

# Meeting of the Council

September 23, 2005

**Present:**

President and District 5 Councillor Rita Thomson, District 1 Councillor Wayne Rubner, District 2 Councillor Amin Bardai, District 3 Councillor Howard Rose, District 4 Councillor Erica Gregory, District 6 Councillor John Hope, District 7 Councillor Carol Gee, Government Appointees Jo Ann Groves, Michael MacDougall and Peter Rubin.

**Absent (with notice):**

Government Appointee Marina Ma and Faculty of Pharmaceutical Sciences Dean Robert Sindelar.

**Staff (at various times):**

Registrar Marshall Moleschi and Deputy Registrar Brenda Osmond.

**Guests (at various times):**

Rosey Brenan, President, Rodon Communications; Janice Moshenko, Director, and Sheryl Peterson, Assistant Director, Division of Continuing Pharmacy Professional Development, UBC and Marnie Mitchell, CEO, BC Pharmacy Association.

**CALL TO ORDER**

President Thomson called the meeting to order at 9:05 a.m.

She noted the College mission statement:

*To ensure British Columbia pharmacists provide safe and effective pharmacy care to help people achieve better health.*

**AGENDA AND TIMETABLE**

The following agenda items were added:

- Technician verification in a community: setting 5.03
- Chair, Hospital Pharmacy Committee: 9.02

## **MINUTES OF PREVIOUS MEETING**

The minutes of the June 17, 2005 Council meeting and July 12, 2005 Council teleconference meeting were approved by-consensus.

## **OUTCOME DEVELOPMENT ISSUES**

### **Community Outreach Project**

Councillors de-briefed on the community outreach presentations completed to date and discussed plans for future presentations.

### **Compounding Standards for Pharmacists**

Registrar Moleschi informed Councillors that new federal guidance would be forthcoming in the fall, and that NAPRA would review the draft Guidelines to Pharmacy Compounding to ensure consistency with federal direction. NAPRA Board of Directors' approval will not be finalized until November 2005. This will be brought forward to the agenda for the November council meeting.

### **Pharmacy Loyalty Points Programs**

At its April 2005 meeting, Council agreed that pharmacists and prescribers could be counted on as professionals who would not provide inappropriate pharmacy services or prescription authorizations based solely on a patient's desire to accumulate loyalty points.

Since then, the College has received several complaints from pharmacists who are still concerned about loyalty programs and other inducements for prescriptions. Registrar Moleschi informed Councillors that current legislation does not give the College authority to prevent loyalty programs. Council reiterated its position that it is unethical for a pharmacist to encourage a patient to go without medication in order to gain from a loyalty program. Pharmacists are responsible for working with patients to make sure they do not compromise their health to benefit from loyalty programs.

### **Methamphetamine Precursors**

The Deputy Registrar updated Council on recent developments regarding methamphetamine precursors.

Deputy Registrar, Dr. Osmond, participated in a conference call with staff from the provincial Ministry of Health, the Solicitor General's office and the Attorney General's office of the four western provinces to consider options for drug schedule changes, and to assist the government staff in preparing recommendations for October 1<sup>st</sup>.

Council agreed to support the monitoring of the sale of over the counter preparations that may be used as a source of methamphetamine precursors. However, until there is clear evidence that consumer packaged products are being used to manufacture methamphetamine, Council recommends that scheduling remains unchanged.

## Home Delivery of Methadone

Deputy Registrar Brenda Osmond informed Council of concerns expressed about home delivery of methadone. Some pharmacists deliver methadone to patient's homes and witness their daily ingestion of methadone.

There are advantages and disadvantages to this practice, disadvantages include the fact that this practice is in conflict with some of the goals of the methadone maintenance treatment program which include helping patients establish daily routines, providing an incentive for patients to reduce or discontinue the use of other opioids and earn the right to take home doses of methadone and encouraging patients to take responsibility for and actively participate in their recovery and maintenance. Advantages include the fact that this practice allows for the unique needs of certain patient populations to be met. It can also assist patients who need to attend a pharmacy in the morning before beginning work, and it helps avoid congregation and loitering of patients around a pharmacy.

In July 2005, we wrote to the approximately 400 pharmacies that dispense methadone to inform them of the issue, and ask their input into possible solutions. We received 67 written responses.

