

# Meeting the Challenge

College of Pharmacists of British Columbia  
Annual Report 2011–2012

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Annual Report 2011–2012



COLLEGE OF PHARMACISTS  
OF BRITISH COLUMBIA

Meeting the  
Challenge

## 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.

## 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.

### 2011/12 Annual Report

All statistical information and Board and committee member listings reported in this 2011/12 Annual Report are as of fiscal year end, February 29, 2012.

# Board's Strategic Goals

## Strategic Goal 1

The enhanced and expanded care and services that registrants deliver are safe and effective and aligned with the healthcare needs of the public.

## Strategic 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.

## Strategic Goal 3

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

## Board of the College of Pharmacists of BC

**Doug Kipp** *Chair*  
District 4 – Kootenay/  
Okanagan

**Bev Harris** *Vice-chair*  
District 2 – Fraser Valley

**Agnes Fridl Poljak**  
District 1 – Metropolitan  
Vancouver

**Blair Tymchuk**  
District 3 – Vancouver Island/  
Coastal

**Robert Craigue**  
District 5 – Northern British  
Columbia

**John Hope**  
District 6 – Urban Hospitals

**Jerry Casanova**  
District 7 – Community  
Hospitals

**Onnolee Osbourne**  
District 8 – Pharmacy  
Technicians

**Penny Denton**  
Government Appointee

**Kris Gustavson**  
Government Appointee

**John Scholtens**  
Government Appointee

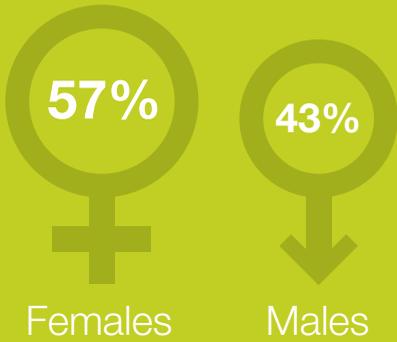
**Jeff Slater**  
Government Appointee

121st Annual General Meeting –  
November 17, 2012

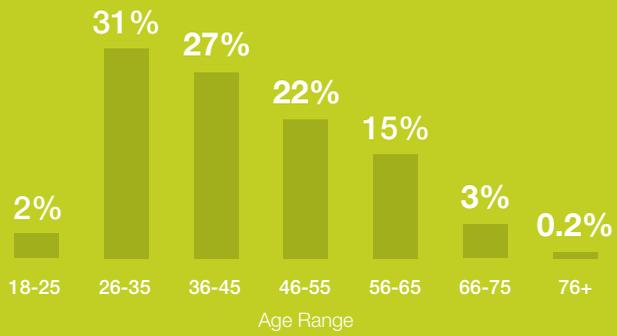
Morris J. Wosk Centre for Dialogue – Simon  
Fraser University 580 West Hastings Street,  
Vancouver BC

# Highlights 2011–2012

## Gender Breakdown: Pharmacists



## Age Breakdown: Pharmacists



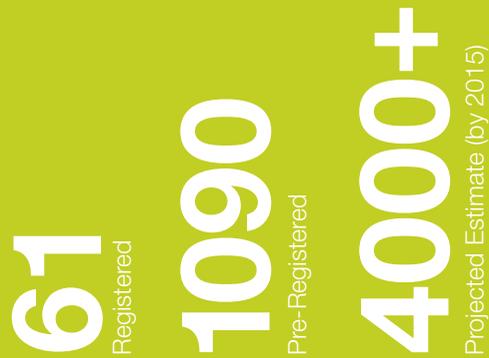
## Community Pharmacists Per District



## Pharmacies by Type



## Total Number of Pharmacy Technicians



## Community Pharmacy by Location



## Hospital Pharmacists by Urban and Community



### Prescription Fills by Community Pharmacists

(Dispensing count for fiscal year 2011/2012)



Total Prescriptions Filled

\*Excludes prescriptions filled by the BC Centre for Excellence in HIV/AIDS



Average per Community Pharmacist

### Methadone

(Number of Active Pharmacies identified as dispensing Methadone at Feb 29, 2012)



1600  
— out of —  
5018  
have injection authority



Highest Uptake of Injection Authority is Okanagan/ Kootenay Region at 77%

### Inquiry Committee Activity

156  
Files  
reviewed



13  
MEETINGS

### Number of Pharmacy Site Visits



# Chair's Message

Doug Kipp *Chair*



It was an honour that I was elected Chair of the Board last year and it is my pleasure to present this report on behalf of the Board.

Welcome to Bob Nakagawa on his appointment as Registrar. Thank you to Suzanne Solven for acting as Registrar for the 8 months while the Board selected a new Registrar.

Over the past year, the Board has tackled a number of issues. These are times of change in pharmacy, and change can be difficult. Assuring the public of safe and effective pharmacy care in this time of change is the utmost priority of the Board.

The College registered our first regulated Pharmacy Technicians and we must now turn our mind to effectively integrating those technicians into the College's regulatory process. We need to ensure that registrants understand and practice to their intended scope.

I am proud of the work the College has done regarding methadone maintenance therapy working closely with registrants to ensure that everyone understands their responsibilities to their patients when dispensing it. Action is being taken against those very small numbers of pharmacies who have taken advantage of their local communities giving pharmacists a bad name.

We are the only province in Canada still selling tobacco products from pharmacies even though our mandate is to promote public health. Hopefully this will soon change.

Due to a large response from the Registrants showing interest in serving on the College's various committees, we have been able to refresh these committees with new members and our thanks go out to the volunteers who applied.

All Board expenses are now posted on the College webpage in order to maintain transparency and accountability.

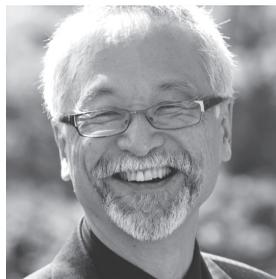
The past year has been a busy one for the College. I want to thank the Board and staff for their service to the pharmacy profession over the last year.

A handwritten signature in black ink, appearing to read 'DKipp', with a stylized flourish at the end.

Doug Kipp *Chair*

# Registrar's Message

Bob Nakagawa Registrar



As the 22nd Registrar of the College of Pharmacists of BC, I am pleased to present you with this Annual Report of our activities. In determining this position, I reviewed the list of Registrars who have served the College since 1891. I was reminded of the rich history that this College has, and am proud to have known many of them as colleagues and friends.

I am sure that you will find this year's report to be interesting and informative.

I would like to extend my sincere thanks and appreciation to Suzanne Solven, who was the acting Registrar after Marshall Moleschi left last summer. Suzanne did a great job of running the organization in the interim, and continues to be a valued source of institutional memory and advice for moving forward. Marshall has moved on to be the Registrar of the Ontario College of Pharmacists. He takes the experience and wisdom he acquired as our Registrar to advance their Mission and Vision as he did so capably here.

