New Brunswick Drug Information System (NBDIS)

KROLL
Computer Systems Inc.

Contents

New Brunswick Prescription Drug Information System (DIS)

The NB Drug Information System (DIS) is an electronic system that allows authorized health care providers such as community pharmacists, family physicians, optometrists, and dentists to access and manage individuals' medication information.

Who to call?

For any issues or errors, please contact Kroll Software Support 1-800-263-5876 (Option 1) for assistance who will determine if this is a Kroll issue or a New Brunswick Drug Information System (DIS) issue.

Kroll User Accounts

In compliance with New Brunswick DIS security standards, Kroll users must have a password associated with their user account. The enforcement of local passwords helps to keep patient information private and secure. If you do not currently have individual users and/or user passwords enabled, please contact the Kroll Support Desk.

Kroll Passwords

In compliance with the Drug Information System (DIS) standards, Kroll passwords must be complex and meet the following requirements:

- Must be at least 8 characters long;
- Must contain lower and upper case characters;
- Must contain a number;
- Must contain a special character (!@#$ %^&^*);
- Must be changed at least every 60 days;
- Must be different than the last 6 passwords;

For security purposes, it is recommended that the new password not contain one or more parts of the user's name.

HINT: Users can incorporate a 2-digit number within their password and change the number sequentially each time it expires to facilitate the tracking of passwords that have been previously used.

NBDIS Information Access

For each user, on the first access of the day, the following warning will appear. The user must agree to, and acknowledge before they will be able to proceed. This message must be acknowledged at least once every 24 hours.
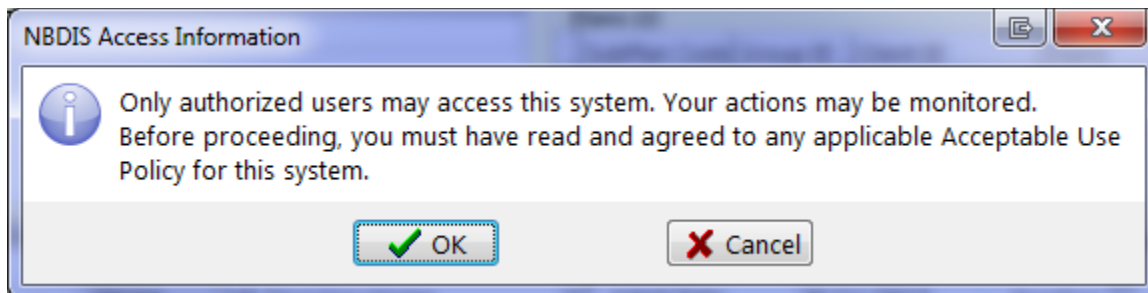
Rules for Searching for a Patient on the Client Registry

For the most part, searching for a patient in Kroll will function in the same manner as before New Brunswick DIS integration. That said, a few extra steps will be required to synchronize data between the local patient record and the New Brunswick DIS patient record. It is of great importance to patient safety that the correct local patient record is linked to the associated provincial Client Registry (CR) patient record because information will be updated to and from DIS via this link.

The ability to search the provincial registry to retrieve patient information is extremely valuable to ensure data quality and completeness. This search allows pharmacies to retrieve information not already recorded for a patient such as Health Card Number (HCN). In order to effectively search the Client Registry from within their system, the pharmacies must use one of the available searches below:

Health Care Number (HCN) – Should always be the first search performed.
- Allows you to search for a HCN from any jurisdiction in Canada.
- Allows searching for Department of Veterans Affairs (DVA), Department of National Defense (DND) clients.
- For New Brunswick Medicare, there is a potential to pull back more than one client.
- Mothers and babies share a HCN for a period of time and may both be pulled back on the search with the mother's HCN.
- Always review the name and date of birth (DOB) when you select a client from the search results.

Enter Entire Name and Date of Birth (DOB) – Enter the entire first and last name and DOB.
- It is preferable to use a 2 token name search (first and last name).
- Entering a two token name and DOB will return clients that match on name and also clients that match on DOB.
- The names returned are those that are phonetically the same as those you entered.
- A list of clients will return; the closest match phonetically and closest DOB match will be at the top of the list.

Enter Entire Name and Phone Number OR Postal Code – Enter the entire first and last name and phone number OR postal code.
- It is preferable to use a 2 token name search (first and last name).
- Entering a two token name and phone number or postal code will return clients that match on name and also clients that match on phone number or postal code.
- The names returned are those that are phonetically the same as those you entered
- A list of clients will return; the closest match phonetically and closest phone number or postal code match will be at the top of the list.

Enter Entire Last Name and Date of Birth (DOB)
- Entering one token name and the DOB will return clients that only match on name and DOB.
- The names returned are those that are phonetically the same as those you entered.
- A list of clients will return; the closest match phonetically and closest DOB match will be at the top of the list.

Enter Entire Last Name and Phone Number OR Postal Code – Enter the entire last name AND phone number OR postal code.
- Entering a one token name and Phone Number or Postal Code will return clients that match on name and also clients that match on Phone Number or Postal Code.
- The names returned are those that are phonetically the same as those you entered
- A list of clients will return; the closest match phonetically and closest phone number or postal code match will be at the top of the list.

Phone number search – This method allows you to search with only a phone number.

- Allows a one token search with phone number.
- Care must be taken to ensure that the client returned matches on other fields so you can be sure that it is the correct client.
- All clients with that phone number will be returned.

Patient Search Scenarios

For pharmacies integrated with New Brunswick DIS, there are four possible scenarios that can be encountered when searching for a patient:

- **Scenario 1 – Existing Local Patient also exists in Client Registry (Not Synchronized)**

  Patient is in Kroll and exists in the Client Registry (CR). Note that all patients with NBPDP will be found in the Client Registry.

- **Scenario 2 – Existing Local Patient (Not Synchronized and Not Found in Client Registry)**

- **Scenario 3 – New Patient (Not found in Kroll but exists in Client Registry)**

  Patient is not found in the Kroll system. This patient has an HCN number or has been entered in the Client Registry. Out-of-province patients may show up with alternate identification numbers.

- **Scenario 4 – New Patient (Not found in Kroll or Client Registry)**

  Patient is not found in the Kroll System and has not been entered on the Client Registry. Adding the patient in Kroll will add them to the Client Registry.

Scenario 1 – Existing Local Patient (Not Synchronized)

This patient exists in the Kroll system but is not yet synchronized with the Client Registry (CR).

Synchronize by Health Care Number

(The local Kroll patient already has a health care number recorded on their file.)

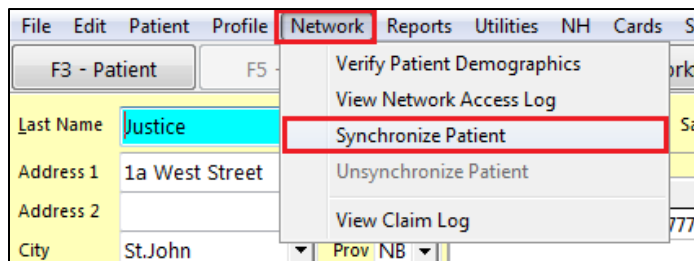1. Search for the patient using the **F3 - Patient** search. If provided, use the HCN to search. Select the patient.

2. The patient card opens. The **DIS Data Status** field will show a yellow '**Unsynchronized**' indicator.

3. From the patient card, go to **Network** > **Synchronize Patient** and enter your login credentials.

4. Patient information from the local Kroll record is automatically copied into the Network Patient Search. The primary search will always be based on the Health Care Number when available. Click **Search**.
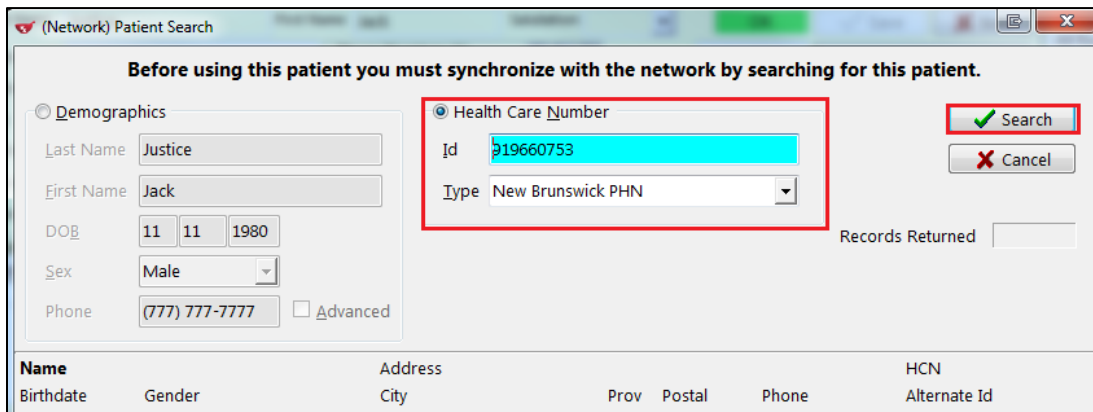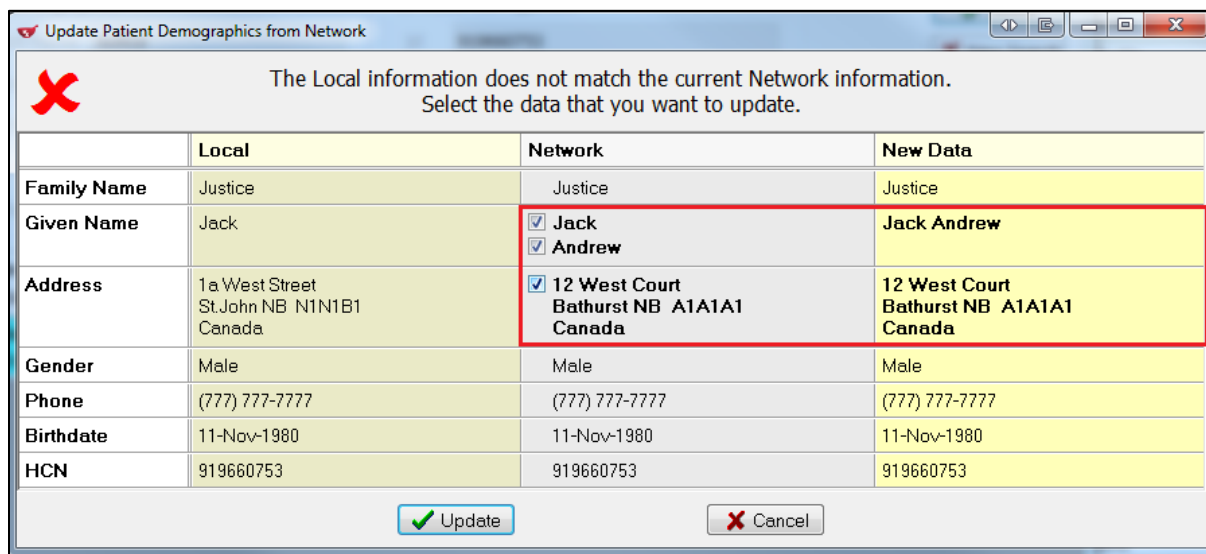
5. An exact match on the HCN is found. Click **Select.**
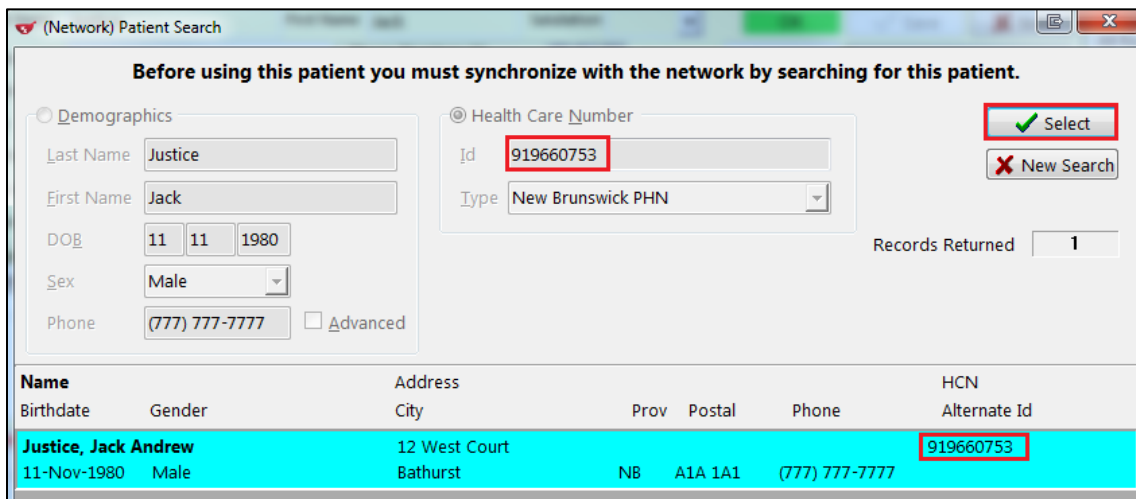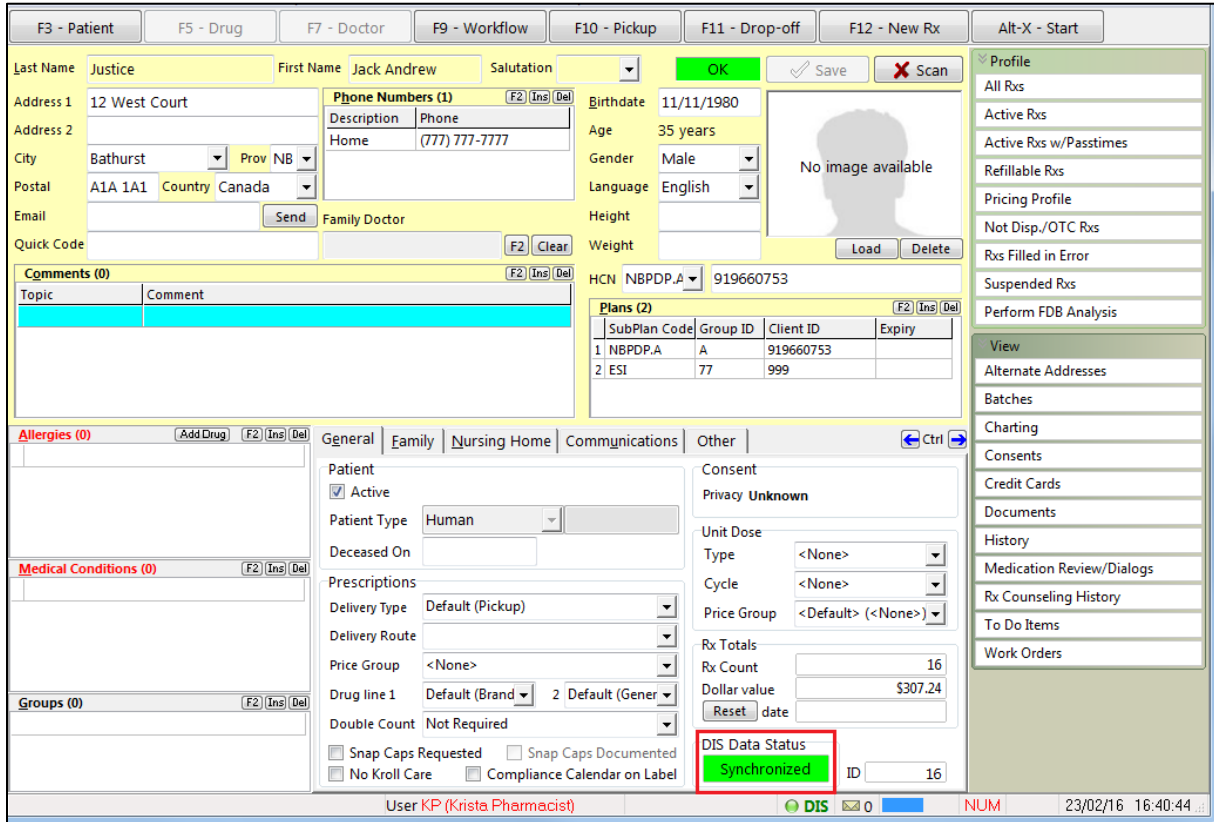
6. The **Update Patient Demographics from Network** window will appear. This screen allows you to compare information between the local and network record. The first column displays current local patient information; the second column displays network (Client Registry) patient information; the last column displays the resulting information that will be updated on the local Kroll patient record. Any mismatched fields will be prefixed with a checkbox. Placing a checkmark in any of those boxes will be reflected in the New Data column.

