

# 2019 Annual General Meeting Minutes Vancouver, British Columbia November 14, 2019

### CALL TO ORDER AND INTRODUCTIONS OF BOARD

College Chair Barry called the 128<sup>th</sup> Annual General Meeting of the College of Pharmacists of British Columbia to order at 6:10pm. Chair Barry welcomed attendees to the meeting and introduced himself as the outgoing Chair.

Chair Barry acknowledged the Coast Salish People on whose unceded traditional territories we are gathered on, the Coast Salish, Squamish and Tsleil-Waututh First Nations.

Chair Barry introduced Board members in attendance, College Registrar Bob Nakagawa, and other College staff in attendance.

Chair Barry noted that notice of the AGM was sent out on October 18, 2019 thus meeting the three week bylaw requirement. He also confirmed that the required quorum of 25 registrants had been met, and the meeting was duly convened.

#### **MINUTES OF PREVIOUS MEETING – NOVEMBER 22, 2018**

It was moved by Tara Oxford, District 3 Board Member and seconded by Mona Kwong, District 1 Board Member that:

Approve the November 22, 2018 Annual General Meeting Minutes as circulated.

#### FINANCIAL STATEMENTS AND AUDITOR'S REPORT

Chair Barry reminded registrants that the audited and Board approved financial statements were available for review on the College website. Chair Barry noted the financial statements will be placed on file.

#### **CHAIR'S REPORT**

Chair Barry provided the following report:

#### **Cultural Humility and Safety**

The College recognizes that cultural safety and humility for Indigenous Peoples in BC, is vital for the provision of fair and equitable health services, as well as the creation of a healthcare environment that is free of racism and discrimination, and where individuals feel safe and respected.

Cultural Safety is an outcome based on respectful engagement that recognizes and strives to address power imbalances inherent in the healthcare system.



Cultural Humility is a process of self-reflection to understand personal and systemic conditioned biases, and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a life-long learner when it comes to understanding another's experience.

I'm pleased that we've made a formal commitment to cultural safety and humility alongside BC's other health regulators, and are continuing to take action to achieve it.

Cultural safety and humility represents a vital first step toward achieving our goal of culturally safe health services for Indigenous Peoples in BC.

I encourage you to read the Cultural Humility and Safety reflections in our annual report to learn about our progress over the last year.

As part of my report, I would like to highlight four key areas of focus for the College over the past year: the mandatory medication error reporting, pharmacy manager training, engagement, and the report entitled "An Inquiry into the performance of the College of Dental Surgeons of British Columbia and the Health Professions Act" which is better known as "The Cayton Report" in acknowledgement of the author of the report, Harry Cayton.

### **Medication Error Reporting**

In November 2018, the College began exploring the implementation of a mandatory medication error reporting policy for all pharmacies in BC.

Medication errors are a leading cause of preventable injuries and result in significant costs to health care system. In 2017/18 and 2018/19, the most common complaints received by the College were related to medication dispensing errors by pharmacy professionals.

The Board also invited Melissa Sheldrick to share her story. Melissa is a patient safety advocate whose son passed away due to a drug dispensing error in Ontario, and requested that the College consider the implementation of mandatory medication error reporting system.

The goal of this program is to allow non-hospital pharmacies to use a medication incident reporting platform of their choosing that meets criteria (to be developed by the College) that includes the capability to transfer a minimal data set into a national repository that is administered by an independent third party.

This process will provide anonymous data that can be analyzed to help identify trends in errors that are occurring and provide opportunities to learn from mistakes, improve practice, and ultimately provide better protection to the public.

I'm pleased to report that at our September 2019 meeting, the Board approved a motion to move forward with mandatory medication error reporting in all pharmacies.



Over the next several years, the College will develop standards and criteria, as well as bylaw and policy changes, to implement a medication error reporting program by 2022/2023.

### **Pharmacy Manager Education**

The Board approved Professional Practice Policy-69: Community Pharmacy Manager Education (PPP-69), which came into effect on September 1, 2018.

