ontario)	The objective of this research was to describe the experience of community pharmacies during the early first phase (mid-March to mid-May 2020) of the COVID-19 pandemic in Ontario, Canada.	Pharmacists, regulated technicians, assistants, designated managers, owners, full-time, part-time and locum staff (39 total)	Qualitative research (combination of convenience, snowball, and purposive sampling methods)	<p>Changes to Standard of Practice: Increased workload with respect to dispensing as policies designed to prevent stockpiling or worsening short ages reduced allowable dispensing quantities (p. 247). Participants vividly described personal and professional fears associated with lack of information regarding the pandemic and in particular issues related to personal safety, lack of personal protective equipment (PPE) and lack of clear policies or practices to guide daily work (p. 247).</p> <p>Changes by Provincial Pharmacists' Associations: n/a</p> <p>Government Changes:</p>



Title	Lead Author	Year	Study Country	Aim of Study	Participants	Research Design	Findings
The legal extension of the role of pharmacists in light of the COVID-19 global pandemic	Merks, P.	2020	European countries, Canada, and the United States	The goal of this paper is to perform an overview of the legal possibilities of pharmacists during the pandemic period.	n/a	Systematic literature review	n/a Changes to Standard of Practice: n/a  Changes by Provincial Pharmacists' Associations: n/a  Government Changes: Authorisation of pharmacists to prescribe, sell, or provide controlled substances in limited circumstances, or transfer prescriptions for controlled substances (e.g. narcotics, controlled drugs, and benzodiazepines), including the following permissions for pharmacists:- to extend and renew prescriptions (for periods beyond the durations prescribed by law);- to transfer prescriptions to other pharmacists;- permit practitioners to verbally prescribe prescriptions with controlled substances;- to deliver controlled substances to patients (at their homes or an alternate location) (p. 3). Exemption from the obligation to provide information to the doctor aimed at "extending, adjusting, or replacing a medication", unless a doctor requests it (p. 3). The prescribing system may use e-mails to communicate prescribing directions to continue providing patient care (p. 3).

### Grey Literature: Theme 1 – Vaccines and Injections

Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Government	NB	Guidance Document	Vaccines	2020-2021 Seasonal influenza vaccine information for immunization providers	1-Aug-20	n/a
Government	NB	Guidance Document	Vaccines	Guidance for Influenza Vaccine Delivery in the Presence of COVID-19	10-Aug-20	n/a
Government	NB	Guidance Document	Vaccines	Immunization in Orange Phase   Immunization dans la phase orange	13-Oct-20	n/a





Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Government	ON	Policy (Update)	Vaccines	O. Reg. 107/96: CONTROLLED ACTS	13-Jan-21	n/a
Government	SK	Guidance Document	Professional Services	Pharmacist-Administered Injections: Considerations during COVID-19 Pandemic	23-Apr-20	n/a
Government	SK	Policy (New)	Vaccines	Saskatchewan Influenza Immunization Policy 2020-2021	1-Sep-20	n/a
Government	MB	Guidance Document	Vaccines	COVID-19 Vaccine: Information for Pharmacists - Form and Program Requirements	n/a	n/a
Government	MB	Guidance Document	Vaccines	COVID-19 Vaccine: Questions and Answers (for Pharmacies)	n/a	n/a
Professional Organization	CPhA	Guidance Document	Vaccines	Influenza 2020/2021: Suggested best practices for pharmacies	4-Dec-20	n/a
Professional Organization	OCP	Hyperlinks	Other	<b>Health Canada and Public Health Agency of Canada</b> Pfizer-BioNTech COVID-19 vaccine: Health Canada recommendations for people with serious allergies What you need to know about the COVID-19 vaccine for Canadians Recommendations on the use of COVID-19 vaccines COVID-19 guidance documents COVID-19 Vaccination Tool Kit for Health Care Providers	n/a	n/a
Professional Organization	OCP	Hyperlinks	Other	<b>Other Helpful Resources</b> 19 to Zero Vaccination Canadian Vaccination Evidence Resource and Exchange Centre (CANVax) COVID-19 Vaccine Questions and Answers for Healthcare Providers Canada's COVID-19 Immunization Plan: Saving Lives and Livelihoods (Canadian Society of Hospital Pharmacists) COVID-19 Vaccines (Centre for Effective Practice). Pharmacy5in5 – COVID-19 Vaccines Quiz Practitioners Guide to the Principles of COVID-19 Vaccine Communications (Vaccine Confidence Project) COVID-19 Health Resources (University of Waterloo School of Pharmacy) Commonly Asked Questions & Answers About Immunization for Your Patients (Immunize Canada)	n/a	n/a
Professional Organization	OCP	Hyperlinks	Other	<b>Webinars</b> The COVID-19 Pivot: Vaccine update for family physicians (College of Family Physicians of Canada, January 12) Recommendations of the National Advisory Committee on Immunization (NACI) on the use of the Pfizer-BioNTech and Moderna COVID-19 vaccines (Public Health Agency of Canada, December 18 and December 30) COVID-19 Vaccine Foundations for Health Care Providers (AMMI Canada, December 14)	n/a	n/a
Professional Organization	OCP	Guidance Document	Vaccines	Administration of COVID-19 Vaccine by Pharmacy Professionals	27-Jan-21	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Professional Organization	OCP	Other	Vaccines	Ontario Ministry of Health and the COVID-19 Vaccine Distribution Task Force Updates	n/a	n/a
Professional Organization	PANL	Position Statement	Vaccines	Role of NL Pharmacies and Pharmacists in COVID-19 Vaccinations	11-Jan-21	n/a
Professional Organization	CPhA	Guidance Document	Vaccines	PRACTICE RESOURCES: Suggested best practices for community pharmacy: Providing influenza vaccine during the COVID-19 Pandemic	4-Dec-20	n/a
Professional Organization	CPhA	Hyperlinks	Vaccines	PRACTICE RESOURCES: Vaccine Hesitancy	n/a	n/a
Professional Organization	CPhA	Guidance Document	Vaccines	DRUG THERAPY INFO: COVID-19: Disruption of immunization schedules during the pandemic. Is a delay a problem?	26-Mar-20	n/a
Professional Organization	CPhA	Guidance Document	Vaccines	ADVOCACY: COVID-19 Vaccine and pharmacy readiness	01-Dec-20	n/a
Professional Organization	BCPA	Position Statement	Vaccines	Notice To Members: Community Pharmacy And COVID-19 Vaccines	12-Jan-21	n/a
Regulatory Body	NBCP	Guidance Document	Medication Administration	COVID-19 & Administration of Injections	28-May-20	n/a
Regulatory Body	NBCP	Guidance Document	Medication Administration	COVID-19 & Administration of Injections	1-May-20	n/a
Regulatory Body	NBCP	Guidance Document	Vaccines	Questions and Answers for providers: Influenza Vaccine Delivery in the Presence of COVID-19	17-Sep-20	n/a
Regulatory Body	NBCP	Guidance Document	Vaccines	Post-vaccination Observation Time for Influenza Vaccinations (in COVID)	6-Oct-20	n/a
Regulatory Body	NBCP	Guidance Document	Vaccines	Preparing for Influenza Vaccinations 2020/2021	17-Sep-20	n/a
Regulatory Body	NLPB	Guidance Document	Medication Administration	Influenza vaccination considerations	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Medication Administration	Administering injections	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Vaccines	Pharmacy professionals' role in informing the public	21-Dec-20	n/a
Regulatory Body	NSCP	Hyperlinks	Vaccines	Association of Medical Microbiology and Infectious Disease Canada (AMMI) – COVID-19 Vaccine Foundations for Health Care Providers. (December 14, 2020)	n/a	n/a
Regulatory Body	NSCP	Hyperlinks	Vaccines	Recommendations of the National Advisory Committee on Immunization (NACI) on the use of the Pfizer-BioNTech COVID-19 Vaccine. (December 18, 2020)	n/a	n/a
Regulatory Body	NSCP	Hyperlinks	Vaccines	Recommendations of the National Advisory Committee on immunization (NACI) on the use of the Moderna COVID-19 Vaccine. (December 30, 2020)	n/a	n/a
Regulatory Body	NSCP	Hyperlinks	Vaccines	<u>GOVERNMENT OF CANADA</u> COVID-19 Vaccines Overview; COVID-19 Vaccine Rollout; COVID-19 Vaccines and Treatments Portal; Recommendations on the Use of COVID-19 Vaccines; Canada's COVID-19 Immunization Plan: Saving Lives and	n/a	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
				Livelihoods; Pfizer-BioNTech COVID-19 vaccine: What you should know; Moderna COVID-19 vaccine: What you should know; Vaccine Safety, Concerns and Possible Side Effects		
Regulatory Body	NSCP	Hyperlinks	Vaccines	<a href="#">GOVERNMENT OF NOVA SCOTIA; COVID-19 Vaccine Information</a>	n/a	n/a
Regulatory Body	NSCP	Hyperlinks	Vaccines	<a href="#">CENTRE FOR EFFECTIVE PRACTICE COVID-19 Vaccines</a>	n/a	n/a
Regulatory Body	NSCP	Hyperlinks	Vaccines	Moderna COVID-19 Vaccine Webinar – Dec 30 Upcoming Moderna Webinar – Dec 29	n/a	n/a
Regulatory Body	OCP	Hyperlinks	Vaccines	to CPhA - Influenza 2020/2021: Suggested best practices for pharmacies	n/a	n/a
Regulatory Body	OPQ	Guidance Document	Medication Administration	COVID-19 Mesures sanitaires applicables à la vaccination en pharmacie	24-Sep-20	n/a
Regulatory Body	CPBC	Position Statement	Vaccines	BC's COVID-19 Immunization Plan and Pharmacist's Injection Authority	29-Jan-21	n/a
Regulatory Body	ACP	Position Statement	Vaccines	Pharmacists needed to administer COVID-19 vaccine	23-Dec-20	n/a
Regulatory Body	CPM	Guidance Document	Professional Services	Guidance to Pharmacists: Administration of Injections During the COVID-19 Pandemic	3-Apr-20	n/a

