



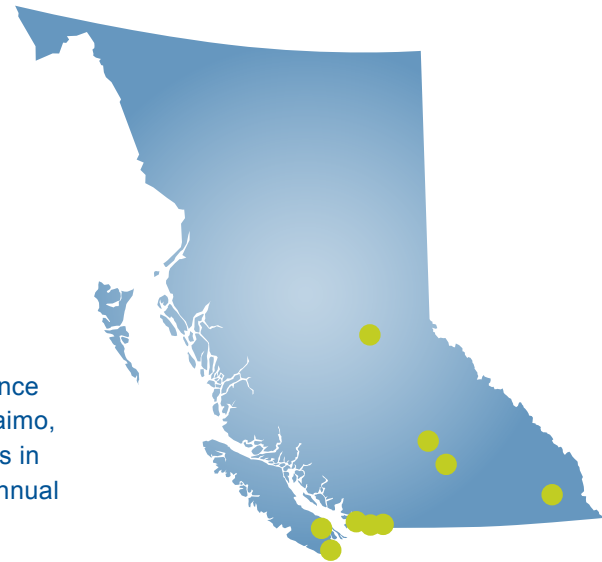
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readlinks

College Roadshow Now Complete



Abbotsford, Surrey, Cranbrook, Prince George, Kamloops, Kelowna, Nanaimo, Victoria, Vancouver...whew...9 cities in just over 6 weeks! The College's annual Fall Roadshow is now complete.

Hundreds of pharmacists took advantage of the opportunity to hear a presentation by the College's Registrar Marshall Moleschi and provide their thoughts and comments on the current initiatives undertaken by the College. Topics ranged from pharmacists advanced practice and pharmacy technician regulation to the introduction of the renewed Professional Development and Assessment Program (PDAP). The discussions were open and honest with the majority of participants expressing that they were leaving the session with a better understanding than when they arrived.

Knowing that not everyone who might have wanted to would have been able to attend one of these live sessions, a recording of the presentation is now available on the College's website: www.bcpharmacists.org (on the homepage under 'events').

Recorded version of the Roadshow presentation is now available from the home page of the College website www.bcpharmacists.org

A System Dependent on ‘Trust’



Marshall Moleschi, Registrar

Over these past few months it seems that no matter what the topic or who the audience might be the concept of ‘trust’ inevitably comes up. By definition ‘trust’ is the “reliance on the integrity, strength, ability, surety, etc., of a person”... in other words “a person on whom one relies”. So why is ‘trust’ so important that I would suggest that our healthcare system is dependent on it?

To begin with ‘trust’, as I was reminded of during the consultative process of the College’s revised Code of Ethics, is the foundation of self-regulation and our ethical commitment as healthcare professionals. Specifically, the

concept of the social contract establishes a relationship whereby society grants the profession the privilege of self-governance in exchange for ‘trusting’ that the profession and its practitioners will serve and protect the best interests of the public first and foremost. This broad framework of trust is then intertwined in all that we do as healthcare professionals.

When we look within our own profession, this idea of trust is pretty well rooted. For the most part we trust that our fellow pharmacists are practicing ethically and feel confident that they are appropriately utilizing their knowledge, skills and abilities to make decisions in the best interest of their patients. Yet, when this trust factor is tested outside of our own profession we are often much more cautious. As an example we may question another practitioners prescribing authority saying that we don’t trust that they have enough knowledge in a particular disease or condition.

Not surprisingly this same type of perceived mistrust has been brought up towards our profession by other professions particularly as we continue to evolve our scope of practice and move into areas that have traditionally been reserved for other practitioners. Interestingly this same reservation or mistrust can apply when we consider some of the concerns expressed by pharmacists regarding the new role and responsibilities of regulated pharmacy technicians.