A couple of years ago Marshall described the year as transitional as the *Health Professions Act* had been proclaimed and pharmacists were provided with an expansion to our scope of practice. Pharmacy Technicians were also recognized as health professionals and would be brought into the College. Since then we have worked diligently in implementing the new legislation, with the profession embracing the changes. 1600 pharmacists are now trained to provide injections to patients, and medication management services have been implemented at pharmacies throughout the province. There are now 61 pharmacy technicians registered with the College and over 1200 pre-registered. I am extremely pleased to welcome them into the College. We have a technician on the Board and will be working over the next few years on ensuring an appropriate presence of technicians in the College staff and committees.

More troublesome and of significant concern is the increase in both the number and complexity of the complaints about pharmacists. In the last year, the total number of complaints has increased from 104 to 141. While this alone is of great concern, of greater concern is the increase in the number of complaints about the professional competence and conduct of pharmacists. Complaints in this category increased from 21 to 67. While this pales in comparison with the total number of patient encounters that pharmacists have on an annual basis, it is still a concern for the College. The process of review is a large undertaking, to make sure that complaints aren't frivolous or unfounded. If the complaint is well founded, the cases must be forwarded for appropriate disciplinary action, including the potential for removal from the register. In recent times, the number of cases that actually proceed for discipline has been minimal, but this may not continue to be true. Our responsibility to the public is to make sure that their pharmaceutical system is safe and effective, and that they can continue to have great confidence and trust in their pharmacist. Self governance is a privilege that we value. Who better than the pharmacists of the province to determine how to deal with our own? This is a serious and important aspect of our role as a professional College.

Thank you for the honour and privilege of serving as your Registrar. I am looking forward to the years ahead.



Bob Nakagawa Registrar

It is the duty of the College at all times to serve and protect the public.

The College of Pharmacists of BC, as the regulatory body for the profession of pharmacy, is responsible for the registration of pharmacists and pharmacy technicians, and for the licensing of pharmacies throughout British Columbia. The College receives its authority from the government of BC through the *Health Professions Act (HPA)* and the *Pharmacy Operations and Drug Scheduling Act (PODSA)*.

The Board of the College is the elected and appointed body responsible for leading and guiding the organization and, in fiscal year 2011/2012, was comprised of seven elected pharmacist Board members, one elected pharmacy technician Board member and four government appointed public Board members.

The purpose and role of the Board is to govern the College to efficiently and effectively fulfill its legislative mandate, achieve its mission and vision, and be accountable to the general public for competent, conscientious and effective pharmacy practice.

In addition to the College Registrar and staff, the Board utilizes a number of committees, made up primarily of College registrants with some public representation, to achieve its identified goals and objectives. Each committee, as a whole, reports through their chair to the Board annually and excerpts of these committee reports have been incorporated throughout this annual report.

Before taking office, all elected and appointed Board members must take and sign an *Oath of Office* acknowledging their understanding and commitment to the College's duty to serve and protect the public.

### Oath of Office:

I do swear or solemnly affirm that:

- I will abide by the Health Professions Act and I will faithfully discharge the duties of the position, according to the best of my ability;
- I will act in accordance with the law and the public trust placed in me;
- I will act in the interests of the College as a whole;
- I will uphold the objects of the College and ensure that I am guided by the public interest in the performance of my duties;
- I have a duty to act honestly;
- I will declare any private interests relating to my public duties and take steps to resolve any conflicts arising in a way that protects the public interest;
- I will ensure that other memberships, directorships, voluntary or paid positions or affiliations remain distinct from work undertaken in the course of performing my duty as a Board member.



## Audit Committee

### Mandate

To provide recommendations to the Board relating to the annual audit and auditor's report.

### Membership

Doug Kipp (*chair*)

Bev Harris (*vice-chair*)

Blair Tymchuk

Jeff Slater (*public Board member*)

Suzanne Solven (*staff resource*)

**Number of Meetings: 4**

## Ethics Advisory Committee

### Mandate

To provide recommendations to the Board and the Registrar on matters relating to the Code of Ethics, Conflict of Interest Standards and any related policies or guidelines.

### Membership

Paul Cheng (*vice-chair*)

Suzanne Solven (*staff resource*)

Carol Gee

Berny Leung

Robin Manweiler

Cidalia Paiva (*Ethicist*)

Gregory Shepherd

**Number of Meetings: 0**

## Electoral Districts

-  **District 1**  
Metropolitan Vancouver
-  **District 2**  
Fraser Valley
-  **District 3**  
Vancouver Island/ Coastal
-  **District 4**  
Kootenay/ Okanagan
-  **District 5**  
Northern BC
-  **Province-wide**
- District 6**  
Urban Hospitals
- District 7**  
Community Hospitals
- District 8**  
Pharmacy Technicians



# Monitoring Pharmacy Practice

While the College's random inspections form a key part of our work, we are proactive in investigating pharmacies that are the subject of a complaint.

One of the fundamental ways in which the College ensures that pharmacy practice is safe and effective, is through the onsite monitoring of practice.

On a proactive basis, the College's team of Inspectors/ Practice Consultants, conduct random site visits of community and hospital pharmacies throughout the province and inspect all new, renovated, and relocated pharmacies as part of the licensure process. The intent of these site visits is to observe practice to ensure minimum practice standards are being met, and to identify, document and reconcile any areas that may require improvement.

In addition to these routine inspections, the College's Investigators visit specific pharmacies in response to circumstances identified through the complaints resolution process. The intent of these site visits is to investigate the complaint, gather any evidence and forward the findings to the College's Inquiry Committee for consideration.

## Pharmacy Inspections

March 1, 2011 to February 29, 2012

### Community Pharmacy

Routine – regular	166
Routine – facility services	17
Consultation – on site	16
Consultation – telephone	27
Facility site	2
Follow-up	11
Methadone services	78
New pharmacy opening	32
Relocation/ Renovation	0
Investigation	23
Robbery	27

March 1, 2011 to February 29, 2012

### Hospital Pharmacy

Opening	1
Routine	34
Relocation/ Renovation	0
Consultation – on site	2
Consultation – telephone	0

## Community Practice Advisory Committee

### Mandate

To provide recommendations to the Board on matters relating to community pharmacy practice.

### Membership

- Derek Lee (*chair*)
- Amy Huang (*vice-chair*)
- George Budd (*staff resource*)
- Amandeep Khun-Khun
- Marylene Kyriazis
- Fady Moussa
- Lena Toncev
- Roberta Wiebe
- Kenneth Wong

**Number of Meetings: 2**



## Hospital Pharmacy Advisory Committee

### Mandate

To provide recommendations to the Board on matters relating to hospital pharmacy practice issues.

### Membership

Keith McDonald (*chair*)

Anita Lo (*vice-chair*)

Jonathan Lau (*staff resource*)

Gregory Atherton

Sherry Coutts

Yvonne Dresen

Gordon Harper

John Hope

Linda Morris

Lynne Nakashima

Shelley Novak

Dawn Robb

Ian Sheppard

**Number of Meetings: 3**

## Residential Care Advisory Committee

### Mandate

To provide recommendations to the Board on matters relating to residential care pharmacy practice issues.