## Grey Literature: Theme 2 – Medication Delivery

Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Government	Canada	Guidance Document	Prescribing	Chloroquine and hydroxychloroquine can have serious side effects. These drugs should be used only under the supervision of a physician.	18-Aug-20	n/a
Government	NL	Policy (Update)	Dispensing	Fee structure - 30 day supply	31-Mar-20	n/a
Government	NL	Policy (Update)	Professional Services	Process Update for Medication Reviews	14-May-20	n/a
Government	NL	Policy (Update)	Professional Services	Process Update for Medication Reviews	1-Jun-20	n/a
Government	NSHA	Policy (Update)	Prescribing	Restrictions on antiviral and hydroxychloroquin Rx.	17-Mar-20	Temporary, no date provided
Government	QC	Guidance Document	Professional Services	SRAS-CoV-2: Recommandations pour la levée des mesures d'isolement des travailleurs de la santé	17-Dec-20	n/a
Government	BC	Guidance Document	Prescribing	COVID-19 Information for Prescribers	n/a	n/a
Government	BC	Policy (Update)	Dispensing	M212: Pharmaceutical Services Act	9-Jul-20	n/a
Government	BC	Guidance Document	Dispensing	BC Pharmacare Newsletter: 20-013	7-Jul-20	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Government	BC	Guidance Document	Dispensing	BC Pharmacare Newsletter: 20-012	30-Jun-20	n/a
Government	BC	Guidance Document	Prescribing	BC Pharmacare Newsletter: 20-009	21-May-20	No expiry dates have been given other than "for the duration of the COVID-19" - applies to many cases/updates
Government	BC	Guidance Document	Dispensing	BC Pharmacare Newsletter: 20-008	1-May-20	n/a
Government	BC	Guidance Document	Professional Services	BC Pharmacare Newsletter: 20-007	17-Apr-20	n/a
Government	BC	Guidance Document	Professional Services	BC Pharmacare Newsletter: 20-006	1-Apr-20	October 1, 2020 (extending limited coverage drugs)
Government	BC	Guidance Document	Professional Services	BC Pharmacare Newsletter: 20-005	26-Mar-20	n/a
Government	BC	Guidance Document	Professional Services	Patient Care During States of Emergency and Evacuations	n/a	n/a
Government	BC	Policy (Update)	Prescribing	B.C. Reg. 113/2020; 20.3: Pharmaceutical Services Act - Provider Regulation	29-May-20	n/a
Government	AB	Policy (Update)	Dispensing	Relaxing the 30-day limit for prescription drugs	10-Jun-20	15-Jun-20
Government	SK	Policy (Update)	Dispensing	Deputy Minister of Health Memo	18-Mar-20	n/a
Government	SK	Policy (New)	Dispensing	Province Lifts Limit On Filling Of Prescriptions	19-May-20	n/a
Government	SK	Policy (New)	Dispensing	Deputy Minister of Health Memo	19-May-20	n/a
Government	SK	Policy (New)	Dispensing	PRESCRIPTION QUANTITIES RESTRICTIONS EFFECTIVE IMMEDIATELY	18-Mar-20	n/a
Government	MB	Position Statement	Dispensing	Re: Changes to Exception Drug Status (EDS) Expiry Dates	20-Mar-20	n/a
Government	MB	Position Statement	Prescribing	COVID-19 Provincial Guidance on Management for Pharmacists	16-Mar-20	n/a
Government	MB	Position Statement	Dispensing	Dispensing limit order	19-Mar-20	n/a
Government	Health Canada	Position Statement	Dispensing	News Release: Canada announces new measures to prevent drug shortages	28-Nov-20	



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Government	Health Canada	Guidance Document	Dispensing	Interim Order Respecting Drug Shortages (Safeguarding the Drug Supply): Background	28-Nov-20	
Government	Health Canada	Policy (New)	Dispensing	Interim Order Respecting Drug Shortages (Safeguarding the Drug Supply)	27-Nov-20	
Government	Health Canada	Position Statement	Dispensing	Interim Order Respecting Drug Shortages (Safeguarding the Drug Supply): Notice	27-Nov-20	
Government	Health Canada	Guidance Document	Dispensing	Interim Order Respecting Drug Shortages (Safeguarding the Drug Supply): Guidance document	27-Nov-20	
Pharmacy (Corporate)	PharmaChoice	Guidance Document	Dispensing	30-Day Prescription Supply	No Date	
Pharmacy (Corporate)	RxHealthMed	Guidance Document	Dispensing	30-Day Prescription Supply	No Date	
Professional Organization	CPhA	Guidance Document	Dispensing	H2-receptor antagonist (H2RA) Shortages (CPhA document)	25-May-20	
Professional Organization	CPhA	Guidance Document	Prescribing	Drug therapy info		
Professional Organization	CPhA	Guidance Document	Prescribing	Prevention and treatment of COVID-19 with chloroquine or hydroxychloroquine	13-May-20	
Professional Organization	OPA	Guidance Document	Prescribing	Statement on the Use of Hydroxychloroquine and Azithromycin for COVID-19 Prophylaxis	1-Mar-20	
Professional Organization	OPA	Guidance Document	Dispensing	FAQ: Salbutamol Inhalers During COVID-19	8-Nov-20	n/a
Professional Organization	OPA	Guidance Document	Professional Services	FAQ: Ontario Drug Benefit (ODB) Program changes during COVID-19	11-Jul-20	n/a
Professional Organization	OPA	Guidance Document	Professional Services	Virtual care	11-Aug-20	n/a
Professional Organization	OPA	Guidance Document	Professional Services	Virtual care guide	11-Aug-20	n/a
Professional Organization	OPA	Guidance Document	Professional Services	A guide to the provision of pharmacy services in long-term care homes during the COVID-19 Pandemic	29-May-20	n/a
Professional Organization	PANL	Guidance Document	Dispensing	Memo to provincial government	22-Mar-20	n/a
Professional Organization	PANL	Policy (Update)	Dispensing	Press release - 30 day supply	25-Mar-20	n/a
Professional Organization	PANL	Guidance Document	Dispensing	Q&A primer for members re 30 day supply	15-Apr-20	n/a
Professional Organization	PANL	Signage	Dispensing	30 Day supply	n/a	n/a
Professional Organization	PANL	Signage	Dispensing	30-day Supply Prescription Bag Notes (NLPDP 65Plus Clients) (Delivery Version)	16-Apr-20	n/a
Professional Organization	PANL	Signage	Dispensing	30-day Supply Prescription Bag Notes (NLPDP 65Plus Clients) (Non-Delivery Version)	16-Apr-20	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Professional Organization	PANL	Guidance Document	Prescribing	Correspondence to NLMA and CRNLL re: Faxed Prescriptions	15-Jun-20	n/a
Professional Organization	PANL	Guidance Document	Professional Services	Medication Reviews May Be Conducted by Telephone	1-Jun-20	n/a
Professional Organization	PEIPA	Guidance Document	Professional Services	Links to external organizations: Canadian Pharmacists Association World Health Organization PEI Health and Wellness PEI College of Pharmacy	n/a	n/a
Professional Organization	CPhA	Guidance Document	Dispensing	DRUG THERAPY INFO: H2-receptor antagonist (H2RA) Shortages (CPhA document)	25-May-20	n/a
Professional Organization	CPhA	Guidance Document	Prescribing	DRUG THERAPY INFO: Prevention and treatment of COVID-19 with chloroquine or hydroxychloroquine	13-May-20	n/a
Professional Organization	CPhA	Guidance Document	Prescribing	DRUG THERAPY INFO:	n/a	n/a
Professional Organization	CPhA	Guidance Document	Prescribing	DRUG THERAPY INFO: COVID-19 in patients taking disease-modifying therapy for the management of multiple sclerosis	10-Jul-20	n/a
Professional Organization	CPhA	Guidance Document	Prescribing	DRUG THERAPY INFO: Treatment of COVID-19 with colchicine	29-Jan-21	n/a
Professional Organization	CPhA	Guidance Document	Prescribing	DRUG THERAPY INFO: Treatment of COVID-19 with remdesivir	20-Nov-20	n/a
Professional Organization	CPhA	Guidance Document	Prescribing	DRUG THERAPY INFO: COVID-19	25-Jun-20	n/a
Professional Organization	CPhA	Guidance Document	Prescribing	DRUG THERAPY INFO: Treatment of COVID-19 with antiretroviral medications	26-May-20	n/a
Professional Organization	CPhA	Guidance Document	Prescribing	DRUG THERAPY INFO: COVID-19 in patients taking DMARDs or other antirheumatic medications	23-May-20	n/a
Professional Organization	CPhA	Guidance Document	Dispensing	DRUG THERAPY INFO: Dipyridamole/ASA Shortage	20-May-20	n/a
Professional Organization	CPhA	Guidance Document	Prescribing	DRUG THERAPY INFO: Therapeutic alternatives to amoxicillin for common pediatric conditions	29-Apr-20	n/a
Professional Organization	CPhA	Guidance Document	Dispensing	DRUG THERAPY INFO: Inhaled salbutamol shortage	07-Apr-20	n/a
Professional Organization	CPhA	Guidance Document	Dispensing	DRUG THERAPY INFO: Fluticasone propionate pressurized metered dose inhaler shortage	02-Apr-20	n/a
Professional Organization	CPhA	Guidance Document	Prescribing	DRUG THERAPY INFO: Use of NSAIDs in patients with COVID-19: what is the evidence?	17-Mar-20	n/a
Professional Organization	CPhA	Guidance Document	Prescribing	DRUG THERAPY INFO: Canadian Cardiovascular Society and the Canadian Heart Failure Society guidance on cardiovascular medications: ACEi/ARB/ARNi, low-dose ASA and NSAIDs	n/a	n/a





Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Professional Organization	CPhA	Guidance Document	Prescribing	AWARENESS: Pharmacists' scope of practice during COVID-19: Prescribing and continuity of care	11-Jun-20	n/a
Professional Organization	CPhA	Guidance Document	Dispensing	AWARENESS: Video - 30 day supply	n/a	n/a
Professional Organization	CPhA	Guidance Document	Prescribing	AWARENESS: Drug myths and COVID-19	n/a	n/a
Professional Organization	BCPA	Position Statement	Dispensing	BCPhA Statement: Drug Supply Slowly Recovering	27-Apr-20	n/a
Professional Organization	BCPA	Position Statement	Dispensing	BCPhA Statement: Addressing 30-Day Supply Of Medications	8-Apr-20	n/a
Professional Organization	BCPA	Position Statement	Dispensing	BC Pharmacists Message To Patients On Medication Supplies During COVID-19 Outbreak	17-Mar-20	n/a
Professional Organization	PM	Guidance Document	Dispensing	Pharmacists Manitoba Member Backgrounder on Measures to Prevent Medication Shortages	16-Apr-20	n/a
Professional Organization	PM	Signage	Dispensing	Pharmacists Providing Maximum One Month Medication Supply	n/a	n/a
Regulatory Body	NBCP	Guidance Document	Dispensing	H2-receptor antagonist (H2RA) Shortages (CPhA document)	25-May-20	n/a
Regulatory Body	NBCP	Guidance Document	Dispensing	Therapeutic Substitution in Times of Medication Shortages	27-Jan-21	n/a
Regulatory Body	NBCP	Guidance Document	Dispensing	NBCP Guidance: COVID-19 & Dispensing appropriately (antimalarials etc)	23-Mar-20	n/a
Regulatory Body	NBCP	Policy (New)	Dispensing	NB College of Pharmacists Directive: 30-day Supply of Medication	3-Apr-20	n/a
Regulatory Body	NBCP	Policy (Update)	Dispensing	Return of Medication to Inventory for Use	29-May-20	n/a
Regulatory Body	NBCP	Policy (Update)	Dispensing	Change to 30 Days Supply Measure	12-May-20	n/a
Regulatory Body	NBCP	Guidance Document	Prescribing	COVID-19 & Delivery Requirements	1-May-20	n/a
Regulatory Body	NBCP	Guidance Document	Professional Services	Virtual Care During an Emergency	20-Oct-20	n/a
Regulatory Body	NBCP	Guidance Document	Professional Services	Virtual Care Checklist	20-Oct-20	n/a
Regulatory Body	NLPB	Guidance Document	Dispensing	Ensuring adequate access to medication	n/a	n/a
Regulatory Body	NLPB	Policy (Update)	Professional Services	Extensions to implementation schedules for sterile and non-sterile compounding standards	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Prescribing	Electronic/alternative prescribing methods	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Prescribing	Prescribing/dispensing medications for treatment of COVID-19	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Dispensing	Ensuring adequate access to medication	n/a	n/a





Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Regulatory Body	NLPB	Guidance Document	Professional Services	Patient consultation	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Professional Services	COVID-19 Guidance For The Public	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Professional Services	Provision of services to personal care homes (PCHs)	n/a	n/a
Regulatory Body	NSCP	Signage	Professional Services	Temporary pharmacy closure with Rx pickup information	1-Apr-20	n/a
Regulatory Body	NSCP	Policy (Update)	Dispensing	Professional Notice - Dispensed Days Supply: Prescribing in a Public Health Emergency/Crisis	18-Mar-20	12-May-20
Regulatory Body	NSCP	Policy (Update)	Dispensing	Standards of Practice: Medical Assistance in Dying	28-Mar-20	Permanent
Regulatory Body	NSCP	Policy (Update)	Dispensing	Return of Medication	28-Mar-20	Permanent
Regulatory Body	NSCP	Policy (Update)	Prescribing	Amendments to Drug Administration Standards	1-Apr-20	n/a
Regulatory Body	NSCP	Policy (Update)	Dispensing	Temporary Suspension of Drug Administration Notification During COVID-19	18-Apr-20	Temporary, no date given
Regulatory Body	NSCP	Policy (Update)	Prescribing	Standards of Practice – Drug Administration	1-Oct-20	Permanent
Regulatory Body	NSCP	Policy (Update)	Professional Services	Standards of Practice - Testing	1-Oct-20	Permanent
Regulatory Body	NSCP	Policy (New)	Professional Services	Pharmacy Practice Guidelines for Virtual Pharmacy During COVID-19	1-Apr-20	n/a
Regulatory Body	NSCP	Policy (Update)	Dispensing	Return of Medication to Inventory for Use	29-May-20	Temporary
Regulatory Body	NSCP	Policy (Update)	Prescribing	Pharmacies in Nova Scotia Can Now Provide Prescriptions Based on Availability from Manufacturers	n/a	n/a
Regulatory Body	NSCP	Policy (Update)	Prescribing	Standards of Practice: Prescribing Drugs	1-Apr-20	Temporary, no date provided
Regulatory Body	OCP	Policy (Update)	Dispensing	Centralized Prescription Processing (Central Fill)	15-Apr-20	n/a
Regulatory Body	OCP	Guidance Document	Dispensing	Medication Supplies - Dispensing Limits	n/a	15-Jun-20
Regulatory Body	OCP	Guidance Document	Prescribing	Emailed Prescriptions - Temporary Method for Transmitting Prescriptions via Unsecure Email During COVID-19	26-Mar-20	n/a
Regulatory Body	OCP	Guidance Document	Prescribing	Faxed prescriptions	n/a	n/a
Regulatory Body	OCP	Guidance Document	Professional Services	Emergency care	n/a	n/a
Regulatory Body	OCP	Guidance Document	Professional Services	to OPA - Virtual Care	n/a	n/a
Regulatory Body	PEICP	Guidance Document	Prescribing	Joint Statement PEICP CPSPEI CNPEI - Unproven Therapies for COVID19	31-Mar-20	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Regulatory Body	PEICP	Policy (Update)	Dispensing	Days Supply Limits	20-May-22	n/a
Regulatory Body	CPBC	Position Statement	Prescribing	Joint Statement on the Unproven Therapies for COVID-19	25-Mar-20	n/a
Regulatory Body	CPBC	Guidance Document	Dispensing	BC's COVID-19 Response - Pharmacists to Provide Prescription Refills and Emergency Supplies of Medication as Needed	18-Mar-20	n/a
Regulatory Body	CPBC	Policy (Update)	Dispensing	Medical Assistance in Dying (MAiD)	7-May-20	n/a
Regulatory Body	CPBC	Policy (Update)	Dispensing	Temporary Exemption for Dispensing Drugs for the Purposes of Medical Assistance in Dying (MAiD) Now in Effect	7-May-20	n/a
Regulatory Body	CPBC	Policy (Update)	Dispensing	Amendments to Orientation Guide – Medication Management (Adapting a Prescription)	7-May-20	n/a
Regulatory Body	CPBC	Policy (Update)	Dispensing	Amendments to PPP-58: Medication Management (Adapting a Prescription)	7-May-20	n/a
Regulatory Body	CPBC	Policy (Update)	Prescribing	Section 19(6.1): Pharmacy Operations and Drug Scheduling Act	7-May-20	n/a
Regulatory Body	ACP	Policy (Update)	Professional Services	COVID-19 Guidance - Delivery of drugs to assisted living facilities	27-Mar-20	n/a
Regulatory Body	ACP	Guidance Document	Professional Services	COVID-19 Guidance – Providing virtual care to patients	1-Jun-20	n/a
Regulatory Body	ACP	Position Statement	Dispensing	Joint message from ACP and CPSA regarding inappropriate dispensing and prescribing of antivirals, antibiotics, and antimalarials during the pandemic	n/a	n/a
Regulatory Body	SCPP	Policy (Update)	Dispensing	Prescription Requests During COVID-19	n/a	n/a
Regulatory Body	SCPP	Position Statement	Prescribing	A Joint Message to Saskatchewan's Doctors, Registered Nurses/Nurse Practitioners and Pharmacists	25-Mar-20	n/a
Regulatory Body	SCPP	Policy (New)	Prescribing	Emergency Exemptions for Prescribing Authority	30-Apr-20	n/a
Regulatory Body	SCPP	Guidance Document	Prescribing	Prescriptive Authority — Pharmacist	19-Jun-20	n/a
Regulatory Body	CPM	Guidance Document	Dispensing	Guidance to Pharmacy Professionals: Emergency Planning and Central Fill Pharmacy Services during the COVID-19 Pandemic	9-Apr-20	n/a
Regulatory Body	CPM	Position Statement	Prescribing	Prescribing and Dispensing of Drugs to Treat COVID-19	n/a	n/a
Regulatory Body	CPM	Guidance Document	Dispensing	Guidance for Pharmacy Professionals: Delivery of Medications During the COVID-19 Pandemic	1-Apr-20	n/a
Regulatory Body	NSCP	Guidance Document	Prescribing	Joint Statement NSCP CPSNS NSCN - Unproven Therapies for COVID19	31-Mar-20	n/a



