

Chapter 15

Health—Monitoring Opioid Prescribing and Dispensing

1.0 MAIN POINTS

While opioid medications can improve patients' quality of life by relieving pain, they are associated with a high risk of misuse and addiction or diversion, leading to overdoses and deaths.

The Ministry of Health monitors the prescribing and dispensing of opioid medications by funding the Prescription Review Program operated by the College of Physicians and Surgeons of Saskatchewan. Through this Program, the College reviews prescription information to identify potential opioid misuse by patients or inappropriate prescribing by provider groups (e.g., physicians, dentists, nurses). It issues alert letters to providers where information suggests inappropriate use or notifies the provider's regulatory body when concerns are identified.

By March 2026, the Ministry implemented the two outstanding recommendations we first made in 2019 about monitoring the prescribing and dispensing of opioids to reduce misuse and addiction.

The Ministry enhanced the Prescription Review Program by beginning to implement the recommendations from an external Program evaluation. It established an advisory committee to enhance communication with Program partners (e.g., Saskatchewan College of Pharmacy Professionals, College of Dental Surgeons of Saskatchewan) and developed Program objectives, actions, and deliverables. The advisory committee plans to monitor progress on the Program deliverables annually. For example, the advisory committee will annually review an analysis of opioid prescribing trends and issued alert letters.

In February 2026, the Ministry also established a comprehensive risk-based approach to identify concerns (e.g., potentially excessive opioid dispensing) and set mitigation strategies (e.g., referrals of pharmacies to regulatory body) for inappropriate opioid dispensing practices in Saskatchewan pharmacies.

As Program administrator, the College of Physicians and Surgeons of Saskatchewan established service agreements with each of the Program's partners. These service agreements will result in sharing of regulatory referrals and associated trends to assist with promoting optimal prescribing and dispensing of opioid medication.

Actively monitoring prescribing and dispensing of opioids helps ensure only patients experiencing chronic pain receive opioids, and risks of opioid addiction are appropriately managed.



2.0 INTRODUCTION

2.1 Background

Under *The Provincial Health Authority Act*, the Ministry of Health is responsible for the strategic direction of the healthcare system in Saskatchewan and administration of the provincial drug plan. The Ministry is also responsible for monitoring the prescribing and dispensing of opioid medications within the province under *The Prescription Drugs Act*.

Opioid medications are some of the controlled substances under *The Controlled Drugs and Substances Act* (Canada) and *The Narcotic Control Regulations* (Canada). While opioid medication can bring significant improvements to patients' quality of life by relieving pain, it has a high risk of misuse and abuse leading to addictions, overdoses, and deaths.¹

Practitioners and pharmacists must follow the prescribing and dispensing rules set out in the Regulations. Practitioners include all persons who, by law, are entitled to write opioid prescriptions (e.g., physicians, nurse practitioners, dentists). The Ministry works with these healthcare professionals who prescribe and dispense opioids, through their related professional bodies, as key partners.²

As shown in the **Figure 1**, the number of individuals receiving prescribed opioids from Saskatchewan pharmacies has remained relatively consistent since 2022–23. Hydromorphone (45%), codeine (25%), and morphine (10%) made up most prescribed opioids during this period.³

Figure 1—Number of Individuals Who Received Prescribed Opioids from a Saskatchewan Pharmacy^A

	2022–23	2023–24	2024–25
Saskatchewan residents with an opioid prescription	102,239	101,676	100,108

Source: Based on information provided by the Ministry of Health.

^A **Figure 1** does not include prescriptions for opioid-use disorder (e.g., methadone, buprenorphine/naloxone) and opioids dispensed in Saskatchewan hospitals.

According to the Saskatchewan Coroners Service's January 2026 report, Saskatchewan had a total of 331 (201 confirmed and 130 suspected) apparent opioid drug toxicity deaths in 2025, an increase of 84% from 2019 (180 deaths in 2019).⁴

The Ministry monitors prescribing and dispensing practices for prescribed opioids by funding the Prescription Review Program operated by the College of Physicians and Surgeons of Saskatchewan; it has done so since 1988.

Actively monitoring prescribing and dispensing of opioids helps ensure only appropriate patients experiencing chronic pain receive opioids. In addition, it can improve prescribing practices, lower or prevent risks of harm related to opioids, and help identify patients

¹ Canadian Centre on Substance Use and Addiction. (2022). *Canadian Drug Summary*.

² Key partners include the College of Physicians and Surgeons of Saskatchewan (CPSS), College of Registered Nurses of Saskatchewan (CRNS), Saskatchewan College of Pharmacy Professionals (SCPP), College of Dental Surgeons of Saskatchewan (CDSS), and the Saskatchewan College of Midwives.

³ Information provided by the Ministry of Health.

⁴ publications.saskatchewan.ca/api/v1/products/128069/formats/153341/download (7 January 2026). Saskatchewan's Coroners Service is unable to determine if opioid drug toxicity deaths were due to illicit use or prescription use.

potentially at risk of addiction. Ineffective monitoring of prescribing and dispensing of opioids may result in increased abuse of opioids or diversion leading to overdoses and death, as well as additional costs to the healthcare system.