   When you are finished comparing and optionally selecting the fields to update, click **Update**.

7. The patient is now synchronized with the DIS. This is indicated in the lower right hand corner under **DIS Data Status** with a green '**Synchronized**' indicator.

Synchronize by Demographics

(The local Kroll patient does not have a health care number on file.)
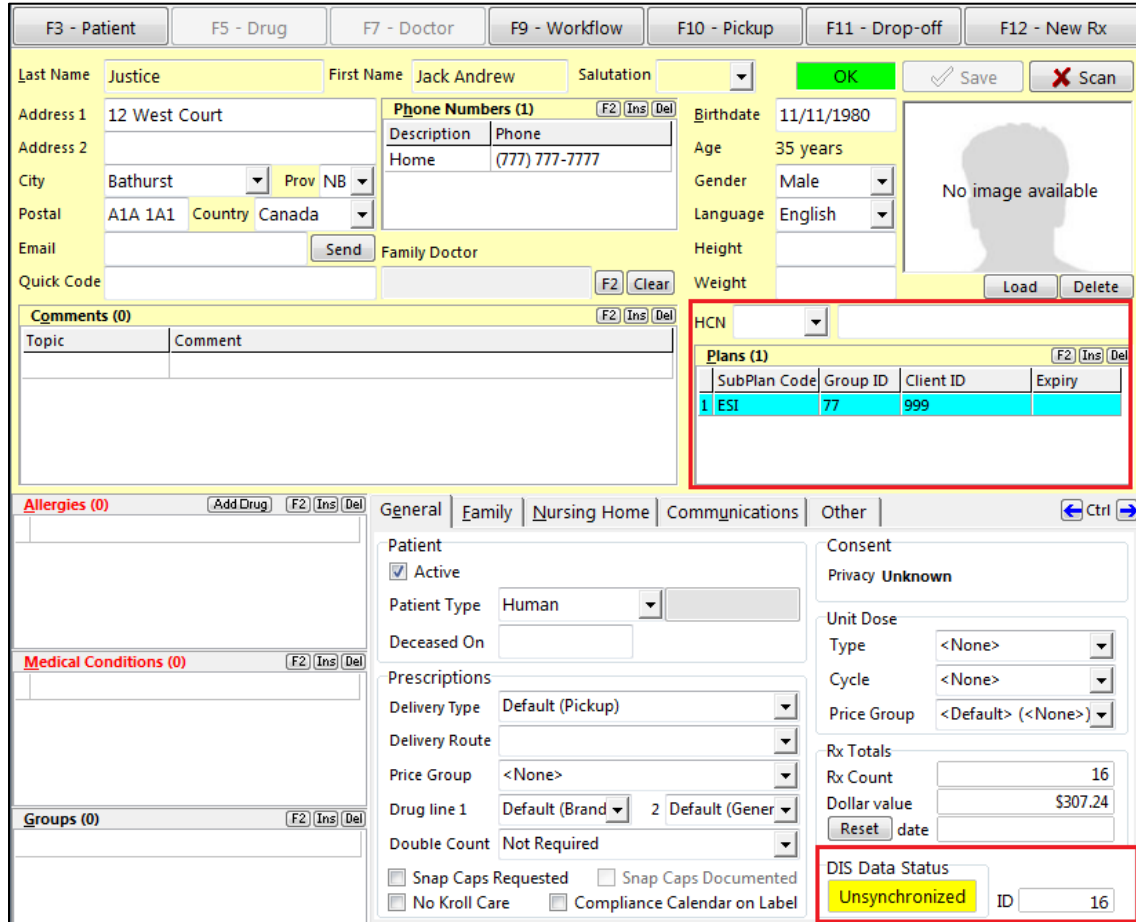
1. When a patient doesn't have a Health Care number, use the patient name to search. Select the patient.

2. The patient card opens. The **DIS Data Status** field will show a yellow '**Unsynchronized**' indicator.

3. From the patient card, go to **Network** > **Synchronize Patient** and enter your login credentials.

4. When the Health Care Number is not available, the Demographics search will be enabled. Click **Search.**
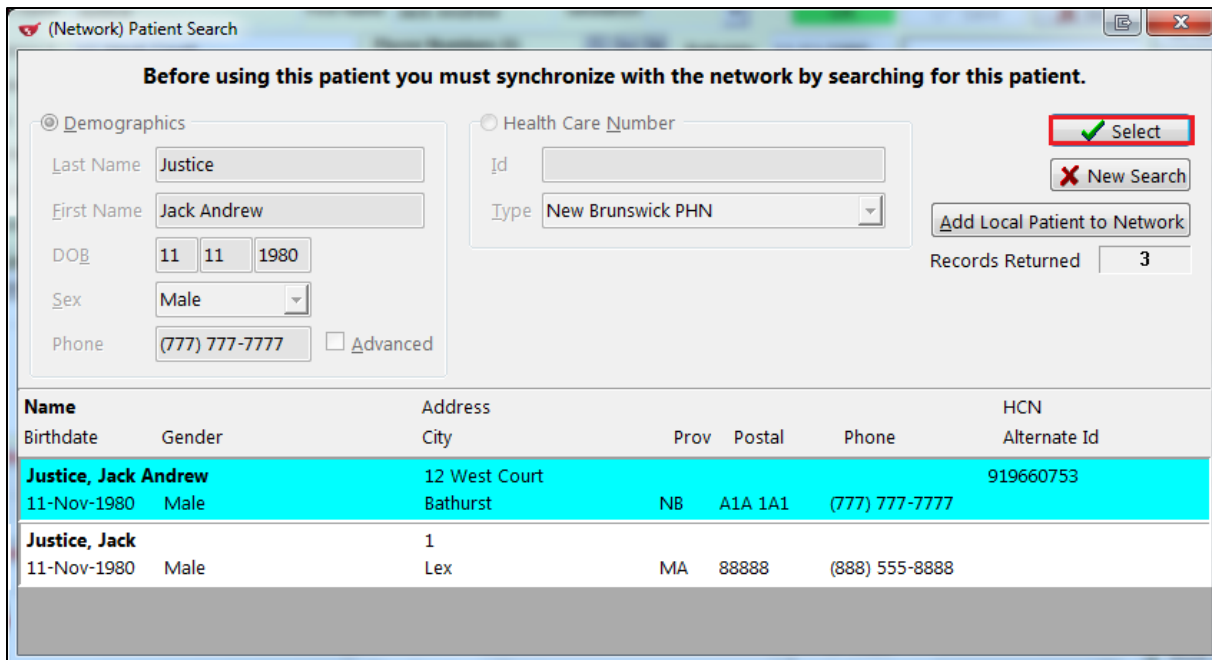
5. A list of patients closely matching the demographic criteria is displayed. Click **Select** on the patient to synchronize to the local record.
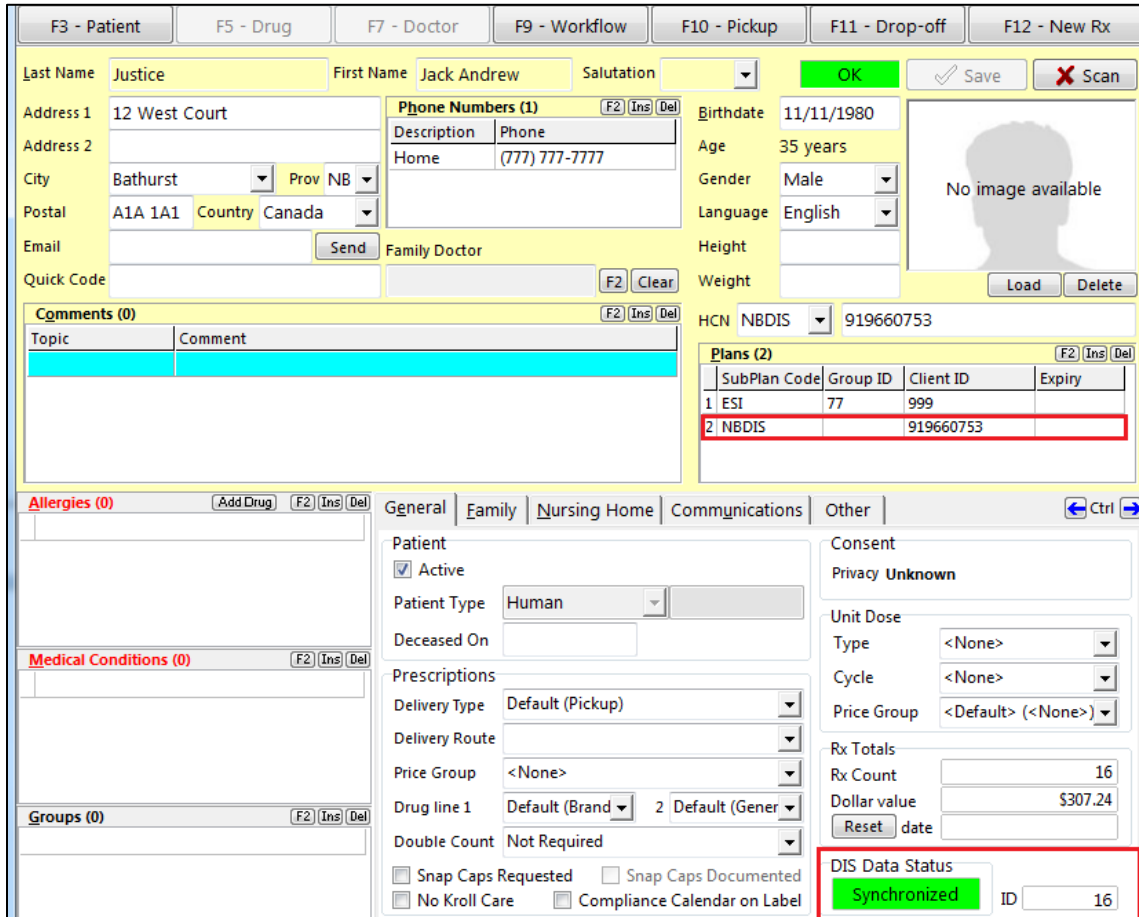
6. The **Update Patient Demographics from Network** window opens. This screen allows you to compare information between the Local and Network record. Any mismatched fields will be prefixed with a checkbox. Placing a checkmark in any of those boxes will be reflected in the New Data column that shows you what your patient record will look like once you update. When finished comparing, click **Update**.