## Grey Literature: Theme 3 – Clinical Management

Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Government	NB	Guidance Document	Other	COVID-19 Guidance for Community Pharmacies	8-Sep-20	23-Apr-20
Government	NL	Guidance Document	Infection Control	List of PPE distributors in the province of NL	n/a	n/a
Government	NL	Guidance Document	Infection Control	List of PPE distributors in the Atlantic Provinces	n/a	n/a
Government	NL	Signage	Infection Control	How to wash your hands	n/a	n/a
Government	NL	Signage	Infection Control	Remember to wash your hands	n/a	n/a
Government	NL	Policy (Update)	Other	Essential Worker Child Care Service Program	14-Apr-20	n/a
Government	NS	Policy (Update)	Closures	Reopening Guidance for Healthcare Settings - Updated	27-May-20	n/a
Government	NS	Signage	Infection Control	How to wear a mask	1-Aug-20	n/a
Government	NS	Policy (Update)	Staffing in Emergency	New Pharmacist Licensure	15-Apr-20	19-Jun-20
Government	NS	Policy (Update)	Staffing in Emergency	New Pharmacist Licensure	20-Jun-20	Temporary, no date given
Government	ON	Guidance Document	Other	COVID-19 Guidance: Community Pharmacies	19-Jun-20	n/a
Government	ON	Guidance Document	Other	COVID-19 quick reference public health guidance on testing and clearance	7-Mar-21	n/a
Government	PE	Guidance Document	Other	Sharing of Provincial government document: PEI Department of Health and Wellness Novel Coronavirus (COVID-19) Guidance for Community Pharmacies	20-Mar-20	n/a
Government	BC	Hyperlinks	Other	COVID-19 Information for Pharmacies	n/a	n/a
Government	BC	Guidance Document	Other	BC Pharmacare Newsletter: 20-011	11-Jun-20	n/a
Government	BC	Guidance Document	Other	BC Pharmacare Newsletter: 20-004	18-Mar-20	n/a
Government	BC	Guidance Document	Other	BC Pharmacare Newsletter: 20-003	13-Mar-20	n/a
Government	BC	Guidance Document	Other	COVID-19 Guidance for Community and Hospital Pharmacies	28-Mar-20	n/a
Government	SK	Guidance Document	Other	Community Pharmacies and COVID -19	9-Apr-20	n/a
Pharmacy (Corporate)	ABCPQ	Guidance Document	Closures	COVID-19 Plan de contingence et fermeture temporaire d'une pharmacie	10-Apr-20	n/a
Pharmacy (Corporate)	ABCPQ	Signage	Infection Control	Masks mandatory	13-Aug-20	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Pharmacy (Corporate)	Costco	Other	Infection Control	COVID-19 Safety Plan (British Columbia)	18-Nov-20	n/a
Pharmacy (Corporate)	Guardian and IDA	Other	Professional Services	Asymptomatic COVID-19 Testing in Pharmacies Across Alberta and Ontario	n/a	n/a
Pharmacy (Corporate)	Guardian and IDA	Other	Infection Control	Our Protective Measures in Store	n/a	n/a
Pharmacy (Corporate)	Jean Coutu	Other	Professional Services	COVID-19 Testing for Asymptomatic Persons	n/a	n/a
Pharmacy (Corporate)	Loblaw Companies Limited	Other	Professional Services	Pharmacies Help COVID-19 Response with Convenient, Community-Level Access to Asymptomatic Testing	21-Aug-20	n/a
Pharmacy (Corporate)	London Drugs	Other	Professional Services	COVID-19 Testing Clinics in Alberta	n/a	n/a
Pharmacy (Corporate)	London Drugs	Guidance Document	Infection Control	COVID-19 Safety Measures	11-May-20	n/a
Pharmacy (Corporate)	London Drugs	Guidance Document	Infection Control	COVID-19 Safety Measures	23-Dec-20	n/a
Pharmacy (Corporate)	McKesson Canada	Other	Professional Services	Rexall®, IDA®, Guardian®, Remedy's Rx® and The Medicine Shoppe® to Provide Safe and Convenient Access to COVID-19 Testing in Select Locations Across Ontario	23-Sep-20	n/a
Pharmacy (Corporate)	PharmaChoice	Other	Infection Control	What We Are Doing	n/a	n/a
Pharmacy (Corporate)	Proxim	Other	Infection Control	Our Protective Measures in Store	n/a	n/a
Pharmacy (Corporate)	Remedy'sRx	Other	Professional Services	Asymptomatic COVID-19 Testing in Pharmacies Across Alberta and Ontario	n/a	n/a
Pharmacy (Corporate)	Remedy'sRx	Other	Infection Control	Our Protective Measures in Store	n/a	n/a
Pharmacy (Corporate)	Rexall	Other	Professional Services	COVID-19 Testing	n/a	n/a
Pharmacy (Corporate)	Rexall	Guidance Document	Infection Control	COVID-19 Safety Plan	5-Aug-20	n/a
Pharmacy (Corporate)	RxHealthMed	Other	Infection Control	What We Are Doing	n/a	n/a
Pharmacy (Corporate)	Shoppers Drug Mart	Other	Professional Services	International Outbound Travel COVID-19 Testing	n/a	n/a
Pharmacy (Corporate)	Shoppers Drug Mart	Other	Professional Services	International Outbound Travel COVID-19 Testing	n/a	n/a
Pharmacy (Corporate)	Shoppers Drug Mart	Other	Professional Services	International Outbound Travel COVID-19 Testing	n/a	n/a
Pharmacy (Corporate)	Shoppers Drug Mart	Other	Professional Services	International Inbound Travel COVID-19 Testing	n/a	n/a
Pharmacy (Corporate)	Shoppers Drug Mart	Other	Professional Services	Public Asymptomatic COVID-19 Testing	n/a	n/a
Pharmacy (Corporate)	Shoppers Drug Mart	Other	Professional Services	COVID-19 Testing is Now Available at Select Shoppers Drug Mart Locations	n/a	n/a
Pharmacy (Corporate)	Sobeys	Other	Infection Control	Sobeys Inc. Pharmacy	n/a	n/a
Pharmacy (Corporate)	The Medicine Shoppe	Other	Professional Services	Asymptomatic COVID-19 Testing in Pharmacies Across Alberta and Ontario	n/a	n/a
Pharmacy (Corporate)	The Medicine Shoppe	Other	Infection Control	Our Protective Measures in Store	n/a	n/a
Pharmacy (Corporate)	Uniprix	Other	Infection Control	Our Protective Measures in Store	n/a	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Pharmacy (Corporate)	Walmart	Other	Professional Services	Asymptomatic COVID-19 Testing	n/a	n/a
Professional Organization	AQPP	Guidance Document	Closures	COVID-19 Plan de contingence et fermeture temporaire d'une pharmacie	11-Apr-20	n/a
Professional Organization	AQPP	Signage	Infection Control	Masks mandatory	12-Aug-20	n/a
Professional Organization	AQPP	Other	Other	COVID Landing Page	n/a	n/a
Professional Organization	CPhA	Guidance Document	Infection Control	PERSONAL PROTECTIVE EQUIPMENT (PPE): Suggested best practices for pharmacies during the COVID-19 Pandemic	n/a	n/a
Professional Organization	CPhA	Guidance Document	Other	Staffing and business considerations if a pharmacy team member becomes ill	16-Apr-20	n/a
Professional Organization	CPhA	Other	Other	Landing Page COVID-19: Information for Pharmacists	n/a	n/a
Professional Organization	CPhA	Guidance Document	Other	Practice resources	n/a	n/a
Professional Organization	OPA	Guidance Document	Infection Control	OPA's Personal Protective Equipment (PPE) Partners	n/a	n/a
Professional Organization	OPA	Guidance Document	Other	Pharmacy staff affected from COVID-19 - Return to work guidance	7-Aug-20	n/a
Professional Organization	OPA	Hyperlinks	Other	Staffing and business considerations if a pharmacy team member becomes ill	16-Apr-20	n/a
Professional Organization	OPA	Guidance Document	Other	A pharmacist's guide to pandemic preparedness	22-Jun-20	n/a
Professional Organization	PANL	Other	Infection Control	Letter to health minister lobbying for recognition of community pharmacists as a priority group for PPE	15-Apr-20	n/a
Professional Organization	PANL	Signage	Infection Control	Masks mandatory	24-Apr-20	n/a
Professional Organization	PANL	Other	Other	Access to PPE, COVID testing, childcare	27-Mar-20	n/a
Professional Organization	PANL	Other	Other	Public Awareness Campaign - Audio of PSA for community pharmacists	4-Apr-20	n/a
Professional Organization	PANL	Signage	Other	Public Awareness Campaign - Sign - "In this together"	4-Apr-20	n/a
Professional Organization	PANL	Other	Other	COVID Landing Page (most updates are provided on this page, without link to a separate document)	n/a	n/a
Professional Organization	PANS	Signage	Infection Control	Stop - COVID-19 Screening	1-Apr-20	n/a
Professional Organization	PANS	Social Media	Staffing in Emergency	NS Rx Connect Pharmacy Facebook Group (Joint effort with NSCP)	n/a	n/a
Professional Organization	CPhA	Guidance Document	Infection Control	PRACTICE RESOURCES: Personal protective equipment (PPE): Suggested best practices for pharmacies during the COVID-19 Pandemic	n/a	n/a
Professional Organization	CPhA	Guidance Document	Other	PRACTICE RESOURCES: Staffing and business considerations if a pharmacy team member becomes ill	16-Apr-20	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Professional Organization	CPhA	Other	Other	Landing Page COVID-19: Information for Pharmacists	n/a	n/a
Professional Organization	CPhA	Guidance Document	Other	PRACTICE RESOURCES:	n/a	n/a
Professional Organization	CPhA	Guidance Document	Other	PRACTICE RESOURCES: Protecting the frontline: COVID day-to-day questions	n/a	n/a
Professional Organization	CPhA	Other	Other	PRACTICE RESOURCES: Webinar recordings	n/a	n/a
Professional Organization	CPhA	Guidance Document	Other	PRACTICE RESOURCES: Supporting pharmacists' mental health and wellbeing during COVID-19	01-May-20	n/a
Professional Organization	CPhA	Signage	Infection Control	AWARENESS: Please wear a mask/facial covering when entering the pharmacy	n/a	n/a
Professional Organization	CPhA	Signage	Infection Control	AWARENESS: Screening	n/a	n/a
Professional Organization	CPhA	Signage	Infection Control	AWARENESS: Top tips to prevent the spread of viruses	n/a	n/a
Professional Organization	CPhA	Signage	Patient Information	AWARENESS: COVID-19 - When to seek help	n/a	n/a
Professional Organization	CPhA	Signage	Patient Information	AWARENESS: Managing COVID at home	n/a	n/a
Professional Organization	CPhA	Guidance Document	Professional Services	AWARENESS: Pharmacy services implemented since COVID-19	29-Jun-20	n/a
Professional Organization	CPhA	Signage	Infection Control	AWARENESS: Graphics Need to visit the pharmacy?	n/a	n/a
Professional Organization	CPhA	Other	Other	ADVOCACY: Remarks to the Standing Senate Committee on Social Affairs, Science and Technology Study on the government's response to the COVID-19 pandemic	01-Dec-20	n/a
Professional Organization	CPhA	Other	Other	ADVOCACY: National survey of community pharmacists and practice challenges during COVID-19	21-Apr-20	n/a
Professional Organization	CPhA	Other	Infection Control	ADVOCACY: Open letter to the Government of Canada Re: Access to Personal Protective Equipment (PPE) for Pharmacy Professionals During the COVID-19 Pandemic	18-Mar-20	n/a
Professional Organization	CPhA	Hyperlinks	Other	<b>Public Health Agency of Canada</b> General overview For health professionals Symptoms and treatment Travel advice Community-based measures to mitigate the spread of coronavirus disease (COVID-19) in Canada Risk-informed decision making for mass gatherings during COVID-19 global outbreak <b>World Health Organization</b> Coronavirus disease (COVID-19) outbreak <b>International Pharmaceutical Federation</b> Information for pharmacists and the pharmacy workforce	n/a	n/a
Professional Organization	BCPA	Guidance Document	Infection Control	The Business Of Pharmacy – Post Pandemic	2-Nov-20	n/a





Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Professional Organization	BCPA	Guidance Document	Infection Control	Reducing Exposure To COVID-19 In The Pharmacy	19-Jun-20	n/a
Professional Organization	BCPA	Consult Services	Other	BCPhA Second Town Hall On COVID-19	17-Jun-20	n/a
Professional Organization	BCPA	Other	Other	Endnote: COVID-19 Timeline Of BCPhA Activities	15-May-20	n/a
Professional Organization	BCPA	Guidance Document	Other	A Global Pandemic: How Pharmacists Have Responded To The COVID-19 Public Health Crisis In B.C.	15-May-20	n/a
Professional Organization	BCPA	Guidance Document	Professional Services	March 27 COVID-19 Update	27-Mar-20	n/a
Professional Organization	BCPA	Guidance Document	Professional Services	March 25 COVID-19 Update	25-Mar-20	n/a
Professional Organization	BCPA	Guidance Document	Professional Services	COVID-19: Guidance, Prevention and Control Strategies	24-Mar-20	n/a
Professional Organization	BCPA	Signage	Infection Control	COVID-19 SIGNAGE - STOP AND CALL [ENGLISH]	18-Mar-20	n/a
Professional Organization	BCPA	Signage	Infection Control	COVID-19 PATIENT POSTER [ENGLISH]	13-Mar-20	n/a
Professional Organization	BCPA	Signage	Infection Control	COVID-19 PATIENT POSTER [ENGLISH/CHINESE SIMPLIFIED]	18-Mar-20	n/a
Professional Organization	BCPA	Signage	Infection Control	COVID-19 PATIENT POSTER [ENGLISH/PUNJABI]	18-Mar-20	n/a
Professional Organization	BCPA	Signage	Infection Control	COVID-19 PATIENT POSTER [FARSI]	17-Mar-20	n/a
Professional Organization	BCPA	Signage	Infection Control	SUSPECTED COVID-19 CASES: STEPS TO TAKE IN THE PHARMACY	20-Mar-20	n/a
Professional Organization	BCPA	Signage	Infection Control	COVID-19 PATIENT HANDOUT - YOUR PHARMACIST CAN HELP [ENGLISH]	17-Mar-20	n/a
Professional Organization	BCPA	Hyperlinks	Other	COVID-19 (Coronavirus): Resources For Pharmacists	n/a	n/a
Professional Organization	APA	Position Statement	Infection Control	Pharmacy-based Asymptomatic COVID-19 Testing Program	n/a	n/a
Professional Organization	APA	Other	Other	COVID-19 (Novel Coronavirus)	n/a	n/a
Professional Organization	APA	Guidance Document	Other	ALBERTA PHARMACISTS LEADERS ON THE FRONTLINES OF A PANDEMIC	25-Aug-20	n/a
Professional Organization	PASK	Hyperlinks	Other	COVID-19 Resources	n/a	n/a
Professional Organization	PASK	Signage	Infection Control	10 Truths about COVID-19	n/a	n/a
Professional Organization	PASK	Guidance Document	Infection Control	Managing COVID-19 Exposures and Proper PPE Usage in Community Pharmacy	n/a	n/a
Professional Organization	PM	Hyperlinks	Other	COVID-19 Key Messages and Resources for Pharmacists Manitoba Members	n/a	n/a





Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Professional Organization	PM	Guidance Document	Other	COVID-19: Guidance, Prevention and Control Strategies	30-Mar-20	n/a
Professional Organization	PM	Guidance Document	Other	COVID-19 Pandemic A Pharmacist's Guide to Pandemic Preparedness	25-Mar-20	n/a
Professional Organization	PM	Signage	Infection Control	COVID-19 Pharmacy Cleaning Guidelines	n/a	n/a
Professional Organization	PM	Guidance Document	Staffing in Emergency	Community Pharmacy Staff Affected from COVID-19	4-Apr-20	n/a
Professional Organization	PM	Guidance Document	Infection Control	Potential Solutions for Physical Distancing	n/a	n/a
Professional Organization	PM	Signage	Infection Control	Need to Visit the Pharmacy? Call your pharmacist first	n/a	n/a
Professional Organization	PM	Signage	Infection Control	Please do not enter...	n/a	n/a
Professional Organization	PM	Signage	Infection Control		n/a	n/a
Professional Organization	PM	Signage	Infection Control		n/a	n/a
Professional Organization	PM	Other	Staffing in Emergency	List of Relief Pharmacists	n/a	n/a
Professional Organization	PM	Other	Staffing in Emergency	PHARMACY TECHNICIANS AND PHARMACY ASSISTANTS AVAILABLE	n/a	n/a
Professional Organization	PM	Other	Staffing in Emergency	PHARMACY STUDENTS AVAILABLE FOR RELIEF	n/a	n/a
Regulatory Body	NBCP	Guidance Document	Closures	COVID-19 Notification of Temporary Pharmacy Closure Form	9-Jun-20	n/a
Regulatory Body	NBCP	Signage	Closures	Pharmacy closure	9-Oct-20	n/a
Regulatory Body	NBCP	Signage	Infection Control	Attention! (do not enter if S&S of COVID)	1-Mar-20	n/a
Regulatory Body	NBCP	Guidance Document	Other	Business Continuity Planning Checklist	7-May-20	n/a
Regulatory Body	NBCP	Other	Other	COVID Landing Page	n/a	n/a
Regulatory Body	NBCP	Guidance Document	Professional Services	Guidance for Pharmacies Providing Services to Long-Term Care Facilities	29-May-20	n/a
Regulatory Body	NBCP	Guidance Document	Professional Services	Commentary: Ethical Decision Making During a Public Health Event	1-Sep-20	n/a
Regulatory Body	NBCP	Social Media	Staffing in Emergency	NB Rx Connect Facebook group	18-Mar-20	n/a
Regulatory Body	NBCP	Guidance Document	Staffing in Emergency	Process if pharmacist tests positive for COVID	1-Apr-20	n/a
Regulatory Body	NBCP	Guidance Document	Staffing in Emergency	COVID-19 Message from Registrar: If staff get sick & business continuity	2-Apr-20	n/a
Regulatory Body	NBCP	Guidance Document	Staffing in Emergency	Business continuity template	1-May-20	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Regulatory Body	NBCP	Guidance Document	Staffing in Emergency	Business continuity planning for community pharmacies during a pandemic	7-May-20	n/a
Regulatory Body	NLPB	Policy (Update)	Closures	Temporary Pharmacy Closure (Community)	1-May-20	Permanent
Regulatory Body	NLPB	Hyperlinks	Infection Control	Hand Hygiene: Why, How & When? (WHO)	1-Aug-09	n/a
Regulatory Body	NLPB	Guidance Document	Infection Control	Pharmacy staff protection	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Infection Control	Pharmacy cleaning guidance	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Infection Control	Reduce the risk of exposure within the pharmacy environment	n/a	n/a
Regulatory Body	NLPB	Hyperlinks	Infection Control	Cleaning pharmacy in response to staff member testing positive - Link to CDC Guidelines	n/a	n/a
Regulatory Body	NLPB	Signage	Infection Control	Pharmacy cleaning guidelines	n/a	n/a
Regulatory Body	NLPB	Signage	Infection Control	Attention!	n/a	n/a
Regulatory Body	NLPB	Signage	Infection Control	Reducing exposure	n/a	n/a
Regulatory Body	NLPB	Hyperlinks	Infection Control	List of PPE distributors in the province of NL	n/a	n/a
Regulatory Body	NLPB	Hyperlinks	Infection Control	List of PPE distributors in the Atlantic Provinces	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Other	Compounding hand sanitizer	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Other	PPE and compounding	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Other	Changes to hours of operation	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Other	Pharmacy service disruptions	n/a	n/a
Regulatory Body	NLPB	Guidance Document	Other	Remember your duty to report notifiable communicable diseases	n/a	n/a
Regulatory Body	NLPB	Hyperlinks	Other	Links to external documents for guidance: CAMH CPSNL  Hyperlinks for vaccine information: - Health Canada COVID-19 Vaccines page - National Advisory Committee on Immunization (NACI) Recommendations on the use of COVID-19 Vaccines - NLPB Health Canada & ISMP Advisories page	n/a	n/a
Regulatory Body	NLPB	Hyperlinks	Other	Government of Newfoundland and Labrador Regional Health Authorities - Eastern Health - Central Health - Western Health - Labrador-Grenfell Health  Health Canada  Pharmacists Association of Newfoundland and Labrador	n/a	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
				Canadian Pharmacists Association		
Regulatory Body	NLPB	Other	Other	COVID Landing Page (most updates are provided on this page, without link to a separate document)	n/a	n/a
Regulatory Body	NSCP	Consult Services	Clinical Support	Clinical Consult Pharmacist	27-Apr-20	n/a
Regulatory Body	NSCP	Policy (New)	Closures	Temporary Pharmacy Closures	1-Apr-20	n/a
Regulatory Body	NSCP	Signage	Closures	Temporary pharmacy closure with reopening date	1-Apr-20	n/a
Regulatory Body	NSCP	Signage	Closures	Temporary closure	1-Apr-20	n/a
Regulatory Body	NSCP	Signage	Closures	Temporary pharmacy closure with partner pharmacy contact	1-Apr-20	n/a
Regulatory Body	NSCP	Signage	Closures	Temporary pharmacy closure with reopening information	1-Apr-20	n/a
Regulatory Body	NSCP	Signage	Infection Control	Pharmacy cleaning guidelines	1-Mar-20	n/a
Regulatory Body	NSCP	Guidance Document	Infection Control	Infection Control Measures During COVID-19	1-Apr-20	n/a
Regulatory Body	NSCP	Guidance Document	Infection Control	Guidance for Pharmacies when a Pharmacy Staff Member is COVID-19 Positive or a Close Contact	1-May-20	n/a
Regulatory Body	NSCP	Guidance Document	Infection Control	Mandatory Use of Non-Medical Masks in Community Pharmacies	30-Jul-20	n/a
Regulatory Body	NSCP	Guidance Document	Other	A Pharmacy Professional's Duty During a Crisis: An Ethical Framework	1-Mar-20	n/a
Regulatory Body	NSCP	Guidance Document	Other	COVID-19 Guidance	14-Mar-20	n/a
Regulatory Body	NSCP	Exemption	Other	Extension of first aid/CPR certification	28-Mar-20	31-Dec-20
Regulatory Body	NSCP	Exemption	Other	Extension of deadline for private counselling room policy compliance	28-Mar-20	31-Dec-20
Regulatory Body	NSCP	Guidance Document	Other	Standard of Care During a Crisis	1-Apr-20	n/a
Regulatory Body	NSCP	Other	Other	COVID Landing Page	n/a	n/a
Regulatory Body	NSCP	Guidance Document	Other	Pharmacy Locations as Sites for Asymptomatic COVID-19 Testing by Third-Party Entities	1-Nov-20	n/a
Regulatory Body	OCP	Guidance Document	Closures	Notification of temporary pharmacy closure	1-Jun-18	n/a
Regulatory Body	OCP	Guidance Document	Closures	Temporary pharmacy closures	n/a	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Regulatory Body	OCP	Hyperlinks	Infection Control	<b>Personal Protective Equipment (PPE): Suggested Best Practices for Pharmacies During the COVID-19 Pandemic</b> (Canadian Pharmacists Association) COVID-19: Guidelines for Pharmacists and the Pharmacy Workforce (International Pharmaceutical Federation) – See pages 9-14 for recommendations on masks Universal Mask Use in Health Care (Public Health Ontario) Focus on Universal Mask Use in Healthcare Settings and Retirement Homes (Public Health Ontario) COVID-19 medical masks and respirators: Information for health professionals (Public Health Agency of Canada)	n/a	n/a
Regulatory Body	OCP	Guidance Document	Infection Control	Should pharmacists wear PPE when dispensing medications?	n/a	n/a
Regulatory Body	OCP	Guidance Document	Infection Control	Public Health Reporting Requirements	n/a	n/a
Regulatory Body	OCP	Guidance Document	Infection Control	Personal Protective Equipment (PPE) Supply	n/a	n/a
Regulatory Body	OCP	Hyperlinks	Infection Control	Personal Protective Equipment (PPE) Supply	n/a	n/a
Regulatory Body	OCP	Guidance Document	Infection Control	Compounding and Importation of Hand Sanitizer	n/a	n/a
Regulatory Body	OCP	Hyperlinks	Infection Control	<b>Infection Prevention and Control Resources</b> Best Practices for Environmental Cleaning for Prevention and Control of Infections in All Care Settings (Public Health Ontario) IPAC Recommendations for Use of Personal Protective Equipment for Care of Individuals with Suspect or Confirmed COVID-19 (Public Health Ontario) Patient Safety and Infection Prevention and Control (Winter 2020 Pharmacy Connection article) A Pharmacist's Guide to Pandemic Preparedness, see Environmental Cleaning section (Ontario Pharmacists Association) PPE: Suggested Best Practices for Pharmacies During the COVID-19 Pandemic (Canadian Pharmacists Association) Pharmacy Infection Control Measures During COVID-19 (Nova Scotia College of Pharmacists) Infection prevention and control for COVID-19: Interim guidance for outpatient and ambulatory care settings (Public Health Agency of Canada) Personal Protective Equipment (PPE) Use During the COVID-19 Pandemic (Ontario Health)	n/a	n/a
Regulatory Body	OCP	Guidance Document	Infection Control	Guidance on shortages of personal protective equipment (PPE) for sterile compounding during Coronavirus Pandemic	30-Apr-20	n/a
Regulatory Body	OCP	Other	Other	COVID Landing Page - Professionals	n/a	n/a
Regulatory Body	OCP	Hyperlinks	Other	<b>Provincial Guidance for Pharmacies</b> The COVID-19 Guidance for Pharmacies	n/a	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
				(updated June 19, 2020) The Ministry of Health webpage for healthcare providers provides important updates and resources. COVID-19 Health Care Resources from Public Health Ontario, including infection prevention and control guidance. The Ministry is also keeping healthcare providers informed of the latest discussions at the COVID-19 Command Table, whose role is to oversee and provide strategic direction to guide Ontario's response, informed by input from stakeholders and other experts. For the latest case numbers in Ontario, visit the Status of Cases in Ontario webpage.		
Regulatory Body	OCP	Guidance Document	Other	COVID-19 Testing of Asymptomatic Persons in Community Pharmacies	1-Nov-20	n/a
Regulatory Body	OCP	Guidance Document	Other	First aid/CPR certification	n/a	n/a
Regulatory Body	OCP	Hyperlinks	Other	COVID-19 quick reference public health guidance on testing and clearance	7-Mar-21	n/a
Regulatory Body	OCP	Hyperlinks	Other	<b>Mental Health</b> Ontario Shores Centre for Mental Health Sciences – Healthcare Worker Assist CAMH – Mental Health Resources and Referrals for Healthcare Workers Lifemark – Ontario Pharmacy Health Program Canadian Mental Health Association – COVID-19 Mental Health Resources Mental Health Commission of Canada – COVID-19 Resources	n/a	n/a
Regulatory Body	OCP	Guidance Document	Staffing in Emergency	Returning to practice to support pharmacy during the COVID-19 pandemic	6-Jan-21	n/a
Regulatory Body	OPQ	Guidance Document	Closures	COVID-19 Plan de contingence et fermeture temporaire d'une pharmacie	9-Apr-20	n/a
Regulatory Body	OPQ	Guidance Document	Infection Control	COVID-19 Mesures sanitaires requises pour assurer la continuité des opérations en pharmacie 2e édition	9-Dec-20	n/a
Regulatory Body	OPQ	Policy (New)	Infection Control	Wearing a face cover: What rules to follow in pharmacies?	19-Jul-20	n/a
Regulatory Body	OPQ	Signage	Infection Control	Masks mandatory	11-Aug-20	n/a
Regulatory Body	OPQ	Guidance Document	Infection Control	Health measures required to ensure the safety of your patients and staff	28-Mar-20	n/a
Regulatory Body	OPQ	Other	Other	COVID Landing Page	n/a	n/a
Regulatory Body	OPQ	Guidance Document	Other	COVID-19 and DSQ tests	31-Mar-20	n/a
Regulatory Body	PEICP	Policy (New)	Closures	Temporary pharmacy closures policy	18-Mar-20	Permanent
Regulatory Body	PEICP	Other	Other	COVID Landing Page	n/a	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Regulatory Body	CPBC	Exemption	Staffing in Emergency	BC's COVID-19 Response - Self-Isolation Advice for Pharmacy Professionals and the Role of Pharmacy Managers	20-Mar-20	n/a
Regulatory Body	CPBC	Exemption	Professional Services	BC's COVID-19 Response - PDAP Exemptions for CE Submissions During COVID-19	30-Mar-20	Dec-20
Regulatory Body	CPBC	Emergency Protocol	Staffing in Emergency	45. (1) of the College's Health Professions Act Bylaws	16-Mar-20	n/a
Regulatory Body	CPBC	Guidance Document	Staffing in Emergency	Temporary Registration Now Available to Support BC's COVID-19 Response	1-Apr-20	n/a
Regulatory Body	CPBC	Guidance Document	Other	Novel Coronavirus (COVID-19)	n/a	n/a
Regulatory Body	CPBC	Guidance Document	Staffing in Emergency	Pharmacy Staff Affected from COVID-19	22-Apr-20	n/a
Regulatory Body	CPBC	Guidance Document	Staffing in Emergency	Becoming a Licensed Pharmacy Professional in BC during the COVID-19 Pandemic	n/a	n/a
Regulatory Body	ACP	Guidance Document	Infection Control	COVID-19 Guidance - Personal Protective Equipment (PPE) for compounding	21-Oct-20	n/a
Regulatory Body	ACP	Policy (Update)	Infection Control	Standards of Practice Laboratory and Point of Care Testing (POCT)	n/a	n/a
Regulatory Body	ACP	Policy (Update)	Professional Services	Standards of Practice for Pharmacists and Pharmacy Technicians	2-Jan-20	n/a
Regulatory Body	ACP	Hyperlinks	Other	COVID-19 updates for pharmacy professionals	n/a	n/a
Regulatory Body	ACP	Guidance Document	Other	COVID-19 Guidance for Pharmacists and Pharmacy Technicians	n/a	n/a
Regulatory Body	ACP	Policy (Update)	Infection Control	Asymptomatic COVID-19 testing paused	28-Oct-20	n/a
Regulatory Body	ACP	Policy (Update)	Staffing in Emergency	Emergency registration for COVID-19 pandemic	n/a	30-Jun-21
Regulatory Body	ACP	Guidance Document	Infection Control	Will your pharmacy offer asymptomatic COVID-19 testing?	2-Sep-20	n/a
Regulatory Body	ACP	Position Statement	Infection Control	Personal protective equipment for pharmacies	8-Jul-20	n/a
Regulatory Body	SCPP	Hyperlinks	Other	COVID-19 Information	n/a	n/a
Regulatory Body	SCPP	Policy (Update)	Staffing in Emergency	The Regulatory Bylaws	13-Nov-20	20-Sep-21
Regulatory Body	SCPP	Guidance Document	Professional Services	Registration Information for Pharmacy Professionals	n/a	30-Jun-20
Regulatory Body	SCPP	Guidance Document	Other	Emergency Preparedness Tools	22-May-20	n/a
Regulatory Body	SCPP	Policy (New)	Closures	Emergency Preparedness – Modifications to Pharmacy Operations and Hours	9-Oct-20	End of state of emergency
Regulatory Body	SCPP	Policy (New)	Other	Pharmacy Manager Responsibilities	17-Dec-20	n/a
Regulatory Body	SCPP	Guidance Document	Closures	Modifying Pharmacy Hours of Operations Procedures	24-Mar-20	n/a



