

## **Consultation: HSO 11002:2026 Emergency and Urgent Care Services Standard – Public Review Feedback Survey**

**Submitted:** June 2, 2026

**Executive Summary:** The Health Standard Organization is proposing a national standard to offer people-centered and evidence-informed care in the emergency and urgent care setting. While the standard highlights a practice of care of high quality, it could benefit from improvements to distinguish the nuances of practice in emergency care versus urgent care and highlight the contributions of the interdisciplinary team to safe transitions of care.

### **CSHP provided the following feedback:**

#### **Incorporation of pharmacy professionals in the interdisciplinary team and ensuring safe care transitions**

Pharmacists play a key role in patient safety while assisting other healthcare providers in the delivery of care. In a fast-paced environment, the expertise of pharmacy is beneficial to obtain the best possible medication history, detect adverse effects, monitor adherence, as efficacy and safety of treatments. Comprehensive assessments prior to discharge enhance medication access, help reduce medication-related risks and support continuity of care in the community. (Section 2.2 and 5.1.2).

Through the completion of care plans, communication during transitions of care can be optimized with information shared with members of the patient’s circle of care, including pharmacists and primary care providers, particularly when patients are transferred between services or discharged to the community. (Section 1.1.3, 6.2.1, 6.2.2)

#### **Enhancing care for special populations (geriatrics and pediatrics)**

Additional safeguards were recommended for the delivery of care of pediatric patients including validating the patient’s weight and special dosage formulation considerations (section 2.2.3). Multiple recommendations were made to enhance the care of the elderly population including an assessment of at-risk medications, mitigation for the risks of falls, opportunities for deprescription and principles of the “Integrated Care for Older People Approach” (section 2.2.4).

#### **Safe medication access**

Ensuring medication access and safe use in the emergency and urgent care setting requires coordinated systems that support appropriate prescribing, dispensing, administration, monitoring, and continuity of therapy. Emergency departments with the support of the pharmacy department should maintain reliable access to essential medications through standardized protocols, monitoring of medication inventories, managing drug shortages, and having contingency plans for pharmaceutical service disruptions. Safe medication use is further supported by opioid stewardship principles, consultation with pharmacy services for complex medication-related decisions. A dedicated space for the safe storage of medication should be present in every emergency and urgent

care department. Additional education on at-risk medications and medication incidents was recommended (Section 2.1.3, 2.2.7, 2.3.1, 3.1.4)