



Board Meeting Minutes
Approved February 11, 2011

November 19, 2010

Present:

Randy Konrad, Chair & District 1 Board Member
Allan Greene, Vice-Chair & District 3 Board Member
Beverley Harris, District 2 Board Member
Doug Kipp, District 4 Board Member
Chris Hunter, District 5 Board Member
John Hope, District 6 Board Member
Bruce Beley, District 7 Board Member
Margaret Cleaveley, Board Member
Penny Denton, Board Member
John Scholtens, Board Member
Jeff Slater, Board Member
Bal Dhillon, Board (Observer) Member

Regrets:

None

Staff (at various times):

Marshall Moleschi, Registrar
Suzanne Solven, Deputy Registrar
Lori DeCou, Director – Communications
Ashifa Keshavji, Director – Professional Development & Assessment Program
Thomas Strumpski, Manager of Finance
Amanda Yen, Business Analyst (Minute Taker)

Invited Guests:

Glenda MacDonald, Director, UBC Division of Continuing Pharmacy Professional Development
Karen Wolfe, Chair, Ethics Advisory Committee
Dr. Cidalia Paiva, Ethics Advisory Working Group Member

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 Konrad called the meeting to order at 9:13 am 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."

1.1 Board Elections/Appointments

The Board Chair acknowledged the results of the 2010 Board elections which were held in Districts 2, 4 and 6 on October 22nd, 2010. The following registrants were elected to a two year term which will end at the beginning of the November 2012 Board meeting.

District 2 – Bev Harris
District 4 – Doug Kipp
District 6 – John Hope (by acclamation)

The Board Chair acknowledged the appointment and re-appointments of the government appointee Board members which, with the exception of Jeff Slater who has been appointed to a 1 year term ending October 31, 2011, have been appointed to a two year term which will end on October 1st, 2012.

Jeff Slater (new appointment)
Margaret Cleaveley (reappointment)
Penny Denton (reappointment)
John Scholtens (reappointment)

NO DISCUSSION

1.2 Oath of Office

As per the Health Professions Act (HPA) all newly elected, appointed and reappointed Board members are required to swear/affirm their Oath of Office prior to starting their term of office at the November Board meeting.

Bev Harris (District 2)
Doug Kipp (District 4)
John Hope (District 6)
Margaret Cleaveley (Government Appointee)
Penny Denton (Government Appointee)
John Scholtens (Government Appointee)
Jeff Slater (Government Appointee)

DISCUSSION POINTS

- Prior to taking their Oath of Office, the chair asked if any Board members had any conflict of interest they wanted to declare to the Board.



- The discussion turned to the formation of a new community pharmacists' advocacy society called the "Canadian Society of Community Pharmacists Inc." and the acknowledgement that two Board members (Bev Harris and Doug Kipp) sit on the Board of Directors of this new society.
- The group debated whether a conflict of interest exists if a Board member represents two separate organizations at the same time.
- The question was asked how to best approach situations such as these where there may be a perceived conflict of interest. One suggestion was that Board members could step aside when topics of perceived conflict of interest arise. Several Board members commented that it is simpler to serve on only one Board at a time.
- It was explained to the Board, by Bev Harris, that the Society was just in the very beginning stages of its formulation and that it did not yet have a specific mandate or any members. The Board was assured by her that they would be kept informed of the society's development.
- The Board members (Bev Harris and Doug Kipp) who previously resigned from the Board at the Extraordinary General Meeting (EGM) in July citing conflict with the Board as a whole over the regulation of pharmacy technicians were asked if their concerns still existed. The Board members acknowledged that they still had concerns but did not feel that they were in a conflict of interest situation.

1.3 Election of Chair/Vice-Chair

In accordance with HPA bylaw 12 (2) and 12 (4) Board members at the November Board meeting elected a Chair and Vice-Chair.

It was moved, seconded that:

Randy Konrad's nomination by Allan Greene be accepted for the position of Chair.

The motion was CARRIED

Given that no other nominations were brought forward, Randy Konrad was declared the returning Board Chair for a one-year term to conclude at the beginning of the November 2011 Board meeting.

It was moved, seconded that:

Allan Greene's nomination by Chris Hunter be accepted for the position of Vice-Chair.

The motion was CARRIED

It was moved, seconded that:

Bruce Beley's nomination by Beverley Harris be accepted for the position of Vice-Chair. Bruce Beley declined the nomination.

