



## Patient Identification Verification

### DEFINITIONS

**“Patient’s Agent”** is a person who drops off a prescription or picks up medication for the patient.

**“Pharmacy team member”** includes pharmacy assistants, pharmacy interns, licensed pharmacy technicians, and licensed pharmacists.

### ACRONYMS

**CDSA** – Controlled Drugs and Substances Act

**PRP** – Prescription Review Program

### 1. PURPOSE

“As a pharmacist practising in the community, it is your duty and responsibility to make sure the right person gets the right dose of the right drug at the right time. The very first step in providing pharmacy care is to positively identify the patient—be sure you have the right person. Without correctly identifying the patient, the rest of the steps in patient care and patient safety can be compromised.” – College of Pharmacists of British Columbia.

Circumstances in Saskatchewan have prompted the need for an identification policy due to:

- 1.1. Concerns raised to the College of Physicians and Surgeons of Saskatchewan by public external stakeholders, medication incident reports, increased prescription forgeries and drug diversions, and requests from members of the Saskatchewan public all indicate that pharmacy team members must increase their efforts to confirm the identity of the person to whom medications are provided.
- 1.2. The Saskatchewan College of Pharmacy Professionals (SCPP) is concerned with reports of hospitalized and incarcerated patients not receiving their medications when picked up by persons claiming to be friends or family members. Diverted medications can pose serious health risks to the individual misusing the medication and to the patient if they do not receive their medication. Medications given to an incorrect patient also poses these same risks.

- 1.3. Verification of the patient's (or the patient's agent) identity will reduce medication errors attributed to the wrong patient receiving medications, proactively address diversion, protect patient confidentiality, and prevent other unintended consequences.
- 1.4. The Saskatchewan Provincial Auditor's [June 2019 report](#) considered whether the monitoring activities of Saskatchewan opioid prescribing and dispensing practices were sufficient to reduce opioid misuse and abuse. This policy is one step to increase the oversight of opioid dispensing practices.

### **Degree of Verification Required in Application of this Policy**

Professional judgement must be used to determine the appropriate degree of verification required to fulfill the intent of this policy, in response to the circumstance of each encounter and risk to the public. **Ultimately, the pharmacy team member is responsible for ensuring that the right individual receives the right medication, and therefore must be satisfied that sufficient verification has been performed.**

Council strongly encourages that steps to thoroughly verify the identity of an individual are taken when the individual **is not known** to the pharmacy team member (as per the Policies and Procedures below). However, Council recognizes that this thorough degree of verification may not be required when the patient **is well known** to the pharmacy team member. **CDSA and PRP medications pose a high risk of harm to patients and the public and therefore require a higher degree of verification when the person picking up the medication is not known to the pharmacy team member.**

### **Degree of Documentation Required in Application of this Policy**

Documentation and record keeping are critical to patient and public safety. Like patient identification verification, the steps vary depending on whether the patient/patients' agent is known or unknown to the pharmacy team member, and whether they are picking up CDSA and/or PRP medications or schedule 1 drugs. This policy speaks to the documentation and record keeping needed at the time of pick up for a CDSA or PRP medication. For more information see [Record Keeping Requirements](#) and [Record Keeping Requirements for CDSA](#).

For CDSA and PRP medications, if the individual is known to the pharmacy team member or the information was previously documented (e.g. photo-copy of identification, or populated witness ingestion tracking sheet for [Opioid Agonist Therapy](#)), the requirements in section 2.2 may not be required to record each time a prescription is picked up. However, **the name and signature of the individual picking up the medication must always be obtained at each encounter**. If the patient is not known to the pharmacy team member, then all requirements listed in 2.3 and 2.4 must be recorded, including government issued photo ID as specified.

**Ultimately, pharmacists must keep records of whom they have provided any PRP/CDSA medication and be able to verify with the name and signature of the individual picking up the medication.** This policy outlines minimum requirements for patient identification verification. It extends to all situations where pharmacy services are provided, including delivery of medications and virtual care. The pharmacy manager must implement processes in the pharmacy workflow to ensure that these requirements are met.

## 2. STANDARDS OF PRACTICE

- 2.1. It is best practice that each pharmacy team member, when **presented with a prescription or a request for a pharmacy service**, verify the identity of the patient or patient's agent and their relationship with the patient, if not known personally to the pharmacy team member.

However, circumstances may arise where a patient is unable to produce suitable identification, therefore, verification of patient identity is:

- 2.1.1. strongly encouraged for all prescriptions; and
- 2.1.2. mandatory when dispensing medications monitored by the PRP.