- 40 respondents suggested that deliveries should only be allowed for exceptional situations
- pharmacies that have made methadone home delivery a focus of their practice urge that no changes be made to the current system and that they be allowed to continue their practice as they have over the past years

Councillors recognized that methadone home delivery can offer additional opportunities for pharmacists and patients to interact and may make it easier to meet the individual needs of patients. Councillors also recognized that methadone home delivery, in some cases, interfere with patient treatment goals. It is up to the pharmacist and patient to decide when home delivery is needed.

## NEW POLICY DEVELOPMENT

### Telepharmacy

Councillor John Hope informed Council that there have been several inquiries requesting information about how to set-up telepharmacy services in BC. Several of the state boards of pharmacy in the USA have addressed this format of pharmacy service.

*It was moved, seconded and carried:*

Council approves by consensus the proposed telepharmacy policy attached as **Appendix 1**.

### Technician checking Technician

John Hope presented a proposal for pharmacy technicians checking pharmacy technicians in a community pharmacy setting. Detailed policies and procedures were contained in the presentation to guide and support pharmacy technicians in the verification process

*It was moved, seconded, carried:*

Council approve s this proposal as a pilot project with a review by the pharmacy in 6 months.

## **Expanded Role of the Pharmacy Technician in Hospital Practice**

The Hospital Pharmacy Committee has been examining the expanded role of the pharmacy technician in hospital practice during the past two years. The committee met with pharmacists and pharmacy technicians throughout the Province to examine daily activities, in all practice settings, to identify functions that could be passed on to pharmacy technicians to allow pharmacists to fulfill their clinical role, while maintaining safe and effective pharmacy care.

Discussion focused on the accreditation of pharmacy technician education organizations and the certification and registration of pharmacy technicians. The Ontario College of Pharmacists is moving to register pharmacy technicians. In Alberta, pharmacy technicians are moving to establish their own College.

By consensus, the councillors supported the concept of the certification of pharmacy technicians and feel that the College of Pharmacists of BC should be involved. Council directed registrar Moleschi to develop a discussion paper describing the current situation across Canada and models that could be applicable in BC.

## **MONITORING ACTIVITIES**

### **Registrar's Executive Report**

Registrar Moleschi provided monitoring reports and updates on the following topics:

#### ***Stakeholder Relations***

Activities and events relating to stakeholder relations were provided for the information of the Councillors.

#### ***Practice Standards: General***

Activities and events relating to practice standards: general were provided for the information of the Councillors.

#### ***Practice Standards: Professional Development and Assessment Program***

Activities and events relating to practice standards: Professional Development and Assessment Program were provided for the information of the Councillors.

#### ***Professionalism***

Various activities relating to the promotion of professionalism were reported.

### ***Pharmacist Empowerment and Autonomy***

Activities and events relating to pharmacist empowerment and autonomy were provided for the information of the Councillors.

### ***Organizational Operation***

The Registrar reported full compliance with requirements of Policy DO-10.

### ***Involving Pharmacists in Key Initiatives***

Various activities relating to the involvement of pharmacists in key initiatives were reported.

### ***Financial Health: College***

The Registrar provided a report, as of Aug.31, 2005, comparing the actual financial position to budget. The Registrar reported his compliance with the requirements of Policy EC-3.

### ***Office Operations: Retention of Records***

The Registrar reported his compliance with the requirements of Policy EC-9a.

### ***Relationship with the Public and other Key Stakeholders***

Councillors' activities relating to outreach to the public and other key stakeholders were summarized.

### ***Tobacco-Free Pharmacies***

Events related to the Council's tobacco-free pharmacy initiative were reported.

### ***Financial Strategy***

Council reviewed the proposed budget for the 2006-07 fiscal year. The Registrar highlighted the revenue and expenditure categories, linking them to the Council's desired outcome statements.

*It was moved, seconded and defeated:*

Council approves a 0% increase budget.

*It was moved, seconded and carried:*

Council approves the budget as proposed (attached as **Appendix 2**).

Council agreed by consensus to have a strategic planning session attached to the January Council meeting.

## NONPOLICY DECISIONS

### Awards

Council considered a number of award recommendations proposed by Registrar Moleschi and Councillor Mike MacDougall.

