



**Present:**

Doug Kipp, Chair, District 4 Board Member  
Beverley Harris, Vice-Chair, District 2 Board Member  
Agnes Fridl Poljak, District 1 Board Member  
Blair Tymchuk, District 3 Board Member  
Robert Craigie, District 5 Board Member  
John Hope, District 6 Board Member  
Jerry Casanova, District 7 Board Member  
Onnolee Osbourne, District 8 Board Member  
Penny Denton, Board Member  
Kris Gustavson, Board Member  
John Scholtens, Board Member  
Jeff Slater, Board Member

**Regrets:**

None

**Staff (at various times):**

Bob Nakagawa, Registrar  
Suzanne Solven, Deputy Registrar  
Mykle Ludvigsen, Director – Communications  
Lori Tanaka, Administrative Assistant - Communications (Minute Taker)  
Jesse Hogan, Accountant  
Doreen Leong, Director – Registrations/Special Projects  
Ashifa Keshavji, Director – Professional Development and Assessment Program  
George Budd, Inspector/Complaints Resolution Investigator  
Valerie Tsui, Complaints Resolution Officer  
Scott Fleming, Complaints Resolution Officer  
Geeta Parmar, Administrative Assistant – Complaints Resolution  
Ying Tan, Administrative Assistant – Complaints Resolution

**Invited Guests:**

Jane Buxton and Erin Gibson, BC Centre for Disease Control – BC Harm Reduction and Strategies Services Committee

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**Vision:** As the medication experts, registrants are professionals who apply their full knowledge, skills and abilities to achieve the best possible healthcare results through patient-centered care.

**Mission:** *To protect the public by ensuring that College registrants provide safe and effective pharmacy care to help people achieve better health.*

**Our Values:**

- Interactions will be handled ethically with respect and dignity while ensuring confidentiality.
- Integrity, honesty, accountability, transparency and responsiveness in all that we do.
- A culture of collaboration, learning and openness to change.



## 1. WELCOME AND CALL TO ORDER

Chair Kipp called the meeting to order at 9:04am and stated the College's Mission Statement:

*"To protect the public by ensuring that College registrants provide safe and effective pharmacy care to help people achieve better health."*

## 2. AGENDA

### 2.1 Confirmation of Agenda

**It was moved, seconded that:**

The Board approve the following amendments to the Agenda:

- Reverse the order of item 4.4 as follows:
  - 4.4a) Terms of Reference
  - 4.4b) Committee Appointments
- Remove item 4.7 BC Pharmacy Association Update
- Remove item 6.1.1a Express Scripts Canada Pharmacy Re: Patient Choice Legislation

**The motion was CARRIED**

**It was moved, seconded that:**

The June 15, 2012 agenda be accepted with changes as noted above.

**The motion was CARRIED**

### 2.2 Board Evaluation Form Feedback

**NO DISCUSSION**

## 3. APPROVAL OF MINUTES

### 3.1 Approval of the April 12 and 13, 2012 Board Minutes.

**DISCUSSION POINTS:**

- Revise the last discussion point, removing the words 'within that district', of item 4.4 Election Process to say:
  - *A Board member asked if some clarity could be provided in the call for Board member nominations mailing regarding who an elected Board member represents. Although Board members are elected by registrants from within a certain district, once elected, they represent the public.*

**It was moved, seconded that:**

The Board approve the February 10, 2012 Board Meeting Minutes as amended.

**The motion was CARRIED**



### 3.2 Approval of the May 29, 2012 (Teleconference) Board Minutes.

#### NO DISCUSSION

**It was moved, seconded that:**

The Board approve the May 29, 2012 (Teleconference) Board Minutes as presented.

**The motion was CARRIED**

## 4. BOARD GOVERNANCE AND DEVELOPMENT

### 4.1 Chair's Report

Chair Kipp thanked the College staff for planning the informal reception at the commencement of the strategic planning meeting the day prior which gave the Board and College staff the opportunity to meet one another.

Over the past few months, the Chair has been involved in numerous discussions with the Registrar and Deputy Registrar regarding the Board Agenda, the appointment of committee members, and a joint venture taxation issue.

### 4.2 Registrar's Report

The Registrar thanked the Chair for his availability and support in the past several weeks, specifically with putting together the agenda for this meeting and in ensuring that the work of the College aligns with the direction of the Board.

