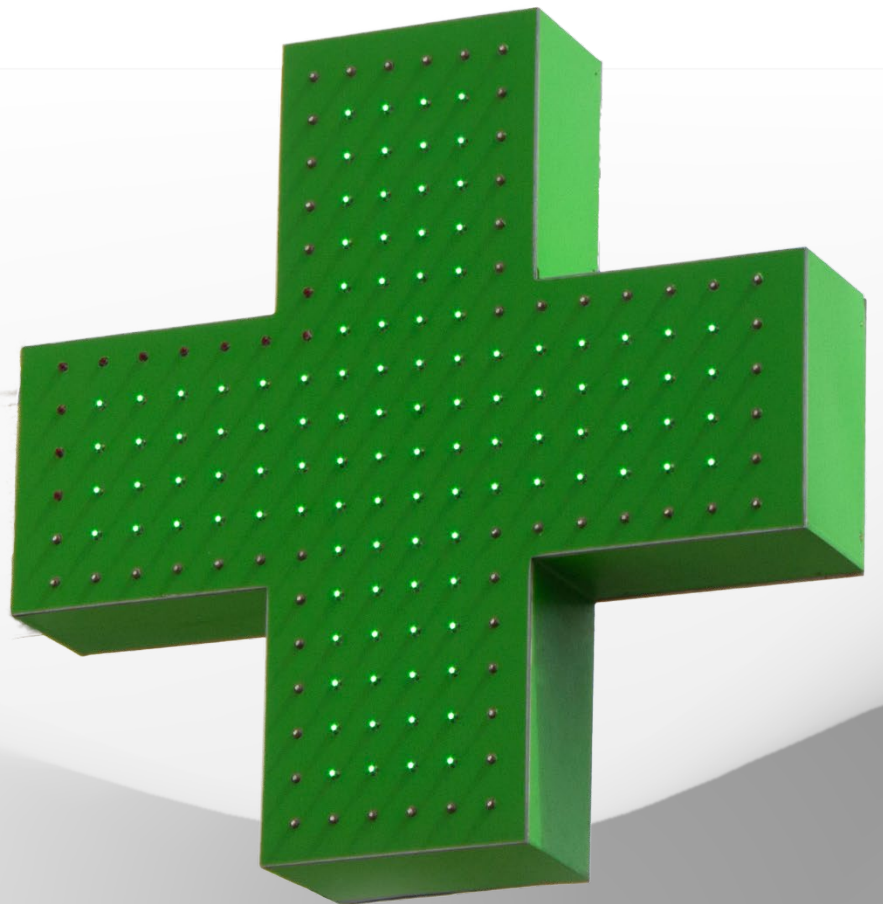


WHITE  
PAPER

**Leger**



# **The Changing Role of the Pharmacist**

by Leger's  
Healthcare Team

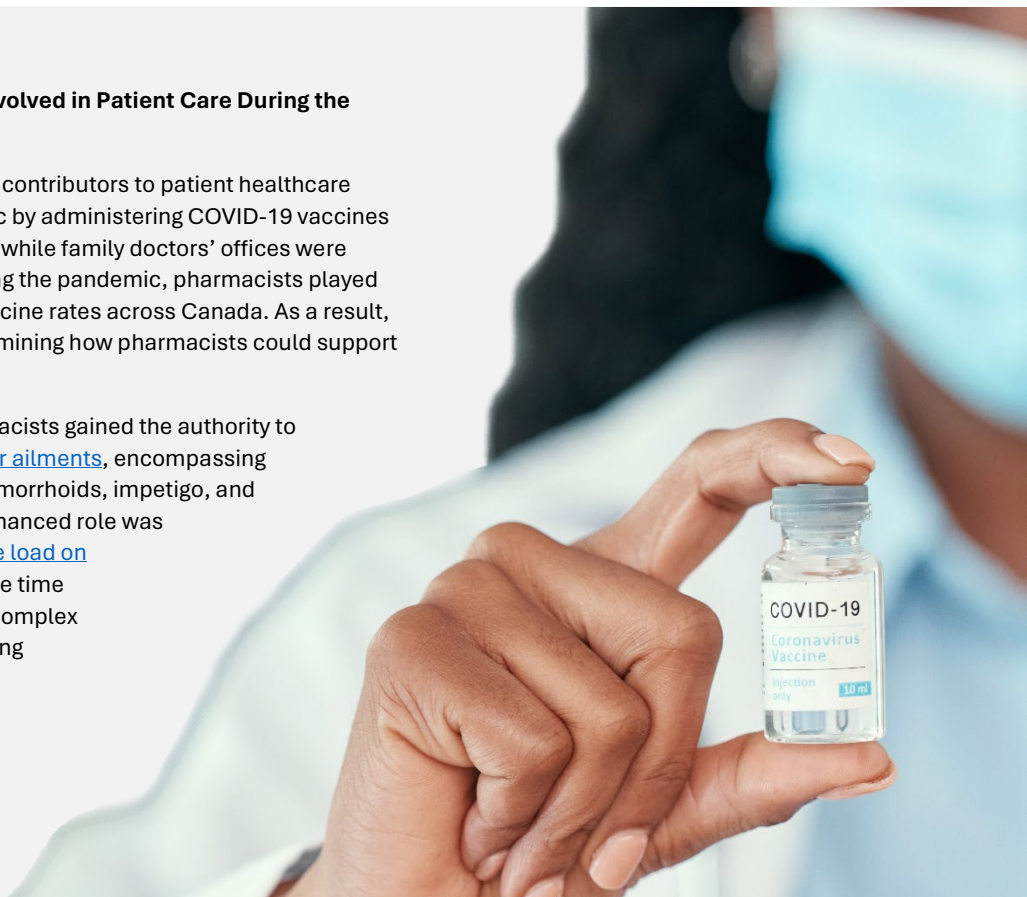
In the wake of the COVID-19 pandemic, Canadians are in a transitional phase of healthcare delivery. The pandemic forced changes in how people interact with the healthcare system in Canada, and we are now settling into a new “normal”. Despite signs of recovery, hospitals and emergency rooms continue to grapple with overwhelming demand. A significant number of family physicians opting for a hybrid approach, dividing their time between in-person and virtual consultations, may potentially be contributing to this surge in hospital and ER visits. This, coupled with a surge in [retirements within the GP community](#), has led to a noticeable strain on primary care services.

Consequently, more and more Canadians are finding themselves without a family doctor, resulting in extended wait times for those fortunate enough to have one. This predicament has prompted an increasing reliance on hospital emergency rooms, where extended wait times have become the norm. As a result, there is a pressing need for alternative solutions.

#### **Pharmacists Became More Involved in Patient Care During the COVID-19 Pandemic**

Pharmacists emerged as major contributors to patient healthcare needs throughout the pandemic by administering COVID-19 vaccines and providing treatment advice while family doctors' offices were closed to in-person visits. During the pandemic, pharmacists played an integral role in driving up vaccine rates across Canada. As a result, people began more closely examining how pharmacists could support primary health care.

In January 2023, Ontario pharmacists gained the authority to [prescribe medications for minor ailments](#), encompassing conditions such as eczema, hemorrhoids, impetigo, and urinary tract infections. This enhanced role was conceived, in part, to [relieve the load on family doctors](#), giving them more time to address patients with more complex healthcare needs while improving accessibility. Many see this as a positive step for Ontario, however, the province is by no means the first to initiate such reforms.



