Medication Safety Self-Assessment
Community Pharmacy

Data Spotlight 2026

The **Medication Safety Self-Assessment® for Community Pharmacy (MSSA-CP)** is designed to help community pharmacy teams identify and address vulnerabilities that could lead to medication incidents and patient harm.

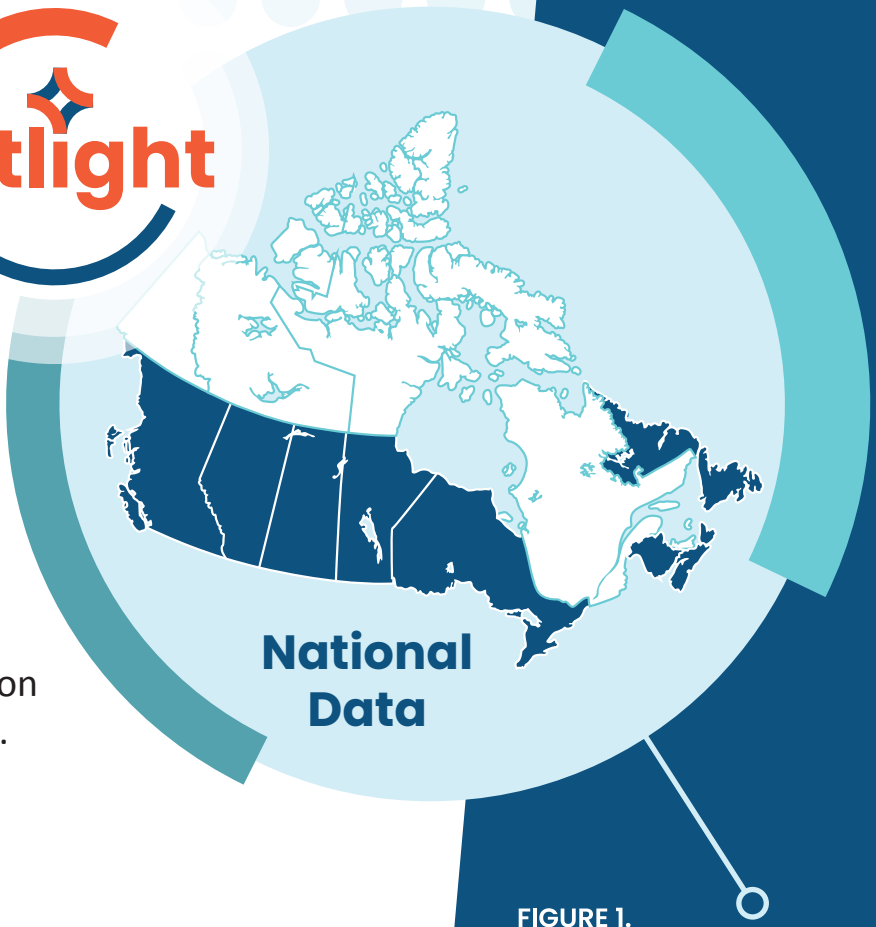

FIGURE 1.
Between January 1 and December 31, 2025, 556 Canadian community pharmacies across 8 provinces completed at least one MSSA-CP.