*It was moved, seconded and carried:*

Council approves the following award recipients:

#### Excellence in Practice Awards

<i>Five Star Pharmacist</i>	Donna Ratcliff
<i>Award of Excellence in Community Pharmacy Practice</i>	Mona Kwong
<i>Award of Excellence in Hospital Pharmacy Practice</i>	Dana Cole
<i>Award of Excellence in Long-term Care Pharmacy Practice</i>	Paul Polachek & Brigita-Ann Wilkinson

#### Volunteer Honour Roll

<i>Gold Certificate</i>	Peter Cook
<i>Silver Certificate</i>	38 volunteers (attached as <b>Appendix 3</b> )
<i>Bronze Certificate</i>	122 volunteers (attached as <b>Appendix 4</b> )

<b>Honourary Registrant of the College of Pharmacists of BC</b>	Linda Lytle
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## CONSENT ITEMS

### Drug Schedules Regulation Amendments

Schering Canada received a Notice of Compliance for the use of buprenorphine in Canada for the indication of the treatment of opioid dependency. In order to ensure that buprenorphine is subject to the same regulation as are other opioids in BC and to restrict the use of buprenorphine to physicians who have training and experience in the treatment of opioid dependency, it was recommended that buprenorphine be added to the Controlled Prescription Program.

*It was moved, seconded and carried:*

Council approves the recommended amendment to the *Drug Schedules Regulation* as follows:

#### Add:

1A Buprenorphine

## **Committees**

*It was moved, seconded and carried:*

Council approves the following amendment to Council Committee Appointments:

The reappointment of Dianne Kapy as Chair of the Hospital Pharmacy Committee

## **Meeting Assessment**

Councillors completed the Council Meeting Assessment form. President Thomson will compile the data and report the results at the November meeting.

## **ADJOURNMENT**

The meeting was adjourned at 3:30 p.m.

"Telepharmacy" is the provision of pharmacy services to underserved populations at a remote site that is staffed by a pharmacy technician with access to the central pharmacy and registered pharmacists by computer, broadband video, and audio link. If broadband video access is not available then the use of digital images and telecommunication links are an acceptable alternative.

1. Telepharmacy prescription processing can only occur in licensed pharmacies.
2. An application for establishing a telepharmacy operation shall be made in writing to the Registrar no less than 60 days prior to opening the telepharmacy. Prior to opening a telepharmacy site there shall be a site visit by the College to both the remote site and the central site to ensure that minimum standards are met including security, space, fixtures, sanitation and technical equipment, including the audio, video and data link to the central pharmacy. (Community Practice sites: see Bylaw 28, 30. Hospital Practice sites: see Bylaw 72, 73).
3. The remote site is considered to be under the supervision of the pharmacist at the central pharmacy. A pharmacist at the central pharmacy must approve each prescription before it leaves the remote site.
4. The pharmacy technician at the remote site is responsible for receiving and processing the prescription. All patient questions regarding drug therapy or questions regarding over-the-counter products shall be answered by a pharmacist at the central site.
5. The pharmacist at the central site must assess the appropriateness of the prescription. Using video and audio link, the pharmacist is responsible for the final check of the prescription this includes review of the label, compare the stock bottle, drug dispensed and strength.
6. Counselling must be done by the pharmacist via video and audio link. The pharmacist must counsel the patient or the patient's agent on all new prescriptions and refill prescriptions. (Pharmacist/Patient Dialogue, see Bylaw 44). If broadband video and audio link is not available, patient counselling may be done by telephone. Written information may be provided to reinforce oral communication but is not sufficient alone. A contingency contact telephone number must be provided in the event the patient needs to contact the pharmacist at a later time.
7. There must be policies and procedures in place to ensure the safe and effective distribution of pharmaceutical products and delivery of the required pharmaceutical care including:
  - the process for discussing drug related problems with the prescriber.
  - the management of prescription transfers, both into the remote site and out to another pharmacy.
  - the management of over-the-counter drugs.
  - the procedure for extemporaneous compounding of prescriptions.
  - the procedure for supplying compliance packaging.
  - the contingency plan in the event of an interruption in data, video, or audio link to the central pharmacy.
  - the contingency plan to ensure continuous pharmacy service is available in the event that either or both the pharmacy technician/pharmacist are unavailable for work on short notice.
  - the maintenance of patient privacy and confidentiality during all communication with the patient.
8. There must be an ongoing review of incident reports and outcomes, with appropriate corrective action taken when necessary, to ensure there is no change in frequency of errors in dispensing drugs or devices.
9. A telepharmacy site may not remain open for business and no prescriptions shall be dispensed if an interruption in data, video or audio link occurs or if the pharmacy technician is not on duty at the remote site or the pharmacist is not on duty at the central site.
10. A patient record must be prepared and maintained for each patient for whom a drug is dispensed. Prescriptions dispensed at the remote site must be distinguishable from those dispensed at the central site including a unique label with a unique identifier in the prescription data base.
11. Each person involved in dispensing a drug must sign, initial or otherwise identify him-or herself on the prescription.