7. The patient is now synchronized with the DIS. This is indicated in the lower right hand corner under **DIS Data Status** with a green '**Synchronized**' indicator. Note that the **NBDIS** plan is automatically inserted.
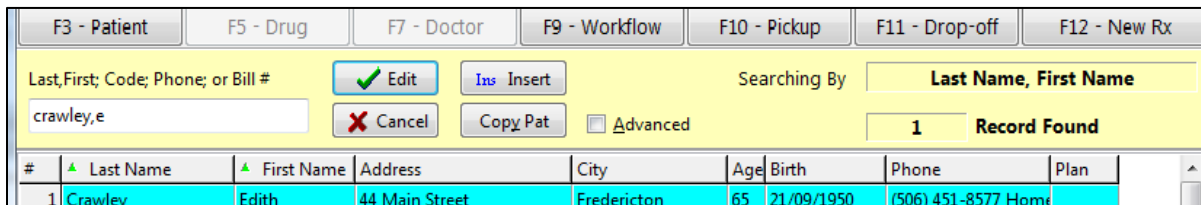
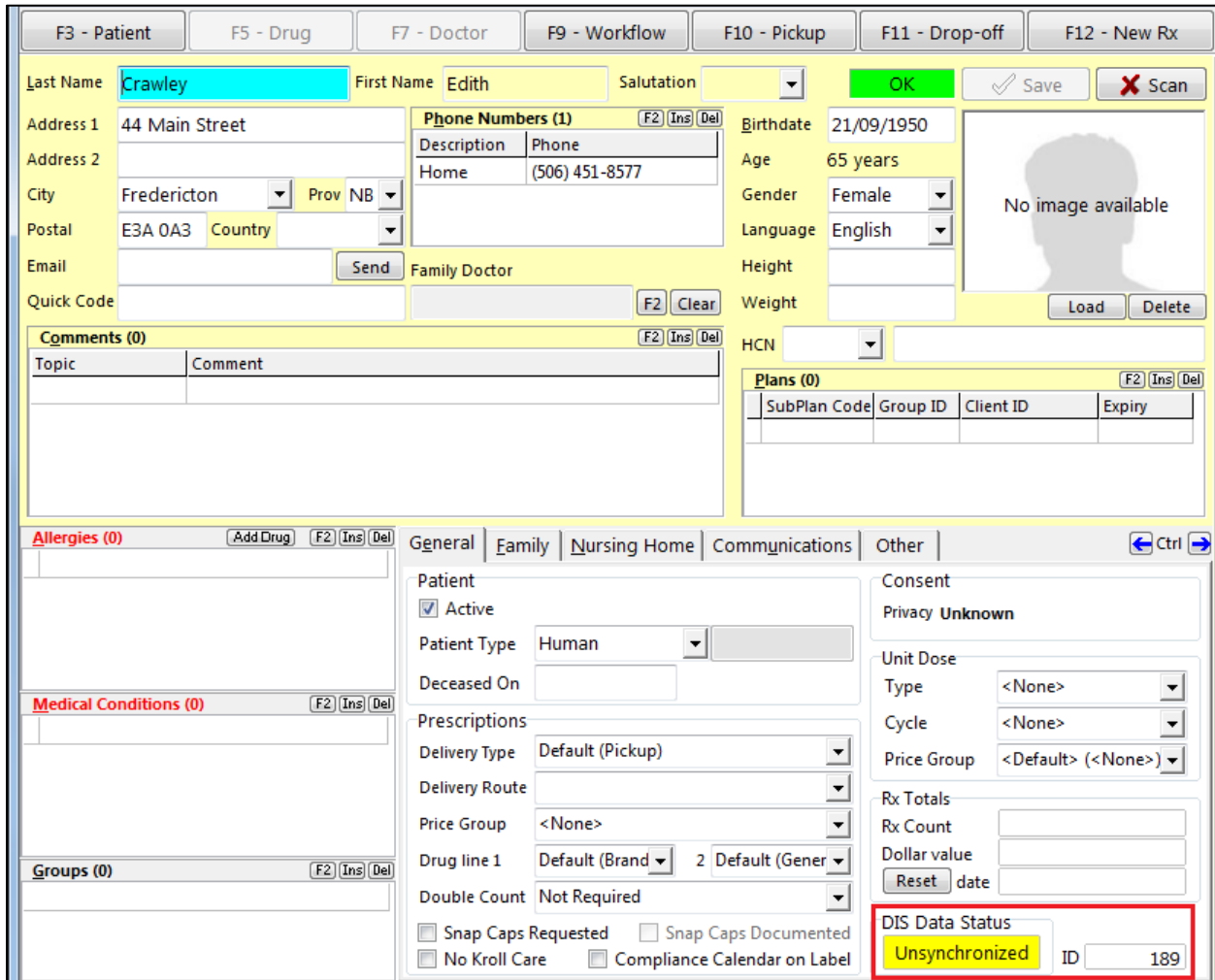# Scenario 2- Existing Local Patient (Not Synchronized and Not Found in Client Registry)

1. Search for the patient using the **F3 - Patient** search. Select the patient. This patient exists locally in your Kroll database, but has not been synchronized with a Network patient record.

2. The patient card opens. The **DIS Data Status** field will show a yellow '**Unsynchronized**' indicator.

3. From the patient card, go to **Network** > **Synchronize Patient** and enter your login credentials.

4. Patient information from the local patient record will automatically be copied into **Demographics** on the (**Network) Patient Search** window and used as search criteria. Click **Search** or press **Enter** on the keyboard to search the CR for a matching patient.

If no records are returned for the search criteria entered, you will be shown a message indicating 'No results found with the specified search criteria'. If you have more information on this patient, please retry with additional search criteria.

5. If you have been provided with additional information for this patient, then an advanced search should be performed.

NOTE: When doing a demographics search, minimum criteria must include the last name and date of birth, last name and postal code, or phone number. If you attempt to search without the minimum criteria, a validation error will occur.

6. If the patient is still not found, select **Add Local Patient to Network.**
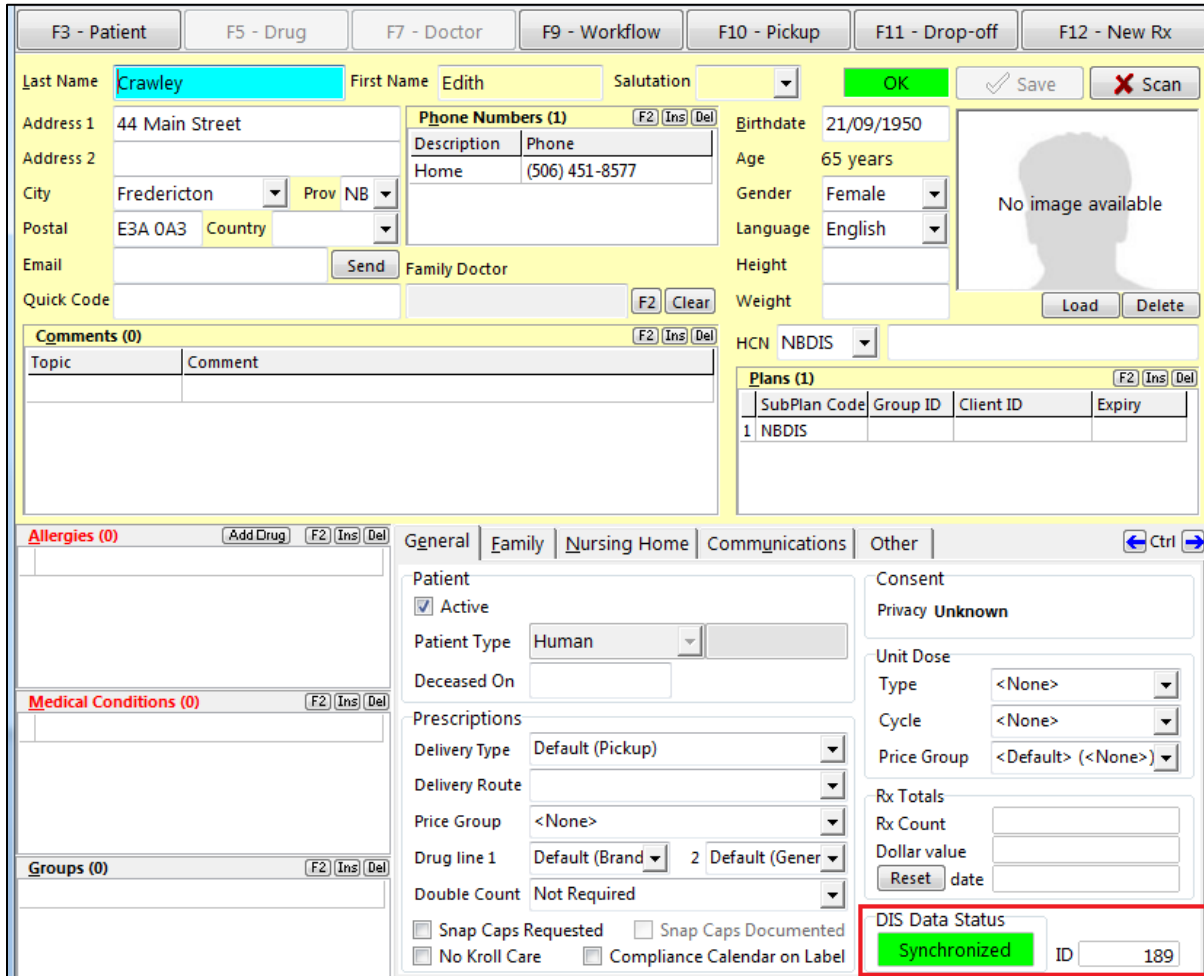
7. The patient is now added to the Network as indicated by the **DIS Data Status** of '**Synchronized**'. Note that the **NBDIS** plan is automatically inserted but does not contain a client ID.

Scenario 3 – New Patient (Not Found in Kroll but Exists in Client Registry)

1. Search for the patient using the **F3-Patient Search**. If provided, use the patient's HCN as this is the preferred method should you need to search the network. Verify the patient does not exist on the local system and click **Insert.**
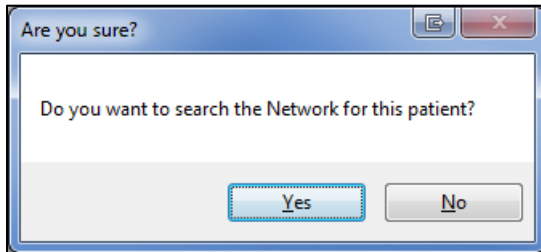
2. To search the Client Registry for a matching patient, answer **Yes** when asked '**Do you want to search the Network for this patient?**'


NOTE: If you answer **No**, you will be brought directly to the **F3 - Patient** card to enter the patient's information manually.
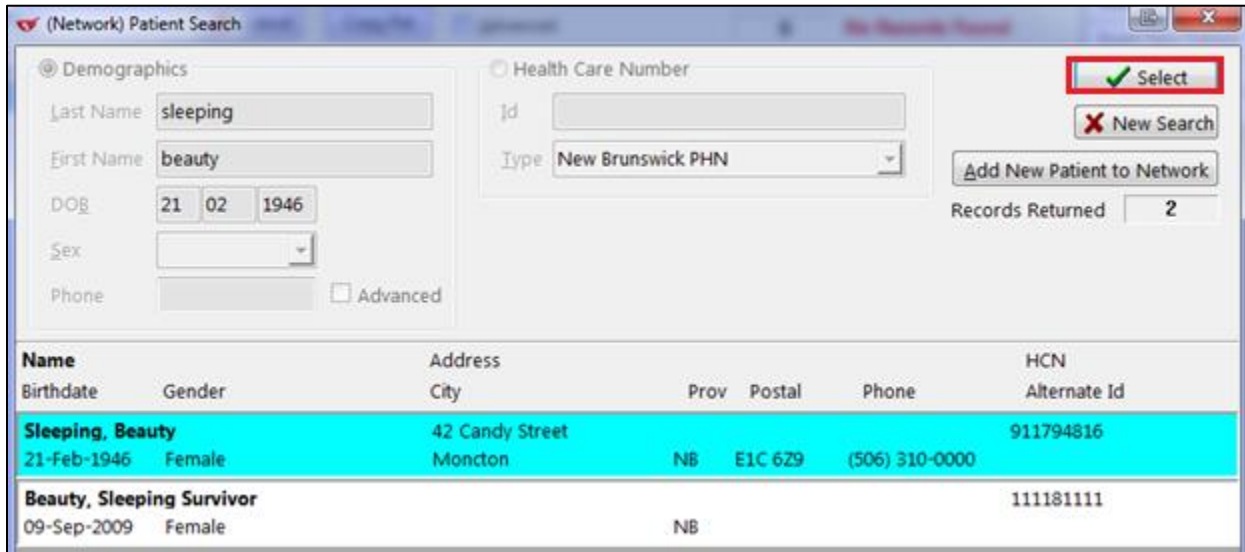
3. Input all available patient information into the **(Network) Patient Search** screen and click **Search** or press **Enter** on the keyboard.
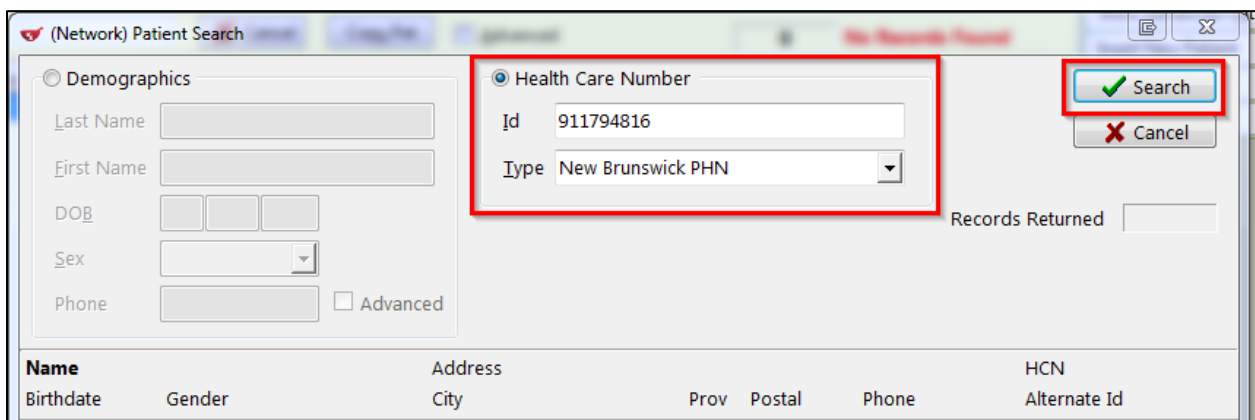
NOTE: When the health care number is not available, the last name and date of birth, last name and postal code or phone number must be provided in order to initiate the search.
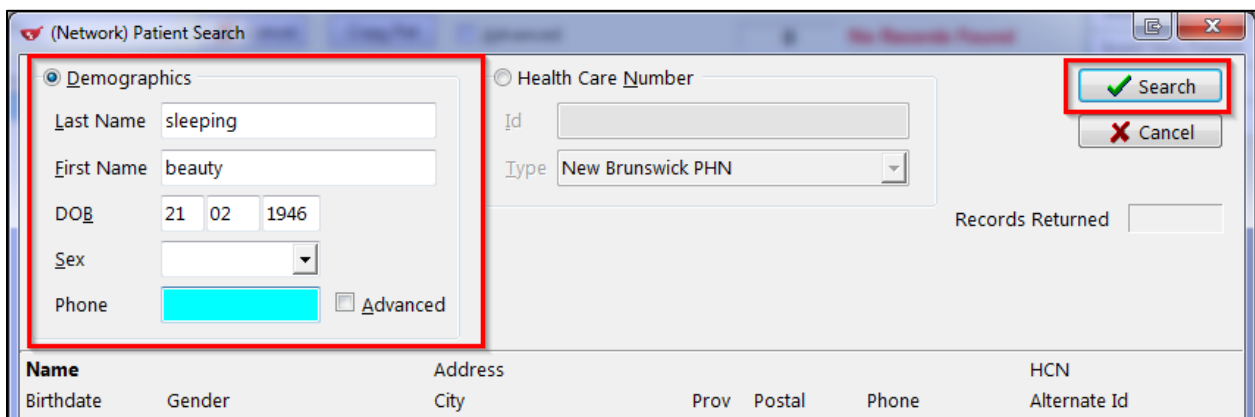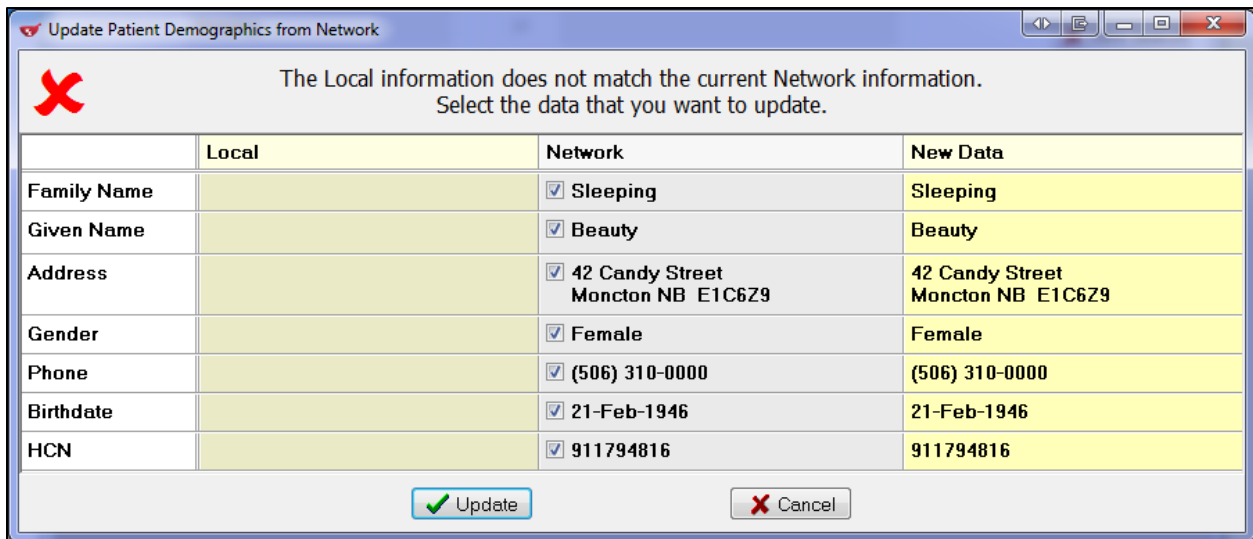
4. Select the matching patient from the CR results by highlighting the entry and clicking **Select** or by pressing **Enter** on the keyboard.
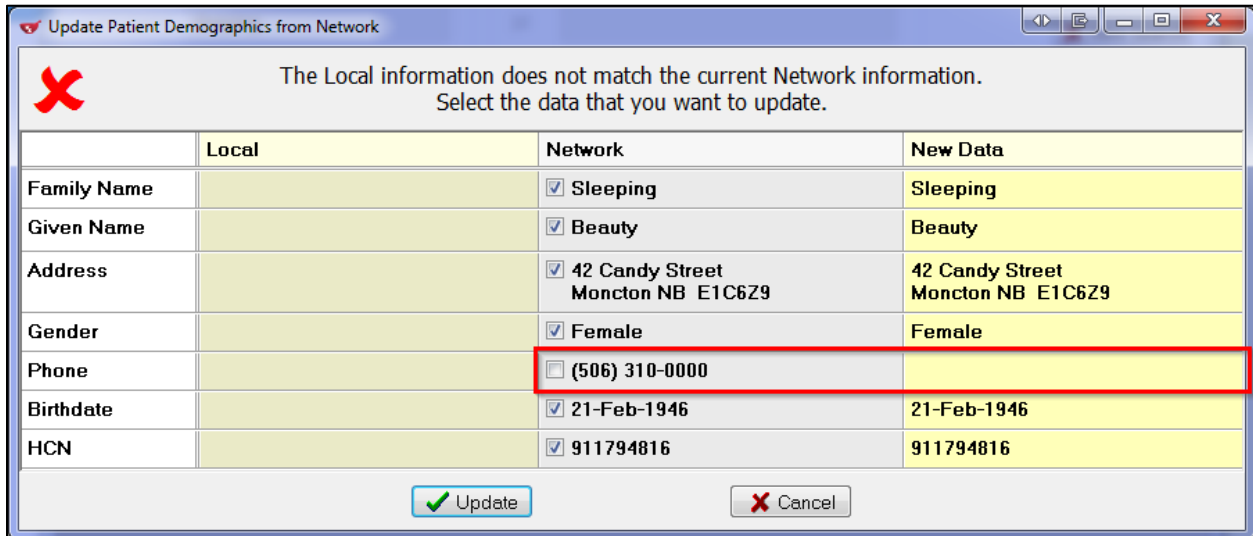