Pharmacy Managers have distinct and extensive responsibilities. However, it came to the College's attention that some pharmacy managers were not fully aware of all of their legislated obligations.

This new policy provides guidance to community pharmacy managers on complying with their obligations under the Pharmacy Operations and Drug Scheduling Act (PODSA) and College Bylaws.

Community pharmacy managers must now complete an online course that includes information relevant to the management of a pharmacy in BC.

The goal of this education program is to improve the overall operation of pharmacies, decrease the number of complaints, help pharmacy managers better understand the full extent of their responsibilities, and ultimately ensure safe pharmacy practice for the public.

The Program is open to pharmacists, pharmacy technicians, pharmacy students, owners, and anyone else who is interested.

## **College Engagement**

The College has conducted a number of stakeholder engagement to help us solicit input on College initiatives, policies and bylaws including:

- Pharmacy Operations and Drug Scheduling Act Bylaw Modernization (including Pharmacy Manager Requirements)
- Cultural Humility and Safety; and
- Customer Satisfaction (as part of our ongoing work towards organizational excellence).

Our customer satisfaction survey for 2019 year is currently open, so please share your thoughts with us by November 22. You can visit <u>www.bcpharmacists.org/customer</u> to learn more and take the survey

Through these stakeholder engagements, the College was able to gather significant input and feedback from patients, pharmacy professionals, pharmacy students and other health professionals, helping us to gauge sentiment, identify gaps, and inform our plans.

The College would like to thank all those who provided feedback and shared their thoughts during our various engagements in 2018 and 2019.



The College also engaged with registrants and the public while drafting its next strategic plan, using the insights gleaned to develop and refine the following strategic goals:

- Goal One: The Public is given evidence-informed, patient-centred, team-based care.
- Goal Two: To enable practice innovation through regulation that enhances health and wellness of the public and ensures patient safety.
- Goal Three: To have the public and health professionals see pharmacy professionals as valuable resources who are acting first and foremost in the public interest.
- Goal Four: To have strong, collaborative engagement with all healthcare providers to advance patient-centred, team-based care.

Stay tuned for more on the College's Strategic Plan for 2020/2021 to 2024/2025 which will be launched in March 2020.

## **Cayton Report**

Lastly, much of the discussion this year surrounding the future of health regulation in BC focused on "The Cayton Report", which was authored by Harry Cayton, the former chief executive of the UK's Professional Standards Authority.

The report outlines an inquiry into the College of Dental Surgeons of BC and recommends changes to the Health Professions Act.

The Cayton Report highlights the concepts of "patient safety," "public health and wellness" and "right touch regulation," all of which align with the College's mandate and approach to its work. Right Touch Regulation refers to the process of being proportionate and targeted in regulating risk or finding other ways beyond regulation to promote good practice and high quality health care.

The College will continue to work with the government and other relevant stakeholders to ensure we are adhering to a high standard of professional regulation.

## **REGISTRAR'S REPORT**

Registrar Nakagawa provided the following report:

## **Cultural Humility and Safety**

On March 2017, I had the honour of joining the rest of province's health regulators in signing the "Declaration of Cultural Safety and Humility in Health Services Delivery for First Nations and Aboriginal Peoples in BC."

Through this, the College pledged its commitment to making our health system more culturally safe for First Nations and Aboriginal people.

Since then, the College has worked on developing a strategy to fulfill its pledge to improve BC pharmacy professionals' work with First Nations and Aboriginal Peoples over the past fiscal year.



Moving forward, we recognize that working together with the First Nations Health Authority, other health regulators, pharmacy associations, First Nations groups, and others will be essential to act on our plan and create a healthcare environment free of racism and discrimination, where individuals feel safe and respected.

In February 2019, the College was fortunate to be invited back to the second annual Mental Health and Wellness Summit hosted by the First Nations Health Authority.

The College used this opportunity to build trust with members of First Nations Communities and help address the fact that Indigenous peoples are too often exposed to systemic stigma and racism, and that this can sometimes occur in healthcare settings.