2.2 Focus of Follow-Up Audit

This chapter describes our third follow-up audit of the Ministry's actions on the recommendations we first made in 2019.

We concluded, for the 12-month period ended February 28, 2019, the Ministry of Health had effective processes to monitor the prescribing and dispensing of opioids to reduce misuse and addiction other than the areas identified in our seven recommendations.⁵ By March 2024, the Ministry implemented five recommendations.⁶

To conduct this audit engagement, we followed the standards for assurance engagements published in the *CPA Canada Handbook—Assurance* (CSAE 3001). To evaluate the Ministry's progress toward meeting our recommendations, we used the relevant criteria from the original audit. Ministry management agreed with the criteria in the original audit.

To carry out our follow-up audit, we interviewed key Ministry staff responsible for monitoring opioid prescribing and dispensing practices and examined related key documentation (e.g., service agreements, Prescription Review Program Advisory Committee minutes, risk register).

3.0 STATUS OF RECOMMENDATIONS

This section sets out each recommendation including the date on which the Standing Committee on Public Accounts agreed to the recommendation, the status of the recommendation at March 13, 2026, and the Ministry of Health's actions up to that date.

3.1 Prescription Review Program Enhanced

We recommended the Ministry of Health determine whether the Prescription Review Program is helping reduce the misuse of prescribed opioids in Saskatchewan. (2019 Report – Volume 1, p. 111, Recommendation 5; Public Accounts Committee agreement January 11, 2022)

Status—Implemented

The Ministry of Health enhanced the Prescription Review Program by beginning to implement the recommendations from an external Program evaluation. It established an advisory committee to enhance communication with its partners and developed clear Program objectives and deliverables. As Program administrator, the College of Physicians and Surgeons of Saskatchewan also established service agreements with each of its

⁵ 2019 Report – Volume 1, Chapter 7, pp. 95–119.

⁶ 2021 Report – Volume 2, Chapter 28, pp. 211–220 and 2024 Report – Volume 1, Chapter 13, pp. 169–174.



partners to clearly outline how each partner's responsibility helps reduce the misuse of prescribed opioids.⁷

External Evaluation Complete

In our 2024 follow-up audit, we found the Ministry engaged an external consultant to evaluate the Program's effectiveness and impact on reducing the misuse of prescribed opioids in Saskatchewan. The final report in June 2023 made recommendations to strengthen the Program, such as:

- Enhance communication with Program partners like the College of Physicians and Surgeons of Saskatchewan and the Saskatchewan College of Pharmacy Professionals (e.g., schedule bi-annual discussions between Program management and partners to discuss the Program and trends)
- Clearly define the Program's objectives, and report on such activities within the Program's annual report
- Develop service agreements with each of its partners requiring regular reporting on potentially inappropriate opioid prescribing and dispensing

The Ministry made progress on these recommendations in 2025–26 as outlined below.

Advisory Committee Established

In 2025–26, the Ministry established a Prescription Review Program Advisory Committee with representatives from each of its key Program partners.⁸

The Committee plans to meet at least twice a year to provide expert advice on the design, evaluation, and continuous improvement of the Program.

We found the Committee met three times between December 2025 and February 2026 and discussed topics such as the Program's 2026–27 objectives, service agreements with the Program's partners, and a risk-based approach to identify concerns associated with dispensing medications in Saskatchewan community pharmacies.

Program Objectives, Actions, and Deliverables Drafted

In February 2026, the Ministry drafted Program objectives, actions, and deliverables for 2026–27.

The Program objectives focus on strengthening monitoring of prescribing, utilization, and dispensing of monitored drugs; improving oversight of related risks from dispensing monitored drugs; and providing strategic advice for partners to enhance policy and regulatory oversight.⁹ To meet these objectives, we found the Ministry included actions

⁷ Partners for the Prescription Review Program include the College of Registered Nurses of Saskatchewan (CRNS), Saskatchewan College of Pharmacy Professionals (SCPP), College of Dental Surgeons of Saskatchewan (CDSS), and the Saskatchewan College of Midwives.

⁸ Representatives include members from the College of Physicians and Surgeons of Saskatchewan (CPSS), College of Registered Nurses of Saskatchewan (CRNS), Saskatchewan College of Pharmacy Professionals (SCPP), College of Dental Surgeons of Saskatchewan (CDSS), and the Saskatchewan College of Midwives. The Ministry of Health chairs the meetings.

⁹ The College of Physicians and Surgeons of Saskatchewan sets out the panel of prescription drugs, including opioids, that is monitored by the Prescription Review Program.

and deliverables in its draft annual Program agreement with the College of Physicians and Surgeons of Saskatchewan. See **Figure 2** for examples of the Program's planned 2026–27 actions and deliverables.