5. The **Patient Update** screen will appear allowing you to select the information they want to use from the Client Registry to create the local Kroll patient record.

6. By default, all of the **Network** columns will be flagged for updating. If you do not want to update the local data with the Network data, uncheck the flag next to the applicable field.
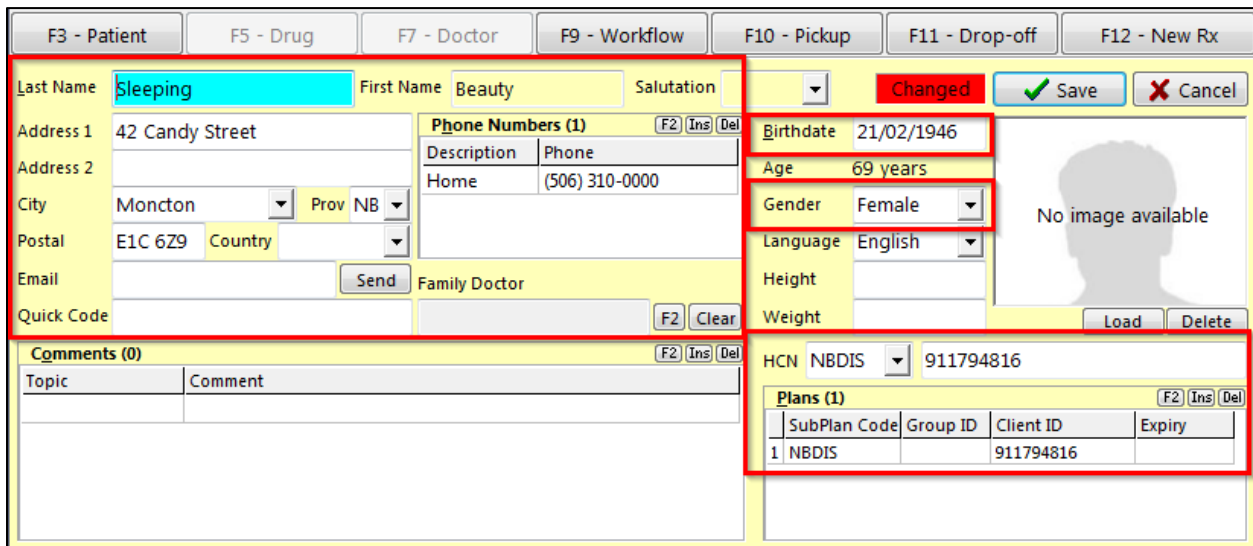
7. Once you have finished selecting the Network data that needs to be updated into the local patient record, click **Update** or press **Enter** on the keyboard. Selected patient information will be populated into the local Kroll record.

8. Input other pertinent patient information (e.g., snap cap preference, additional plan information, height, weight, etc.) and click **Save** or press **Enter** on the keyboard.

9. Once the patient card is saved, the **DIS Data Status** window will display a green '**Synchronized**' indicator.

Scenario 4 – New Patient (Not Found in Kroll or Client Registry)

1. Search for the patient using the **F3 - Patient** search.

2. Verify that the patient does not exist in the local Kroll database, then click **Ins** or press **Insert** on the keyboard.
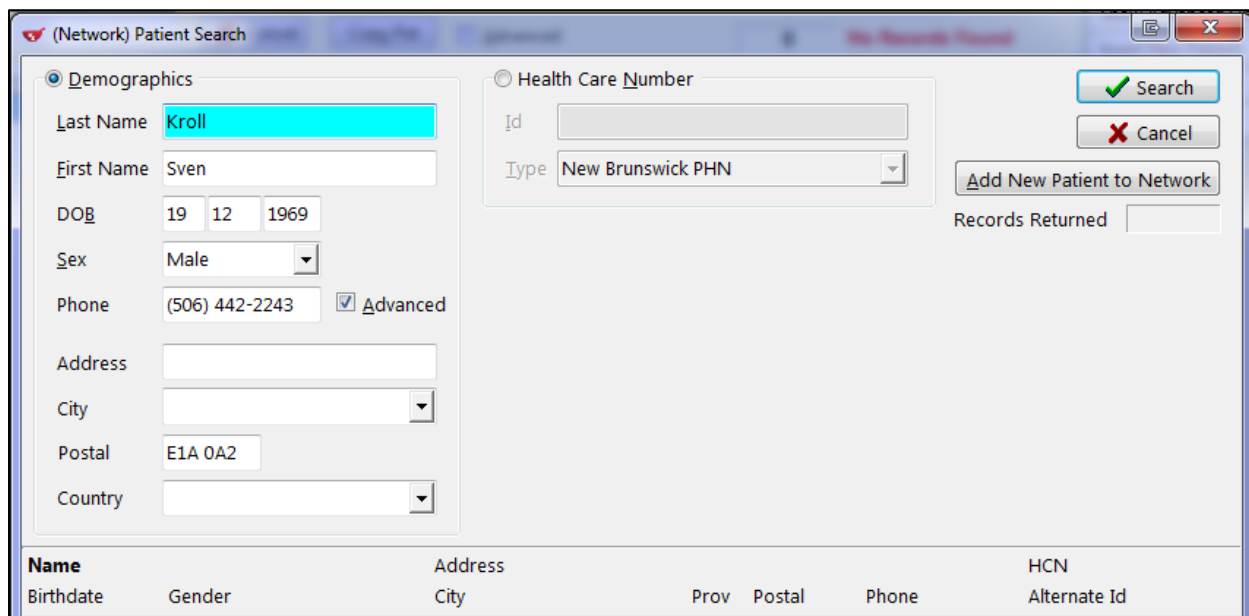
3. When asked '**Do you want to search the Network for this patient?**' answer **Yes** to search the CR for a matching patient.

4. Input all available patient information into the **Network Patient Search** window and click **Search** or press **Enter** on the keyboard to search the CR for the patient.

NOTE: When the health care number is not available, the last name and date of birth or last name and postal code or phone number must be provided in order to initiate the search. Searching by middle name is also an option; however, no separate field is present in Kroll. The middle name can be entered by itself in the first name field or the combination of both the first and middle name can be placed in the first name field.

5. If the search does not return any matching patient records, you can perform an **Advanced** patient network search by checking the **Advanced** flag.
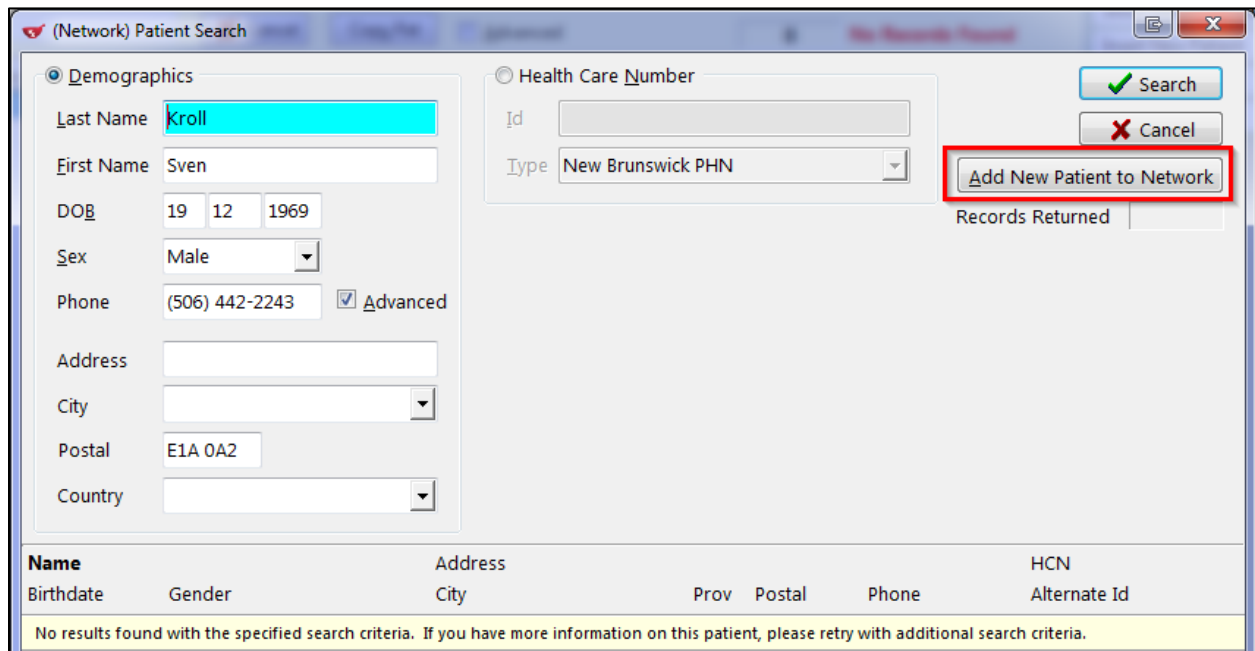
NOTE: If no records are returned for the search criteria entered, you will be shown a message indicating "No results found with the specified search criteria. If you have more information on this patient, please retry with additional search criteria".

6. If all available patient information has been entered to search for the patient and still no matching results are returned, click **Add New Patient to Network**.