We did this by sharing resources and building awareness of our complaints process, and how patients can report concerns with the healthcare they have received.

First Nations in BC have also been disproportionally affected by the opioid crisis, so as an exhibitor, the College used this opportunity to spread awareness of emergency use naloxone (including intranasal naloxone) and its importance in helping prevent opioid overdose deaths.

As Arden mentioned, I encourage you to learn more about our progress of cultural humility and safety in our annual report.

## **Opioid Overdose Crisis and Opioid Agonist Treatment**

The opioid crisis continues to be a top priority for us and other public health organizations across the province.

In 2018, there were 1,541 illicit-drug overdose deaths, compared with 1495 in 2017 and 992 in 2016. Somewhat encouragingly, the number of overdose deaths per capita in BC has declined so far in 2019, but it still represents a disturbing and tragic number of fellow British Columbians.

Similar to 2017, more than 80% of overdose deaths in 2018 involved fentanyl, with the majority of those deaths occurring in Vancouver, Surrey, and Victoria.

The Board continues to support several initiatives to combat this crisis including building awareness of how to access and use naloxone, new opioid agonist treatment policies, and addressing the impact of stigma on patient care.

In the past year, the College has engaged in a number of independent and collaborative efforts to further address and raise awareness of the opioid crisis.



This included two new professional practice policies for opioid agonist treatments, new training requirements for these treatments, and a number of articles.

On September 1, 2018, the new Professional Practice Policy-67 for Injectable Opioid Agonist Treatment (iOAT), as well as an accompanying Policy Guide for Injectable Hydromorphone Maintenance Treatment came into effect.

These documents set out the requirements for the safe dispensing of injectable hydromorphone for the treatment of opioid use disorder, addressing the previous absence of such requirements.

Under this model, patients will self-administer injectable hydromorphone within their community pharmacy up to three times per day.

New opioid agonist treatment training requirements came into effect January 1, 2019.

The new opioid agonist treatment training program focuses on reducing stigma and expanding pharmacists' knowledge about opioid agonist treatments including training on buprenorphine/naloxone and slow-release oral morphine.

During her time as Board Chair, Mona Kwong published an article on our ReadLinks blog, speaking about her experiences with stigma in health practice, and how health professionals can work to reduce it using respectful language.

The College also continued its naloxone campaign, using social media and digital advertising, to help share these resources and build awareness of how to use naloxone to save a life.

#### **Electronic Record Keeping**

The College introduced new Electronic Record Keeping requirements that came into effect on November 13, 2018.

Under the new records management framework, pharmacies are permitted to continue keeping only hard copy records, only electronic records, or a combination of both.

Well-kept records support the provision of safe services, continuity of care, and evidence-based care, as well as good professional practice and medication management.

## Medical Assistance in Dying (MAiD)

On November 1, 2018, new reporting requirements for Medical Assistance in Dying (MAiD) came into effect. The new Federal regulations and Provincial requirements identify the reporting requirements for pharmacists, physicians, and nurse practitioners.

Amendments to the College's Standards Limits and Conditions for MAiD to reflect the new Federal and Provincial reporting requirements also came into effect at the same time.



While previously the responsibility of the BC Coroners Service, the Ministry of Health became the designated recipient of all reportable information from pharmacists, physicians, and nurse practitioners.

In BC, pharmacists who dispense drugs for the purposes of MAiD are now required to submit both federally and provincially required information to the Ministry of Health within six business days after the scheduled date of MAiD protocol.

The College worked closely with the Ministry of Health, the College of Physicians and Surgeons of BC, the BC College of Nursing Professionals, and Health Authorities in the development of these new requirements.

## **New Pharmacy Ownership Requirements**

On April 1, 2018, the College's amendments to the Pharmacy Operations and Drug Scheduling Act (PODSA) Bylaws, which incorporate the new pharmacy ownership requirements approved by the provincial government in 2016, came into effect.