### Membership

Carol Hansen (*chair*)

Douglas Danforth (*vice-chair*)

Sharon Kerr (*staff resource*)

Christa Choi

Nicole Collier

Ken Lee

Ada Leung

Ting Luu

Anna Kownacki

Maria Ton

**Number of Meetings: 2**



“The initial registrant registration process ensures that only those individuals who have successfully met the ‘entry to practice’ standards...can practice.”

To become a practising pharmacist or pharmacy technician in British Columbia, individuals must be ‘registered’ with the College of Pharmacists of BC, similarly all pharmacies operating in the province must be ‘licensed’ by the College.

The initial registrant registration process ensures that only those individuals who have successfully met the ‘entry to practice’ standards and have thereby demonstrated that they have the necessary knowledge, skills and abilities to provide safe and effective pharmacy services may practise. Subsequently, all registrants must adhere to the College’s requirements with respect to professional development and continuing education, which are tied to annual registration renewal, to ensure their ongoing competence throughout practice.

The College is responsible for maintaining an accurate register, which is available to the public on the College website, which identifies those pharmacists and pharmacy technicians qualified to practise and those legitimate pharmacies licensed to operate in the province. The College must also publicly note any limits, conditions, suspensions or cancellations imposed by the College on a registrant or a pharmacy.

Registrants are also required to consent to a criminal record check and to carry professional liability insurance as a condition of their registration.

### Regulated Pharmacy Technicians

The College registered its first pharmacy technicians in 2011-12. The result of this is the creation of a new healthcare professional and new registrant of the College. Regulated pharmacy technicians are directly responsible and accountable for an expanded scope of technical functions related to prescription preparation and processing.

This has been one of the most significant initiatives facing the pharmacy profession today as it will shift the work, in the areas of prescription processing and preparation, from the pharmacist to the technician, allowing pharmacists more time for their evolving role in clinical care activities.

### Mandatory Criminal Record Check

The criminal record check is a requirement of the *Criminal Records Review Act* and is intended to help protect children from physical and sexual abuse. All healthcare practitioners under the *Health Professions Act (HPA)* must consent to a criminal record check every five years regardless of whether or not they work directly with children.

Consent to a criminal record check is not optional and should a registrant refuse to consent or fail a criminal record check the College will not be able to initially register or renew the registrant’s registration.

### Mandatory Liability Insurance

All practising pharmacists and pharmacy technicians must possess professional liability insurance with the following minimum criteria:

- Minimum of \$2 million coverage insuring against liability arising from error, omission or negligent act of the registrant, and
- Policy provides occurrence-based coverage or claims-made coverage with an extended reporting period of at least three years, and
- If not issued in the registrant’s name, the group policy covers the registrant as an individual.

## Registration Committee

### Mandate

To ensure registrants are qualified to practice.

### Membership

Raymond Jang (*chair*)

Mona Kwong (*vice-chair*)

Doreen Leong (*staff resource*)

Yonette Harrod

Christine Lee

Marina Ma

Kathy McInnes

Wayne Rubner

John Scholtens

**Number of Meetings: 3**

## Jurisprudence Committee

### Mandate

To ensure that the Jurisprudence Examination continues as a valid and reliable assessment instrument.

### Membership

Maria Ton (*chair*)

Hesham Metwaly (*vice-chair*)

Sharon Kerr (*staff resource*)

Doreen Leong (*staff resource*)

Pamela Burns

Gianni DelNegro

Sylvia Ghoshal

Stephanie Hahn

Fatima Ladha

Colleen Wong

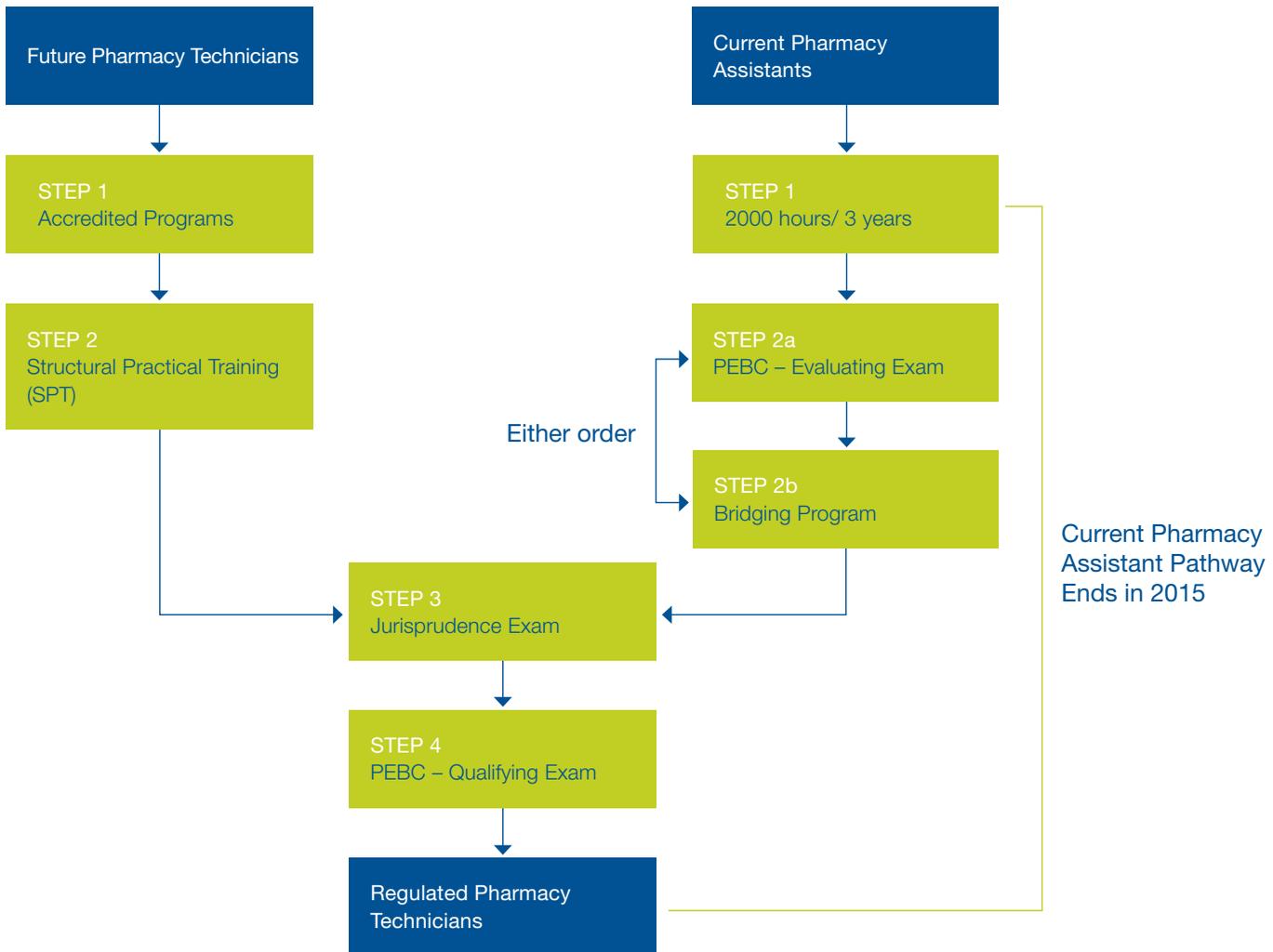
**Number of Meetings: 8**

**Number of Blueprint Meetings  
for Pharmacy Technicians: 1**

**Number of JE's: 7 (pharmacists),  
3 (pharmacy technicians)**



## Regulated Pharmacy Technician Process



In order to become a regulated pharmacy technician, current pharmacy assistants as well as future students will need to successfully complete the required steps outlined above. Current assistants have a limited time to pursue regulation through the channel on the right as it is only intended to be offered until 2015. After that time, current technicians wishing to become regulated will have to take the 'Future Technicians' route and successfully complete a CCAPP accredited pharmacy technician program offered through a public or private college.