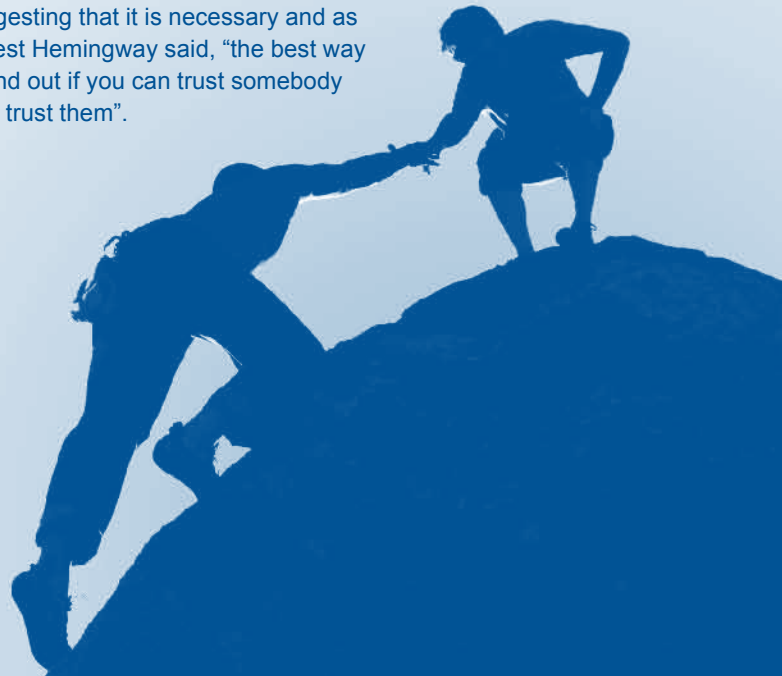
In many ways this is understandable. How can someone be expected to trust someone when they don’t know what that person knows? Yet here in lies the dilemma. Trust is intangible. It’s not something that you can see it’s something that you have

to believe. And this belief is not just reserved for others it’s also introspective. It is by trusting in our own knowledge, skills and abilities that we build our confidence to utilize our professional judgment and make appropriate decisions about our patient’s healthcare each and every day.

A patient’s healthcare is not reserved for any one or even two healthcare providers. In fact, in an evolving patient-centered healthcare system it is the norm rather than the exception that a variety of allopathic and complementary healthcare practitioners are part of the patient’s healthcare team. So in this complex reality how can trust be maintained?

The answer, I believe, lies in the very foundation of our professions which I referenced at the beginning of this column. We must remember that we are all regulated healthcare professionals and as such have committed to serving the best interests of our patients. We must trust that we each know what we know and equally as important, trust that we each know what we don’t know.

I’m not saying that this is easy but I am suggesting that it is necessary and as Ernest Hemingway said, “the best way to find out if you can trust somebody is to trust them”.



Continuing Education Simple and Easy!

PDAP CE Component Timeline



In preparation for the launch of the Continuing Education (CE) Component of the Professional Development and Assessment Program (PDAP) this coming June, registrants will have an opportunity, early in the New Year, to familiarize themselves with this new requirement.

As approved by the College Board, the CE Component of PDAP is an annual mandatory requirement for all registrants and is linked to individual registration renewal. The requirement is a minimum of 15 hours of learning documented on a minimum of 6 Learning Records. Registrants will have 12 months to complete this requirement which begins with registrants who renew in June 2011. This means that registrants who renew their registration in June 2011 will receive notification at that time that they have the next 12 months to complete their CE requirement which must be submitted to the College with their annual renewal in June 2012. Similarly, July 2011 renewals will be notified that their CE is due in July 2012 and so on and so on.

The CE Component utilizes the CE-Plus tool which was piloted and evaluated extensively in 2008 – 2010. The tool is completed online and begins with a simple yet effective Self-Assessment which assists pharmacists in identifying specific learning needs so their professional development can be tailored to practice. The individual learning that is then undertaken is recorded on an easy to use online form called a Learning Record. Ultimately, it is these Learning Records which must be submitted to the College annually prior to registration renewal.

The College appreciates that pharmacists practice in various settings and that people learn in different ways which is why CE-Plus has been designed to recognize all types of learning. Whether a pharmacist chooses to participate in a traditional course or seminar that has been accredited, or engages in learning through a literature review or focused dialogue with a colleague, it is all valid as long as it is appropriately documented on the required Learning Record.

In order to familiarize yourself with the Self-Assessment and Learning Records, and therefore the CE-Plus tool as a whole, you are encouraged to take the opportunity to go online through eServices on the College website early in the New Year to check it out. An eBlast will be sent to all registrants with further details once the test site is available.

Note: The launch of the mandatory Assessment Component of PDAP will begin in 2012 with the first 10% of registrants (randomly selected and notified in the summer of 2011) required to complete a Knowledge Assessment exam within the calendar year. Additional information about the Assessment Component will be available on the College website as well as in subsequent issues of ReadLinks.

