

Newfoundland and Labrador Pharmacy Board

Interpretation Guide

Professional Liability Insurance Requirements for Registration

Revised August 2022 For Implementation as of September 30, 2023

The *Pharmacy Act*, 2012 and *Pharmacy Regulations*, 2014 state that applicants for registration must "provide proof that he or she has obtained professional liability insurance coverage in a form and amount satisfactory to the board". For the purposes of this section, all applicants for registration are required to meet the requirements defined below and in the attached appendices.

- 1. To be acceptable, coverage under professional liability insurance must be personal insurance that which names the pharmacist, pharmacy technician, student, or intern personally as an insured and covers the insured for all aspects of their practice and in all locations in the province in which that practice occurs.
- 2. An amount of \$2,000,000 per claim or per occurrence and \$4,000,000 annual aggregate is the acceptable minimum limit of coverage. In some situations, it may be appropriate for a higher level of coverage to be obtained on an optional basis.
- 3. Either "claims made" or "occurrence" forms of policies are acceptable. "Claims made" policies require an extended reporting period provision for a minimum of three years.
- 4. The policy must not contain a retroactive date and must provide for full prior acts protection.
- 5. An annual certificate of coverage, provided by the insurance carrier, is required to confirm that the professional liability insurance policy meets the criteria set by the board.
- 6. Legal defence payments for regulatory proceedings or other legal proceedings afforded by a professional liability insurance policy must not erode the minimum limit of liability coverage required by the board.
- 7. The policy must include a clause to the effect that the insurer will notify the board if the policy is cancelled, expires, or ceases to meet the criteria set by the board.
- 8. The policy must include a clause to the effect that the policy continues in force in conformity with the criteria set by the board until the notice described in section 7 of this Interpretation Guide is received by the board.
- 9. A crown servant within the meaning of the Treasury Board Policy on the Indemnification of and Legal Assistance for Crown Servants, is not obligated to hold and continuously maintain acceptable malpractice insurance, provided that the member:
 - (i) at all times restricts his or her practice to the scope of duties and employment as a Crown servant; and
 - (ii) completes a Practice Undertaking in a form approved by the board. (see Appendix I)
- 10. A copy of the annual certificate of coverage must be uploaded to the registrant's profile on the NLPB registration portal within 30 days of the policy start or renewal date.
- 11. Registrants must provide a copy of the annual certificate of coverage to the pharmacist in charge within 30 days of the policy start or renewal date to be kept on file at the pharmacy at which they practice. If a registrant practices as a relief pharmacist or relief pharmacy technician, they must present a copy of the annual certificate of coverage to the pharmacist in charge at any pharmacy where they are working.

PLEASE NOTE: NLPB strongly recommends to pharmacists-in-charge that similar professional liability insurance coverage is in place for their pharmacy, should a claim be made that also names the pharmacy.

Enabling Legislation: Pharmacy Act, 2012 section 14.(e), 15.(1)(c) and 17.(1)(e)

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^{1 &}quot;claims made" means that the policy responds if it is in place at the time in which the claim is made against a registrant

^{2 &}quot;occurrence" means that the policy responds if it was in place at the time in which the incident that is the subject of the claim occurred



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Appendix I Practice Undertaking for a Pharmacist

To whom it way Concern:			
I, , wish	to attest that as a Ca	anadian Forces pharmacy officer or	a public servic
pharmacist employed by the Department of Nati	ional Defence licens	ed in Newfoundland and Labrador,	I will undertake
to practice pharmacy in the course of my official	DND/CF duties only	y, and that all liability for my profess	ional pharmac
services is adequately covered through the Trea	asury Board of Cana	da Policy on Legal Assistance and I	ndemnification
In this undertaking I request that for licensure in	Newfoundland and L	_abrador that the compulsory persor	nal professiona
liability insurance coverage be waived and that,	, should I wish, at ar	ny time in the future, to provide pha	rmacy services
for another employer or on a volunteer basis, or	otherwise engage in	n the practice of pharmacy outside t	he scope of m
employment with the Canadian Forces or the F	Public Service of Ca	nada, I will immediately inform the	Newfoundland
and Labrador Pharmacy Board and acquire the	e necessary liability	insurance. I agree that breach of the	his undertaking
constitutes professional misconduct, and that m	y license will be sus	spended immediately.	
Pharmacist Signature	Registration #	 Date Signed	