Details on all of these steps are available on our website under *Key Initiatives > Pharmacy Technician Regulation*.

# 2011/12 Registration Statistics

<b>Licensed Pharmacies</b>	2011-12	2010-11	2009-10	2008-09	2007-08	2006-07
<b>Community (Education included):</b>						
Beginning of year	1,081	1,062	1,017	981	941	905
Add – Openings	45	48	53	52	51	54
Less – Closings	(8)	(29)	(8)	(16)	(11)	(18)
	1,118	1,081	1,062	1,017	981	941
<b>Hospital:</b>						
Beginning of year	68	70	70	69	70	68
Add – Openings	2	-	-	1	-	2
Less – Closings	(2)	(2)	-	-	(1)	-
	68	68	70	70	69	70
<b>End of year</b>	<b>1,186</b>	<b>1,149</b>	<b>1,132</b>	<b>1,087</b>	<b>1,050</b>	<b>1,011</b>

<b>Registered Pharmacists</b>	2011-12	2010-11	2009-10	2008-09	2007-08	2006-07
<b>Beginning of year</b>	<b>4,835</b>	<b>4,571</b>	<b>4,379</b>	<b>4,219</b>	<b>4,066</b>	<b>3,906</b>
<b>Add – New registrants</b>						
UBC students	132	155	139	134	129	135
Limited	-	1	3	-	-	-
Agreement on Internal Trade	51	68	78	82	81	89
Other provinces and territories (non-AIT/ new Grad)	11	14	10	23	11	8
Outside Canada	137	120	74	62	60	68
	331	358	304	301	281	300
<b>Add – Reinstatement</b>						
AIT – Reinstatement	6	12				
Reinstatement	46	39	76	41	41	28
Maternity/ Parental leave	-	-	-	42	35	42
	52	51	76	83	76	70
<b>Less –</b>						
Transfer to former	(177)	(124)	(163)	(178)	(167)	(180)
Transfer to Non Practising	(19)	(16)	(21)			
Maternity/ Parental leave	-	-	-	(42)	(35)	(28)
Deceased	(4)	(5)	(4)	(4)	(2)	(2)
	(200)	(145)	(188)	(224)	(204)	(210)
<b>End of year *</b>	<b>5,018</b>	<b>4,835</b>	<b>4,571</b>	<b>4,379</b>	<b>4,219</b>	<b>4,066</b>

\*This number excludes honorary registrants (4 at year-end).

Registered Pharmacy Technicians	2011-12	2010-11
Beginning of year	-	-
<b>Add – New registrants</b>		
Current Technicians	60	-
New Graduates	-	-
Agreement on Internal Trade	1	-
	61	-
<b>Add – Reinstatement</b>		
AIT – Reinstatement	-	-
Regular	-	-
	-	-
<b>Less –</b>		
Transfer to former	-	-
Transfer to Non Practicing	-	-
Deceased	-	-
	-	-
<b>End of year *</b>	<b>61</b>	



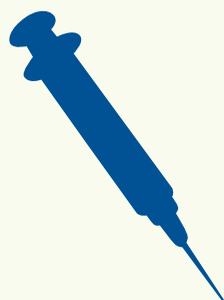
Pharmacist Pre-Registration	2011-12	2010-11	2009-10	2008-09	2007-08	2006-07
<b>Agreement on Internal Trade</b>						
Beginning of year	29	24	18	21	24	35
Add – New applicants	67	76	95	83	85	91
Less – Registered as pharmacist	(51)	(68)	(77)	(81)	(81)	(89)
Less – Application expired	(6)	(3)	(12)	(5)	(7)	(13)
	39	29	24	18	21	24
<b>Other Provinces &amp; Territories</b>						
Beginning of year	10	14	10	17	5	3
Add – New applicants	9	14	14	19	25	11
Less – Registered as pharmacist	(11)	(14)	(10)	(23)	(11)	(8)
Less – Application expired	(2)	(4)	-	(3)	(2)	(1)
	6	10	14	10	17	5
<b>Outside Canada</b>						
Beginning of year	236	205	150	139	131	95
Add – New applicants	262	175	147	91	92	114
Less – Registered as pharmacist	(137)	(120)	(74)	(62)	(60)	(68)
Less – Application expired	(25)	(24)	(18)	(18)	(24)	(10)
	336	236	205	150	139	131
<b>End of year</b>	<b>381</b>	<b>275</b>	<b>243</b>	<b>178</b>	<b>177</b>	<b>160</b>

UBC Students	2011-12	2010-11	2009-10	2008-09	2007-08	2006-07
Year 1	226	157	153	118	96	140
Year 2	157	147	151	154	158	147
Year 3	143	149	151	160	156	144
Year 4	149	146	163	150	143	135
Post UBC	2	9	-	-	-	-
<b>End of year</b>	<b>677</b>	<b>608</b>	<b>618</b>	<b>582</b>	<b>553</b>	<b>566</b>

Student (Non-UBC)	2011-12	2010-11
	24	22

Pharmacy Technician Pre-Registration	2011-12	2010-11
<b>Current Technicians</b>		
Beginning of year	409	-
Add – New applicants	696	409
Less – Registered as pharmacy technician	(60)	-
Less – Application expired	-	-
	1,045	409
<b>New Graduates</b>		
Beginning of year	7	-
Add – New applicants	38	7
Less – Registered as pharmacy technician	-	-
Less – Application expired	-	-
	45	7
<b>Agreement on Internal Trade</b>		
Beginning of year	-	-
Add – New applicants	1	-
Less – Registered as pharmacy technician	(1)	-
Less – Application expired	-	-
	-	-
<b>End of year</b>	<b>1,090</b>	<b>416</b>

Injection application (valid for 5 years)	2011-12	2010-11	2009-10
Pharmacists	1,612	617	477



**1600**  
— out of —  
**5018**  
have injection  
authority

“PDAP consists of a mandatory Continuing Education component, as well as a mandatory Assessment Component which all registrants are required to complete.”

One of the ways in which the College supports its mandate to provide safe and effective pharmacy care is through the development and administration of its Professional Development and Assessment Program (PDAP). In accordance with legislation, PDAP consists of a mandatory Continuing Education component, as well as a mandatory Assessment Component which all registrants are required to complete.