Given that no other nominations were brought forward, Allan Greene was declared the new Board Vice-Chair for a one-year term to conclude at the beginning of the November 2011 Board meeting.



2. AGENDA

2.1 Consideration of Additions to Agenda

Chair Konrad called for any additional agenda items.

ACTION:

- The Board directed the Registrar to add the issue of the current drug shortage as an agenda item for discussion at the next Board meeting.

2.2 Confirmation of Agenda

It was moved, seconded that:

Accept the November 19, 2010 agenda as presented.

The motion was CARRIED

3. APPROVAL OF MINUTES

3.1 Approval of Board Minutes September 24, 2010

DISCUSSION POINTS:

- There was some discussion as to whether or not the recorded minutes accurately reflected the Board's discussion regarding the Extraordinary General Meeting (EGM)
- The Board members who were present at the September Board meeting confirmed that the minutes did accurately reflect the Board's discussion.

It was moved, seconded that:

The Board approves the September 24, 2010 Board Meeting Minutes as presented.

The motion was CARRIED

Requested recorded vote:

Board members Doug Kipp and Bev Harris requested that their 'opposed' votes be recorded.

4. BOARD GOVERNANCE AND DEVELOPMENT

4.1 Financial Health

(a) Periodic Financial Statements

- Financial Statements for the period March 1, 2010 to September 30, 2010 were presented to the Board for their information only.

NO DISCUSSION



(b) 2 Year Proposed Budget (2011-12 & 2012-13)

The Registrar informed the Board that a number of factors were currently impacting the budget including:

- A significant increase in costs in the area of Complaints Resolution due to; timeline and processing changes resulting from the transition to the Health Professions Act and introduction of the Health Professions Review Board and the increase in the number and complexity of complaints being received by the College particularly in the area of Methadone Maintenance treatment.
- A cap on revenues received by the Ministry for PharmaNet services.

The Registrar, who is directed by the Board to deliver a balanced, two year budget, presented three options:

- **Option 1** – Status quo (spending as per the Strategic Plan, no fee increases)
 - Results in a \$1M deficit over 2 years
- **Option 2** – 5% increase across all fees in Year 1 and in Year 2 (includes some modest expense reductions but essentially delivers the Strategic Plan outcomes)
 - Results in a balanced budget over 2 years
- **Option 3** – 7.5% increase across all fees in Year 1 and a 3% increase in Year 2 (includes some modest expense reductions but essentially delivers the Strategic Plan outcomes)
 - Results in a balanced budget over 2 years

The Registrar reminded the Board that over the past 5 years pharmacy fees have only been raised slightly and pharmacist fees have not been increased at all. Additionally fees in BC are amongst the lowest in Canada

DISCUSSION POINTS:

- A Board member enquired as to whether or not the College was forecasting enough in the area of Complaints Resolutions given current trends. The Deputy Registrar commented that they had estimated as best they could and were comfortable with the budgeted dollars.
- A Board member enquired about cost recovery for Inquiry and Discipline expenses. The Board was reminded that the Tariff of Costs in legislation outlines what expenses may be recovered by the College, which is estimated at approximately 30%, and this has been reflected in the budget.
- A Board member commented that perhaps the Board should be directing the College to run a surplus budget.
- A Board member asked about the College's operating reserve and was assured that the budget reflected the Board directed operating reserve of the equivalent of six months operating expense
- The Registrar was complimented on not increasing fees over the past few years. With the increase in workload and registration fees staying the same, it shows that the College has been working more efficiently.

It was moved, seconded that:

The Board approves a 2 Year Proposed Balanced Budget (2011-12 & 2012-13) with a 5% fee increase in Year 1 and a 5% fee increase in Year 2.

The motion was CARRIED



4.2 Committees

- As required, the administration brought forward recommended updates and changes to the membership of various Board committees.
- The Board was informed that once approved, the updated list will be posted on the College website.

It was moved, seconded that:

The Board approves the elected Board Committee chair/vice-chair for the Ethics Advisory Committee as presented.

The motion was CARRIED

It was moved, seconded that:

The Board approves the elected Board Committee chair/vice-chair for the Discipline Committee as presented.

The motion was CARRIED

It was moved, seconded that:

The Board approves the replacement of the Learning and Practice Portfolio Subcommittee with the new CE-Plus Subcommittee, its Terms of Reference, committee members and elected chair as presented.