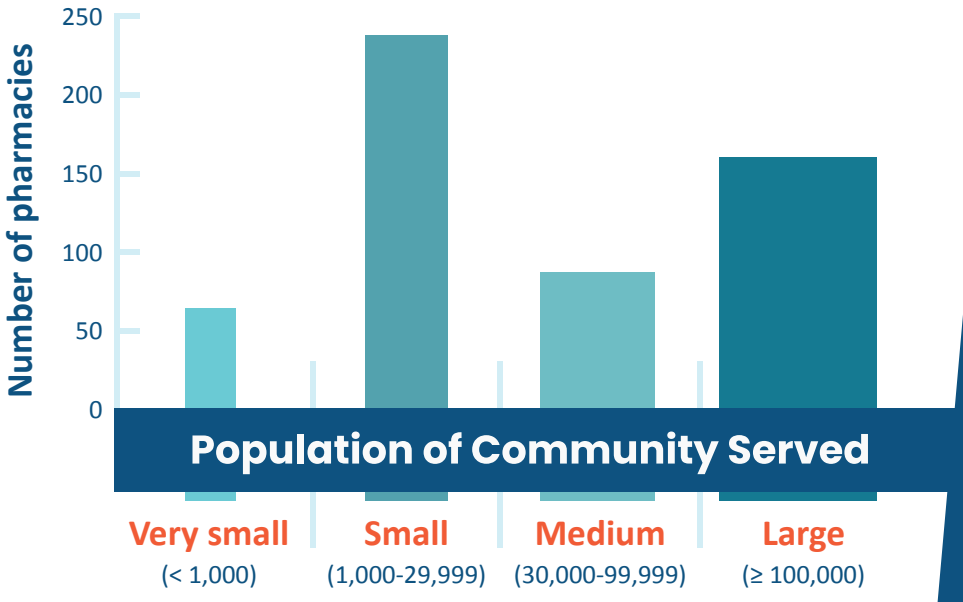

FIGURE 2.
Number of respondents based on the population of the community served by the pharmacy.

MSSA-CP - mssa2.ismp-canada.org/comm-pharm-ii

Weekly Prescription Volume

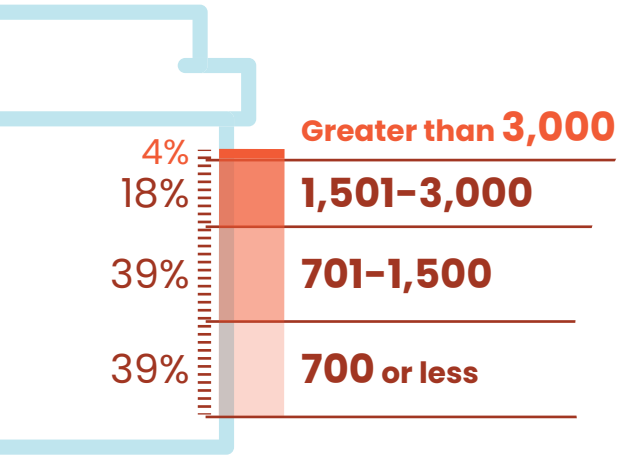

FIGURE 3.
Proportion of respondents based on the pharmacy's weekly prescription volume.

Incorporating Assessment into Quality Improvement Initiatives

FIGURE 4.
Do you plan to incorporate this assessment into ongoing quality improvement activities for your pharmacy?