The current program, which was approved by the Board in June 2010, and was launched in fiscal year 2011/2012, was developed following an extensive internal and external review and analysis (2004 – 2008) of the College's previous program, it requires all registrants to complete, as part of their annual registration renewal, a minimum of 15 hours of continuing education. In addition, the Assessment Component requires registrants, in a 10-year cycle, to sit a Knowledge Assessment exam.

## Partnership with UBC-CPPD

The College provides a substantial annual financial grant to the University of British Columbia's Faculty of Pharmaceutical Sciences Continuing Pharmacy Professional Development (CPPD) division to support ongoing learning opportunities for pharmacists and to administer the required bridging programs for pharmacy technicians.

## Quality Assurance Committee

### Mandate

To ensure that registrants are competent to practise and to promote high practice standards amongst registrants

### Membership

Peter Cook (*chair*)  
Sandi Hutty (*vice-chair*)  
Ashifa Keshavji (*staff resource*)  
Penny Denton  
Maria Finamore  
Melanie Johnson  
Lorna Kroll  
Michael MacDougall  
Terry Pollard  
Monica Silva

**Number of Meetings: 3**



## Knowledge Assessment Subcommittee

### Mandate

To ensure that the Professional Development and Assessment Program's Knowledge Assessment option continues as a valid and reliable assessment.

### Membership

Melanie Johnson (*chair*)  
Tila Pelletier (*vice-chair*)  
Ashifa Keshavji (*staff resource*)  
Raymond Jay  
Eddie Kwan  
Judy MacDonald  
Wilfred Mak  
David Massaro  
Alnoor Suleman  
Susan Troesch

**Number of Meetings: 3**

## CE-Plus Subcommittee

### Mandate

To ensure that the Professional Development and Assessment Program's CE Component, the CE-Plus tool, continues as a valid and effective continuing professional development tool in accordance with current quality assurance practices.

### Membership

Sandi Hutty (*chair*)  
Ashifa Keshavji (*staff resource*)  
Hani Al-Tabbaa  
Mina Fahim  
Amy Kim  
Lorna Kroll  
Glenda MacDonald  
Linda Mah  
Philip Mang  
Fady Moussa  
Salivnaz Parpia  
Lynn Pollock  
Dorothy Zahn

**Number of Meetings: 2**



## UBC's Continuing Pharmacy Professional Development Statistics

2011-12	Programs		Contact Hours		# of Participants	
	No.	% of Total	No.	% of Total	No.	% of Total
<b>Canadian Pharmacy Practice Program (CP3)</b>						
CP3 Programme	2	1.4%	576.00	17.2%	33	0.6%
"Getting Ready" Session	3	2.0%	24.00	0.7%	57	1.1%
<b>Pharm Tech Bridging Program</b>						
PLAR	12	8.1%	36.00	1.1%	506	9.6%
Completed In Class Modules	31	20.9%	1,161.00	34.6%	681	13.0%
Completed Online Modules	17	11.5%	597.00	17.8%	654	12.5%
In Progress In Class Modules	14	9.5%	498.00	14.9%	258	4.9%
In Progress Online Modules	9	6.1%	373.00	11.1%	338	6.4%
<b>Live Programs</b>	2	1.4%	15.50	0.5%	341	6.5%
<b>Distance Learning Programs</b>						
Print-based Programs	7	4.7%	30.00	0.9%	33	0.6%
Med Management Training Online Program	3	2.0%	1.50	0.0%	806	15.3%
Virtual Learning Centre Online Programs	48	32.4%	40.43	1.2%	1544	29.4%
<b>Total</b>	<b>148</b>	<b>100%</b>	<b>3,352.43</b>	<b>100%</b>	<b>5251</b>	<b>100%</b>

## The College's complaints resolution process is focused on the College mandate of protecting the public.

As regulated healthcare professionals College registrants have a legal and ethical obligation to promote and protect the best interests of their patients first and foremost. The majority of registrants are competent, skilled practitioners who work hard to uphold this obligation and maintain their patient's confidence by providing safe and effective pharmacy care.

However, there are times when someone may have a concern about the pharmacy care they have received. The College's complaints resolution process is designed to deal with such circumstances and is focused on the College mandate of protecting the public.

College staff must review, in a timely manner, all complaints, received by the College in writing, related to a registrant's professional practice. The concern may be raised by a patient, co-worker, employer, other healthcare provider or simply a member of the public.

The vast majority of complaints can be effectively resolved through the Inquiry Committee process with only a few requiring referral to the Discipline Committee for resolution. To ensure transparency and disclosure to the public Inquiry and Discipline Committee results are posted on the College website as is required by law.

This year saw an increase in the number of complaints that related to the conduct or competence of a registrant. The College is firmly committed to resolving these complaints, but these types of complaints are often significantly more complex and require significant resources to resolve.

### Inquiry Committee

As stipulated in legislation the Inquiry Committee has 120 days to complete the review of a complaint and can take a number of actions:

- Take no action (if the complaint is found to be trivial, frivolous or submitted in bad faith)
- Take any action it considers appropriate to resolve the matter between the complainant and the registrant
- Reprimand or take remedial action by consent
- Refer the matter to the Discipline Committee
- Take extraordinary action to protect the public

### Discipline Committee

The Discipline Committee, which must hear and determine all matters brought before it, have a number of options available to them:

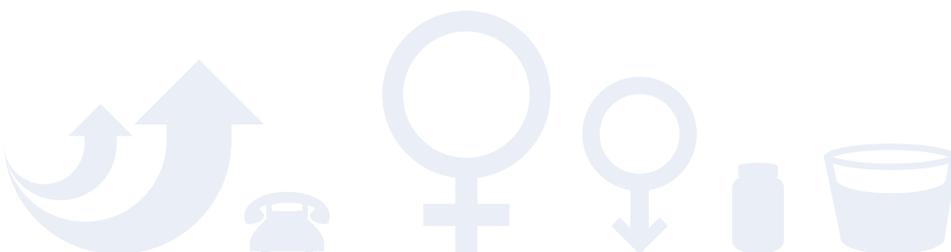
- Reprimand the registrant
- Fine the registrant
- Impose limits and/or conditions on their practice
- Suspend or cancel their registration

### Health Professions Review Board

All professional College's under the *Health Professions Act (HPA)* fall under the jurisdiction of the Health Professions Review Board (HPRB) and all decisions made by the College regarding the registration of registrants or the timeliness and disposition of complaints can be brought before them for review.

The HPRB is an independent administrative tribunal created to help ensure the public of transparent, objective, impartial and fair administrative processes and decision-making by regulated health professions. HPRB members cannot be current registrants or Board members of any of the regulated health professions.

There is no cost to apply to the HPRB however, applications must be received, in writing, within 30 days of the complainant having received from the College the written notice of the decision, notice or disposition that is to be reviewed.



## Inquiry Committee

### Mandate

Investigate complaints and concerns regarding a registrants conduct, competency and/or ability to practise and decide on an appropriate course of action pursuant to legislation.

### Membership

Gordon Eddy (*chair*)

Beverley Harris (*vice-chair*)

Suzanne Solven (*staff resource*)

Heather Baxter

Cindy Bondaroff

Penny Denton

Aimee Dhoot

Yonette Harrod

Susan May

Marney McKay

Janice Munroe

Smita Natha

Jing-Yi Ng

**Number of Meetings: 13**

## Discipline Committee

### Mandate

Hear and make a determination of a matter referred to the committee regarding a registrants conduct, competency and/or ability to practise, pursuant to legislation.