The motion was CARRIED

Audit Committee

- As the Audit Committee requires Board representation, and Michael MacDougall is no longer a Board member, current Board members were invited to volunteer to fill the vacant position.

DISCUSSION POINTS:

- As more than one Board member was interested, it was suggested that the Board consider adjusting the Terms of Reference for the Audit Committee which currently requires three Board members including the Chair, Vice-Chair, and at least one public member.

It was moved, seconded that:

The Board approves a change to the Terms of Reference for the Audit Committee to include a minimum of three Board members including the Chair, Vice-Chair, and at least one public member.

The motion was CARRIED

It was moved, seconded that:

Bruce Beley be accepted as a member of the Audit Committee.

The motion was CARRIED

It was moved, seconded that:

John Scholtens be accepted as a public member of the Audit Committee.

The motion was CARRIED



4.3 Annual General Meeting

- Board members were reminded of the College's Annual General Meeting (AGM) scheduled for Saturday November 20th, 2010 from 4:00pm – 5:00pm at the Morris J. Wosk Centre for Dialogue in Vancouver. In addition to the AGM itself, Board members were also encouraged to attend the joint luncheon meeting with the BC Pharmacy Association Board scheduled from 12:45pm – 2:00pm and the reception that follows the AGM from 5:00pm – 7:00pm.
- As presented at the September 24th, 2010 Board meeting, 3 resolutions were being brought forward at the AGM. Board members were reminded that the Board's role at the AGM is to listen to the discussion and collect information to bring back to the Board's February 2011 Board meeting when resolution outcomes will be considered.
- As requested by the Board at the September 24, 2010 meeting background information was provided on each of the resolutions.

DISCUSSION POINTS:

- It was agreed that Board members would not speak to resolutions at the AGM and that the Board would give due consideration to the outcome of the resolutions at the February Board meeting.
- A Board member asked if the Terms of Reference for the Resolutions Committee should be revised to allow the committee to decide if a resolution is applicable and if it qualifies to be brought forward.

ACTION:

- The Board directed the Registrar to do a review of the Terms of Reference of the Resolutions Committee and bring forward to a subsequent Board meeting.

4.4 Board Meeting Schedule 2011

- The proposed Board Meeting Schedule for 2011 is:

Friday February 11, 2011
Friday April 15, 2011 (note: Good Friday April 22)
Friday June 17, 2011
Saturday June 18, 2011 (annual strategic planning session)
Friday September 23, 2011
Thursday November 24, 2011 (board orientation session)
Friday November 25, 2011
Saturday November 26, 2011 (Annual General Meeting)

NO DISCUSSION

It was moved, seconded that:

The Board approves the Board meeting schedule for 2011 as presented.

The motion was CARRIED



4.5 Regional Meetings

- A total of 9 regional meetings have taken place across the province. Attendance at each of the meetings ranges from 25 – 50 registrants. Each session was scheduled for 1 ½ hours with a 40 minutes overview presentation on current College initiatives followed by an open discussion with registrants.
- The general feedback from the sessions has been positive with registrants appreciating the opportunity to hear directly from the College and to be able to have their specific questions and concerns expressed.
- A recorded version of the regional meetings will be posted on the College website and will be available to all registrants in the coming weeks.

NO DISCUSSION

5. STRATEGIC & POLICY MATTERS

Goal 1

The enhanced and expanded care and services that pharmacists and regulated pharmacy technicians deliver are safe and effective and aligned with the healthcare needs of the public.

Objective 1

Develop a model for pharmacy technician regulation, seek government approval on bylaws and integrate into College processes and programs.

5.1 Pharmacy Technician Regulation

(a) The Registrar provided an update on the action plan in the Board's briefing package.

- An intra-provincial meeting of the Provincial Regulatory Authorities (PRAs) was held in Ottawa on October 28 & 29, 2010 to collaborate on Pharmacy Technician initiatives and discuss common issues to ensure consistency of requirements nationally.
- The College partnering with UBC's Continuing Pharmacy Professional Development (UBC-CPPD) has delivered the Pharmacy Technician Bridging Program; to-date the following number of students have enrolled in the bridging program modules/exams:
 - Pharmacology = 125
 - Product Preparation = 60
 - Management of Drug Distribution Systems = 25
 - PLAR Challenge Exams = 131
 - Pharmacology = 48
 - Product Preparation = 41
 - Management of Drug Distribution = 42
- On-line delivery of the modules is anticipated to be available in January 2011.
- 238 pharmacy technicians are currently pre-registered with the College (effective October 29, 2010).