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Regulatory Body	SCPP	Signage	Infection Control	If you are sick or need a prescription... do not go into your pharmacy	n/a	n/a
Regulatory Body	SCPP	Guidance Document	Other	Practice Changes for Community Pharmacy During COVID-19 Pandemic	15-Sep-20	n/a
Regulatory Body	SCPP	Guidance Document	Other	Emergency Preparedness Resource Kit for Pharmacists and Pharmacy Technicians	19-Oct-20	n/a
Regulatory Body	SCPP	Policy (New)	Staffing in Emergency	Emergency Registration and Licensure - Supplemental Policy	8-Apr-20	n/a
Regulatory Body	CPM	Hyperlinks	Other	COVID-19 Resources for Pharmacy Professionals	n/a	n/a
Regulatory Body	CPM	Guidance Document	Professional Services	Pharmacy Professional's Duty during an Emergency, Disaster or Pandemic Ethical Framework	1-Mar-20	n/a
Regulatory Body	CPM	Guidance Document	Infection Control	Guidelines for ensuring pharmacy accessibility during a health crisis, or pandemic	1-Mar-20	n/a
Regulatory Body	CPM	Guidance Document	Professional Services	Point of Care Testing for COVID-19 by Pharmacists	1-Jan-21	n/a

#### Grey Literature: Theme 4 – Controlled Substances

Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Government	Canada	Policy (Update)	Controlled Substances	Prescription management by pharmacists with controlled substances under the Controlled Drugs and Substances Act and its regulations	n/a	n/a
Government	Canada	Guidance Document	Controlled Substances	Frequently asked questions: Subsection 56(1) class exemption for patients, practitioners and pharmacists prescribing and providing controlled substances in Canada during the coronavirus pandemic	n/a	n/a
Government	Canada	Policy (Update)	Dispensing	COVID-19 – Update to Requirements for Post-Consumer Returns Containing Controlled Substances	14-Sep-20	<ul style="list-style-type: none"> <li>• March 31, 2021;</li> <li>• the date that they are replaced by new or additional measures; or</li> <li>• the date upon which these measures are revoked.</li> </ul>
Government	Health Canada	Hyperlinks	Controlled Substances	Subsection 56(1) class exemption for patients, practitioners and pharmacists prescribing and providing controlled substances in Canada during the coronavirus pandemic	19-Mar-20	Earliest of the Following dates: <ol style="list-style-type: none"> <li>1. September 30, 2021;</li> <li>2. The date that it is replaced by another</li> </ol>





Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
						exemption; or 3. The date on which it is revoked.
Government	Health Canada	Exemption	Controlled Substances	Office of Controlled Substances - Requirements for Chain of Signatures in Light of COVID-19	20-Mar-20	Expiry: • June 30, 2020; • the date that they are replaced by new or additional measures; or • the date upon which these measures are revoked.
Government	NL	Policy (Update)	Controlled Substances	Update on OAMT Delivery Billing Process	8-May-20	n/a
Government	NS	Emergency Protocol	Controlled Substances	Nova Scotia Prescription Monitoring Program	24-Mar-20	In conjunction with Health Canada
Government	NS	Emergency Protocol	Controlled Substances	Drug Information System	24-Mar-20	In conjunction with Health Canada
Government	NSHA	Consult Services	Clinical Support	Community of practice online forum for providers of Opioid Agonist Therapy (OAT) and Physician Call List	20-Apr-20	n/a
Government	NSHA	Consult Services	Clinical Support	Addictions Medicine Consult Service	9-Sep-20	n/a
Government	BC	Policy (Update)	Controlled Substances	PROFESSIONAL PRACTICE POLICY-71: Delivery of Opioid Agonist Treatment	6-Apr-20	n/a
Government	BC	Guidance Document	Controlled Substances	BC Pharmacare Newsletter: 20-017	21-Sep-20	n/a
Government	Health Canada	Emergency Protocol	Controlled Substances	Subsection 56(1) class exemption for patients, practitioners and pharmacists prescribing and providing controlled substances in Canada during the coronavirus pandemic	30-Sep-20	This exemption expires on the earliest of the following dates:  September 30, 2021; The date that it is replaced by another exemption; or The date on which it is revoked.
Government	Health Canada	Guidance Document	Controlled Substances	Frequently asked questions: Subsection 56(1) class exemption for patients, practitioners and pharmacists prescribing and providing controlled substances in Canada during the coronavirus pandemic	21-Apr-20	Respecting revocation: This exemption automatically expires no