### Membership

Erica Gregory (*chair*)

Michael MacDougall (*vice-chair*)

Suzanne Solven (*staff resource*)

Grace Barrington-Foote

Wayne Chen

Peter Cook

Jody Croft

Bal Dhillon

Gillian Mayo

Peter Rubin

John Scholtens

Jeff Slater

Barbara Stipp

**Number of Meetings: 3**

**Number of Hearing Days: 5**



## Complaints Resolution Statistics – Received Between March 1, 2011 and February 29, 2012

<b>Number of Formal Complaints Received</b>	<b>141</b>
<b>Current Status of Complaints Received</b>	
Open	61
Closed	76
Monitoring	4
<b>Complaints Recorded by Type* (some complaints may have more than one type)</b>	
Medication Related	80
Privacy/ Confidentiality	8
Professional Conduct/ Competency	67
Fitness to Practice	4
Suspected Unlawful Activity	14
Sexual Misconduct	0
<b>Disposition of all complaints taken to Inquiry Committee meetings* (some complaints may involve more than one registrant)</b>	
No Further Action Taken	15
Letter of Advice	16
Letter of Undertaking	43
Referred to Discipline Committee	1
Suspension of Registrant/ Closure of Pharmacy	0
Consent Agreement/ Monitoring	20
Active/ Pending – investigation in process	61
*Total Presented to Inquiry Committee	156
*This includes first and follow-up presentations of files, for these, the complaint types and disposition states are counted each time.	
<b>Discipline Committee Hearings</b>	<b>1</b>

### Inquiry Committee Activity

**156**  
Files  
reviewed



**13**  
MEETINGS

# 2011 Financial Review

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28	Statement of Cash Flows
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To the board of directors of  
College of Pharmacists of British Columbia

We have audited the accompanying financial statements of the College of Pharmacists of British Columbia, which comprise the statements of financial position as at February 29, 2012, February 28, 2011 and March 1, 2010, and the statements of changes in net assets, revenue and expenditures, and cash flows for the years ended February 29, 2012 and February 28, 2011, and a summary of significant accounting policies and other explanatory information.

## Management's responsibility for the financial statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

## Auditor's responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the College's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the College's internal control.

An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained in our audits is sufficient and appropriate to provide a basis for our audit opinion.

## Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of the College of Pharmacists of British Columbia as at February 29, 2012, February 28, 2011 and March 1, 2010 and the results of its operations and its cash flows for the years ended February 29, 2012 and February 28, 2011 in accordance with Canadian accounting standards for not-for-profit organizations.

A stylized signature of "Grant Thornton LLP" in a cursive script.

### Chartered Accountants

Vancouver, Canada

June 15, 2012

### Grant Thornton LLP

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Grant Thornton Place  
333 Seymour Street  
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# Statements of Financial Position

	February 29, 2012	February 28, 2011	March 1, 2010
			(Note 3)
<b>Assets</b>			
Current			
Cash and cash equivalents	\$ 3,521,399	\$ 5,069,614	\$ 4,768,880
Short-term investments (Note 4)	6,355,776	3,351,816	3,209,152
Receivables (Note 5)	211,614	214,623	205,215
Due from joint venture (Note 6)	–	2,018	2,095
Prepays and deposits	112,534	100,908	62,340
	<b>10,201,323</b>	8,738,979	8,247,682
Development cost (Note 7)	133,256	177,675	148,062
Property and equipment (Note 8)	2,043,881	2,193,665	1,889,097
	<b>\$ 12,378,460</b>	\$ 11,110,319	\$ 10,284,841
<b>Liabilities</b>			
Current			
Payables and accruals (Note 9)	\$ 727,486	\$ 671,814	\$ 700,468
Current portion of capital lease obligations (Note 10)	44,371	43,077	59,196
Due to joint venture (Note 6)	414	–	–
Deferred revenue (Note 11)	2,859,707	2,657,563	2,456,536
Deferred contributions (Note 12)	1,416,312	1,528,363	1,731,304
	<b>5,048,290</b>	4,900,817	4,947,504
Capital lease obligations (Note 10)	117,042	161,413	31,373
	<b>5,165,332</b>	5,062,230	4,978,877
<b>Net assets</b>			
Invested in property and equipment	1,882,468	1,989,175	1,798,528
Restricted building fund	390,343	315,635	246,150
Unrestricted net assets	4,940,317	3,743,279	3,261,286
	<b>7,213,128</b>	6,048,089	5,305,964
	<b>\$ 12,378,460</b>	\$ 11,110,319	\$ 10,284,841

See accompanying notes to the financial statements.

# Statements of Changes in Net Assets

Year ended February 29, 2012	Invested in Property and Equipment	Restricted Building Fund	Unrestricted	Total
Balance, March 1, 2010	\$ 1,798,528	\$ 246,150	\$ 3,261,286	\$ 5,305,964
(Deficiency) excess of revenue over expenditures	(217,207)	69,485	889,847	742,125
Investment in property and equipment	407,854	–	(407,854)	–
Balance, February 28, 2011	1,989,175	315,635	3,743,279	6,048,089
(Deficiency) excess of revenue over expenditures	(242,095)	74,708	1,332,426	1,165,039
Investment in property and equipment	135,388	–	(135,388)	–
<b>Balance, February 29, 2012</b>	<b>\$ 1,882,468</b>	<b>\$ 390,343</b>	<b>\$ 4,940,317</b>	<b>\$ 7,213,128</b>

See accompanying notes to the financial statements.

# Statements of Revenue and Expenditures

Year ended February 29, 2012	2012	2011
Revenue		
Pharmacy fees	<b>\$ 1,508,125</b>	\$ 1,414,475
Pharmacists fees	<b>3,551,145</b>	3,216,953
Technician fees	<b>178,815</b>	91,520
Other	<b>993,073</b>	986,850
Grants	<b>413,751</b>	550,441
Investment income	<b>188,939</b>	202,042
<b>Total revenue</b>	<b>6,833,848</b>	6,462,281
Expenditures		
Board and administration	<b>765,882</b>	770,298
Communications	<b>53,862</b>	175,095
Complaints resolution	<b>459,759</b>	348,084
Finance and corporate services	<b>630,305</b>	551,520
Grant distribution	<b>263,751</b>	368,234
Inspections	<b>78,383</b>	53,980
Licensure services	<b>139,810</b>	140,618
PharmaNet, eDrug and technology	<b>118,915</b>	144,314
Policy and registration	<b>76,730</b>	98,196
Quality assurance	<b>119,731</b>	95,364
Salaries and benefits	<b>2,661,685</b>	2,703,784
Special projects	<b>57,901</b>	53,462
<b>Total expenditures</b>	<b>5,426,714</b>	5,502,949
Excess of revenue over expenditures before amortization	<b>1,407,134</b>	959,332
Amortization	<b>242,095</b>	217,207
<b>Excess of revenue over expenditures</b>	<b>\$ 1,165,039</b>	\$ 742,125

See accompanying notes to the financial statements.