- The next sittings of the pharmacy technician Pharmacy Examining Board of Canada (PEBC) Qualifying Exam (OSPE) are March 26, 2011 and September 11, 2011.
- The next sitting of the pharmacy technician PEBC evaluating exam is April 17, 2011.
- The Registrar and Registration Director presented an update on pharmacy technician regulation at the 5th Annual Pharmacy Technician Conference held on October 15-16, 2010.
- The College is currently publishing and distributing “Tech Talk”, a publication with the most current information on pharmacy technician regulation which is circulated to the College’s database of approximately 1200 technicians.

DISCUSSION POINTS:

- A Board member enquired as to whether or not the legislation in Ontario is different than BC with respect to technicians’ independent authority. The Registrar confirmed that the requirements are the same in both provinces.
- A Board member requested that the Director of Registration/Special Projects consider allowing technicians to enrol in the bridging programs without having to pre-register with the College first. This would allow technicians to take advantage of the learning for continuing education purposes only.
- A number of Board members identified that there are still concerns regarding technician regulation amongst registrants and the Board confirmed that further ongoing communication is required. As part of the communications strategy the Registrar has travelled throughout the province to connect with registrants and answer any questions.

Goal 1

The enhanced and expanded care and services that pharmacists and regulated pharmacy technicians deliver are safe and effective and aligned with the healthcare needs of the public.

Objective 2

Develop a model and support associated legislation for ensuring advanced professional practice in a manner that supports pharmacists in the delivery of consultation, cognitive services, medication management, and dispensing services.

5.2 Pharmacists’ Advanced Professional Practice

5.2.1 Adapting Prescriptions

- At the end of September 2010 the College made a presentation to the MAP (Monitoring Adapting Prescriptions) Task Force meeting. The intent of the presentation was to outline the following:
 - The scope and extent of monitoring that had taken place to date with respect to adaptations
 - Identification of barriers to best patient care
 - Outline the College’s next steps with respect to moving forward with the removal of the additional limits/conditions that were implemented in December 2008*



- Based on the feedback received, College staff have committed to further dialogue and consultation with various stakeholder groups and the consideration of a phased approach to the lifting of limits and conditions.

** It is important to note that the 7 fundamentals (standards/limits/conditions) outlined in the PPP-58 Orientation Guide would remain and they set clear standards/limits and conditions for the pharmacist. The fundamentals are sequential in order, therefore at any point if the pharmacist cannot meet the standard identified at that level, the adaptation process stops.*

NO DISCUSSION

5.2.2 Administering Injections

(a) The Registrar provided an update on the action plan in the Board's briefing package.

- At an Injection Drug Advisory Committee (IDAC) meeting held at the end of September, IDAC committee members were updated on the current policy document, complaints received to date and injection statistics.
- The intent is to evolve the current Standards, Limits and Conditions for Immunization to permit pharmacists to administer any injections.
- IDAC was supportive of moving forward with removing the restrictions on injections and the next steps include proposed draft revised Standards, Limits and Conditions be brought forward to the College Board for approval at the February 2011 meeting
- 821 pharmacists are authorized to administer injections (effective October 29, 2010), with the following breakdown by geographical area:
 - District 1 – 275
 - District 2 – 240
 - District 3 – 113
 - District 4 – 143
 - District 5 – 46
 - Outside BC – 4

NO DISCUSSION

5.2.3 Advanced Practice Pharmacist

(a) The Registrar provided an update on the action plan in the Board's briefing package.

- Business case analysis has commenced.
- Final draft of feasibility study will be presented at the next Board meeting.

NO DISCUSSION



Goal 1

The enhanced and expanded care and services that pharmacists and regulated pharmacy technicians deliver are safe and effective and aligned with the healthcare needs of the public.

Objective 3

Identify and support initiatives that ensure that the skills of pharmacists and regulated pharmacy technicians are developed in accordance with the scope of practice.

5.3 Quality Assurance

5.3.1 PDAP

(a) The Registrar provided an update on the action plan in the Board's briefing package.