### **Ontario Was One of the Last Provinces to Allow Pharmacists to Assess Minor Ailments**

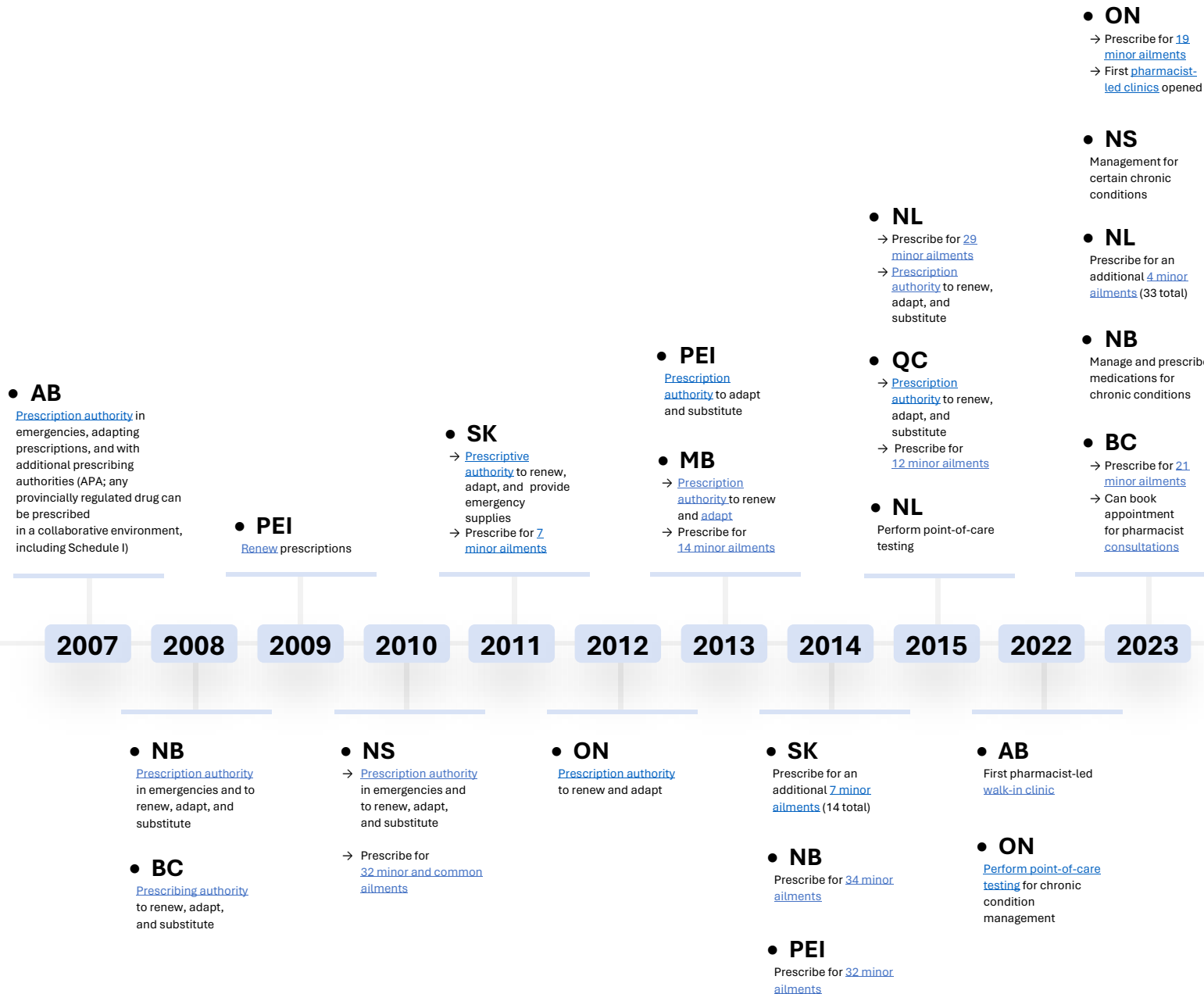
In Alberta, pharmacists have been able to prescribe a broad range of medications [since 2006](#). Provinces like [New Brunswick](#), [Nova Scotia](#), and [Saskatchewan](#) have had policies in place where pharmacists can prescribe medication for minor ailments for several years, with a continuous expansion of the scope of conditions they can address.

In October 2023, Ontario expanded the number of conditions pharmacists could provide prescriptions for to include [six additional ailments](#). This expansion aims to alleviate the burden on healthcare access experienced by individuals unable to find a family doctor.



### **Timeline of Expanding Pharmacist Authority by Province**

The table on the following page outlines the expanding role of the pharmacist across Canada. Alberta tends to be most ahead of the curve in terms of expanding pharmacists' scope of responsibilities, while Ontario lags behind.