# Statements of Cash Flows

Year ended February 29, 2012	2012	2011
Cash derived from (used in)		
<b>Operating</b>		
Excess of revenue over expenditures	\$ 1,165,039	\$ 742,125
Amortization	242,095	217,207
Amortization of development costs	44,419	44,418
Gain on sale of capital assets	(1,075)	(8,484)
Change in non-cash operating working capital		
Receivables	3,009	(9,408)
Due from joint venture	2,432	77
Prepays and deposits	(11,626)	(38,568)
Payables and accruals	55,672	(28,654)
Deferred revenue	202,144	201,027
Deferred contributions	(112,051)	(202,941)
	<b>1,590,058</b>	916,799
<b>Financing</b>		
Capital lease repayments	(43,077)	(33,215)
<b>Investing</b>		
Purchase of property and equipment	(92,311)	(374,639)
Proceeds from sale of capital assets	1,075	8,484
Increase in development costs	-	(74,031)
Increase in investments	(3,003,960)	(142,664)
	<b>(3,095,196)</b>	(582,850)
Net (decrease) increase in cash and cash equivalents	<b>(1,548,215)</b>	300,734
Cash and cash equivalents, beginning of year	<b>5,069,614</b>	4,768,880
Cash and cash equivalents, end of year	<b>\$ 3,521,399</b>	\$ 5,069,614
<b>Cash and cash equivalents consists of:</b>		
Cash	<b>\$ 3,521,399</b>	\$ 3,056,135
Guaranteed investment certificates	-	2,013,479
	<b>3,521,399</b>	5,069,614
<b>Non-cash investing and financing activities</b>		
Purchase of property and equipment funded by capital leases	<b>\$ -</b>	\$ 147,136

See accompanying notes to the financial statements.

# Notes to the Financial Statements

February 29, 2012

## 1. Nature of operations

The College of Pharmacists of British Columbia (the "College") is a regulatory body for pharmacists, pharmacy technicians and pharmacies of B.C. to set and enforce professional standards for the professions. The College is incorporated under the Pharmacists, Pharmacy Operations and Drug Scheduling Act as a not-for-profit organization. For income tax purposes, the College is treated as a not-for-profit organization.

## 2. Statement of compliance with Canadian accounting standards for not-for-profit organizations and summary of significant accounting policies

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations.

### Basis of presentation

Accounting standards for not-for-profit organizations require entities to select accounting policies appropriate for their circumstances from choices provided in the specific standards. Following are the details of the choices selected by the College and applied in these financial statements.

### Revenue recognition

The College follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted revenues are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Licence and registration fees are recognized as revenue in the year to which the fee relates.

### Cash and cash equivalents

Cash and cash equivalents consist of cash on hand, balances with banks, and short-term deposits with maturities of three months or less.

### Development cost

Program and implementation costs for the Pharmacy Technician Bridging program have been deferred and will be amortized on a straight-line basis over five years. Amortization will commence when the program is in place and generating revenue. Should the conditions for deferral cease to exist, the cost will be charged as a period expense.

### Property and equipment

Property and equipment of the College are recorded at cost and amortized over their estimated useful lives using the following rates:

Building and building improvements	straight-line method over 25 years
Furniture and fixtures	straight-line over 10 years
Office equipment	straight-line over 5 to 10 years
Computer	straight-line over 3 years
Software	straight-line over 2 years
Security system	10% declining balance

Property and equipment purchased or disposed of in the year are amortized using the half-year rule.

### Capital leases

Leases which transfer substantially all the benefits and inherent risk related to the ownership of the property leased to the College are capitalized by recording as assets and liabilities the present value of the payments required under the leases.

### Restricted building fund

A portion of dues assessed to pharmacists is restricted for office space renovation and upgrades.

### Financial instruments

The College initially measures its financial assets and financial liabilities at fair value. The College subsequently measures all of its financial assets and financial liabilities at amortized cost, except for short-term investments, which are measured at fair value. Changes in fair value are recognized in the statement of revenue and expenditures.

Financial assets measured at amortized cost include cash and cash equivalents, receivables, and due from joint venture.

Financial liabilities measured at amortized cost include payables and accruals and due to joint venture.

Financial instruments measured at fair value include short-term investments. Fair values are based on quoted market values where available from active markets; otherwise, fair values are estimated using a variety of valuation techniques and models. Transaction costs incurred on the purchase and sale of securities are included in the investment balance. Purchase and sales of investments are recorded on the trade date.

## 3. First-time adoption of accounting standards for not-for-profit organizations

These are the College's first financial statements prepared in accordance with Canadian accounting standards for not-for-profit organizations ("new standards"). The date of transition to these new standards is March 1, 2010.

These financial statements of the College have been prepared using policies specified by those standards that are in effect at the end of the reporting period ended February 29, 2012. The significant accounting policies that have been applied in the preparation of these financial statements are summarized in Note 2. These accounting policies have been used throughout all periods presented in the financial statements.

The College has applied The Canadian Institute of Chartered Accountants Handbook Section 1501 *First-time Adoption* in preparing these first financial statements under accounting standards for not-for-profit organizations. The College has applied the mandatory exceptions; however, no optional exemptions were applied. The College's transition from Canadian generally accepted accounting principles to the new standards had no impact on opening net assets as at March 1, 2010, the statement of financial position as at March 1, 2010 and February 28, 2011, or the statements of revenue and expenditure and cash flows for the year ended February 28, 2011.

#### 4. Short-term Investments

Short-term investments consist of guaranteed investment certificates ("GICs") and bonds with interest rates from 1.32% to 4.53% (February 28, 2011: 0.75% to 6.10%; March 1, 2010: 3.1% to 6.38%).

#### 5. Receivables

	February 29, 2012	February 28, 2011	March 1, 2010
PharmaNet receivables	\$ 155,048	\$ 190,761	\$ 185,876
Grant receivables	51,700	–	–
Rent receivables	4,866	23,862	19,339
	<b>\$ 211,614</b>	<b>\$ 214,623</b>	<b>\$ 205,215</b>

#### 6. Joint Venture

The College entered into an agreement dated March 3, 1989, to purchase 30% interest in a joint venture set up to acquire and develop a property. The College occupies space in the building and pays rent to the joint venture.