The Registrar reported on the following:

- Attending the NAPRA Board meeting with Board member Bob Craigie.
- Meeting new Pharmaceutical Services Division ADM Barb Walman.
- The intention of Health Canada to rename Schedule F in the *Food and Drugs Act* to 'Prescription Drugs'.
- Work with PEBC regarding different methods for credential validation.
- Concerns over authenticity of English fluency test results due to a recent breach of security at TOEFL.
- Attending the BC Pharmacy Association conference in Victoria and giving a presentation on the role of the College. The College financially supported the conference and was a sponsor of a presentation on injections administration.
- Attending the Canadian Pharmacists Association conference in Whistler.

### 4.3 Financial Health

#### (a) Financial Statement

The Registrar presented an overview of the periodic financial statements from March 1 to April 30, 2012.

**It was moved, seconded that:**

The Board accept the periodic financial statement as presented.

**The motion was CARRIED**



**(b) Audit Committee Report**

The Audit Committee met on Wednesday, June 13, 2012 and reviewed audited financial statements for fiscal 2011/2012.

**DISCUSSION POINTS:**

- The Registrar reported that during the audit process, the College staff gave complete access of all College records to four auditors over seven days. Feedback from the auditors suggests that the process was smooth and relatively easy due to staff cooperation.

**It was moved, seconded that:**

The Board accept the audited financial statements for fiscal 2011/2012 as presented.

**The motion was CARRIED**

**It was moved, seconded that:**

The Board accept the Audit Committee Report as presented.

**The motion was CARRIED**

**(c) Charging HST/GST to Registrants**

**DISCUSSION POINTS:**

- The Deputy Registrar reported that the taxation issue raised by the joint venture has been dealt with. Taxes will be re-filed reflecting the change.
- The Deputy Registrar also provided clarification regarding rationale around charging HST/GST on registration and licensure fees, stating that the College elects to charge tax on these fees in order to be able to claim input tax credits for HST/GST that has been paid on purchases made by the College.
- A Board member requested further information regarding the amount the College claims for input tax credits.
- A Board member suggested that this discussion be referred to the Audit Committee.

**It was moved, seconded that:**

Charging HST/GST on registration fees be referred to the Audit Committee.

**The motion was CARRIED**

**4.4 Board Committees**

**(a) Terms of Reference**

The College Committee Terms of Reference (TOR) were reviewed and updated as necessary.

**DISCUSSION POINTS:**

- It was brought to the Board's attention that changes to the Committee TOR included removing wording which granted Committee Chairs an additional deciding vote in the case of an equality of votes, and adding the appointment of a public member to the Ethics Advisory Committee's TOR.



**It was moved, seconded that:**

The Board approve the revised TOR for the following committees:

- Registration Committee
- Injection Drug Administration Committee
- Audit Committee
- Community Pharmacy Advisory Committee
- Hospital Pharmacy Advisory Committee
- Residential Care Advisory Committee
- CE-Plus Subcommittee
- Knowledge Assessment Subcommittee
- Jurisprudence Committee
- Ethics Advisory Committee

**The motion was CARRIED**

**DISCUSSION POINTS:**

- A Board member suggested adding further clarity to the Panels section of both the Discipline and Inquiry committees' TOR to include a College registrant – either a full pharmacist or pharmacy technician – dependent on the type of registrant under investigation.

**It was moved, seconded that:**

The Board approve the amended TOR for the Discipline Committee to include a College registrant – either a full pharmacist or pharmacy technician – dependent on the type of registrant under investigation.

**The motion was CARRIED**

**It was moved, seconded that:**

The Board approve the amended TOR for the Inquiry Committee to include a College registrant – either a full pharmacist or pharmacy technician – dependent on the type of registrant under investigation.

**The motion was CARRIED**

**DISCUSSION POINTS:**

- A Board member raised concerns regarding the committee Chair appointing a panel of the Quality Assurance Committee and asked that the Quality Assurance Committee (QAC) utilize the same process as the Inquiry/Discipline Committees where panels are selected on a first come first serve basis.
- The Director – Professional Development and Assessment Program provided further information regarding panels of the QAC stating that although this committee has the authority to strike a panel, it has never done so and suggested removing that section from the Terms of Reference.

**It was moved, seconded that:**

The Quality Assurance Committee Chair will make a recommendation to the Quality Assurance Committee regarding a panel and the committee will vote.

**WITHDRAWN**



**It was moved, seconded that:**

Approve the revised TOR for the Quality Assurance Committee with amendment to remove the panel section.