### **Provinces Are Starting to Expand Pharmacists' Abilities Beyond Minor Ailments to Encompass Chronic Conditions**

Certain provinces are extending pharmacists' responsibilities beyond minor ailment care. Lethbridge, Alberta, became the first place in Canada to open a [pharmacist-led walk-in clinic](#) in June 2022; in addition to minor ailments, pharmacists can offer support in managing select chronic conditions. Nova Scotia began giving pharmacists [management authority for certain chronic diseases](#) in February 2023 to expand access to primary care. Ontario announced two new pharmacy care clinics in July 2023, with plans for a third later in the year, and New Brunswick followed suit with a [similar pilot program](#), announced in August 2023.

These facilities further blur the line between pharmacist and family physician, with many clinics undergoing a physical transformation, emulating a doctor's office with dedicated waiting areas and treatment rooms. This trend is expected to continue nationwide as provinces increasingly explore the expanded role of pharmacists in healthcare.



### **Lab Testing Is Becoming More Readily Available Among Pharmacists in Some Provinces**

In addition to assessing and prescribing, pharmacists in Alberta, Manitoba, Quebec, and PEI can [order and interpret lab tests](#), providing more accessibility to patients who no longer must visit their doctor for a requisition. Saskatchewan, New Brunswick, and Nova Scotia were under review for implementing similar changes as of August 2023. [Some provinces](#) have taken it one step further by allowing pharmacists to perform rapid point-of-care testing for select illnesses beyond the initial COVID-19 tests.

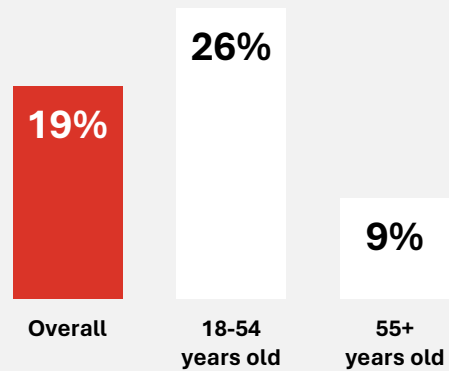
### What Pharmacists Can Do by Province

	ON	QC	BC	AB	SK	MB	NB	NS	PEI	NL
Independently prescribe Schedule 1 drugs										
Renew/extend prescriptions										
Change doses/formulations										
Make a drug substitution										
Assess and prescribe for minor ailments										
Manage select chronic conditions	<small>*Pilot program underway June 2023</small>						<small>*Pilot program underway Aug. 2023</small>	<small>*Pilot program underway Feb. 2023</small>		
Order and interpret lab tests					<small>*Pending</small>	<small>*Limited</small>	<small>*Pending</small>	<small>*Pending</small>	<small>*Limited</small>	
Conduct point-of-care testing					<small>*With restrictions</small>	<small>*Limited</small>				

## One-in-Five Canadians Do Not Have a Family Doctor

To understand the impact the expanding role of the pharmacist could have on the general public in terms of their access to primary healthcare, Leger surveyed over 1,500 Canadians in September 2023 about their knowledge of what pharmacists can do and their relationship with their existing pharmacist. First, Leger wanted to get an understanding of how many people currently have a general practitioner or family doctor. One-in-five Canadians reported that they did not currently have a family doctor, and of those who do, 25% say their GP/family doctor was difficult to get access to or schedule an appointment with. Canadians under the age of 55 are less likely to have a family doctor, potentially since many GPs are retiring, finding a family doctor who is accepting new patients is incredibly challenging, leaving many younger patients without one.

### Currently Do Not Have Access to a Family Physician

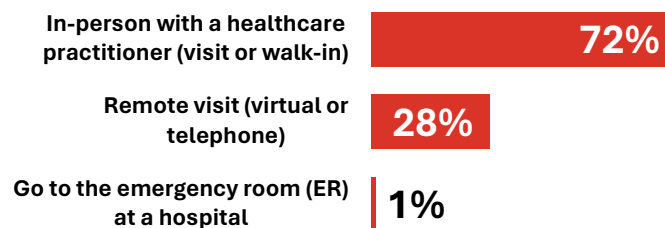


Base: Canadians (n=1,538)

## Canadians Still Prefer Accessing Care via In-Person Visits with a Healthcare Practitioner

When asked how they prefer to receive healthcare, over 70% of Canadians selected in-person for a minor ailment. This trend further opens the door for new providers, like pharmacists, who can see patients in person, which is potentially more convenient for patients than waiting for a doctor’s appointment.