- The QAC met on September 28th, 2010 and approved the formation of the CE-Plus Subcommittee to oversee the development and implementation of the CE-Plus Tool. A call for volunteers was included in the September edition of ReadLinks. The QAC has drafted policies for the program, which they are currently revising based on feedback and will approve at their next meeting. The policies will formalize the details of the PDAP structure and timelines as approved by the Board.
- The communication plan for PDAP was launched as scheduled in September. Registrants have begun to receive program details through ReadLinks and the website and will continue to do so as they are developed throughout the fall. The CE Component of PDAP is scheduled to launch in June 2011 with the Assessment Component following in 2012.

NO DISCUSSION

5.3.2 Complaints Resolution

(a) The Registrar provided an update on the action plan in the Board's briefing package.

- 40 new files are scheduled for presentation to the Inquiry Committee following the September 24th Board meeting.
- All new files will be resolved within the HPA timelines (of 120 days)
- The Registrar reported that there is currently heightened security at the College office on the advice of local authorities, due to threats to staff arising from some recent Inquiry/Discipline proceedings.

NO DISCUSSION



5.3.3 Pharmacy Services Review

(a) The Registrar provided an update on the action plan in the Board's briefing package.

**All Site Visits Stats per month by IPC - 2010
(from report 0005 - include multiple service reviews on same day)**

<i>Month</i>	<i>Total</i>
January	29
February	39
March	29
April	50
May	45
June	46
July	31
August	29
September	36
Total	334

(b) Proposed PPP-66 Methadone Maintenance Treatment

The Deputy Registrar provided the background for the introduction of the new Professional Practice Policy

- Over the years, the provision of methadone maintenance treatment has grown with over 50% of community pharmacies across the province currently providing the service.
- This is an area of practice that has seen an increase in practice concerns (eg. Complaints) over the past few years.
- The purpose of introducing PPP-66 Methadone Maintenance Treatment is to ensure that all pharmacy managers and all pharmacists providing this essential service are adhering to the same standards and guidelines.
- The College is in the final stages of developing a comprehensive Methadone Maintenance Treatment Policy Guide (2010) which has included extensive stakeholder consultation and feedback.
- As outlined in PPP-66, all pharmacy managers and staff pharmacists employed in a community pharmacy that provides services related to methadone maintenance treatment, or would like to provide these services, will be required to successfully complete a College training program based on the standards and guidelines outlined in the new Policy Guide.
- This requirement is identical to that of the College of Physicians and Surgeons of BC (CPSBC), which requires the completion of a one-day "Methadone 101" course by physicians who have applied for an exemption to prescribe methadone (in accordance with federal



legislation). Every physician exempted to prescribe methadone has completed the CPSBC training program.

- CPBC Inspector/Practice Consultant staff will develop new materials for pharmacy site visit documentation, based on the new policy. They will also assist with pharmacist orientation regarding the existence of the new requirements during their pharmacy site visits.
- The CPBC registration process will be adjusted to document ongoing involvement by individual pharmacists and pharmacies with the provision of methadone pharmacy services.
- In order to ensure continuity of care for patients, particularly in rural areas. The policy includes a transition period of over a year and the mandatory training program, which is free for registrants, will be available in 'live' sessions in as many as 20 communities throughout BC as well as 'online'.
- Complete details will be communicated to all registrants as the training becomes available early in the New Year. Funding for this initiative will be off-set by a grant received by the Federal government.

DISCUSSION POINTS:

- Board members expressed support for the policy as their experience in pharmacy and on the Inquiry Committee showed a large number of cases resulting from the delivery of Methadone Maintenance Treatment. Introducing this policy will help ensure appropriate delivery of pharmaceutical care and provide a baseline to measure Inquiry cases and reduce long-term costs for the College.

It was moved, seconded that:

The Board approves the proposed PPP-66 on methadone maintenance treatment as presented.

The motion was CARRIED

(c) Proposed PPP-67 Refrigerated Pharmaceutical Storage Requirements

The Registrar provided the background for the introduction of the new Professional Practice Policy

- In order to protect the public, pharmacies need to be able to guarantee the integrity of their refrigerated pharmaceuticals.
- In order to do this they need to store refrigerated pharmaceuticals as directed by the manufacturer and the BC Centre for Disease Control

DISCUSSION POINTS:

- Board members commented that using a thermometer may not necessarily address the source of the problem. A normal household fridge would not be desirable yet a \$20,000 fridge which guarantees temperatures is a significant investment.
- It was agreed that the College would refer the policy to the Community Pharmacy Advisory Committee and the Hospital Advisory Committee for further review.