Figure 2—Examples of the Prescription Review Program 2026–27 Services with Planned Actions and Deliverables

Service	Actions	Deliverables
Prescription Monitoring and Analysis	Collect, analyze, and review prescription data related to the panel of monitored drugs	Annual analysis of prescribing trends and communications issued to partners
Prescriber Support and Education	Provide timely, evidence-based prescribing information and program guidance	Tracking of prescriber inquiries and response times
		Annual reporting on education activities, topics, and formats
		Completion and maintenance of service agreements with each regulatory college, with copies provided to the Ministry of Health
Targeted Prescriber Communications	Issue alert and explain letters where monitoring indicates potential inappropriate prescribing	Annual reporting on the volume, type, and outcomes of prescriber communications
Risk-Based Profiles and Dispensing Oversight	Maintain prescriber, patient, and pharmacy profiles to support risk-based monitoring	Document dispensing-related risks and associated mitigation strategies
		Ongoing monitoring and reporting on the effectiveness of mitigation strategies over time
Reporting, Evaluation, and Trend Analysis	Produce statistics, reports, and analyses to support program oversight and policy development	Annual report provided to the Ministry and Advisory Committee
		Establish key performance indicators for 2027–28
Public and Stakeholder Education	Deliver education initiatives to prescribers and the public related to the appropriate use of monitored drugs	At least one public education initiative delivered annually
		Prescription Review Program articles included in all regulatory body publications a minimum of twice per year
Strategic Advice and Governance Support	Provide strategic advice and information to program partners and the Advisory Committee	Annual review of service agreements
		Annual recommendations from Program staff provided to the Advisory Committee regarding potential changes to the panel of monitored drugs

Source: Adapted from the draft agreement between the Ministry of Health and College of Physicians and Surgeons of Saskatchewan, April 1, 2026, to March 31, 2027.

The Ministry expects to finalize its agreement with the College in April 2026. Having clearly defined Program expectations in its agreement will enable the Ministry to better measure and monitor the success of the Program.

The Advisory Committee plans to review and assess progress on the actions and deliverables annually with the first annual assessment anticipated following the 2026–27 fiscal year.



Service Agreements Signed

The College of Physicians and Surgeons of Saskatchewan, which administers the Prescription Review Program, also developed service agreements with its key program partners. The College signed agreements with its partners in March 2026.

The purpose of the agreements is to clearly set out responsibilities, services, and reporting the Prescription Review Program will provide to each of its partners.

Our review of the service agreements found the College plans to provide quarterly narrative reports and an annual financial report to its partners related to the Prescription Review Program. Quarterly narrative reports will include information such as statistics on regulatory referrals issued for potentially inappropriate prescribing/dispensing and associated trends, pharmacy data entry errors and corrections, number of regulatory alerts issued, and progress toward Program objectives.¹⁰ The Ministry expects the College to begin providing quarterly reports to the Program's partners in 2026–27.

Having clear Program objectives with regular information sharing and reporting between key partners will help to strengthen the Program and will give the Ministry a sense of the number and nature of potential opioid misuse cases in the province. In addition, it will help the Ministry determine whether it is doing enough to reduce prescribed opioid misuse.

3.2 Risk-Based Approach to Monitor Opioid Dispensing Practices in Pharmacies Established

We recommended the Ministry of Health establish a risk-based approach to identify concerns in opioid dispensing in Saskatchewan pharmacies.

(2019 Report – Volume 1, p. 102, Recommendation 3; Public Accounts Committee agreement January 11, 2022)

Status—Implemented

The Ministry of Health established a risk-based approach to identify concerns with opioid dispensing in Saskatchewan pharmacies.

In February 2026, the Ministry established a comprehensive risk-based approach for the Prescription Review Program, which includes four key areas for its risk management process:

- Identify risks and maintain a risk register
- Document a risk management plan for each identified risk
- Implement risk management plan
- Risk monitoring, control, and reporting

¹⁰ Prescription Review Program staff issue alert letters to providers where data suggests inappropriate use of opioid medication(s) or provide the information to a provider's regulatory body to allow that regulatory body to deal with the concern.

We found the Ministry identified 10 risks related to inappropriate prescribing and dispensing of medications, and documented corresponding mitigation strategies (i.e., risk management plans). Four of these 10 risks related to pharmacies.

For example, the Ministry identified pharmacies' failure to follow guidelines as a key risk relating to inappropriate prescribing and dispensing of opioids. To mitigate this risk, Program staff plan to use several parameters when reviewing pharmacy prescription information to try to identify potentially excessive opioid dispensing and trigger referral of a pharmacy to the regulatory body (i.e., Saskatchewan College of Pharmacy Professionals). For example, parameters may look for dispensing of benzodiazepine over the long-term (i.e., >4–6 weeks of supply).

The Ministry's Prescription Review Program Advisory Committee will require Program staff to report on risk management progress at each meeting, beginning in 2026–27, which will include the extent of potentially excessive opioid dispensing found at pharmacies.

Having an established risk-based process to assess whether pharmacies consistently and properly dispense opioids strengthens the Ministry's ability to identify potential opioid misuse and opportunities to proactively reduce misuse.