7. You will then receive a warning that this is a new patient and they will be added to the network once you have saved the changes to the local system
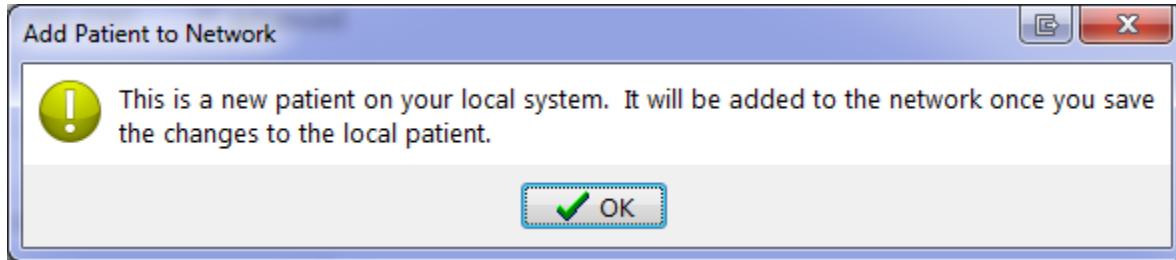
8. Complete all necessary patient information and click **Save** or press **Enter** on the keyboard to save the patient file. The local patient information will now be recorded on the DIS for this patient.

9. Once you have saved the patient, the system will transmit the information to the network.
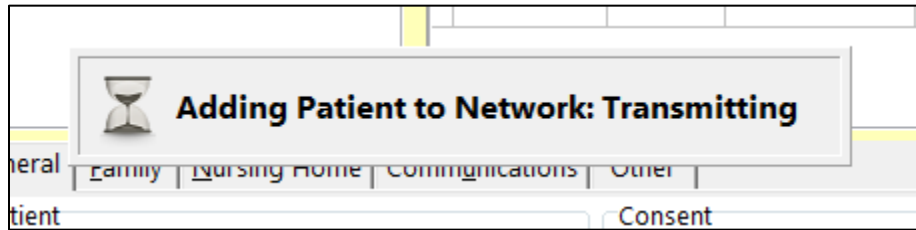
10. Upon completion, the DIS **Data Status** will show a green '**Synchronized**´ indicator.

Note: If the patient doesn't have enough information entered, the DIS Data Status will show a red **Incomplete**. When you hover your mouse over the **Incomplete** status, it will display the information that is missing and required.
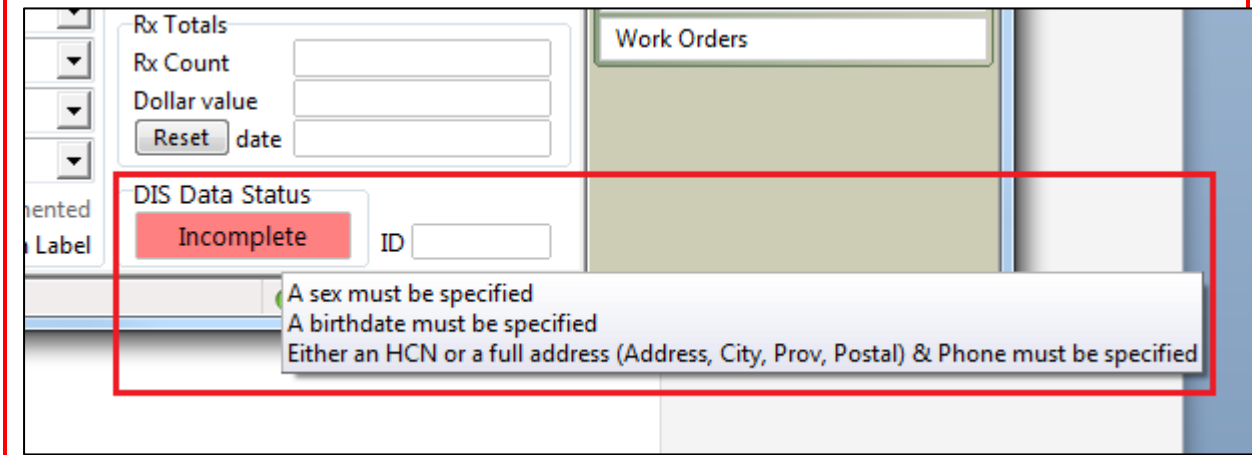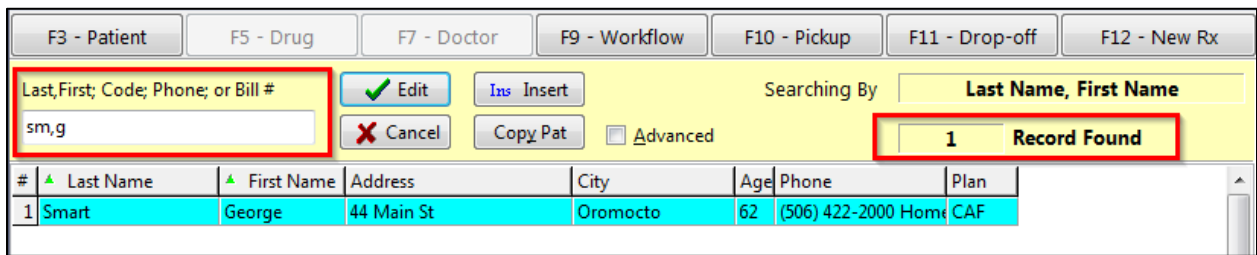
Out-of-Province Patients (Federal Plan Members - CAF, IA, RCMP, VET) - Alternate IDs

Some New Brunswick patients will have a PHN issued out of province, or an ID issued by a federal agency.
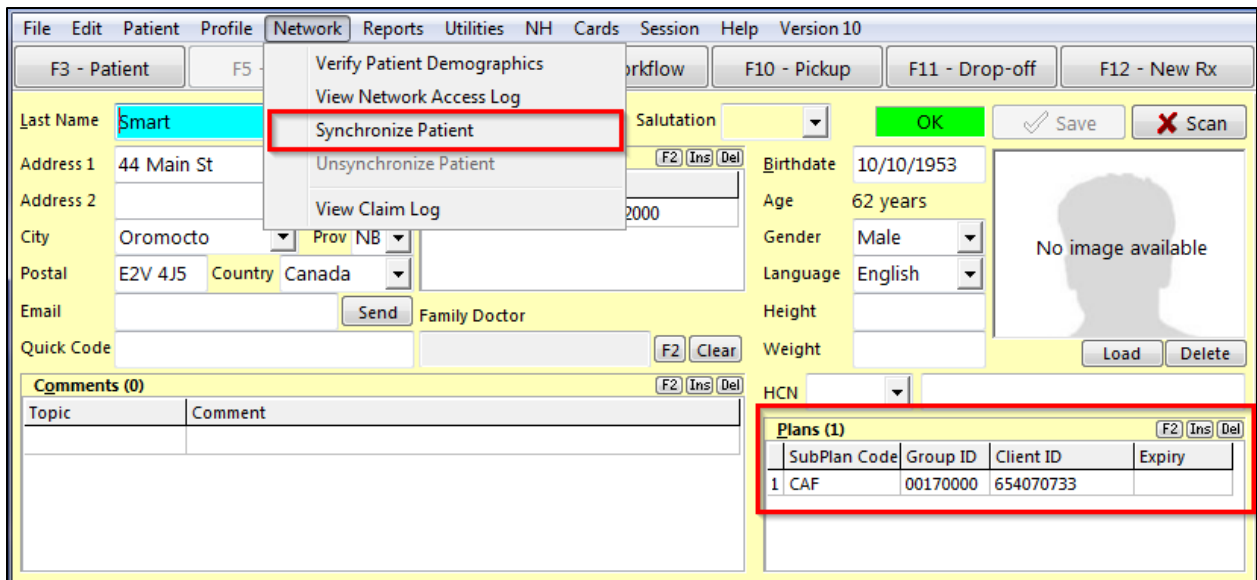
Existing Local Patient

1. Search for the patient in the local Kroll system.
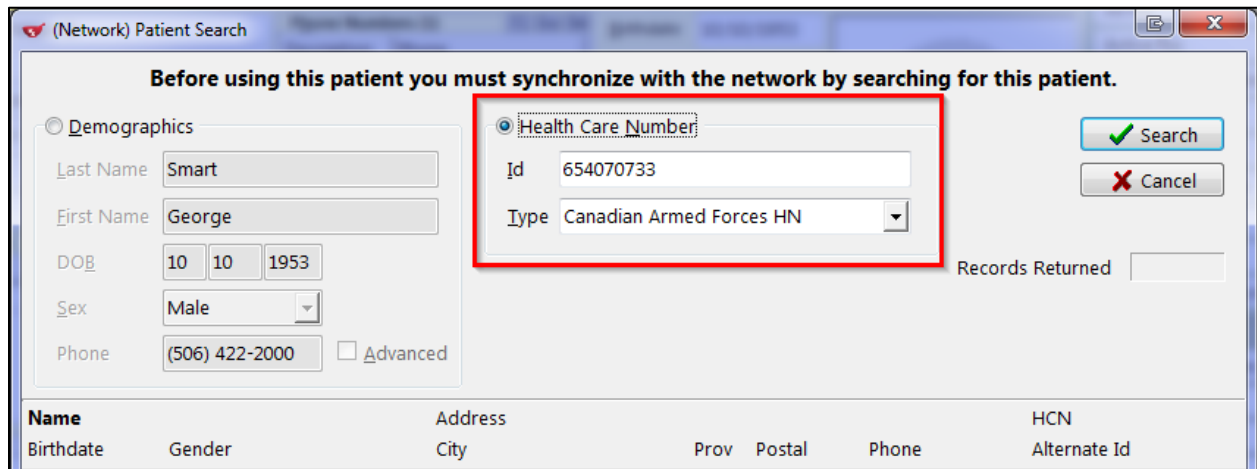
2. From the patient card, go to **Network** > **Synchronize Patient**. Enter your login credentials.

3. From the **(Network) Patient Search**, search for the patient on the Client Registry. The ID **Type** has been changed to the appropriate plan/provincial identifier.
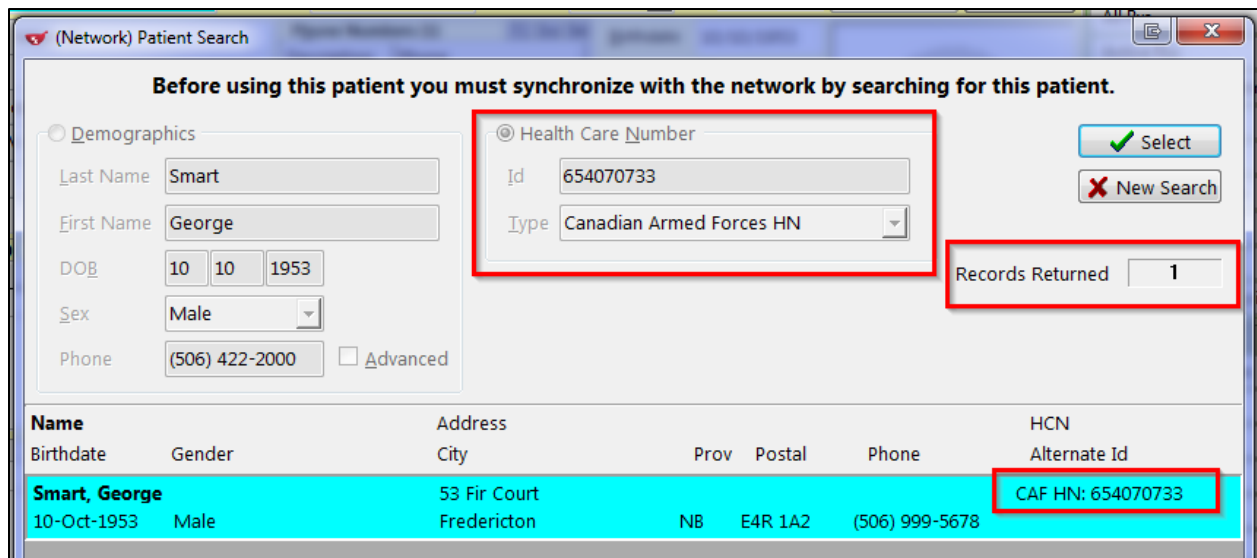
a) If the patient is FOUND, the Client Registry will return the alternate ID in the field directly below the PHN field.
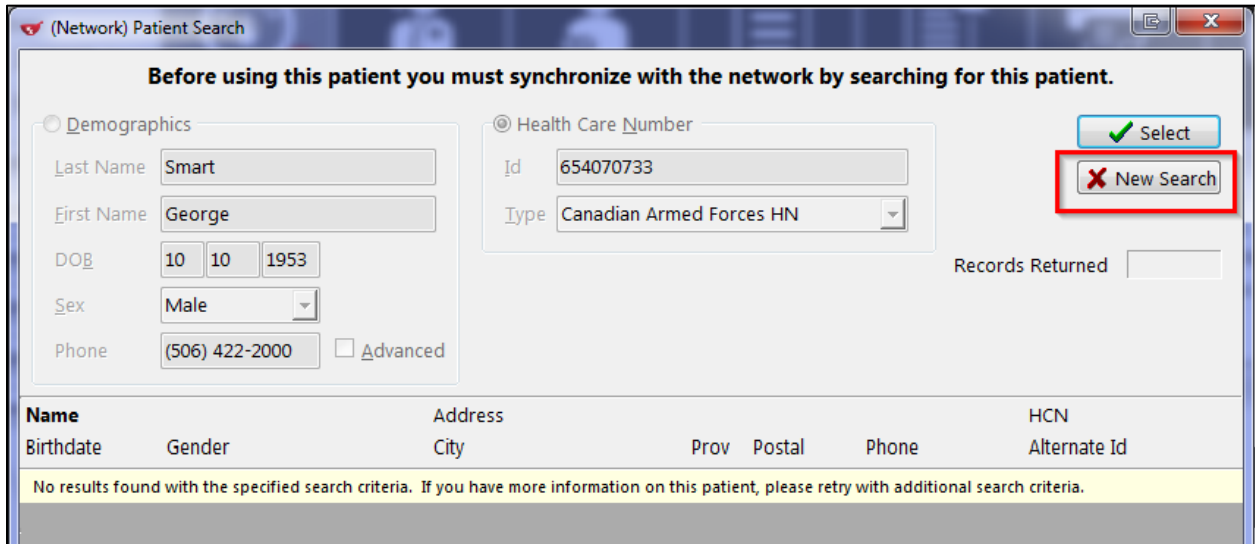
b) If the patient is NOT FOUND, select **New Search**.