### Preferred Method of Receiving Healthcare for a Minor Ailment



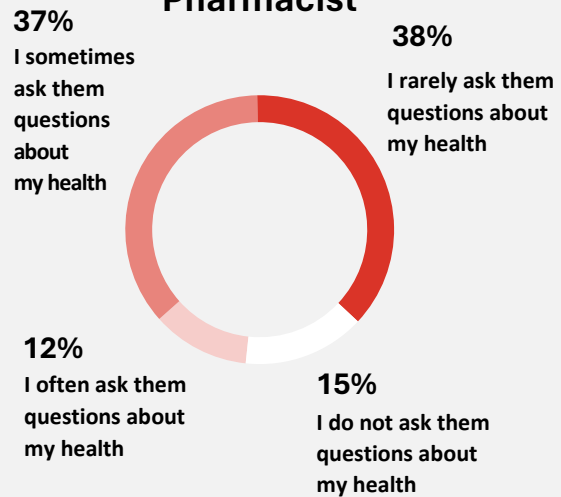
Base: Canadians (n=1,538)

## The Patient-Pharmacist Dynamic Is Also Starting to Change

When asked about their current relationship with their pharmacist, only 32% of surveyed Canadians said they speak to their pharmacist at least once every 2-3 months or more often, suggesting the majority of Canadians have, at best, an infrequent relationship with their pharmacist.

In addition, over half said they rarely ask their pharmacist questions about their health or do not ask them at all. However, three-quarters (77%) of surveyed Canadians say they are likely to see a pharmacist in the future to diagnose/assess and prescribe medication for a minor ailment instead of a doctor. This may indicate a potential new shift in healthcare delivery in Canada, and that the post-COVID-19 healthcare transition is not quite over.

### Patient Relationship with Their Local Pharmacist



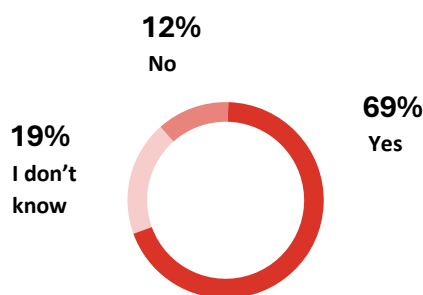
**Base:** Canadians who speak to a pharmacist about their health (n=1,220)



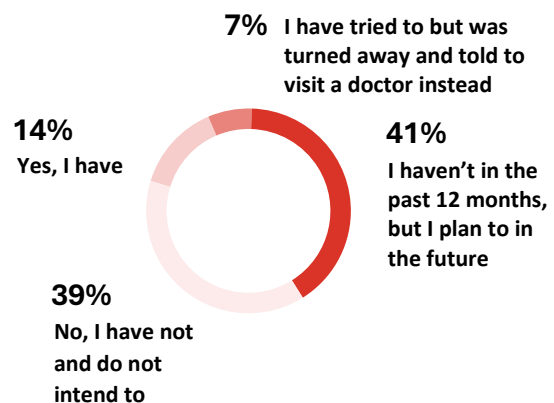
### Only a Small Number of Canadians Have Visited Their Pharmacist to Have a Minor Ailment Diagnosed

More than 30% of Canadians are still unaware or misinformed about whether pharmacists in their province can diagnose/assess and prescribe medication for minor ailments (pharmacists in all provinces Leger surveyed can currently perform these tasks to some extent). Only 14% said they saw a pharmacist in the past 12 months to assess or diagnose their minor ailment. This trend points to a disconnect between people’s knowledge of this practice and their willingness to use it, suggesting more needs to be done to promote relationships between members of the general public and their pharmacists.