It was moved, seconded that:

The Board refers the proposed PPP on refrigerated pharmaceutical storage requirements to the Community Pharmacy and Hospital Advisory Committees for



further review and revision (including costing) before being brought back to the Board for consideration.

The motion was CARRIED

5.3.4 Registration

(a) The Registrar provided an update on the action plan in the Board’s briefing package.

- Registration Statistics (March 1 – September 30, 2010)

New Pharmacist Registrants

○	UBC students	142	
○	Students (Non-UBC)	22	
○	MRA/AIT	45	
○	Other provinces	11	
○	Outside Canada	59	
○	Return-to-practice	21	
	TOTAL	300	

Pharmacy Technicians (Pre-registration applications)

○	Metro Vancouver	54	
○	Fraser Valley	84	
○	Vancouver Island		45
○	Kootenay/Okanagan	31	
○	Northern BC	24	
	TOTAL	238	

NO DISCUSSION

5.3.5 Legislation/Standards

(a) The Registrar provided an update on the action plan in the Board’s briefing package.

- The Board was reminded that the current Code of Ethics was over 15 years old and that the College had initiated work well over a year ago to revise the Code to ensure that College’s standards, with respect to professional and ethical conduct, were reflective of current pharmacy practice.
- Representatives from the Ethics Working Group and Ethics Advisory Committee, provided the Board with a presentation outlining the foundational framework and comprehensive development of the recommended revised documents (Preamble to the Code, Code of Ethics, Conflict of Interest Standards, Model for Ethical Decision Making and Pharmacy Oath).
- The presentation included a breakdown of the consultation process which included:
 - CPBC Ethics Advisory Committee
 - Chair and Vice Chair (and other members) of the following CPBC committees:
 - Inquiry and Discipline



- Quality Assurance
- Community Pharmacy Advisory
- Hospital Pharmacy Advisory
- Registration
- Ethics Advisory
- Residential Care Advisory
- The purpose of the sessions was to gain feedback with respect to relevancy and applicability of the draft documents as well as identification of communication and implementation strategies and any issues or barriers to implementation. The documents were well received and useful feedback was provided.
- The documents were also forwarded to the Canadian Society of Hospital Pharmacists, Canadian Association of Chain Drug Stores- BC Branch, and the BC Pharmacy Association for comment.
- The Working Group revised the documents and provided final drafts to the Ethics Advisory Committee for final approval and presentation to the Board.

DISCUSSION POINTS:

- The Board discussed each document at length making some minor revisions which did not change the intent, and a few significant ones throughout the process.
 - With respect to the Code of Ethics document, the Board debated the inclusion of a conscientious objection guideline which would permit a pharmacist to refuse to provide a product or service if it would contravene their personal, moral or religious value system. In the end, the Board voted to include a conscientious objection guideline although a pharmacist must refer the patient as appropriate.
 - With respect to the Conflict of Interest Standards, the Board debated the parameters of a guideline relating to the offering of loyalty or incentive programs. In the end, the Board voted to include a guideline that states “pharmacists or pharmacies must not offer loyalty or incentive programs”.

It was moved, seconded that:

The Board approves the updated Pharmacists Oath with one minor revision.

The motion was CARRIED

It was moved, seconded that:

The Board approves the Preamble to the Code of Ethics with one minor revision.

The motion was CARRIED

It was moved, seconded that:

The Board approves the updated Code of Ethics with the inclusion of a conscientious objection guideline and a few other minor revisions.

The motion was CARRIED

It was moved, seconded that:

The Board approves revising references to “Appendix A” with noted changes.

The motion was CARRIED



It was moved, seconded that:

The Board approves the updated Conflict of Interest Standards with the revised guideline on loyalty and incentives and a few other minor revisions.

The motion was CARRIED

It was moved, seconded that:

The Board approves the Model for Ethical Decision Making as presented.

The motion was CARRIED

With the inclusion of the conscientious objection guideline to the Code itself, PPP-35 Refusal to Provide a Product or Service for Moral or Religious Reasons became redundant.

It was moved, seconded that:

The Board approves Professional Practice Policy-35 Refusal to Provide a Product or Service for Moral or Religious Reasons be rescinded.