**The motion was CARRIED**

**(b) Committee Appointments**

Further to the April 2012 Board Meeting, the Committee Chairs (and some Vice-Chairs) met with the College staff resource for each committee to review the current committee membership and the new volunteer applications for the purposes of providing recommendations to the Board for membership of each committee. The Board Chair and Vice-Chair received the recommendations with the Registrar prior to presentation to the Board for approval.

Board Committees Required by Legislation:

- Inquiry Committee
- Discipline Committee
- Registration Committee
- Quality Assurance Committee
- Injection Drug Administration Committee

Board Initiated Committees:

- Audit Committee
- Community Pharmacy Advisory Committee
- Hospital Pharmacy Advisory Committee
- Residential Care Advisory Committee
- CE-Plus Subcommittee
- Knowledge Assessment Subcommittee
- Jurisprudence Committee
- Ethics Advisory Committee

Membership recommendations were made based upon a balanced representation of practice type, gender, years of practice, expertise and experience.

**DISCUSSION POINTS:**

- Board member Jeff Slater requested to be reappointed to the Discipline Committee as a public member.
- The Deputy Registrar acknowledged that some committees are still awaiting appointment of public members in order to meet the minimum requirement of public representation. Once potential public members are identified, their names will be brought to the Board for formal appointment at the September Board meeting.
- The Registrar asked for a revision to the Discipline Committee's list of proposed members re-appointing Peter Cook and Michael MacDougall each to 2-year terms to enable them to continue work on ongoing cases.

**It was moved, seconded that:**

The Board approve the committee members for each Board committee as presented and amended, for the terms noted.

**The motion was CARRIED**



**It was moved, seconded that:**

The Board approve a Chair and Vice-Chair for each Board committee, for a term of one year as presented.

**The motion was CARRIED**

**ACTION:**

College staff will draft a thank-you letter to all registrants who volunteered to sit on a committee but were not selected.

**ACTION:**

College staff will draft a thank-you letter to those committee members who were not reappointed and place their names on the volunteer honour roll for recognition at the November 2012 AGM.

**4.5 Presentation: “Understanding the Registration Process”**

Doreen Leong, Director of Registration and Special Projects gave a presentation to the Board which detailed the registration process for pharmacists and pharmacy technicians and outlined the role of the Registration Committee.

**4.6 NAPRA Board Meeting (April 14-15, 2012)**

Board member and Board appointed NAPRA representative Bob Craigie attended the NAPRA Board meetings in Ottawa with the Registrar in April. Information taken from the meeting was provided in the Board’s briefing package.

**DISCUSSION POINTS:**

- The Registrar summarized the paper produced by the *Ordre des Pharmaciens du Québec* regarding drug shortages, which was produced in response to the Sandoz situation where injectable drugs ceased to be produced causing a severe shortage. The paper contains recommendations to Health Canada by the working committee for solutions that will lessen consequences for patients and ensure the supply of drugs considered to be medically necessary.
- A Board member raised a concern regarding pharmacists being listed on the preferred immigrant list as there may no longer a shortage of pharmacists in British Columbia. The Registrar affirmed that he has been in discussions with government regarding the preferred immigrant list and asked if the reasons for being included are still valid.

**4.7 50 Years of Licensure Recognition**

Board member John Hope suggested that the Board formally recognize any member who has been a registrant with the College for 50 years or more.

**DISCUSSION POINTS:**

- A Board member suggested that such recognition would be the responsibility of a member association, however it was clarified that being a member of an association is not mandatory and that not all registrants would then be recognized.
- A Board member suggested that any registrant who has maintained their registration for 50 years or longer could be given a certificate of recognition at the AGM.



**It was moved, seconded that:**

The Board recognize registrants who have been registrants for 50+ years from this point forward.

**The motion was CARRIED**

**ACTION:**

College staff to develop a process to recognize registrants who have maintained their registration with the College for 50 years or longer.

**4.9 Presentation: “Complaints Resolution & Recent Investigations”**

Deputy Registrar Suzanne Solven gave a presentation to the Board introducing the College’s Complaints Resolution Team, detailing the Inquiry/Discipline process, and giving some examples of recent cases and outcomes.

**5. CONSENT ITEMS**

**5.1 Drug Scheduling: Naloxone – Dr. Jane Buxton**

Dr. Jane Buxton, accompanied by Erin Gibson, representing the BC Centre for Disease Control (BCCDC) Harm Reduction Strategies and Services Committee gave a presentation requesting a scheduling change of naloxone being added to Schedule IV, effectively giving pharmacists the authority to prescribe it. Dr. Buxton noted that as an effective antidote to opioid overdose, naloxone has been proven to save lives when it is made more openly available. It is proposed by the BCCDC that take-home ‘naloxone kits’ containing two doses of naloxone, syringes, and other materials could be prescribed and dispensed by pharmacists to individuals at high-risk of suffering or witnessing an opioid overdose. These kits would only be dispensed to those who have undergone training from a qualified nurse and received certification to administer the drug.

