

**MINUTES
MEETING OF COUNCIL
ALBERTA COLLEGE OF PHARMACISTS
June 2, 2006**

1.1. Call to Order

The meeting was called to order at 8:05 a.m.

1.2. Roll Call

The registrar called the roll and identified that a quorum of council was present.

1.3. Adoption of the Agenda

1.3.1. Additions to the Agenda

MOTION: That the agenda be adopted with the addition of #1.4.1.1 and #1.4.1.2.
CARRIED

1.4.1.1 Minutes for the Council Teleconference Meeting of May 29, 2006

MOTION: That the minutes of the May 29, 2006 council teleconference meeting be accepted as circulated. CARRIED

1.4.1.2 Proposed Amendments to the Presidential Oath

The last two sentences of the registrar's introduction were amended to read:

"You will support and promote adherence to our legislation, standards of practice, and code of ethics, such that pharmacist services are consistently provided in a safe, effective, responsible and accountable manner, and that Albertans benefit from the full spectrum of knowledge and competencies of pharmacists.

MOTION: That the presidential oath be accepted as amended.
CARRIED

1.4. Minutes from Previous Meetings

1.4.1. Minutes from the Meeting of Council April 26, 2006

One councilor advised that on April 26th they arrived at 10 a.m.

MOTION: That the minutes of the meeting of council on April 26, 2006 be adopted as amended. CARRIED

1.4.2. Minutes of the Teleconference Meeting of Council May 9, 2006

MOTION: That the minutes of the council teleconference meeting of May 9, 2006 be accepted as circulated. CARRIED

1.5. Disposition of Directives From Previous Meetings Provided for information.

1.6. In Camera

MOTION: That council moves to an "in camera" session at 1:50 p.m. CARRIED

MOTION: That council adjourns the "in camera" session at 2:10 p.m. CARRIED

1.7. Strategic Direction and Planning

1.7.1. GP-12 Council Planning Cycle and Agenda Control – Proposed Strategic Planning Cycle

The ACP management team proposed a strategic planning cycle to clarify the timing and responsibilities of ACP staff (inputs) that will enable council to provide long term direction (outcomes) for strategic priorities, specific goals, the business plan, and resource allocation.

MOTION: That this agenda item be deferred to the September 2006 council meeting.
CARRIED

1.7.2. Proposed Council Meeting Dates for the 2006 - 2007 Council Year

Consensus: Council will consider its 2007 meeting dates in September 2006.

1.8. Governance Policy Reports

1.8.1. Policies E, E1-E4 Ends Policies

1.8.1.1. Annual Report

MOTION: That council accepts the 2005 – 2006 Alberta College of Pharmacists annual report. CARRIED

1.8.1.2. Report from the Registrar

The registrar provided the following information:

Four Operational Priorities for 2006:

- 1) *Implementation of the regulations to the HPA and PDA* – proclamation and implementation remains on target for early fall.
- 2) *Development, consultation, and implementation of the standards of practice and the standards of operations* – the standards of practice will be the foundation for the prescribing orientation. Implementation of the new standards should occur late fall.
- 3) *Development, consultation, and implementation of advanced training criteria* – the Competence Committee's proposed model for criteria will be reviewed by an expert panel to define the criteria for measurement. The final report should be presented to council in December 2006.
- 4) *Development of a communication and education plan for pharmacists and the public* – preliminary planning for an orientation program has commenced and a complementary communication plan is also being developed. Pharmacists must complete the orientation program before they can prescribe.

Appendix 1 – ACP's Three-Year Strategic Communications Plan:

Key messages will be developed to meet specific objectives and audiences. The plan describes five conceptual objectives (to be structured in a measurable format) and complements what ACP will be doing educationally:

- 1) *Albertans know what to expect from their pharmacist* – whether Albertans seek a professional relationship with their pharmacist and whether they consider their pharmacist an important member of their health care team.
- 2) *Albertans observe changed pharmacist behavior* – compliance with the new standards of practice and implementation of new practices.

- 3) *Other health professionals have new expectations about pharmacists' contributions to patient care and to the health care team relationships* – development of new relationships with other health professionals.
- 4) *Employers know how to support pharmacist practice* – employers will understand practice expectations and provide resources and support.
- 5) *Albertans understand the role of the college and know how to contact us* – for a concern about a pharmacist's practice or a pharmacy's operations.

ACP's Audiences:

- *Albertans* – it is impossible for the college to reach all Albertans; therefore, ACP will focus communication to individuals with diabetes, because many diabetics also have secondary afflictions and the incidence of the disease is growing.
- *Alberta pharmacists* – require a cohesive message that is supported by consistent behavior and actions.
- *Other health professionals* – strong relationships with other health professionals is important to achieve the college's/profession's goals.
- *Employers* – should understand the demands the new scope of practice will place on pharmacists and how employers can support them as well as understand the new standards for pharmacy operations.