i. Click on the **Demographics** radio button and retry the search with the minimum requirements.
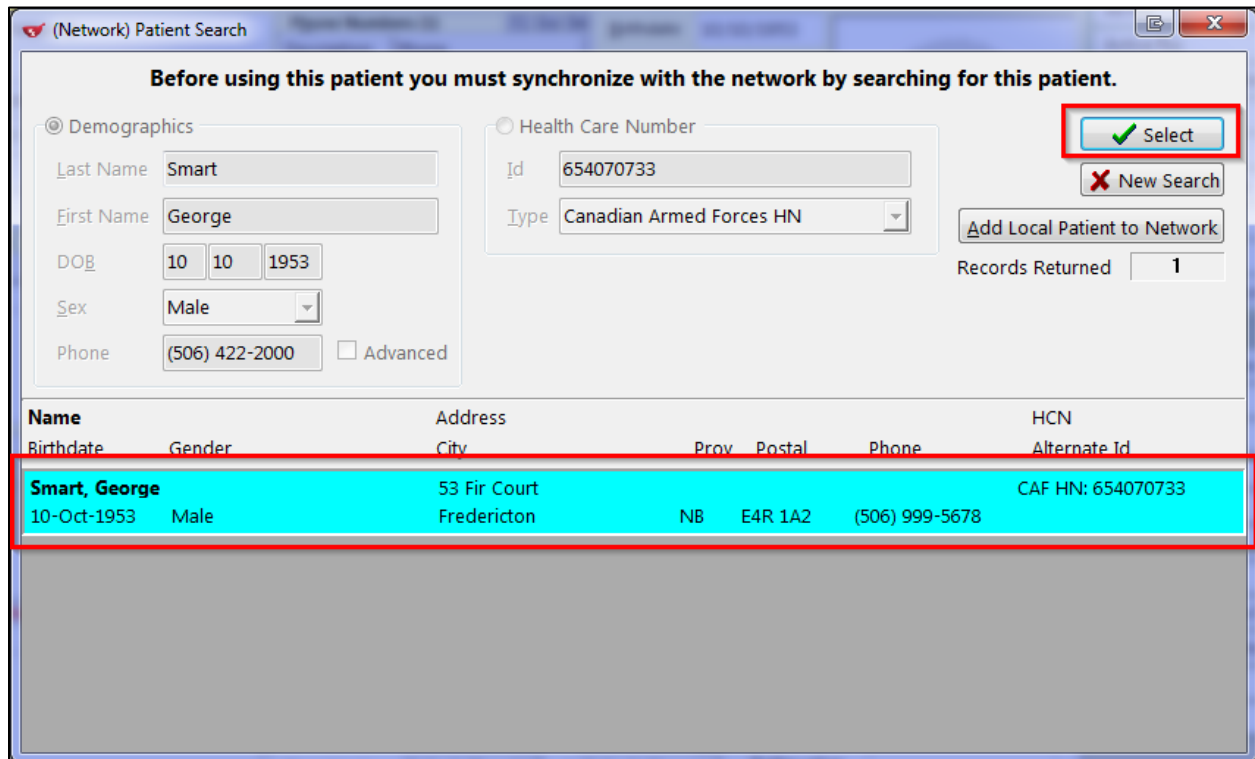
ii. If the patient is returned, choose **Select**.
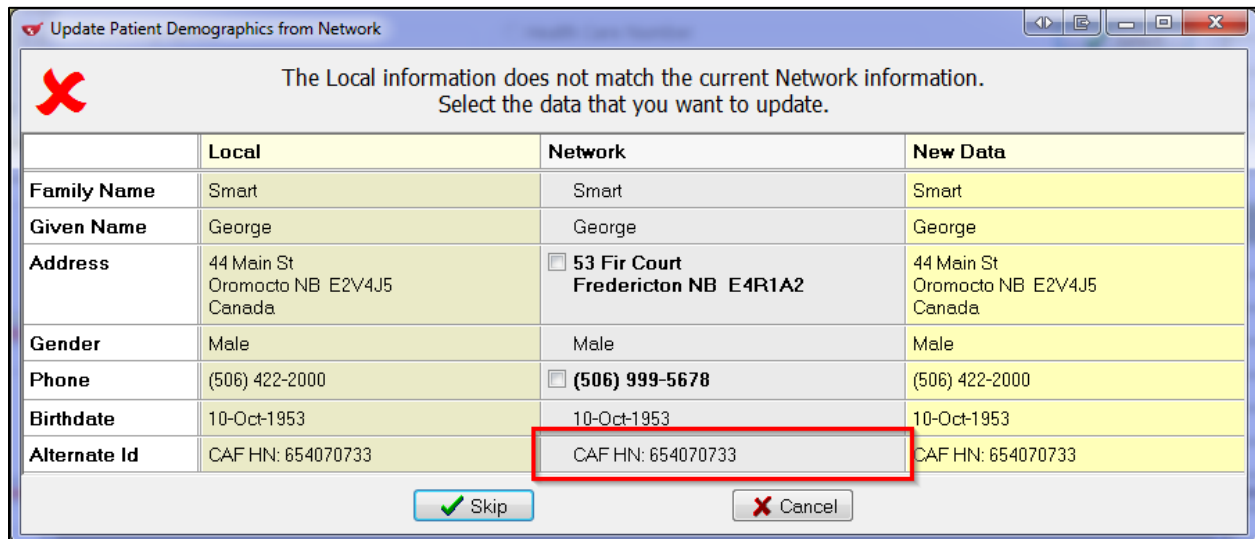
4. Selecting the patient will call up the **Patient Update** window. Select all the parameters that need to be updated into the local Kroll patient card and click **Update/Skip**.

5. Patients with an alternate ID issued by a federal agency will have an **NBDIS** plan containing a blank client ID added to the patient card.
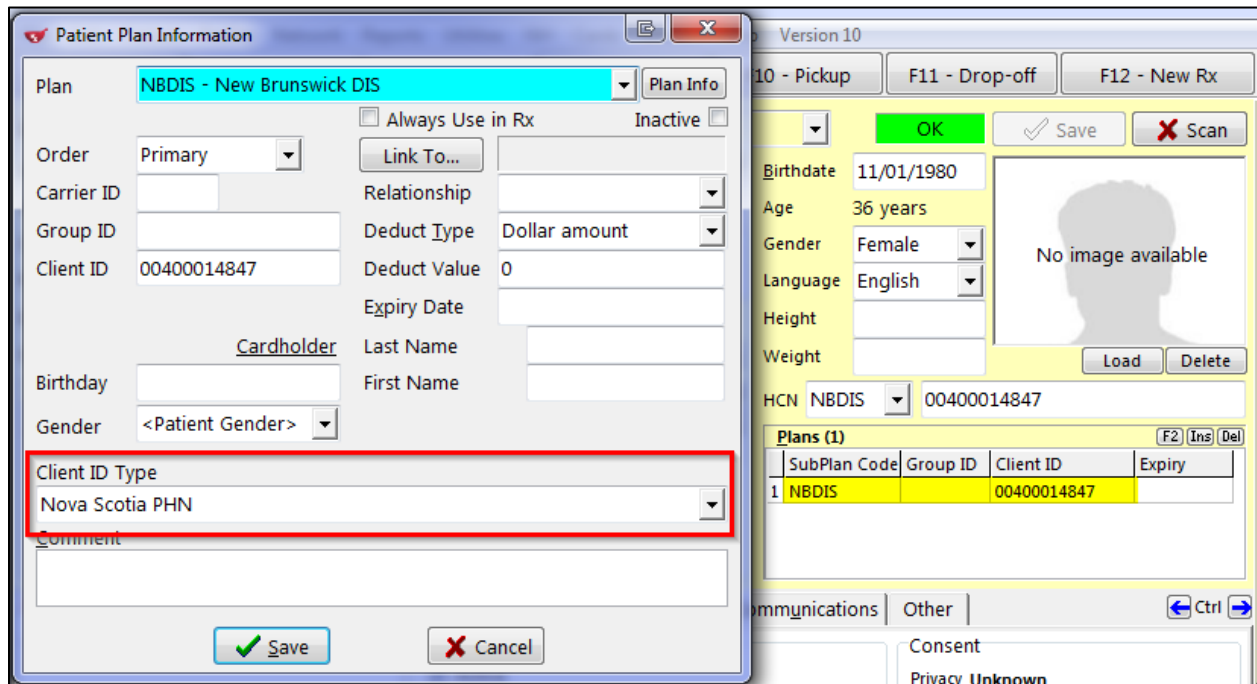
Out-of-Province Patients

Patients with a PHN issued out of province will have an **NBDIS Plan** with their out-of-province **PHN** in the **Client ID** field added to the patient card.

At the plan level, the **NBDIS Plan** will be identified with the province of issue **Client ID Type**.
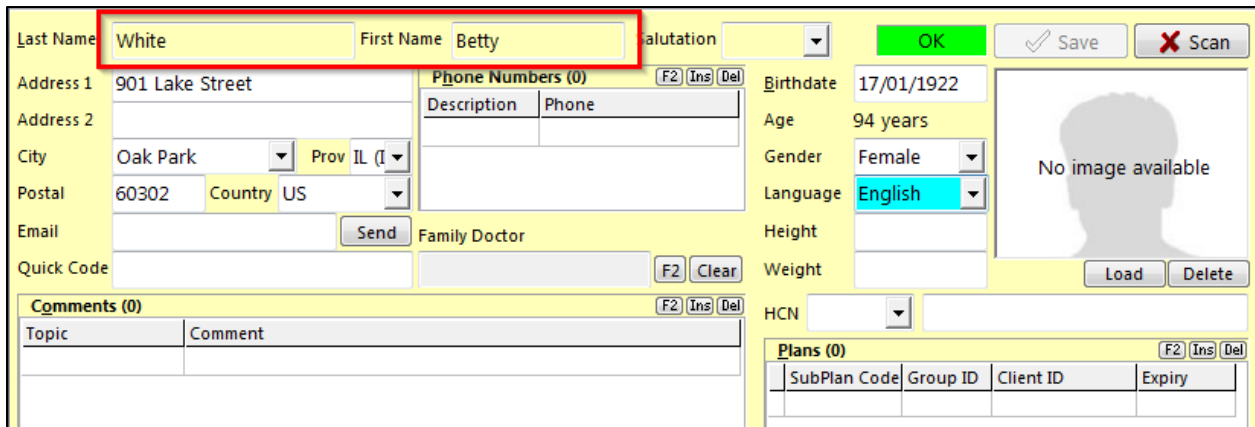
Patient with Multiple Given Names

Pharmacy users will often encounter situations where a patient will go by multiple names. For example, a patient may have registered with New Brunswick Health under the first name "Robert", but would like the name on his vial labels to read "Bob". A patient may have registered with New Brunswick Health using their maiden name, and then get married and adopt their spouse's last name without informing the provincial Client Registry. In situations like these, users can send one name to DIS (or any plan) and have another name printed and recorded on the local Kroll patient file.

1. Search for and call up the local **F3 - Patient** card with the name that the patient is using.
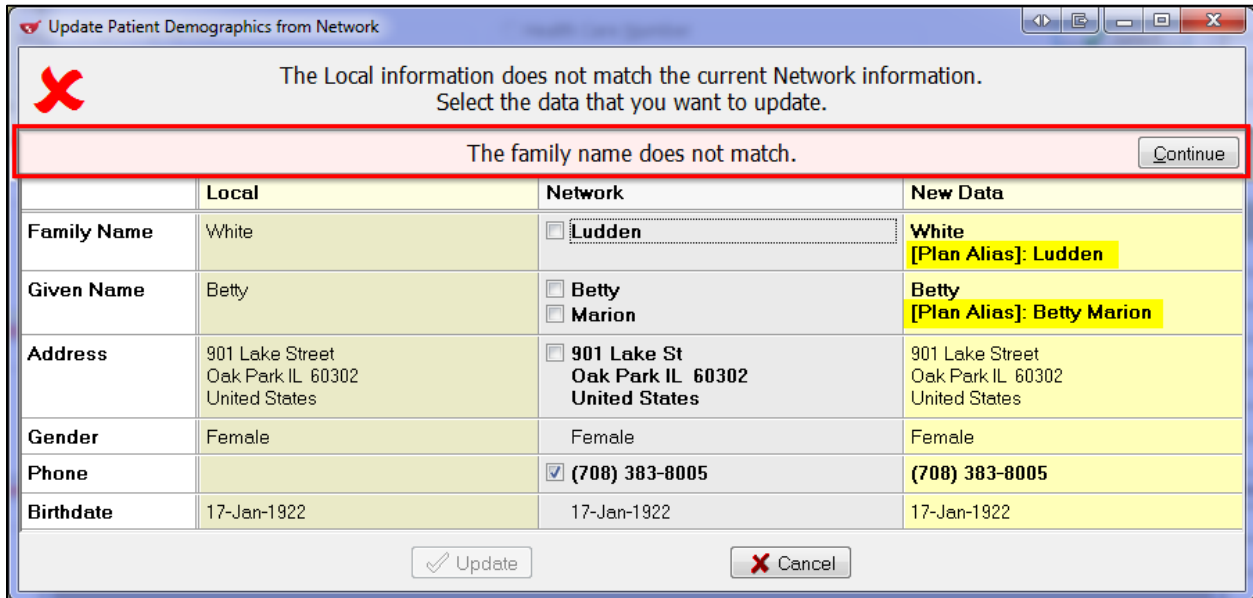
2. From the patient card, go to **Network** > **Synchronize Patient** and enter your login credentials.

3. Search for and select the patient from the **(Network) Patient Search** results. The **Update Patient Demographics from Network** window will appear.