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
						later than September 30, 2020. However, if the exemption is no longer necessary prior to that date, consideration could be given to revoking the exemption.
Government	Health Canada	Position Statement	Controlled Substances	Letter from the Minister of Health regarding treatment and safer supply	24-Aug-20	n/a
Professional Organization	OPA	Guidance Document	Controlled Substances	Pharmacist's role in managing opioid use disorder during COVID 19	27-Aug-20	n/a
Professional Organization	PANL	Policy (Update)	Controlled Substances	Temporary Change to Methadone Carries Fee Structure	2-Apr-20	n/a
Professional Organization	PEICP	Policy (Update)	Controlled Substances	Health Canada CDSA Exemption Guidance	4-Apr-20	In conjunction with Health Canada
Professional Organization	CPhA	Guidance Document	Controlled Substances	PRACTICE RESOURCES: What can pharmacists do under the Controlled Drugs and Substances Act (CDSA) during the COVID-19 Pandemic? Accepting a verbal order (BC)	07-Aug-20	n/a
Professional Organization	CPhA	Guidance Document	Controlled Substances	PRACTICE RESOURCES: What can pharmacists do under the Controlled Drugs and Substances Act (CDSA) during the COVID-19 Pandemic? Adapting a prescription (ON)	07-Aug-20	n/a
Professional Organization	CPhA	Guidance Document	Controlled Substances	PRACTICE RESOURCES: What can pharmacists do under the Controlled Drugs and Substances Act (CDSA) during the COVID-19 Pandemic? Extending a prescription (NL)	being updated March 2020	n/a
Professional Organization	CPhA	Guidance Document	Controlled Substances	PRACTICE RESOURCES: What can pharmacists do under the Controlled Drugs and Substances Act (CDSA) during the COVID-19 Pandemic? Transferring a prescription (NB)	07-Aug-20	n/a
Professional Organization	CPhA	Guidance Document	Controlled Substances	AWARENESS: COVID-19 and controlled drugs and substances	12-Jun-20	n/a
Professional Organization	BCPA	Policy (Update)	Controlled Substances	Summary of the Recent COVID-19 Ministerial Orders and Opioid Agonist Treatment	21-Sep-20	n/a
Regulatory Body	NBCP	Guidance Document	Controlled Substances	COVID-19 and the Provision of Methadone and Other Substances	29-May-20	n/a
Regulatory Body	NBCP	Policy (Update)	Controlled Substances	COVID-19 and the Provision of Methadone and Other Substances - UPDATED	27-Jan-21	n/a
Regulatory Body	NLPB	Guidance Document	Controlled Substances	COVID-19 and the Provision of Opioid Agonist Maintenance Treatment	13-Aug-20	In conjunction with Health Canada



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
Regulatory Body	NLPB	Guidance Document	Controlled Substances	FAQ Subsection 56 (1) Class Exemption for Patients, Pharmacists Prescribing and Providing Controlled Substances in Newfoundland and Labrador during COVID-19	31-Aug-20	In conjunction with Health Canada
Regulatory Body	NSCP	Signage	Closures	Temporary pharmacy closure with OAMT contact	1-Apr-20	
Regulatory Body	NSCP	Guidance Document	Controlled Substances	Opioid Agonist Maintenance Treatment (OAMT) Services During the COVID-19 Pandemic	1-Mar-20	n/a
Regulatory Body	NSCP	Emergency Protocol	Controlled Substances	Prescribing Narcotics, Controlled, and Targeted Drugs	19-Mar-20	In conjunction with Health Canada
Regulatory Body	NSCP	Policy (Update)	Controlled Substances	Fax Transmission of Prescriptions (Controlled Substances)	19-Mar-20	1. In conjunction with Health Canada 2. Permanent
Regulatory Body	NSCP	Exemption	Controlled Substances	Sharing of Federal Government document: Office of Controlled Substances - Requirements for Chain of Signatures in Light of COVID-19	20-Mar-20	Expiry: • June 30, 2020; • the date that they are replaced by new or additional measures; or • the date upon which these measures are revoked.
Regulatory Body	NSCP	Guidance Document	Controlled Substances	Loss or theft of narcotic reports to be emailed to Health Canada as faxes are not monitored	28-Mar-20	n/a
Regulatory Body	OCP	Exemption	Controlled Substances	Summary of federal changes		n/a
Regulatory Body	OCP	Guidance Document	Controlled Substances	Prescribing and providing controlled substances during the coronavirus pandemic	8-Apr-20	n/a
Regulatory Body	OCP	Guidance Document	Controlled Substances	Initiating, Adapting and Renewing Prescriptions	1-Dec-20	n/a
Regulatory Body	OCP	Guidance Document	Controlled Substances	Delivery of prescriptions	1-Mar-20	n/a
Regulatory Body	OCP	Guidance Document	Controlled Substances	Narcotic prescription part-fills	1-Mar-20	n/a
Regulatory Body	OCP	Guidance Document	Controlled Substances	Prescription expiry	1-Mar-20	n/a
Regulatory Body	OCP	Guidance Document	Controlled Substances	Prescription transfers	1-Mar-20	n/a
Regulatory Body	OCP	Hyperlinks	Controlled Substances	Managing OUD Therapy Links: CRISM CAMH	n/a	n/a
Regulatory Body	PEICP	Exemption	Controlled Substances	Sharing of Federal Government document: Office of Controlled Substances - Requirements for Chain of Signatures in Light of COVID-19	20-Mar-20	Expiry: • June 30, 2020; • the date that they are replaced by new or



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
						additional measures; or • the date upon which these measures are revoked.
Regulatory Body	PEICP	Exemption	Controlled Substances	Opioid Agonist Maintenance Treatment (OAMT) Services During the COVID-19 Pandemic	20-Mar-20	In conjunction with Health Canada
Regulatory Body	PEICP	Policy (Update)	Controlled Substances	Ammendments to Regulated Health Professions Act Pharmacist and Pharmacy Technician Regulations	4-Apr-20	In conjunction with Health Canada
Regulatory Body	PEICP	Policy (Update)	Controlled Substances	Frequently Asked Questions Health Canada Exemption/Regulatory Amendments	4-Apr-20	In conjunction with Health Canada
Regulatory Body	CPBC	Position Statement	Controlled Substances	BC's COVID-19 Response: Temporary Authorizations for the Delivery of Opioid Agonist Treatment by Non-Pharmacists	7-Apr-20	As per federal gov (not BC gov - they did not give a specific date): This exemption expires on the earliest of the following dates:  September 30, 2021; The date that it is replaced by another exemption; or The date on which it is revoked
Regulatory Body	CPBC	Position Statement	Controlled Substances	Changes to the Delivery Requirements for OAT Now In Effect	7-Apr-20	As per federal gov (not BC gov - they did not give a specific date): This exemption expires on the earliest of the following dates:  September 30, 2021; The date that it is replaced by another



Organization Type	Organization	Document Type	Topic	Document	Date	Expiry
						exemption; or The date on which it is revoked
Regulatory Body	CPBC	Policy (Update)	Controlled Substances	PROFESSIONAL PRACTICE POLICY-66: Opioid Agonist Treatment	20-Nov-20	Sept 30, 2021 (just the training availability)
Regulatory Body	ACP	Policy (Update)	Controlled Substances	COVID-19 Guidance - Temporary authorizations for controlled substances	21-Oct-20	Sept 30, 2021 (via Health Canada)
Regulatory Body	ACP	Policy (Update)	Controlled Substances	Joint message from ACP and CPSA regarding s56(1) exemptions	n/a	n/a
Regulatory Body	ACP	Guidance Document	Controlled Substances	Photocopied TPP Alberta forms are not acceptable	9-Dec-20	n/a
Regulatory Body	SCPP	Policy (Update)	Controlled Substances	Prescription Review Program (PRP)	n/a	n/a
Regulatory Body	SCPP	Guidance Document	Controlled Substances	Memo: Section 56 Exemption Communication	23-Mar-20	30-Sep-20
Regulatory Body	SCPP	Guidance Document	Controlled Substances	Exemptions to the Opioid Agonist Therapy "OAT" Standards During the COVID 19 Pandemic	25-Mar-20	30-Sep-20
Regulatory Body	SCPP	Guidance Document	Controlled Substances	AMENDMENTS TO Prescription Regulations DURING COVID-19 PANDEMIC BASED ON SECTION 56(1) EXEMPTION	1-Apr-20	n/a
Regulatory Body	SCPP	Guidance Document	Controlled Substances	Section 56 Exemption Communication	4-Aug-20	September 30, 2021; • The date that it is replaced by another exemption; or • The date on which it is revoked.
Regulatory Body	CPM	Hyperlinks	Controlled Substances	Friday Five (May 29, 2020)	29-May-20	n/a
Regulatory Body	CPM	Guidance Document	Controlled Substances	Joint Guidance to Physicians, Nurse Practitioners and Pharmacy Professionals: Narcotic and Controlled Drug Prescriptions for Personal Care Home Residents	29-Sep-20	30-Sep-21