**DISCUSSION POINTS:**

- A Board member raised a concern regarding how pharmacists would identify patients who would benefit from being prescribed naloxone. It was clarified that individuals at high-risk of either suffering or witnessing an opioid overdose would receive training and become certified to administer the drug. The certification could then be presented to a pharmacist who could initiate a prescription for naloxone.
- A Board member raised the question of availability of College staff resources required to draft, develop and implement a professional practice policy guiding pharmacists in the area of prescribing naloxone. The Registrar stated that the College is aware of the amount of work involved in moving forward with the request and is prepared to take it on if that is the direction the Board wishes to take.
- In a related point, a Board member raised a concern regarding banning of naloxone in palliative care units in Fraser Health.

**It was moved, seconded that:**

The Board approves in principle the recommendation to add naloxone to Schedule IV of the Drug Schedules.

**The motion was CARRIED**





**It was moved, seconded that:**

The Board directs the Registrar to develop a professional practice policy that provides the guidelines and standards for naloxone prescribing and report back to the Board for approval no later than the November Board meeting.

**The motion was CARRIED**

**ACTION:**

College staff will bring the issue of banning the use of naloxone in palliative care units to the Long Term Care committee.

**6. STRATEGIC & POLICY MATTERS**

**6.1.1 Legislation/Standards**

The Registrar provided information on the action plan in the Board's briefing package.

- The revision and drafting of bylaws has been a priority for April, May and June for the Deputy Registrar and Director – Registration and Special Projects.
- Significant housekeeping, corrections and integration of new bylaws has been the focus.
- The drafting process is scheduled to be completed by the end of June 2012.
- Next steps:
  - July 2012 - draft documents distributed confidentially via email to the Board and the Board Committees for feedback
  - August 2012 – feedback incorporated
  - September 2012 – “final” draft provided to Board at September Board meeting for approval to publicly post

Code of Ethics Online Module:

- The deadline for registrants to complete the online ethics module tutorial was May 31, 2012.
- On average the number of hits via the website on each module was approximately 5,000, consistent with the number of pharmacist registrants.
- The tutorial was very well received according to registrant feedback.

**NO DISCUSSION**

**6.1.1(b) Loyalty Points**

The provision of incentives such as loyalty points being provided to patients in return for their prescription business had been considered by the Board previously. A legal opinion was provided to the Board for information.

The Board was requested to review and consider whether College staff should pursue the development of bylaws prohibiting patient incentives being provided in return for pharmacy services.



**DISCUSSION POINTS:**

- There was a discussion surrounding whether this was an issue for the College and whether it was in the public interest to pursue this change. The Board believed that there was a definite public interest motivation in doing so.
- It was suggested by staff that drafting legislation for approval by government is a clear and definitive approach to eliminating this practice in pharmacies.
- A Board member raised the point that offering patient incentives has been known to compromise continuity of care as patients are waiting to fill prescriptions at times when additional 'points' may be earned, essentially compromising therapy in order for the patient to earn the most points.
- Board member Kris Gustavson abstained from the vote.

**It was moved seconded:**

That the Board direct the Registrar to develop legislation prohibiting patient incentives being provided in return for pharmacy services.

**The motion was CARRIED**

**6.1.2 PDAP**

The Board received the action plan in their briefing package.

**Knowledge Assessment Subcommittee:**

- Knowledge Assessment Subcommittee (KAS) meetings were held on April 2, 2012 and May 17, 2012. The committee continues to work on monitoring the feedback of the computerized format and developing the KA exam and preparation resources:
  - KA Pilot exam held in March – staff and KAS monitored feedback from registrants in order to identify administrative and technical issues prior to first sitting.
  - First sitting held on April 13 & 14, 2012 – 80 examinees sat the exam. Test feedback was monitored by staff and KAS and addressed with exam provider. Evaluation feedback for computerized testing received from 72 examinees to date.
  - Next exam sitting scheduled for Jun 8 & 9, 2012. 102 registrants are scheduled to sit the exam.