NOTE: Any differences in critical information, such as given name, date of birth, or gender will require you to click **Continue** and then login to acknowledge the override.
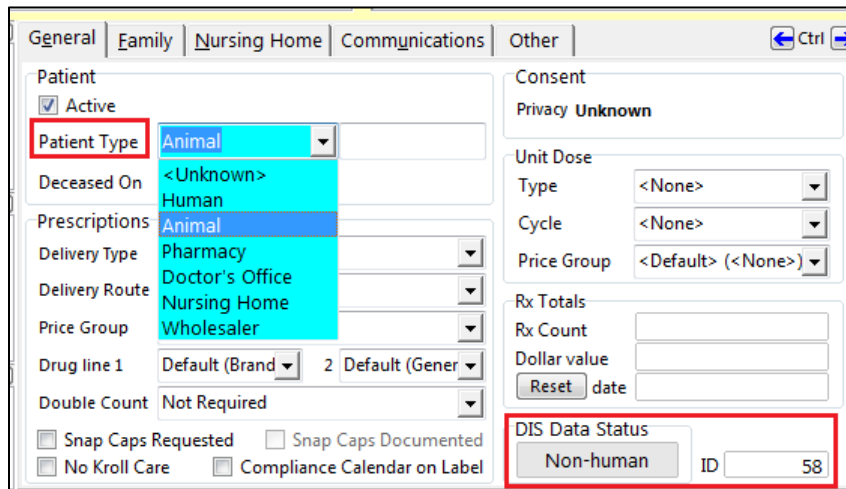
4. Any of the name, date of birth, or gender fields you choose to not synchronize with the network will be shown with a prefix of **[Plan Alias]** and these aliases will be saved with the local NBDIS plan entry.
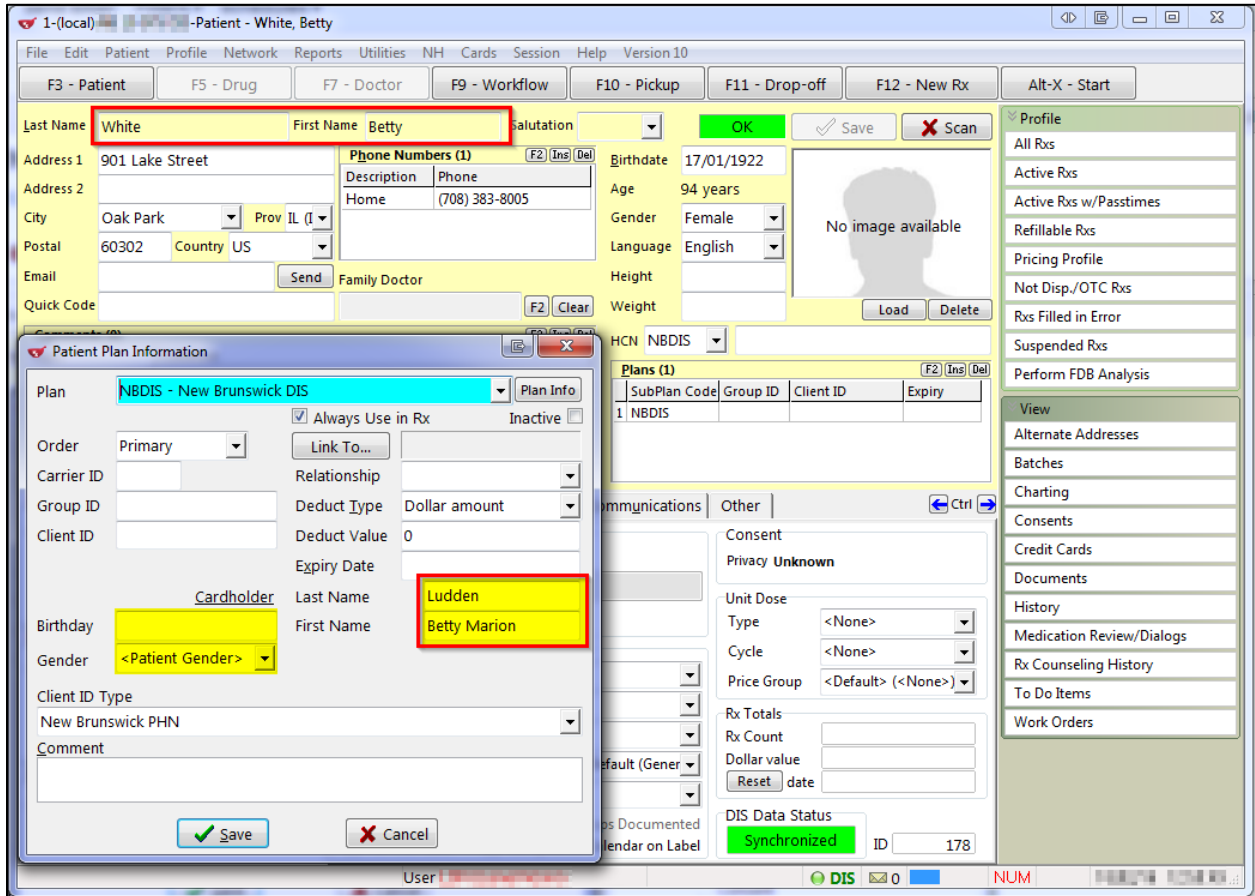
Non-Human Patients

Non-human patients (animals, pharmacies, doctor's offices, nursing homes and wholesalers) will not have a PHN and therefore will not appear in the Client Registry.

1. For non-human patients the Patient Type must be selected. The patient's **DIS Data Status** will show **Non-human**.

Update Patient Demographics

For patient demographics recorded on the DIS, information entered by the pharmacy is considered the source of truth. If a patient's address, phone number, etc. are changed on the local system, the information is updated on the DIS.
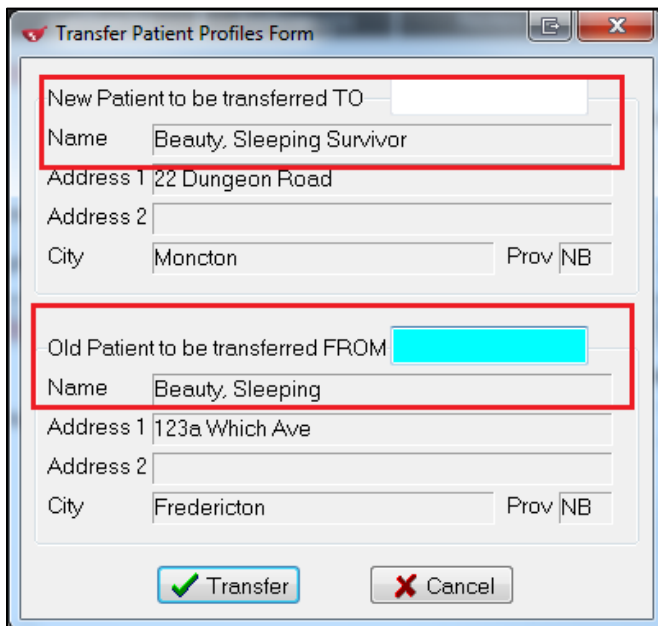
Merging Duplicate Patients

It is recommended that if there are multiple patient records for the same patient that they are merged together in Kroll to maintain accurate patient information on the DIS. Merging the local patient records on Kroll will merge the corresponding records on DIS. To accomplish this, go to Kroll start screen and then **Utilities** > **Merge** > **Patient**.

Enter the surviving patient as the **New Patient to be transferred TO** and the patient to be merged into the **Old Patient to be transferred FROM**.

Unmerging Patients

If a merge was done in error, you can reverse the merge.
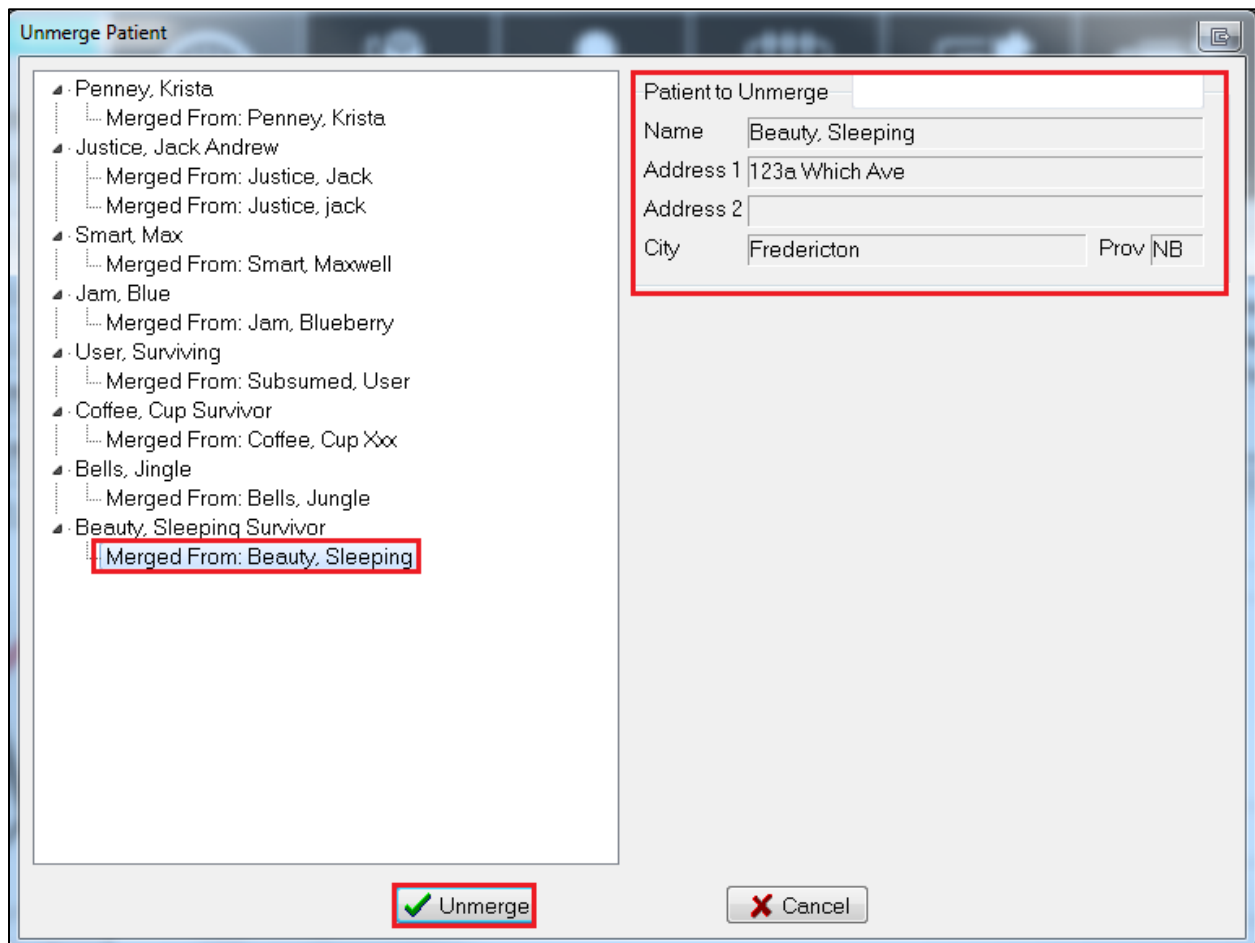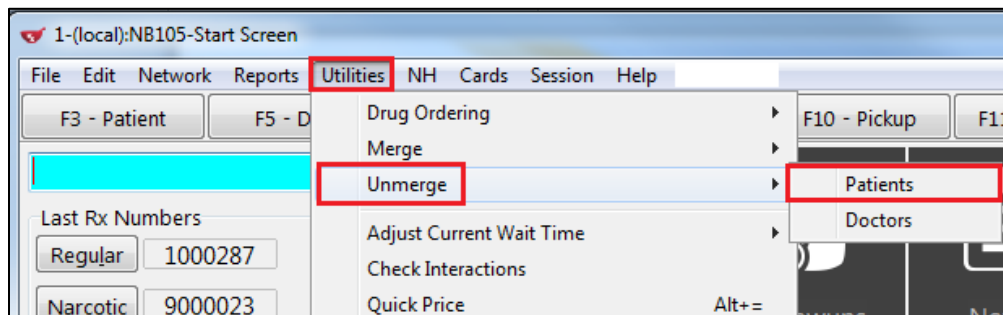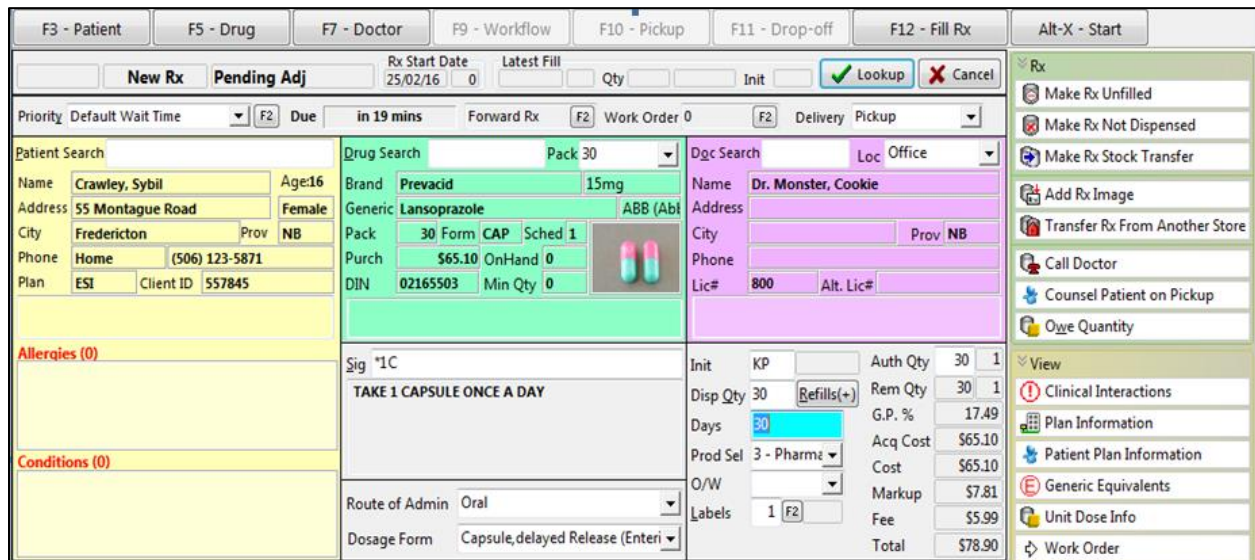
Filling Prescriptions on New Brunswick DIS

All prescriptions filled for human patients in New Brunswick must be sent to the New Brunswick DIS for clinical recording. With New Brunswick DIS integration in Kroll, prescriptions should first be adjudicated to all fiscal plan(s) for financial reimbursement, and then sent to DIS for clinical recording. The "Cash" plan will always come after the DIS plan. This sequence of plans allows prescriptions to be billed, and then logged on the New Brunswick DIS before passing down any remaining co-payment amounts to the patient. In the event that the DIS Network is down, you can bill the fiscal plans, print the label, and then place the Rx in a **Network Pending Queue** until the DIS Network is back up at which point the Rx can be completed in its entirety. (See the [What to do when NBDIS is Unavailable](#) section for more information).