**Are Pharmacists Able to Diagnose/ Assess and Prescribe Medications for Minor Ailments?**



**In the Past 12 Months, Have You Seen a Pharmacist to Have Them Diagnose/Assess a Minor Ailment?**



Base: Canadians (n=1,538)

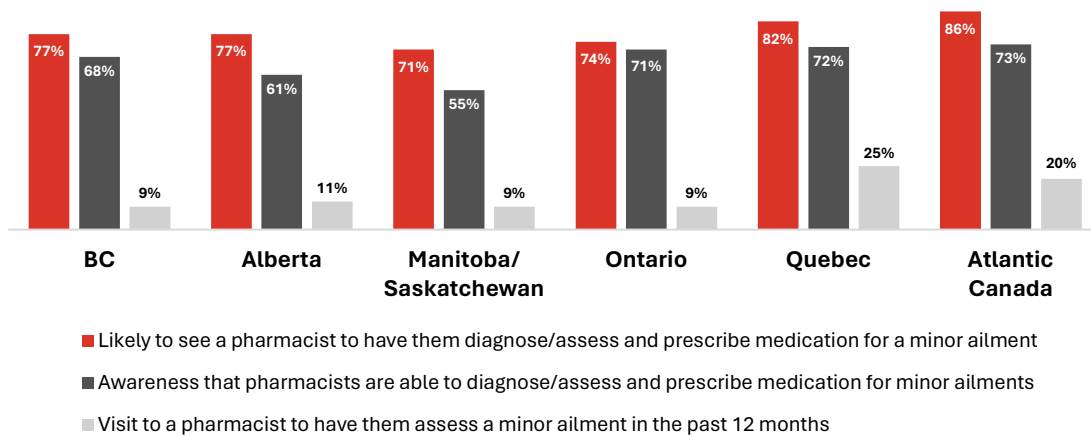
### Atlantic Canadians Eagerly See Pharmacists as a New Option for Minor Ailments Amid Lack of Primary Care Physicians

When broken out by province, Alberta, where pharmacists have had this ability for the longest time, ranked one of the lowest in terms of awareness of pharmacists’ ability to diagnose/assess minor ailments. Ontario was one of the provinces with highest awareness – perhaps because this change only occurred in 2023 and is still fresh in people’s minds.

Likelihood to visit a pharmacist to assess a minor ailment and knowledge of pharmacists’ ability to do so ranked high among people in Atlantic Canada—the shortage of GPs is perhaps felt more strongly by the more rural provinces, which suggests people were eager to see their pharmacist when the option became available. This trend is further supported by the fact that Atlantic Canada reported the second-highest rate of people who visited their pharmacist in the past 12 months to have them assess a minor ailment, second only to Quebec.

People from Quebec reported the highest rate of having visited a pharmacist (25%) for a minor ailment in the past 12 months; they were also the province with the highest rate of people without a GP, with 27% of Quebec respondents indicating they did not have a family doctor. This result suggests that pharmacists could at least be partially making up for the shortfall in primary care physicians in this province.

### Likelihood, Awareness, and Usage of Pharmacists to Diagnose/Assess and Prescribe Medication for Minor Ailments by Province (percent who agreed)



Base: Canadians (n=1,538)

### Early Signs Show Positive Interactions Between Patients and Their Pharmacists

Despite the still limited use of pharmacists to diagnose minor ailments, early signs point to positive interactions between “patients” and pharmacists. Among the 14% of people who had seen a pharmacist, 52% indicated they had received a prescription, 30% indicated they had received a diagnosis, and 24% said they had received advice/information on the medical issue for which the visit was needed. This suggests an overall successful outcome for patient visits with their pharmacist.

### What Was the Outcome of Your Most Recent Visit to the Pharmacist to Have them Diagnose/Assess Your Minor Ailment?



**Base:** Canadians who visited a pharmacist to diagnose/assess a minor ailment in the past 12 months (n=210)

### Pharmacists’ Roles Are Expected to Continue to Grow in the Future

More and more people are expected to begin viewing their pharmacist as an alternative primary care provider. In turn, provincial governments are expected to expand on the conditions pharmacists can assess, and more provinces may begin looking at pharmacists as an option for ongoing monitoring of certain chronic conditions to ensure better access to care. While pharmaceutical manufacturers have traditionally focused primarily on physician engagement, with pharmacists taking on more diagnosis and prescribing abilities, it begs the question: How long will it take for pharmaceutical manufacturers to respond?