**CE-Plus Subcommittee**

- First deadline for submissions is Aug 31, 2012:
  - # of Registrants due: 189
  - # of Registrants completed Tutorial: 107
  - # of Registrants completed Self Assessment: 69
  - # of Registrants completed minimum requirements: 26
- 6-month and 3-month reminder letters were sent – 6-week reminder will be included with annual registration renewal notices.
- Reminder calls are scheduled for 2 months prior to deadline with follow-up calls at 1 month prior to deadline as required.
- Next CE-Plus Subcommittee meeting tentatively scheduled for July 2012.



### 6.1.3 Complaints Resolution

The Board received the action plan in their briefing package.

#### Complaints Resolution Statistics:

- Formal complaints received during reporting period April 1, 2012 to May 23, 2012: 5\*

##### Categories of complaint types

- Medication-related: 4
- Privacy/confidentiality: 0
- Professional conduct/competency: 3
- Fitness to practice: 0
- Suspected unlawful activity: 2
- Sexual misconduct: 0

*\*The sum of complaint types exceeds number of formal complaints because a complaint file can include more than one type of complaint category.*

- Files reviewed by Inquiry Committee (includes files opened prior to reporting period; new and reconsidered files): 54
- Open files at reporting date (includes IC disposed files awaiting final paperwork): 39

- Dispositions under HPA or PODSA

##### Disposed and Closed

- No further action (after investigation, Inquiry Committee satisfied with registrant's response): 5
- Letter of Advice: 6
- Consent Agreement or Letter of Undertaking: 1
- Suspension of Registrant/Closure of Pharmacy: 0
- Referred to Discipline: 0
- Other [i.e. per HPA 33(6)(b)]: 1

##### Disposed and Monitoring

- Consent Agreement or Letter of Understanding with follow-up requirements: 6
- Discipline Committee hearings: 0
- Requests for records from HPRB: 1 (new process, CPBC has been notified that an application has been made to the HPRB but no action (request for records) is required until further notification)

#### Improved complaints resolution processes

- An iMIS specific complaints module is under development with timeline for completion fall 2012.
- iMIS is the College database used to capture registrant information.
- The complaints module will ensure that information regarding a registrant with respect to the complaints process will be captured together with the rest of the registrant information in real time. Currently this is done through a manual process.
- Benefits will ensure:
  - Greater accountability
  - Compliance with register
  - Streamlining of process
  - Enhanced records management



**6.1.4 Pharmacy Services Review**

The Board received the action plan in their briefing package.

- Inspection process has been updated to integrate new legislation and standards of practice through the new electronic inspection forms. Work in progress to now integrate the most recent professional practice policies.
- Inspection processes have been improved by:
  - Conversion from paper inspection/manager response forms to electronic real-time forms
  - Integration of inspection field kits which include: laptop/tablet computers, portable printer and scanner, camera, audio recorder
- Work in progress to implement monitoring framework (for inspection) based on risk criteria. Work completed to date:
  - Risk criteria/indicators identified
  - Monitoring reports created via Healthideas database
  - Staff trained in the use of the database and creation of the monitoring reports
  - Preliminary evaluation of the reports has identified technical issues that need to be resolved before full implementation is possible – dependence on Ministry of Health resources (database resides with the Ministry of Health)

**All Site Visits Stats per month by IPC - 2012**

<i>Month</i>	<i>Total</i>
January	11
February	11
March	25
April	26
<b>Total</b>	<b>73</b>

*\*stats do not include consultation - phone*

**Marketing of “specialty” areas of pharmacy practice**

- Concerns have been brought to the College’s attention that pharmacies are advertising “certified” specialty areas of practice, such as “certified geriatric pharmacist”, “certified compounding specialist”, etc.
- The Health Professions Act does permit the College to develop certified practice authorization; to date the only certified practice for pharmacy is for injection authorization.
- Currently the College does not have the expertise or the resources to certify or accredit various specialty areas or programs.
- The marketing by pharmacies of these designations has the potential to mislead the public in the absence of College approval.
- Staff requested guidance from the Board as to whether they wished to establish a task group to review this issue and provide recommendations in this regard.

**DISCUSSION POINTS:**

- As there is no such thing as a restricted ‘certified’ title, it would be very time consuming and resource heavy for the College to become involved with certifying or accrediting specialty areas or programs.



**It was moved seconded:**

The Board instruct staff to establish a task group to review this issue and provide recommendations in this regard.

**The motion was DEFEATED**

**6.1.5 Registration**

The Board received the action plan in their briefing package.