Dispensing a Prescription
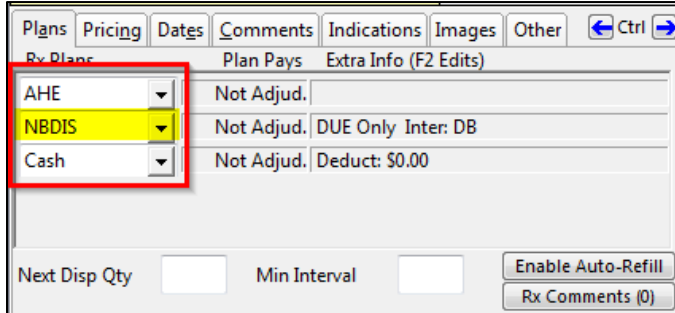
1. Enter patient, drug, doctor, sig, dispense information, etc. in the F12 screen.

2. Ensure that the New Brunswick DIS plan is the last plan before 'Cash'.

NOTE: The NBDIS plan is always marked as Drug Utilization Evaluation Only "DUE Only", which means there is no financial adjudication involved.

3. Once all necessary information has been entered, click **F12 - Fill Rx** or press F12 on the keyboard to fill the prescription.

4. Adjudication to the fiscal plan(s) will be completed first and then the Rx will be sent to NBDIS – New Brunswick DIS for clinical recording. You will get a response stating 'The Dispense Rx was successful' and a prescription label will print once **OK** is selected.

Filling Prescriptions for a Device
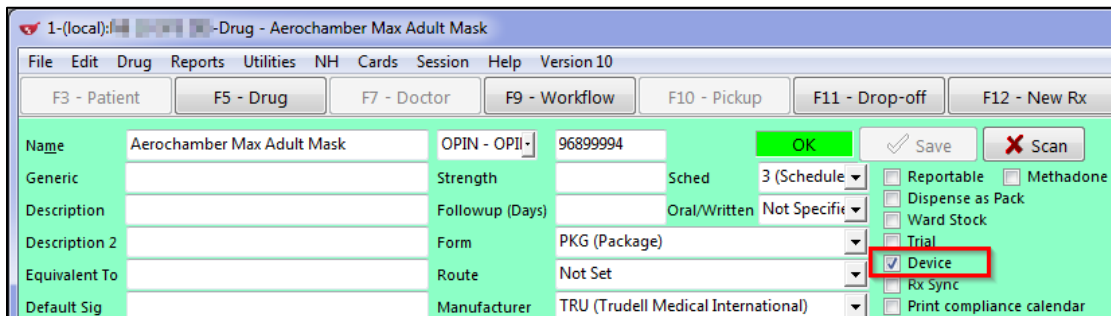
Devices are non-drug products. They can include, but are not limited to, diabetic strips, lancets, alcohol swabs, compression stockings, etc. When a prescription is filled for a device, it is not sent to the NBDIS. Fill an Rx for a device as follows:

1. Bring up the **F5 - Drug** card for a device by performing an F5 drug search.

2. Place a checkmark next to the **Device** flag.

3. Click **Save** or press **Enter** on the keyboard to save changes made to the drug card.

4. Press **F12** to fill a new prescription

NOTE: If the drug being filled has the **Device** flag ON and the NBDIS plan is included in the plan sequence, the system automatically drops the NBDIS plan and a warning message will appear stating 'The clinical plan was removed for this device'.

Unfilling a Prescription

When a patient requests the pharmacy to keep a record of the written prescription but not fill the prescription until a later time, they are unfilling the Rx or 'deferring' it. Unfilled Rxs are not sent to the NBDIS.

Filling a Prescription for a Non-human

Prescriptions filled for non-humans (animals, pharmacies, doctor's offices, nursing homes and wholesalers) are not recorded on DIS.

Filling Rxs for Doctors when License is Unknown

When a pharmacy first integrates with DIS, Kroll inserts all available doctors that have been provided by the New Brunswick Department of Health. In the event a doctor is missed and the doctor license is unknown, the following list of substitute licenses can be used on the doctor card to complete the Rx.

Doctor	License
In-province dentist	D1
Out-of-province dentist	D2
In-province medical doctor	D3
Out-of-province doctor	D4
In-province pharmacist	D5
Out-of-province pharmacist	D6
In-province registered nurse practitioner	D7
Out-of-province registered nurse practitioner	D8
In-province optometrist	D9
Out-province optometrist	D10
Out-of-province other provider	D999

What to do when NBDIS Goes Down

In the event the NBDIS server goes down, Kroll will queue the following claim messages:

- Patient Update
- Filling
- Cancelling
- Inactivate
- Reactivate

You can adjudicate claims to the fiscal plans first, print labels for dispensing, and then place the Rx in a queue for subsequent adjudication once the NBDIS server is back up.

1. The Rx plan sequence should have the fiscal plans listed first, then the NBDIS plan, followed by the Cash plan.

2. Select **F12 - Fill Rx** to initiate the adjudication of the prescription. The Rx will be sent to the fiscal plans first for payment. Below is an example for ESI and AHE.

3. Once fiscal adjudication is complete, the prescription will be sent to NBDIS for clinical recording. Since the NBDIS server is down, the claim transmission will fail.

4. Select **Send Later**. Labels will print automatically and the prescription will be queued.

Sending Pending NBDIS Claims

When the NBDIS server is back up, any pending claims must be sent.

1. Go to **F9 - Workflow** > **Pending Adjudication**.

2. Click **Send/Review All** to send everything at once or choose **Send/Review for Current Patient** to send for a particular patient only.

Appendix

Client Registry Data Standards

In order to maintain maximum effectiveness of the patient matching features within the Client Registry, each pharmacy must agree to capture the minimum data for the clients they register in their local systems.

Audits are performed daily in the Client Registry to ensure that the minimum data is captured by each patient record. If there are items that are deficient, the store will be assigned further work to remediate the problem. This could, for example, include updating the record with missing information or merging duplicate records (see Data Integrity Tasks section below). It is important to note that if not enough information is received on a patient file from the pharmacy this record will not be added to the Client Registry which means the information it contains cannot be used to provide care for that patient by the various clinical users of the Electronic Health Record (EHR) system.

It is important to also remember that records that are not a human patient (dogs, doctor's offices, etc.) must not be submitted to the provincial Client Registry.

The pharmacist or a designated pharmacy technician or pharmacy assistant will work with the Department of Health to resolve any Client Registry data integrity issues. Communication will be through online tools (Sharepoint), or through telephone communication.

Data Quality questions may be:

1. Verification of demographic data elements for patient for identity management;

2. Verification of drugs dispensed to the patient in case of patient records that require modification;

3. Identifying two or more records that may belong to the same client and must be merged (combined);

4. Requests to review/correct the Health Card Number or Date of Birth contained in the local pharmacy system.

The minimum data set must be captured using the approved standards. This will allow the Client Registry algorithm to score at the highest possible level and ensure that the client has only one record displaying in the Electronic Health Record (EHR) system for care providers to leverage at point of care.

The fields being transmitted are listed below along with details regarding data standards and minimum requirements.

MANDATORY DATA ELEMENT	FIELD TYPE AND VALID VALUES	STANDARDS

Sex	Text
	
	M,F,
	
	U – only valid for extremely rare cases
		A code depicting the biological sex or gender of an individual.
		  - Valid values are: M = Male, F = Female,
		  U = Unknown (Only valid if a test is processed that would not have a gender; ie; water test)

Date of Birth	YYYYMMDD	The calendar date on which an individual was born.

Name	Text
	
	 Last Name, FirstName MiddleName(s)
	
	No spaces after comma; include space between given names if more than one.
	
	Standard: 30 characters allowed for name field.
		The complete legal name.
		  - For individuals with only one name, record it in the Last Name field.
		  - Hyphens and Apostrophes can be used if part of name (e.g. Smith-Jones, O'Regan).
		  - Initials are not to be used unless part of a legal name or the middle name cannot be entered in its entirety.
		  - Middle names are **not** to be truncated. Enter the names that fit in their entirety, and then if there is another name, enter the first initial.
		Example for Frederick William Joseph Johnson:
		Johnson,Frederick William J
		  - Periods and numbers are not to be used.
		  - Titles or suffixes are not to be used (e.g. Mrs., Dr., Rev, Jr, Sr.).

Address		The primary street and/ or mailing address must be obtained. -Unit Identifier (when Applicable) -PO Box -Civic Street Address -Civic Street Number Suffix (when applicable) -Civic Street Name -Civic Street Type -Street Direction (when applicable)

MANDATORY DATA ELEMENT	FIELD TYPE AND VALID VALUES	STANDARDS
City /Community name		Use Canada Post Community Name and corresponding Postal Code table.
Province/ Territory/State	AB = Alberta BC = British Columbia MB = Manitoba NB = New Brunswick NL = Newfoundland/Labrador NS = Nova Scotia NU = Nunavut ON = Ontario PE = Prince Edward Island QC = Quebec SK = Saskatchewan YT = Yukon	Use the standardized table following Canada Post guidelines.
Postal Code (PC) or Zip Code (ZC)	PC: ANA NAN ZC: 5 or 9 digits	-Valid by Post Canada or US Zip code. -See information for City/Community.
Telephone Number	### ### #### Example: 506 555 5555	-Record one telephone number on first line. -Number can be home or other number. -Mandatory to record area code with the number for all individuals including NB residents. -Telephone type will not be indicated (Home, Business etc.) -Brackets or hyphens are not to be used.
Health Insurance Number	Alphanumeric	Federal, provincial or territorial health insurance number for an individual. - hyphens are not to be used
Health Insurance Assigning Authority	Text	An abbreviation designating the authority responsible for the Health Insurance. (Federal, Provincial or Territorial)

Data Integrity Tasks

Sharing information with the provincial systems requires a high degree of attention to data accuracy and completeness. The Client Registry is the system that links all patient records and allows a single patient view in the Electronic Health Record (EHR) system. As such, any discrepancies or insufficiencies as it relates to data coming from the pharmacies will lead to the generation of tasks. Tasks are simply the means by which the Department of Health and the stores can communicate to correct or complete data to ensure an appropriate linkage between patient records. This process ensures the safety of patients by ensuring patient information is accurate and complete when presented in the EHR.

Potential Duplicate

This type of task occurs when multiple records in the pharmacy system closely resemble the same patient. The task is resolved by merging records in the pharmacy system and communicating a merge to the Client Registry.

Potential Overlay

Identifies a record within the pharmacy system in which the patient's data has changed significantly and appears to not be the same person. This would lead to believe that a record was opened and someone mistakenly over wrote one patient's information with another patient's information.

Task is resolved by reviewing patient information in the pharmacy system to ensure information is corrected and working closely with the Department of Health to correct data in Client Registry to ensure proper display in the EHR for care providers to use.

Because of the high risk to patient safety, this type of issue is handled immediately and will lead the Department of Health to a call the pharmacy as soon as it is detected. Before resolution, this record is locked within the provincial EHR. The locking of the record is essential to prevent clinicians from making clinical decisions on information that may not belong to the patient.

Review Identifier

This is a task that identifies records within the same pharmacy system that have a high potential that a client could be incorrectly sharing Health Insurance number with another record. This task is identified by comparing records and tracking duplication of identifiers.

A Review Identifier could signal that it is the same person, or it could be that the Provincial Health Insurance Number was recorded on the wrong client record.

Task is resolved by verifying patients' Health Insurance number in pharmacy system and removing the HCN from the incorrect patient's record; or if they are the same patient, merging the records in the source system.

More Information Required or Custom Task

During the normal course of auditing and monitoring data quality and completeness, the Department of Health may identify data quality issues. For example, a record from the pharmacy may not be linked to the provincial patient record because of a missing HCN or inconsistent address and/or phone in comparison to other high scoring records. If that information is clarified it may allow the Department of Health to perform a manual linkage. In such cases, the Department of Health will create a manual task to obtain additional information and/or data correction in the pharmacy system. Those types of tasks include:

- Confirmation of missing or incorrect HCN, address, and/or phone.

- Request that information is corrected on the patient file.

    o   Correct a date of birth or records that do not follow the name standards.

    o   Add the correct HCN to a patient's file.

Merging a Potential Duplicate

As explained above, duplicates within the pharmacy system lead to the creation of a Data Integrity Task from the Client Registry as it becomes impossible for the system to understand which of the records from the pharmacy should be associated with the patient record provincially. A duplicate therefore generates a "Potential Duplicate" task for the store to resolve. It has been noted that stores may have difficulties merging within their pharmacy system but this is essential after the connection to DIS.

Although the below should likely not be detailed within the Software Training Guide and is part of the Department of Health's Pharmacy Task Training, it is important to understand the process steps related to merging in DIS to ensure this knowledge is well integrated within the Software Training Guide:

1. The Daily DIS Tasks Report is generated by the pharmacy location for all DIS source records by an automated process in the Client Registry and is updated in the Pharmacies Daily Tasks

worklist on Sharepoint. New worklist tasks added to the worklist for their pharmacy, based on the setup for that pharmacy (by location id) in the EHR User Log.

2. On a daily basis, the pharmacy system user (pharmacist or pharmacy technician) trained to do so reviews the tasks worklist for potential duplicate tasks.

3. For each potential duplicate record reported, you will retrieve the customer records in the pharmacy system and investigate.

4. If only one record exists, you must determine if the records have already been merged in the pharmacy system.

5. If the records have not been merged, you must determine if they are duplicate records within the pharmacy application.

6. If they are duplicate records, they will merge the records in the pharmacy system and a merge message will be sent electronically to the Client Registry.

7. The pharmacy system user will update the task resolution in the worklist as "Merged at Pharmacy".

8. The Department of Health reviews worklist tasks resolved as "Merged at Pharmacy".

9. The Department of Health confirms the resolution.

10. If the record has not been merged, the Department of Health will confirm the surviving record with the pharmacy system user to then perform a manual merge in the Client Registry.

11. If you determine they are either not a duplicate record or they do not have enough information on the records to make a determination, update the worklist task as "Not Same Person" or "Not Enough Info" respectively.

12. The Department of Health reviews worklist tasks resolved as "Not Same Person" or "Not Enough Info".

13. The Department of Health will defer the task. The potential duplicate will no longer appear on reports until one of the DIS source records has an additional update, at which time they will be re-compared.

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