MSSA-CP Completion Time

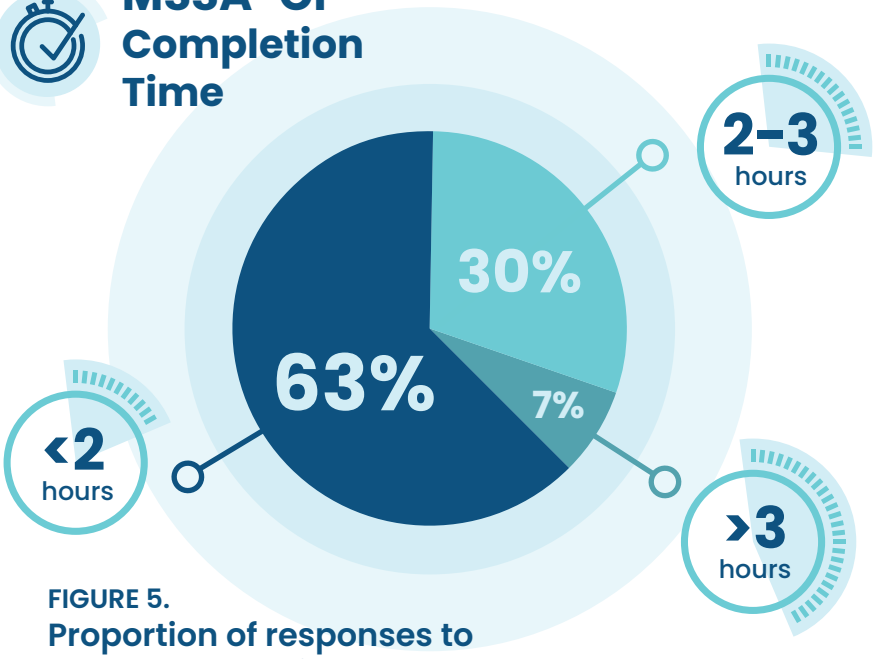

FIGURE 5.
Proportion of responses to the amount of time taken to complete the MSSA-CP.

Key Elements of a Safe Medication System

- Patient Engagement and Partnership — I
- Medication Storage and Handling — II
- Use of Technology and Devices — III
- Quality Assurance and Continuous Improvement — IV
- Addressing Known Areas of Risk — V
- Considerations for Selected Clinical Situations — VI
- **Considerations for Selected High-Alert Medications and Classes** — VII

Focus on Insulins and Oral Anti-Cancer Drugs

High-alert medications pose an increased risk of causing substantial patient injury or death when administered incorrectly.[1] Insulins and oral anti-cancer drugs are categorized as high-alert medications, requiring system safeguards to minimize the risk of incidents.

Quality Improvement Considerations for Insulins and Oral Anti-Cancer Drugs

- With your team, review the assessment items detailed in Table 1, which relate specifically to insulins and oral anti-cancer drugs, and input your pharmacy's individual MSSA-CP results.
  - Identify assessment items for which your pharmacy has high scores, and celebrate these successes!
  - Recognize opportunities to improve assessment items for which your pharmacy has scores below the aggregate.
- Use the MSSA-CP Action Plan Template as a guide to develop and document strategies to improve your pharmacy's assessment item scores.

Action Plan Template - PDF

TABLE 1.

Assessment Results and Improvement Strategies Related to Insulins and Oral Anti-Cancer Drugs

ASSESSMENT ITEM	IMPROVEMENT STRATEGY
Storage Considerations for Insulins The storage arrangement for insulin is based on duration of action, rather than brand name or manufacturer. **Average score:** (out of 4)[i,ii] **1.90** /4 **Your score:** /4 *Self-Assessment Item 25.2*	Segregate individual short-, intermediate-, and long-acting insulin formulations in the refrigerator with individual bins or shelf dividers.[2]
Assessment and Counselling for Insulin Initiation Pharmacists follow a standardized approach to assess and counsel patients newly prescribed insulin (especially a concentrated insulin, e.g., U-200, U-300, U-500). **Average score:** (out of 4)[i,ii] **3.22** /4 **Your score:** /4 *Self-Assessment Item 25.1*	Develop a counselling checklist for newly prescribed insulin that includes counselling on the risk of hypoglycemia[3] (including how to prevent and manage it), and use the teach-back technique to demonstrate how to deliver the prescribed dose. This teach-back process can also be used as an additional check to ensure the correct insulin product was dispensed.[4] Update the patient's profile with each new prescription for insulin, and ensure that discontinued insulins, including previous dosing regimens, are inactivated.[4]
Specific Dosing Instructions for Oral Anti-Cancer Drugs Prescription labels for oral anti-cancer drugs to be taken on specific days explicitly indicate the dates medications are to be taken (e.g., Sept 12, 13, 14, not Day 1, 2, 3, or Days 1-3). **Average score:** (out of 4)[i,ii] **1.35** /4 **Your score:** /4 *Self-Assessment Item 28.1*	Label the prescription vial with the treatment cycle and specific dose, frequency, and date(s) (e.g., imatinib cycle 2: 400 mg by mouth twice daily on Sept 1 to 14). Use compliance packs/pouches that specify dates beside the days of the week labelled on the card or pouches.
Safe Handling of Oral Anti-Cancer Drugs Oral anti-cancer drugs requiring manipulation for patient use (e.g., tablet splitting) are prepared using appropriate environmental controls or referred to a pharmacy where such controls are available. **Average score:** (out of 4)[i,ii] **1.55** /4 **Your score:** /4 *Self-Assessment Item 28.3*	Develop clear policies and procedures for the use of personal protective equipment (PPE) and devices in the safe handling or oral anti-cancer drugs. Designate a separate area for medication preparation with the appropriate PPE readily accessible.[4] Affix safety-focused auxiliary labels such as "Cytotoxic" or "Hazardous Drug" on the stock bottles when receiving inventory.[5] Educate staff to identify cytotoxic and hazardous medications.