**New Registration Statistics (March 1, 2013 – April 30, 2012)**

- Pharmacist Registrants
  - Student UBC (includes Post UBC) 1
  - Student non-UBC (Canada/US) 0
  - New Graduate (Canada/US) 0
  - Agreement on Internal Trade 9
  - Other provinces (non-AIT) 0
  - Outside Canada (US/International) 16
  - Reinstatement 7
  - **TOTAL 33**
  
- Pharmacy Technician Registrants
  - Current 4
  - New Graduates 3
  - **TOTAL 7**

**Current Total Registrations/Licensure (as of February 29, 2012)**

- Pharmacists (Full) 5016
- Pharmacists (Non-Practising) 60
- Pharmacists (Limited) 1
- Pharmacists (Student UBC) 677
- Pharmacy Technicians 61
- Pharmacies
  - Community 1116
  - Hospital 68
  - Telepharmacy 12
  - Hospital Pharmacy Satellite 3
  - Education Site 2

**Pre-Registration Statistics (as of April 20, 2012)**

- Pharmacy Technicians
  - Pre-registration - current 1092
  - Pre-registration - new graduates 73
  - **TOTAL 1165**

**6.2.1 Adapting Prescriptions**

The Board received the action plan in their briefing package.

- No work has been done in this area during this reporting period due to other priorities and limitation of staff resources.



- Requested that the Board consider whether this goal remains a priority during the strategic planning session in June.

### **6.2.2 Administering Injections**

The Board received the action plan in their briefing package.

- 1654 pharmacists are authorized to administer injections (as of April 30, 2012).
- No work has been done in this area during this reporting period due to other priorities and limitation of staff resources.

### **6.2.3 Advanced Practice Pharmacist**

The Board received the action plan in their briefing package.

- Amendments being made to Project Management Plan to reflect updated timelines.

## **6.3 Pharmacy Technician Regulation**

- A national meeting of the Pharmacy Regulatory Authorities (PRAs) and NAPRA was held in May 2012 to discuss the transition plans to “nationalize” the Pharmacy Technician Bridging Program (PTBP) curriculum.
- PTBP, enrollments for the Spring 2012 intake for UBC-CPPD are approximately 200 registrations in 3 in-class courses and 4 online courses.
- PTBP enrollments for the Winter 2012 intake (online) for Selkirk College were:
  - Pharmacology (N=21)
  - Product Preparation (N=15)
  - Management of Drug Distribution (N=18)
  - Professional Practice (N=20)
- PTBP enrollments for the Summer 2012 intake to-date are:
  - Pharmacology (N=17)
  - Product Preparation (N=18)
  - Management of Drug Distribution (N=9)
  - Professional Practice N=14)

## **6.4 Removal of Tobacco**

- The Registrar reported that the College had not heard back from the Ministry with regards to our submissions.

## **6.5 Technology Framework**

- This action plan item has been completed.

## **6.6 Emerging Technologies**

The Board received the action plan in their briefing package.

- Early Adopters are the pharmacy software vendor and the EMR (Electronic Medical Record) vendor who have been involved in the planning/development of the



PharmaNet Modernization Project. They will be participating in the Phase One Pilot prior to general deployment.

- The Phase One Pilot will commence in July 2012. Sites are located in Summerland, Penticton and the Cowichan Valley. The Pilot is expected to last the balance of the calendar year. Province-wide roll out planned for 2013.

#### **6.7 Communication Strategy**

The Board received the action plan in their briefing package.

- Work is continuing on the development of a joint (with the BC Pharmacy Association) public awareness campaign as outlined in the Board approved fiscal 2012/13 budget. The College is continuing to work with BCPHA on the campaign which is expected to launch in the Fall.
- Work is continuing on alignment and evaluation of communications tools with messages and stakeholders as per the communication plan.
- College investigating additional online communications as a way in which to reach registrants.

### **5. CONSENT ITEMS**

#### **5.2 Approval of June 15, 2012 Board Highlights**

The Communications Director presented the Board with the Board Highlights headlines for approval.

**It was moved, seconded that:**

The Board approves the Board Highlights headlines as presented.

**The motion was CARRIED**

**ACTION:**

The draft Board Highlights are to be forwarded to the Board Chair for approval prior to distribution to all registrants and posting on the College website.

### **7. EVALUATION**

#### **7.1 Evaluation form**

- Board meeting evaluation forms were distributed to Board members with any completed forms collected by the Board Chair.

### **8. IN-CAMERA SESSION**

- No motions came out of the Board's in-camera session.

### **9. ADJOURNMENT**

- The Board Meeting adjourned at 3:44 pm.