The motion was CARRIED

Given that all of these new documents will form Schedule A to the HPA bylaws, subject to filing with the Ministry, it was necessary for the Board to repeal the current Schedule A.

It was moved, seconded that:

Resolved that, in accordance with the authority established in section 19(1) of the Health Professions Act and subject to filing with the Minister as required by section 19(3) of the Health Professions Act, the Board repeal Schedule A to the Health Professions Act Bylaw and substitute with the Schedule A as attached to this resolution.

The motion was CARRIED

Finally, given the significance of these documents as practice standards, and a resource to support pharmacists in ethical decision making, the Board approved a mandatory education program for all registrants.

It was moved, seconded that:

There be mandatory training of the revised Code of Ethics and Conflict of Interest standards documents for all current registrants.

The motion was CARRIED

Goal 1

The enhanced and expanded care and services that pharmacists and regulated pharmacy technicians deliver are safe and effective and aligned with the healthcare needs of the public.

Objective 4

Continue to implement the plan to remove non-medicinal nicotine products from buildings that have pharmacies.



5.4 Removal of Tobacco

(a) The Registrar provided an update on the action plan in the Board's briefing package.

- The recent government cabinet shuffle on October 26 moved the responsibility for tobacco from the Ministry of Healthy Living back to Minister Falcon and the Ministry of Health Services. In a meeting with Minister Falcon earlier this year the Minister expressed support for the College position on the removal of tobacco from pharmacies. In light of this the College is currently working to arrange a follow up meeting with the Minister on this topic.

NO DISCUSSION

Goal 2

The College sets standards and conditions to ensure that emerging technologies and changes to pharmacy processes contribute to safe and effective pharmacy care.

Objective 1

Develop a policy framework to monitor safe and effective utilization of pharmacy technologies and practice processes.

5.5 Technology Framework

(a) The Registrar provided an update on the action plan in the Board's briefing package.

- In response to direction set by the Board, the College drafted a Professional Practice Policy (PPP-67) Pharmacy Technology for Board consideration.
- This policy is intended to ensure the appropriate selection and maintenance of technologies that support patient-centered, safe and effective pharmacy care.
- The policy holds pharmacy managers responsible for evaluating the suitability and safety of all technologies utilized within their pharmacy systems and provides general guidelines and criteria that must be followed in this regard.
- Further details on the policy will be communicated to all registrants early in the New Year.

NO DISCUSSION

It was moved, seconded that:

The Board approves the proposed PPP-67 Pharmacy Technology as presented.

The motion was CARRIED

Goal 2

The College sets standards and conditions to ensure that emerging technologies and changes to pharmacy processes contribute to safe and effective pharmacy care.

Objective 2

Continue to promote the need for Electronic Health Record that includes all drugs and all people.



5.6 Electronic Health Record

(a) The Registrar provided an update on the action plan in the Board's briefing package.

- CPBC is participating in discussions (as a stakeholder) for e-prescribing as it relates to the Electronic Medical Record (EMR)
- CPBC focus is on: 1) ensuring professional practice standards/policies are met and 2) Workflow design reflects best practice
- e-prescribing is a significant component of the MoHS' PharmaNet Modernization Project (planned go live in 2012)

DISCUSSION POINTS:

- A Board member requested a demo, when it becomes available, so the Board could view a sample record and go through the expected process for e-prescribing.

Goal 3

The public, government, healthcare professionals, and registrants understand the role and value of the pharmacist.

Objective 1

Maintain a practical communications strategy.

5.7 Communication Strategy

(a) The Communications Director provided an update on the action plan in the Board's briefing package.

- The second flight of the College's public awareness campaign will run from November 1 through November 28 throughout BC. A combination of radio and online advertising will be utilized with the focus of the message on building trust between the patient and pharmacist by emphasizing the pharmacist's qualifications and the role of the College in ensuring pharmacists meet these.

NO DISCUSSION

6. CONSENT ITEMS

6.1 Approval of November 19, 2010 Board Highlights

- The Communications Director presented the Board with the Board Highlights headlines, which were agreed to as presented.

NO DISCUSSION

ACTION:

- The draft Board Highlights are to be forwarded on Tuesday November 23, 2010 to the Board Chair for approval prior to distribution to all registrants and posting on the College website.



It was moved, seconded that:

The Board approves the Board Highlights headlines as presented.

The motion was CARRIED

7. 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: 4:30 pm.