### Virtual Care (Video and Telephone)

When a licensed member is providing care through virtual means, the expectations outlined in this document still apply. Over a video connection, patient identity can still be verified by asking the patient to present their identification to the camera to validate identity. When providing care over the telephone, patient identity should be verified with a second identifier such as their date of birth and address.

- 2.2. The pharmacy team member **must always** verify identity, as per Section 3 below, when a patient **presents a prescription** for a medication listed in the schedules to the [CDSA](#), or monitored by the [PRP](#), unless the patient is known to the pharmacy team member.

- 2.2.1. If a patient's agent is **not known** to the pharmacy team member and is presenting a prescription for a medication listed in the schedules to the CDSA, or monitored by the PRP, then the patient identity must be verified as per Section 3 below where possible; or

- 2.2.2. Verify the identity of the patient through open ended questions such as the name and birthdate of the patient or address.

- 2.3. **Regardless of whether the patient or patient's agent is known or unknown, the following information must be documented and retained every time CDSA or PRP medications are picked up:**

- 2.3.1. Name and signature of the person picking up
- 2.3.2. Date;
- 2.3.3. Prescription or transaction number; and
- 2.3.4. Initials of pharmacy team member handing over the medication.

- 2.3.5. Where a signature is not obtainable (e.g. disability, refusal to sign during pandemic) by the individual picking up a CDSA or PRP medication, the reason must be documented.
- 2.4. If the patient or patient's agent picking up the CDSA or PRP medication **is not known** to the pharmacy team member then the pharmacy team member must verify identity as per section 3 below, and document:
- 2.4.1. Type of government-issued photo identification and identification number.

### **Prescriptions for Drugs with High Risk of Misuse or Abuse**

Any prescription for a medication listed in the schedules to the [CDSA](#), or the [PRP](#), where the signature of the physician is not known to the pharmacist, must be verified to ensure it is a valid prescription. (Note: this is also a federal requirement for all CDSA drugs as per section 31(2) of the [Narcotic Control Regulations \(NCR\)](#) and section G.03.002 of the [Food and Drug Regulations \(FDR\)](#)).

See also [Forgeries](#) and [PRP Physicians with Prescribing Restrictions](#) to confirm there are no restrictions placed on their prescribing authority.

The same caution to verify the prescription is recommended when the identity of the patient cannot be confirmed.

- 2.5. In circumstances where the person comes to pick up medication for another person:
- 2.5.1. Ensure that the patient has consented to that person obtaining their medication on their behalf either by written or verbal verification;

### **Mature Minors and Consent**

Patients less than 18 years old may exercise their own rights or powers under the [Health Information Protection Act](#) (HIPA):

- at the discretion of the pharmacy team;
- must be evaluated on a case-by-case basis; and
- documented in their profile to ensure consistency in their privacy (e.g. consent for parents to pick up their medication and release of their medical information).

For more information on determining whether the patient can be considered a mature minor, see the [Office of the Saskatchewan Information and Privacy Commissioner's Guide to HIPA](#).

- 2.5.2. Verification of consent should be confirmed once annually at a minimum.

### Obtaining Patient Consent for Patient's Agents

In the best interest of patient confidentiality and the pharmacy, when the patient presents with a prescription the pharmacy team is encouraged to obtain verbal or written consent of agents allowed to pick up on their behalf, and confirmed once annually at a minimum.

### Delivery of Medications

- 2.6. When delivering medications listed in Schedule I, pharmacies **should** have a process in place to confirm the delivery and receipt of the drug.
- 2.7. When delivering medications listed in the schedules to the [CDSA](#), or monitored by the [PRP](#), pharmacies **must** have a process in place that meets the requirements of 2.3., regardless of whether the delivery is made by a pharmacy team member or a delivery person acting as an agent of the pharmacist (See textbox "Delivering CDSA Drugs below);
- 2.7.1. The patient or the patient's agent must be present to receive and sign for the receipt of the CDSA or PRP drug. If a signature is not obtainable as per section 2.3.5, documentation must be made to verify that the person was present, and received the drugs.
- 2.8. If an agent is to receive and sign for the delivery, they must be specified in advance by the patient;
- 2.8.1. The pharmacist may reasonably assume the patient has consented to permit an authorized representative (i.e. patient's agent) of a facility where patients do not normally receive and manage their own medications (e.g. long-term care homes, correctional facilities), to receive their medications on their behalf.