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First approved: 23 Sep 05  
Revised:  
Reaffirmed:

PPP-55

**College of Pharmacists B.C.****2006-07 PROPOSED BUDGET****2005-06****2006-07****REVENUE**

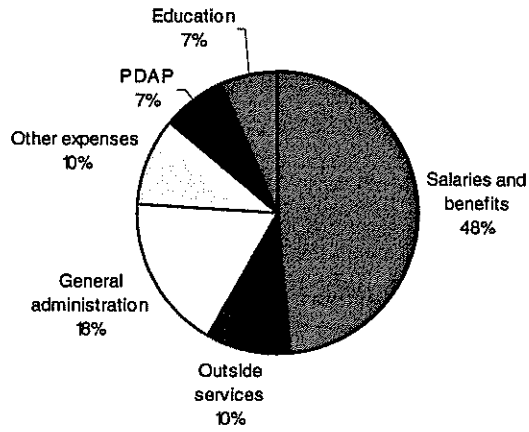
Registration and license fees	3,179,850	3,283,901
Pharmacy fee (from \$1025 to \$1060: \$35 increase)		
Pharmacist fee (from \$575 to \$595: \$20 increase)		
College Place Joint Venture <i>(includes cash investment)</i>	140,000	140,000
Other revenue	393,450	302,000

**TOTAL REVENUE****3,713,300****3,725,901****EXPENSES**

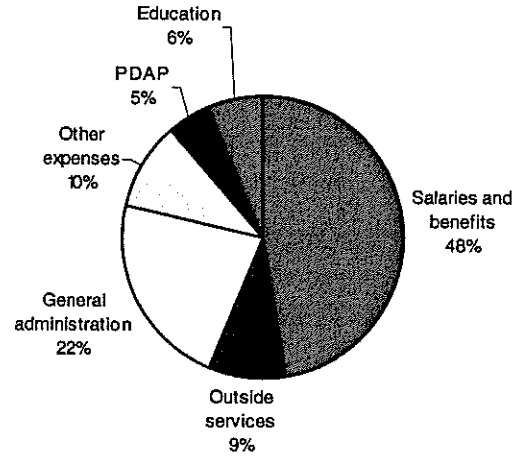
Council	48,000	48,000
Income replacement (5 one-day meetings and AGM)		
Travel and accommodation		
Committee	17,650	25,650
Income replacement (selective)		
Travel (selective) and light meals		
Other council costs	5,000	6,000
Election scrutineers, graduation banquet, etc		
Other professional activities <i>(Highlights - not all inclusive)</i>	254,325	296,500
Annual general meeting		
BC Pharmacy Conference, CPhA Conference		
NAPRA (\$56 per capita), meetings		
Seminars, workshops and conferences		
Miscellaneous travel and meetings		
Pharmacy services reviews	45,982	45,982
Travel, accommodation, laboratory tests		
PharmaNet	5,880	5,880
Travel, administration, legal		
Inquiry/discipline	30,000	25,000

Travel, accommodation, income replacement, legal		
Registration	12,865	30,000
Jurisprudence exams, Internship,		
Professional development and assessment program	215,945	200,765
<i>(Highlights - not all inclusive)</i>		
Board of Examiners		
Framework of Professional Practice		
Learning and Practice Portfolio		
Knowledge Assessment		
Education	297,800	307,300
<i>(Highlights - not all inclusive)</i>		
Scholarships and awards		
Continuing Pharmacy Education grant		
Community Pharmacy Residency Program grant		
Medication Information of BC		
Bulletin		
General and administration	2,779,853	2,734,824
<i>(Highlights - not all inclusive)</i>		
Salaries and benefits		
Legal and audit		
Printing, supplies, postage, delivery		
Equipment rental and maintenance		
Staff development		
<b>TOTAL EXPENSES</b>	<b>3,713,300</b>	<b>3,725,901</b>
<b>SURPLUS (DEFICIT)</b>	<b>0</b>	<b>0</b>