The new requirements permit the College to know the identity of all pharmacy owners, determine their suitability for pharmacy ownership, and hold them accountable for providing safe and effective care by ensuring their pharmacies are compliant with the legislative requirements for pharmacies in BC.

While the majority of people involved in pharmacies are honest and ethical, the College needs to have the authority to protect the public from unscrupulous pharmacy owners and operations that put patient safety at risk.

I'd like to acknowledge all College staff involved in this project for their hard work and dedication in bringing this initiative to fruition.

#### **Public Health Crisis**

2018 brought with it a number of issues that had a powerful impact on public health and safety, including the opioid crisis, wildfires, and drug shortages and recalls.

The College developed and distributed multiple announcements, resources, articles and guidance for the public and pharmacy professionals in response to a nation-wide shortage of EpiPen auto-injectors in April 2018 and a July 2018 recall of several drugs containing valsartan.

The materials developed by the College were intended to provide advice to affected patients, as well as guidance for pharmacists to provide access to safe therapeutic alternatives and substitutions.

Similar to 2017, on August 15, 2018 the British Columbia government declared a provincial state of emergency to support the province-wide response to the ongoing wildfire situation.

In response to the emergency, the College reached out to registrants via email, social media, and through our website to remind them of the provisions laid out in Professional Practice Policy 25 –



Pharmacy Disaster Preparedness, and to provide them with the appropriate College contact for questions related to continuity of care during an emergency.

Our communications also provided information and resources for displaced patients (e.g. Find a Pharmacy Tool), as well as guidance for pharmacy professionals.

As a health regulator and trusted sources of public health information, the College contributed to communication efforts with a specific focus on what to expect from pharmacy professionals in caring for patients affected by these crises.

### **Excellence Canada**

Over the past fiscal year, College staff conducted a significant amount of work towards achieving a Silver Certification with Excellence Canada's 'Excellence, Innovation and Wellness Standard.'

The Excellence, Innovation and Wellness Standard is an integrated quality-based management system, based on a holistic strategic framework that ensures organizations achieve the best possible outcomes across all business drivers, including: Leadership, Planning, Customers, People, and Processes.

This certification helps the College achieve its current strategic goal of Organizational Excellence.

As part of the evaluation for the Silver Certification, Excellence Canada looks for things like:

- Employee involvement in planning and improvement initiatives,
- Wide employee understanding of the organization's strategic approach to excellence, innovation and wellness, and
- High staff awareness of policies and procedures.

In addition, Excellence Canada also ensures that organizations have strategic and annual operating plans in place, and have established baseline indicators, measures, and related goals for excellence, innovation, and wellness.

I am pleased to announce that, as a result of this work, the College was recently awarded Silver Certification with Excellence Canada's 'Excellence, Innovation and Wellness Standard.'

I'd like to recognize all the staff at the College, who were strongly engaged in this process.

#### **Report of Board Elections**

The College would like to thank pharmacists and pharmacy technicians in Metropolitan Vancouver (District 1), Vancouver Island/Coastal (District 3), Northern BC (District 5), and Community Hospitals (District 7) that voted in the 2019 Board elections.

Board members, whether pharmacists, pharmacy technicians or public appointees, bring diverse points of view to the table and work as a team to make sound policy and governance decisions in the public interest.



It is also important to remember that while an election process is used to establish Board membership, the mandate of the Board is to uphold the College's duty as set out in the Health Professions Act: to serve and protect the public.

Over 21% (710 votes) of the 3233 eligible registrants in District 1, 3, 5, and 7 voted in the elections.

I would like to recognize and congratulate the following candidates on being elected to the Board for a 3-year term:

- Alex Dar Santos, District 1
- Andrea Silver, District 3
- Michael Ortynsky, District 5
- Claire Ishoy, District 7

These candidates will begin their terms at the beginning of the November 2019 Board meeting, tomorrow morning.

#### ADJOURNMENT

Chair Barry thanked the assembly for attending and participating in the College of Pharmacists of BC's 128<sup>th</sup> Annual General Meeting, and adjourned the meeting at 6:39pm.