### Delivering CDSA Drugs

Subsection [3\(2\)](#) of the [Narcotic Control Regulations \(NCR\)](#), subsection [G.01.005\(2\)](#) of the [Food and Drug Regulations \(FDR\)](#), and subsection [3\(2\)](#) of the [Benzodiazepines and Other Targeted Substances Regulations \(BOTSR\)](#) permit a pharmacist, or a person acting as an agent of a pharmacist, while acting in the course of their employment duties or role as agent, to **possess** narcotics, controlled or targeted substances, and benzodiazepines for the provision of pharmacy services.

Though the regulations do not speak directly to the delivery of narcotics or controlled substances, subsection [31\(2\)](#) of the [NCR](#), and subsection [G.03.002](#) of the [FDR](#), permit

pharmacists to **sell** or **provide** narcotics, controlled and targeted substances when doing so under the authority of a prescription.

As per the [definitions](#) cited in the [CDSA](#):

- **provide** means to give, transfer or otherwise make available in any manner, whether directly or indirectly; and
- **sell** includes offer for sale, expose for sale, have in possession for sale and distribute.

Through this, the SCPP interprets that pharmacists, or agents of the pharmacist (i.e. delivery driver) may **provide** indirectly (i.e. deliver) narcotic, controlled and targeted substances when dispensing a prescription.

It should be noted that subsection [51\(1\)](#) of [BOTSR](#) expressly permits a pharmacist to sell, provide, send, deliver or transport a targeted substance.

### **Maintaining Control and Security During Delivery of Controlled Substances**

As per section 43 of the [NCR](#), pharmacists are required to maintain control of controlled substances and protect from loss or theft. Processes must be in place to ensure safekeeping and storage during transport and until it has been received by the patient/agent.

**When delivering narcotics, controlled or targeted substances, the pharmacist or agent must take all necessary steps to ensure the safekeeping, and proper storage of the drugs when accompanying and transporting the drugs.** A chain of signatures must be accurately maintained showing all persons who have been in charge of the drugs, until they have been delivered to the intended individual. Any loss or theft that occur during transportation/delivery, must be [reported](#) to the Minister within ten (10) days of discovery. See also [Record Keeping Requirements for CDSA Drugs](#).

## **3. POLICIES AND PROCEDURES**

### **3.1. Verifying Identity**

3.1.1. Verification of an individual's identity must be done with either **one piece of photo identification** issued by the provincial, territorial or federal government, or **two sources of reliable information**.

3.1.1.1. Document on the patient's profile that their identity has been verified.

3.1.2. **Government-issued photo identification** must be **original**, valid and current. Examples include:

3.1.2.1. Driver's Licence;

3.1.2.2. Passport;

3.1.2.3. Police Identification Card (Royal Canadian Mounted Police);

3.1.2.4. Certificate of Indian Status;

3.1.2.5. Permanent Resident Card.

3.1.3. **Reliable** sources of information include **copies** of a government-issued photo identification, or any statement, form or certificate, including:

3.1.3.1. Non-Photo Provincial Health Card (e.g. Saskatchewan);

3.1.3.2. Birth Certificate;

3.1.3.3. Social Insurance Card;

3.1.3.4. Work/Visitor/Study Permit;

3.1.3.5. Naturalization Certificate;

3.1.3.6. Marriage Certificate;

3.1.3.7. Change of Name Certificate;

3.1.3.8. Travel Visa Issued by a Foreign Government.

3.2. **When identification cannot be verified professional judgement must be used** to determine the most reasonable approach to meet the needs of the patient in each unique situation.

3.2.1. In circumstances where the person is unable to produce suitable identification, verify their identity by other means, such as asking them open-ended questions to verify their address, phone number and other information unique to the patient.

3.2.2. Where the patient is new to the pharmacy, the minimum or reasonable amount of medication should be provided and only after verification that the prescription is valid.

3.3. **When the Individual Identifies as from Out-of-province**

3.3.1. In addition to steps outlined in sections 3.1 and 3.2, the licensed pharmacy team member must check if a Pharmaceutical Information Program record exists for the purpose of dispensing a medication.

## 4. AUTHORITY

4.1. [The Pharmacy and Pharmacy Disciplines Act](#)

- 4.2. [The Controlled Drugs and Substances Act](#)
- 4.3. [Narcotic Control Regulations](#)
- 4.4. [Benzodiazepines and Other Targeted Substances Regulations](#)
- 4.5. [Food and Drug Regulations](#)
- 4.6. [The Health Information Protection Act](#)
- 4.7. [Prescription Review Program](#)

## **5. ACKNOWLEDGMENTS**

- 5.1. [College of Pharmacists of British Columbia](#)
- 5.2. [Ontario College of Pharmacists](#)
- 5.3. [Financial Transactions and Reports Analysis Centre of Canada](#)
- 5.4. [Office of the Saskatchewan Information and Privacy Commissioner](#)