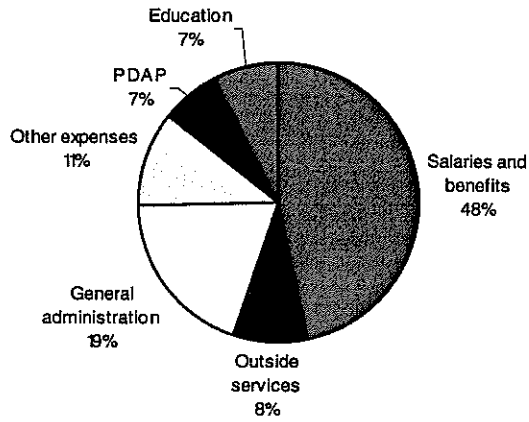
**2003-04 ACTUAL**



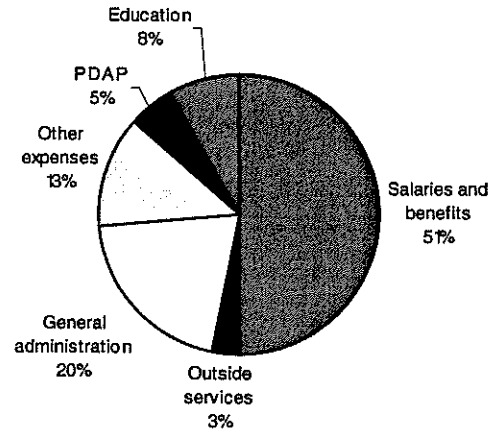
**2004-05 ACTUAL**



**2005-06 ACTUAL (6 months)**



**2006-07 BUDGET**



**College of Pharmacists B.C.**  
**PROFIT & LOSS SUMMARY**  
**For the 6 months ending August 31, 2005**

	<b>2005-06 Budget \$</b>	<b>YTD Budget \$</b>	<b>YTD Actual \$</b>	<b>Variance \$</b>	<b>Variance %</b>
	<b>12 mths</b>	<b>6 mths</b>	<b>6 mths</b>		
<b>REVENUE</b>					
License and registration fees					
Pharmacy	1,008,600	504,300	408,706	95,594	19%
Pharmacist	2,156,250	1,078,125	952,432	125,693	12%
Other revenue	408,450	204,225	514,233	-310,008	-152%
College Place JV and investment interest	140,000	70,000	62,567	7,433	11%
	<b>3,713,300</b>	<b>1,856,650</b>	<b>1,937,938</b>	<b>-81,288</b>	
<b>EXPENSES</b>					
Council	48,000	24,000	18,262	5,738	24%
Other council	5,000	2,500	4,003	-1,503	-60%
Committee	17,650	8,825	2,586	6,239	71%
Other professional activities	254,325	127,163	145,671	-18,509	-15%
Pharmacy service reviews	45,982	22,991	14,186	8,805	38%
PharmaNet	5,880	2,940	8,844	-5,904	-201%
Inquiry and discipline	30,000	15,000	16,891	-1,891	-13%
Registration	12,865	6,433	5,512	921	14%
Prof. development and assessment (PDAP)	215,945	107,973	138,961	-30,989	-29%
Education	297,800	148,900	143,207	5,693	4%
General administration	2,779,853	1,389,927	1,441,101	-51,175	-4%
	<b>3,713,300</b>	<b>1,856,650</b>	<b>1,939,224</b>	<b>-82,574</b>	
<b>SURPLUS (DEFICIT)</b>	<b>0</b>	<b>0</b>	<b>-1,286</b>	<b>1,286</b>	

**Volunteer Honour Roll  
Silver**

<b>First Name</b>	<b>Last Name</b>
Beena	Abraham
Cheryl	Bishop
Linda	Bryan
Sharon	Carleton
Connie	Chung
Gordon	Clough
William	Creighton
Edmund	Goldberg
Erica	Gregory
Richard	Hawksley
Colin	Holyk
John	Hope
Tania	Jarzebiak
Melanie	Johnson
Veronica	Kagetsu
Anwer	Kamal
Jack	Lee
Kelvin	Lee
Christine	Liotta
Miguel	Lopez-Dee
Maike	Lorenzen
Mona	Louie
Alan	Low
Wendy	Mays
Norris	Nevins
Jing-Yi	Ng
Balraj	Phagoora
Peter	Rubin
Jasvinder	Sandhu
Kulvinder	Sangha
Angela	Ser
Robert	Seymour
Barbara	Thompson
Maria	Ton
Anar	Virji
Tinka	VonKeyserlingk
Elaine	Wong
Samantha	Wong