The proportionate share of assets, liabilities, revenues and expenses of the joint venture are incorporated into the College's financial statements as follows:

February 29, 2012	100% Joint Venture	30% College
<b>Balance sheet</b>		
Assets		
Current assets	\$ 323,208	\$ 96,962
Property and equipment	5,358,863	1,607,659
	<b>5,682,071</b>	<b>1,704,621</b>
Liabilities and equity		
Total liabilities	374,180	112,254
Total equity	5,307,891	1,592,367
	<b>\$ 5,682,071</b>	<b>\$ 1,704,621</b>
<b>Statement of operations</b>		
Revenues	\$ 1,162,043	\$ 348,613
Expenses	600,482	180,145
Excess of revenue over expenditures	<b>\$ 561,561</b>	<b>\$ 168,468</b>

**Notes to the  
Financial Statements**

(continued)

<b>February 28, 2011</b>	<b>100% Joint Venture</b>	<b>30% College</b>
<b>Balance sheet</b>		
Assets		
Current assets	\$ 273,374	\$ 82,012
Property and equipment	5,448,226	1,634,468
	5,721,600	1,716,480
Liabilities and equity		
Total liabilities	315,519	94,656
Total equity	5,406,081	1,621,824
	\$ 5,721,600	\$ 1,716,480
<b>Statement of operations</b>		
Revenues	\$ 1,127,988	\$ 338,396
Expenses	606,525	181,958
Excess of revenue over expenditures	\$ 521,463	\$ 156,438

<b>March 1, 2010</b>	<b>100% Joint Venture</b>	<b>30% College</b>
<b>Balance sheet</b>		
Assets		
Current assets	\$ 558,640	\$ 167,592
Property and equipment	4,806,701	1,442,010
	5,365,341	1,609,602
Liabilities and equity		
Total liabilities	1,039,783	311,935
Total equity	4,325,558	1,297,667
	\$ 5,365,341	\$ 1,609,602

## 7. Development cost

	February 29, 2012	February 28, 2011
Pharmacy Technician Bridging Program		
Net book value, beginning of year	\$ 177,675	\$ 148,062
Addition	–	74,031
Amortization	(44,419)	(44,418)
Net book value, end of year	\$ 133,256	\$ 177,675

## 8. Property and equipment

	Cost	Accumulated Amortization	February 29, 2012 Net Book Value
Land	\$ 524,379	\$ –	\$ 524,379
Building and building improvements	2,413,422	1,208,607	1,204,815
Furniture and fixtures	216,185	152,010	64,175
Office equipment	239,663	73,121	166,542
Computer	294,493	227,398	67,095
Software	73,217	59,396	13,821
Security system	3,771	717	3,054
	\$ 3,765,130	\$ 1,721,249	\$ 2,043,881

	Cost	Accumulated Amortization	February 28, 2011 Net Book Value
Land	\$ 524,379	\$ –	\$ 524,379
Building and building improvements	2,369,488	1,124,716	1,244,772
Furniture and fixtures	212,122	133,165	78,957
Office equipment	239,663	25,189	214,474
Computer	324,633	240,994	83,639
Software	136,451	92,401	44,050
Security system	3,771	377	3,394
	\$ 3,810,507	\$ 1,616,842	\$ 2,193,665

## Notes to the Financial Statements

(continued)

	Cost	Accumulated Amortization	March 1, 2010 Net Book Value
Land	\$ 524,379	\$ –	\$ 524,379
Building and building improvements	2,301,254	1,211,025	1,090,229
Furniture and fixtures	185,638	116,051	69,587
Office equipment	321,356	232,683	88,673
Computer	277,978	176,825	101,153
Software	84,418	69,342	15,076
	<b>\$ 3,695,023</b>	<b>\$ 1,805,926</b>	<b>\$ 1,889,097</b>

At February 29, 2012, assets under capital lease with a cost of \$237,626 (February 28, 2011: \$237,626; March 1, 2010: \$292,182) and accumulated amortization of \$71,288 (February 28, 2011: \$23,763; March 1, 2010: \$204,527) are included in office equipment

### 9. Payables and accruals

This account includes HST payable amounting to \$128,424 as at February 29, 2012 (February 28, 2011: \$105,810; March 1, 2010: \$47,851).

### 10. Capital lease obligations

The College is committed to pay annual leases for office equipment under lease agreements. The leases will expire in fiscal 2016. Minimum annual lease commitments are as follows:

	February 29, 2012	February 28, 2011	March 1, 2010
2011	\$ –	\$ –	\$ 59,196
2012	–	43,077	31,373
2013	<b>44,371</b>	44,371	–
2014	<b>45,706</b>	45,706	–
2015	<b>47,084</b>	47,084	–
2016	<b>24,252</b>	24,252	–
	<b>161,413</b>	204,490	90,569
Less: current portion	<b>44,371</b>	43,077	59,196
	<b>\$ 117,042</b>	\$ 161,413	\$ 31,373

## 11. Deferred revenue

Deferred revenue represents the subsequent year's pharmacy licences and registration fees received prior to the year end.

## 12. Deferred contributions

Deferred contributions represent the unamortized amount of grants received for future operating activities and programs. The amortization of deferred contributions is recorded as revenue in the statement of revenue and expenditures.

	February 29, 2012	February 28, 2011
Balance, beginning of year	\$ 1,528,363	\$ 1,731,304
Amounts received	151,700	200,000
Less: amounts amortized to revenue	(263,751)	(402,941)
Balance, end of year	\$ 1,416,312	\$ 1,528,363

## 13. Capital management

The capital structure of the College consists of net assets invested in property and equipment, restricted building fund and unrestricted net assets. The primary objective of the College's capital management is to provide adequate funding to ensure efficient delivery of its service activities.

Net assets invested in property and equipment represents the amount of net assets that are not available for other purposes because they have been invested.

The purpose for restricted building fund is disclosed in Note 2.

Unrestricted net assets are funds available for future operations and are preserved so the College can have financial flexibility should opportunities arise in the future.

As of February 29, 2012, the College has complied with all externally imposed capital restrictions.

## 14. Financial instruments

The estimated fair value of cash and cash equivalents, short-term investments, receivables, payables and accruals, and capital lease obligations approximates carrying value due to the relatively short-term nature of the instruments.

The carrying amounts of financial assets measured at amortized cost are \$3,733,013 as at February 29, 2012 (February 28, 2011: \$5,286,255; March 1, 2010: \$4,976,190).

The carrying amounts of financial assets measured at fair value are \$6,355,776 as at February 29, 2012 (February 28, 2011: \$3,351,816; March 1, 2010: \$3,209,152).

The carrying amounts of financial liabilities measured at fair value are \$889,313 as at February 29, 2012 (February 28, 2011: \$876,304; March 1, 2010: \$791,037).

### **Market risk**

Market risk is the potential for financial loss to the College from changes in the values of its financial instruments due to changes in interest rates, equity prices, currency exchange and other price risks. The investments of the College are not subject to significant market risk as substantially all of it are in GICs and denominated in Canadian dollars.

### **Credit risk**

The College is exposed to the risk that a counterparty defaults or becomes insolvent. The only financial instrument that potentially subjects the College to concentrations of credit risk is its receivables.

The maximum exposure to credit risk in terms of receivable is \$211,614 as of February 29, 2012 (February 28, 2011: \$214,623; March 1, 2010: \$205,215). Management believes that the College does not have a significant credit risk on their receivables.

### **Liquidity risk**

Liquidity risk is the risk that the College cannot meet a demand for cash or fund its obligations as they come due. Maximum exposure to liquidity risk is \$889,313 as at February 29, 2012 (February 28, 2011: \$876,304; March 1, 2010: \$791,037). Except for the obligation under capital lease balance of \$117,042, which will be paid until 2016 (Note 10), the College's liabilities are due to be paid in full before February 28, 2013.