Consensus: Council will review the communication plan at their meeting in September 2006 and formalize it when the *Health Professions Act* is proclaimed.

ACP Insurance Policy Status Report of May 24, 2006:

- New Directors and Officers (D & O) insurance has been secured and ACP now has a new broker to oversee our policies.
- The broker has confirmed that an alternative source of professional liability insurance for pharmacists on the clinical register is available as long as 25% of eligible pharmacists subscribe; otherwise, it will be reassessed after the first year. The premium is based on group coverage and the carrier will collect the premiums for the first year; subsequently, ACP will be responsible for collecting the premiums.
- Members of the Executive Committee met with the RxA board. Concern was expressed that: ACP may be in a conflict of interest because the college has prescribed the insurance requirement so should not be the provider; and the premiums would increase because the size of the insurance pool will be split.

Consensus: That pharmacists should be in compliance with the \$2 million of claims made personal professional liability insurance coverage required by the regulations to the *Health Professions Act* and that pharmacists must secure the insurance and complete the orientation program before they can prescribe.

- The registrar will discuss the procedure and specifics (for members to complete the orientation and supply proof of their insurance coverage) with legal counsel.

MOTION: That ACP provides an option to members to purchase \$2 million of claims made personal professional liability insurance coverage through the college. CARRIED

MOTION: That council accepts the report from the registrar. CARRIED

2.2.2 Policy EL-4 Financial Condition – Internal Financial Report

- ACP's auditors provided new accounting standards for the balance sheet to be implemented by 2007.
- The management team chose to implement the new standards in 2006, as follows:
 - Equities will appear on the balance sheet at market value and fluctuations will be adjusted through the account: *Unrealized Gain/Loss Net Assets*. Monthly fluctuations will not affect the net income figure.
 - Bonds and money market items will also appear on the balance sheet as market value. Fluctuations will be adjusted on the income statement through the account: *unrealized Gain/Loss Fin. Assets*. Monthly fluctuations will modestly affect the net income.

MOTION: That council accepts the internal financial report for policy EL-4, *Financial Condition*, as at March 31, 2006 for information. CARRIED

2.2.3 Policy EL-11 Emergency Executive

- Core responsibilities of the management team members can continue in case of an unplanned absence or vacancy.
- A disaster recovery binder is maintained and a copy is kept with ACP legal counsel.
- The deputy registrar has been delegated more responsibilities and the college is prepared for succession.

MOTION: That council accepts the report for policy EL-11, *Emergency Executive*. CARRIED

2.2.4 Policy EL-14 Partnership and Stakeholder Relationships

ACP has numerous existing partnerships and obtains their input to achieve council's *Ends*.

MOTION: That council accepts the report for policy EL-14, *Partnerships and Stakeholder Relationships*. CARRIED

1.9. Governance Policy Review and Amendments

1.9.1. Policy GP6.5 – Continuing Competence Committee

Amend the membership section from:

- ~~ACP Competence Director~~ to a designate of the Registrar.
- ~~The Dean of the Faculty...~~ to a designate of the Dean of the Faculty...

MOTION: That council accepts the Terms of Reference for the Competence Committee with the noted amendment to the membership. CARRIED

1.9.2. Appointment of Council Working Group to Review all Governance and CR Policies

Consensus: A working group will review all governance process (GP) and council-registrar relationship policies and provide a report to council in December 2006.

1.9.3. Policy GP-16 Criteria for Awards

MOTION: That this agenda item and agenda #2.4.1 – Policy EL-12, *Public Image* be deferred to a future meeting of council. CARRIED

1.10. Policy Direction

1.10.1. Policy EL-12 – Public Image

See agenda #2.3.3.

1.11. Committee Reports.

1.11.1. Expert Committee on Advanced Designation – Proposed Terms of Reference

A working group developed proposed terms of reference for the *Clinical Register Advance Designation Advisory Committee*. Council recommended the following amendments:

- *Title* – change to: *Committee to Recommend Criteria for Restricted Activities Under Sections 16(3) and 16(4) of the Regulations to the Health Professions Act*.
- *Membership* – A chair of the committee will be selected by the President from among the committee members.
 - revise “c” to a member of the public at large; and
 - “f” to the registrar’s designate.
- *Activities* – Amend “b” to: Identify competencies and the level at which each must be demonstrated by pharmacists who seek advanced designation and wish to perform the restricted activities as stated in sections 16(3) and 16(4) of the regulations to the *Health Professions Act*.
 - Delete “c” and “d”; change “e” to “c”.
- *Purpose* – Delete “c” and “d”.

MOTION: That council accepts the terms of reference as amended for the *Committee to Recommend Criteria for Restricted Activities Under Sections 16(3) and 16(4) of the Regulations to the Health Professions Act*.
CARRIED

1.12. Appointments

1.12.1. Committee Appointments 2006 – 2007

Appointments were made to the Nominating Committee, Resolutions Committee, and Appeals Committee

1.12.2. Corporate Appointments 2006 – 2007

Appointments were made for legal counsel, auditors, bank, and signing authority.