**1st Pharmacy
Technician
Registrant
Anticipated in
Early 2011**

279 individuals are currently pre-registered with the College of Pharmacists of BC and in various stages of completing the mandatory requirements for becoming registered as pharmacy technicians. Whether 'Currently in Practice' or 'New to Practice', pre-registrants must successfully complete all educational requirements prior to becoming eligible to apply to the College to register as pharmacy technicians. The process of becoming a registered pharmacy technician, which is on a voluntary basis, has always been expected to be a slow and gradual one. The College is anticipating having the first pharmacy technician registrant in early 2011 and may have 100 or so registrants before the year is out. For complete details on the comprehensive mandatory steps to regulation for pharmacy technicians, visit the College website www.bcpharmacists.org under Key Initiatives>Pharmacy Technician Regulation.

New Board, Familiar Faces

As the November Board meeting marked the beginning of the new term, the meeting began with all newly elected, appointed and reappointed Board members affirming their Oath of Office, which supports the College's mandate to serve and protect the public.

Penny Denton
Government Appointee

Bev Harris
District 2

John Scholtens
Government Appointee

Doug Kipp
District 4

Of the government appointee members Penny, John and Margaret were all reappointed to a two-year term and Jeff, the only brand-new member to the Board (see insert), has been appointed to a one-year term. The elected members, Bev, Doug and John (who won by acclamation) will all serve a two-year term. Elections for odd numbered districts; 1, 3, 5 and 7 will take place next fall.

The final piece of business at the Board meeting prior to commencing with the regular agenda was the election of Board Chair Randy Konrad (his second term) and Vice-Chair Allan Greene.

Clockwise from top left:
Margaret Cleaveley, Government Appointee; John Scholtens, Government Appointee; Penny Denton, Government Appointee; John Hope, District 6; Bal Dhillon, Pharmacy Technician Observer; Randy Konrad (Chair), District 1; Bev Harris, District 2; Doug Kipp, District 4; Bruce Beley, District 7; Jeff Slater, Government Appointee; Chris Hunter, District 5; Allan Greene (Vice-Chair), District 3



Newest Board Member Brings Years of Experience

The Board's newest government appointee member, Jeff Slater, comes to the Board with over 20 years experience in government and the private sector. Jeff who currently resides in Victoria was a Caucus Outreach Advisor in the House of Commons in Ottawa, a Caucus Constituency Outreach Advisor in the Legislative Assembly of Ontario, and a former Director of Events and Outreach with the Ontario Crime Control Commission. In addition, he was a former elected Trustee with the Carleton Board of Education, a member of the Discipline Committee with the College of Nurses in Ontario and a participant for the Conversation on Health forum in Victoria in 2007. Active in the community Jeff has volunteered his time with the Victoria Police Department, BC Special Olympics, Peachland Fun Fair, Canadian Kidney Foundation, Cancer Society and the Kiwanis Club.

Board Will Discuss AGM Resolutions at February 2011 Meeting

Three resolutions, which were circulated to all registrants in their notification of the Annual General Meeting (AGM) package, were brought forward at the AGM for discussion and Board consideration. Prior to a diverse and respectful debate on each of the resolutions, attendees were reminded that although the Board will give careful consideration to the resolutions at their next scheduled Board meeting, the Board cannot be bound by the outcome of the resolutions due to the potential for conflict with the Board's overriding duty to serve and protect the public.

The first resolution, which was defeated, called on the Board to consider "eliminating the taking of verbal prescriptions from practitioners and also the elimination of the final check of the filled prescriptions from the community pharmacy technician's scope of practice".

The second resolution, which was carried, called on the Board to consider "amending the policy of restricting consideration and voting on matters at general meetings only to registrants attending in person, and instead open general meetings to all registrants including those attending at a distance through electronic means."

The final resolution, which was also carried, called on the Board to consider "establishing policy whereby the College would indemnify a pharmacist involved in such a situation, when he or she is working with a regulated pharmacy technician."

The outcome of these resolutions will be discussed by the Board at the February 11, 2011 Board meeting.