[i] **MSSA scores are assigned numeric values ranging from 0 (not implemented or not applicable) to 4 (always implemented).**

[ii] The average scores in this table were obtained from 556 community pharmacies, in 8 provinces (Alberta, British Columbia, Manitoba, New Brunswick, Newfoundland and Labrador, Nova Scotia, Ontario, and Saskatchewan), that submitted MSSA-CP data between January 1 and December 31, 2025, inclusive.

How to Use the MSSA-CP for Quality Improvement

1. Complete the MSSA-CP with your pharmacy team and compare your responses to anonymous aggregate data.
2. Identify lower-scoring core characteristics and assessment items. Highlight key areas for improvement.
3. Brainstorm strategies to improve identified lower-scoring areas.
4. For every strategy, document the following: relevance to patient safety, time frame for implementation, individual team members' responsibilities, potential barriers and challenges, and steps to monitor progress.
5. Prioritize the action plan in accordance with your team's goals.
6. Take action! Implement outlined strategies to improve medication safety in your community pharmacy.

Action Plan Template
https://ismpcanada.ca/wp-content/uploads/MSSA-Action-Plan-Template-2025.pdf

Community Pharmacy Reporting & Learning
https://ismpcanada.ca/impact/community-pharmacy-reporting-learning/

ISMP Canada Safety Bulletins
https://ismpcanada.ca/safety-bulletins/

National Incident Data Repository for Community Pharmacies (NIDR)
https://ismpcanada.ca/national-incident-data-repository-for-community-pharmacies-nidr/

The MSSA-CP supports continuous quality improvement (CQI) initiatives in community pharmacies and may be used to meet the requirements of CQI programs in Canadian provinces. The content was developed with support from a pan-Canadian Advisory Panel and includes learning from incidents reported to the National Incident Data Repository for Community Pharmacies (NIDR).

REFERENCES

[1]A new Canadian approach to high alert medications. ISMP Can Saf Bull. 2024 [cited 2026 Apr 27];24(1):1-5. Available from: https://ismpcanada.ca/wp-content/uploads/ISMPCSB2024-i1-High-Alert-Medications.pdf
[2]A multi-incident analysis of reports associated with newer insulins. ISMP Can Saf Bull. 2026 [cited 2026 April 27];26(3):1-6. Available from: https://ismpcanada.ca/wp-content/uploads/ISMPCSB2026-i3-Insulins-MIA.pdf
[3]Diabetes Canada Clinical Practice Guidelines Expert Committee. Diabetes Canada 2018 clinical practice guidelines for the prevention and management of diabetes in Canada. Can J Diabetes. 2018;42(Suppl 1):S1-S325.
[4]Analysis of incidents involving oral chemotherapy agents. ISMP Can Saf Bull. 2015 [cited 2026 Apr 27];15(4):1-4. Available from: https://ismpcanada.ca/wp-content/uploads/ISMPCSB2015-04_OralChemotherapyAgents.pdf
[5]Ng T, Badry N, de Lemos ML. Rationalizing the use of auxiliary label for oral oncology drugs. J Oncol Pharm Pract. 2017;23(5):338-343.