1.13. Ownership Linkage - Nil

1.14. Council Education

The Executive Director of NAPRA presented the following information:

- The executive director was appointed on October 15, 2004.
- February 10, 2005 was NAPRA’s 10th anniversary.
- NAPRA’s mission is to enhance the activities of Canadian pharmacy regulatory authorities (PRAs) by representing the common interests of the member organizations; serving as a national resource centre; and promoting the national implementation of regulatory programs and standards.
- NAPRA’s goals are to:

1. Act as a national information clearinghouse and resource centre and provide services to the members in relation to all aspects of pharmacy regulation.
 2. Nationally and internationally represent, promote, and facilitate the interests and activities of the members.
 3. Develop and maintain core competencies related to the professional practice of pharmacy and promote their harmonization and uptake throughout Canada.
 4. Develop models for regulating the profession of pharmacy and pharmacies and facilitate access to such models.
 5. Oversee, coordinate, and promote the activities of NDSAC and promote harmonization of the conditions of the sale of drugs throughout Canada.
- Board members convened for a strategic planning session in February 2005. The following strategies and programs were identified:

Core strategies:

- *Maintain a National Office* – in Ottawa so that NAPRA can effectively access key government departments and other national health care associations and provide valuable services and products to its members.
- *Maintain a National Resource Centre* – NAPRA will continue to use its website, e-mail, and other technology to facilitate communication among the PRAs and their pharmacist members. The NAPRA website will be maintained to provide a reliable and centralized source of current information.
- *Establish and Maintain Core Competencies and the Mutual Recognition Agreement (MRA)* – NAPRA members highly value the development of core competencies for pharmacists; therefore, NAPRA will continue to maintain the core competencies and develop other competencies for advanced areas of practice. The competencies are also an integral component of the MRA.
- *Provide a National Voice* – NAPRA endeavors to establish the association as the principal voice for Canadian PRAs. The primary focus will be on federal or pan-Canadian regulatory matters.
- *Provide an International Voice* – NAPRA will continue to represent Canadian PRAs internationally through further development of a working relationship with the US National Association of Boards of Pharmacy (NABP).
- *Provide a Forum for Information Exchange* – NAPRA staff will plan, organize, and support the necessary meetings to enable members and external representatives on committees to meet and share information on pressing issues facing pharmacy regulatory bodies.

Other strategies:

- *Facilitate Drug Scheduling* (a Core Program) – the National Drug Schedules are a valued product of NAPRA, so there will be continued support for the National Drug Scheduling Advisory Committee (NDSAC) and maintenance of the National Drug Schedules.
 - *Facilitate Access to Tools* – where there is unanimous agreement that a national initiative should be addressed, it would be incorporated into a core strategy. Otherwise, NAPRA's role will be to facilitate the access to tools that may help (*e.g., model programs, guidance documents, policies*).
 - *Be Fiscally Responsible* – the Executive Director is responsible for the proper management of all human, material and financial resources. The Executive Committee of the Board of Directors is responsible for the administration of NAPRA affairs and the development and administration of the budget.
- NAPRA's achievements include:

- Development of a national drug scheduling process and harmonized schedules for the conditions of sale for nonprescription drugs.
- Establishment of national competencies for entry level pharmacists, which have been integrated into the licensing standards, as well as pharmacy educational programs, curricula, and related accreditation standards.
- Implementation of a Mutual Recognition Agreement that facilitates the movement of pharmacists across provincial borders.
- Development of *Model Standards of Practice for Canadian Pharmacists* which provides a framework and practical guidance for pharmacy practitioners to demonstrate compliance with professional standards of practice and ongoing development of competencies reflected in the model Standards of Practice.
- Initiation of a collaborative relationship with international colleagues, such as the National Association of Boards of Pharmacy (NABP) in the United States.

1.15. Committee Reports

1.15.1. Investigating Committee Reports

One investigating report was presented for information.

1.16. Appointment of Investigating Committees

One investigating committee was appointed.

1.17. Council Member District 1

- The president advised council that she accepted a position with NAPRA in Ottawa and, therefore, will resign from her position as council member for District 1 for the period extending from June 2006 to 2009.
- Council discussed a motion passed in 2004 for realignment of the council districts to five districts: Edmonton city only, Calgary city only, Northern Alberta, Southern Alberta, and Central Alberta with an election to be held in three of the districts every three years.

MOTION: That the college conducts a special election to elect a councilor for the unexpired portion of the term in District 1 and so that the newly elected councilor will commence their term on council in September 2006. CARRIED

1.18. Dates for Next Meeting

1.18.1. Teleconference to Consider Draft Regulations to the Pharmacy and Drug Act (June 2006)

1.18.2. Scheduled Meeting and Board Development – September 28 - 30, 2006.

1.19. Closing Remarks - Nil.

1.20. Adjournment

This meeting of council adjourned at 2:20 p.m.