Board Meeting Schedule 2011

All meetings are held at the College's office in Vancouver at:

200 – 1765 West 8th Avenue Vancouver, BC

Friday February 11, 2011

Friday April 15, 2011

Friday June 17, 2011

Friday September 23, 2011

Friday November 25, 2011

2 Gold Certificates Awarded at College's AGM

One of the highlights of the College's 119th Annual General Meeting (AGM), which was held in Vancouver on Saturday November 20th, and attended by approximately 70 registrants, was the awarding of not 1 but 2 Gold Certificates. Gold Certificates are awarded each year by the Board to a College volunteer, or volunteers in the case of this year, who have made an outstanding contribution to the profession through their volunteer efforts and are therefore bestowed the title of 'Volunteer of the Year'.

This year's recipients were **Gordon Eddy** and **Sandi Hutty** who both, in their own right, have contributed significantly over many years to the work of the College.

Gordon Eddy, a non-practitioner, has been a dedicated public member of the College's Inquiry Committee for 10 years. Gordon brings years of prior regulatory experience, a thorough approach and a broad, balanced and intellectual 'layperson's perspective' to the often complex and arduous files of the Inquiry Committee. Over the past year the volume and complexity of the Committee's work has increased significantly and Gordon has consistently risen to the challenge, showing exemplary dedication to the Committee's mandate.

Sandi Hutty, whose background includes community pharmacy, academia and administrative pharmacy, has been a member of the College's Quality Assurance Committee (QAC) since 2008 and was appointed Vice-Chair in 2010. Sandi was a vital member of the QAC during the completion of the Professional Development and Assessment Program's (PDAP) evaluation which included the evaluation of the CE-Plus pilot which she had led as Chair of the CE-Plus Development Task Group. Sandi is an articulate, respectful and thoughtful communicator who as a committee leader ensures that all members' thoughts and ideas are heard.

Congratulations and thank you to both Gordon and Sandi.





On Call



Q: Is there a restriction on the quantity of drug a pharmacist can provide when doing an emergency fill of a prescription for continuity of care purposes?

A: No. The College has left out quantity restrictions on the Emergency Prescription Refills Professional Practice Policy (PPP-31) on purpose. Pharmacists must use their professional judgment and do an emergency fill for the quantity they feel the patient requires in order to ensure a positive patient outcome until they can see their regular doctor. Documentation is important, so ensure you document your rationale on the prescription.

Q: Do B.C. veterinarians require Controlled Prescription Program pads (duplicate prescriptions) to prescribe Controlled Prescription Program drugs?

A: Yes, veterinarians are issued individually stamped Controlled Prescription pads by the College of Physicians and Surgeons and must use them to prescribe Controlled Prescription Program drugs.

Q: Can a pharmacist accept a prescription for a pet written by a medical practitioner?

A: No, a pharmacist should not accept or fill a prescription written by a medical practitioner for an animal. Problems arise when prescriptions for pets are written by prescribers other than a veterinarian. The prescription is recorded on the owner's

medication history, rather than on a separate veterinary profile. As a result, incorrect information and inappropriate DUE messages are returned to all pharmacies filling prescriptions for the owner. Also, the claim may be paid by Pharmacare or added to the individual's Pharmacare deductible, which is not allowed.

Q: When the expiry date on a product is stated as month/year, can I dispense it until the end of that month?

A: No. When the expiry date is stated only as month/year although the date is interpreted as the last day of the noted month it is based on a "consumer-use-by" date, not a "pharmacist-dispense-by" date. Therefore, pharmacists must calculate the quantity of the prescription and ensure that if used according to direction, it will be completed prior to the end of the expiry month.

Q: Am I allowed to store my old prescriptions and invoices offsite?

A: Yes, the Health Professions Act (HPA) bylaw s.74 Storage of Personal Information allows the storage of personal information such as prescriptions and invoices offsite. It is best practice that active prescriptions be stored on the premises, however prescriptions greater than 2 years may be stored offsite but must be readily accessible.

It's important to note that should you choose to utilize offsite storage for documents that contain personal

information about patients you must have a contract in place with the service organization as outlined in HPA bylaw s.78: Contracts for Handling Personal Information.

A pharmacist must ensure that, if personal information about patients is transferred to any person or service organization for processing, storage or disposal, a contract is made with that person which includes an undertaking by the recipient that confidentiality and physical security will be maintained.

Q: Can a pharmacist provide FluMist to patients for self-administration at their home?

A: No. FluMist must be administered under the direct supervision of a healthcare professional in case of an anaphylaxis type of reaction. Please refer to the product monograph available at www.AstraZeneca.ca

Pharmacists may provide FluMist to a patient to take to their physician or to be administered at the pharmacy under the pharmacist's supervision.

Q: Can a pharmacist without injection authority administer FluMist to a patient?

A: Yes, any pharmacist who feels they are competent (ie; have the knowledge, skills and abilities) may administer or supervise the administration of FluMist.



Practice Matters

Revised Code of Ethics Approved by Board

Given recent expansions of scope for pharmacists and subsequent pharmacy practice changes the College, over a year ago, undertook to revise its Code of Ethics which had not been updated for over 15 years. The intention was to ensure that College standards, with respect to professional and ethical conduct, were reflective and supportive of current practice.

Following a presentation by representatives from the College's Ethics Working Group and Ethics Advisory Committee and a lengthy review and discussion of the recommended documents, the Board, after making a few additional revisions, approved a revised Code of Ethics and accompanying documents (Preamble to the Code, Conflict of Interest Standards, Model for Ethical Decision Making and Pharmacy Oath) for the College.

As these documents are a Schedule to the College's HPA bylaws they require final approval by government before coming into effect. Once this final step has been completed, which is expected to take several months, a comprehensive communication and training program will be rolled out to all registrants.

Guidelines for Addressing Pharmacy Robberies Soon to be Released

Earlier this year the College committed to participate in a Pharmacy Robbery Task Force, led by the BC Pharmacy Association and made up of pharmacists from chain and independent community pharmacies, representatives from the RCMP as well as input from a professional criminologist.

One of the primary roles of the Task Force is to provide tools to assist pharmacists and pharmacies in preventing robberies from occurring and helping to mitigate any harm that may occur when a robbery does happen. To this end the Task Force is in the final stages of developing a resource document, "Guidelines for Addressing Pharmacy Robbery in BC" which provides guidelines for pharmacy robbery prevention, and proposes a set of procedures/policies to be implemented in the event and aftermath of a robbery.

From the College's perspective one of the key procedures that pharmacies must follow in the unfortunate circumstance that a robbery does occur is to report to Health Canada, within 10 days of discovery, any loss or theft of narcotics. Health Canada's *Loss or Theft Report Form for Controlled Substances and Precursors* can be found on their website at: www.hc-sc.gc.ca

Over the coming months the College will be working with the BCPhA to develop a communicate plan to ensure that all pharmacists and pharmacies throughout BC are made aware of this helpful resource.

Board Approves 2 New Professional Practice Policies

At the Board's most recent meeting, held on November 19, the Board approved 2 new Professional Practice Policies (PPPs). By definition PPPs are developed by the Board to provide pharmacists and pharmacies with clearer direction and more explicit guidelines to support the delivery of safe and effective pharmacy practice.

PPP-66 Methadone Maintenance Treatment – has been introduced to ensure that all pharmacy managers and pharmacists providing methadone maintenance treatment are adhering to the same standards and guidelines. With over 50% of community pharmacies across the province currently offering this service the Board felt that it was important to evolve the existing recommended guidelines into a more formalized policy. Included in the PPP is the provision for a mandatory training program to ensure that participating practitioners clearly understand the minimal standards required for the delivery of this essential service.

PPP-67 Pharmacy Technology – has been introduced to help ensure that for technologies utilized within pharmacy practice there is appropriate selection and maintenance criteria established that supports patient-centered, safe and effective pharmacy care. The policy holds the pharmacy manager responsible for evaluating the suitability and safety of all technologies utilized within their pharmacy systems and provides general guidelines in this regard.

Further information on these policies will be communicated early in the New Year.



“We would like to wish you and your loved ones a very safe and happy holiday season, and all the best in the New Year.”

*From all of us at the
College of Pharmacists of BC*



Almost 1,000 Pharmacists Now Authorized to Immunize!

With the flu and cold season currently in full force community pharmacists from across the province continue to step up and receive their authorization to administer injections. Thanks to a recent offering of the mandatory training programs administered by the BC Pharmacy Association (BCPhA), there are now nearly 1000 pharmacists, approximately one-third of all community pharmacists in BC, qualified to immunize their patients. This is a great example of adding capacity to the healthcare system by providing patients with additional access and choice.

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The ReadLinks newsletter provides important College and pharmacy practice information. All registrants are expected to be aware of these matters.



**COLLEGE OF PHARMACISTS
OF BRITISH COLUMBIA**

Safe and Effective Pharmacy Care

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Vice-Chair – Allan Greene
Registrar – Marshall Moleschi

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