

**MINUTES**  
**VIDEOCONFERENCE MEETING OF COUNCIL**  
**ALBERTA COLLEGE OF PHARMACY**  
**February 25, 2021**

**1. Introduction**

**1.1 Call to Order**

President Lyons called the business meeting to order at 1:01 p.m. She encouraged council members to submit “Council Issue Sheets” as a tool to bring forth proposed council agenda items or issues of concern.

**1.2 Roll Call**

Registrar Eberhart called the roll and identified the following individuals in attendance:

- District 1 - Peter Macek (President-Elect)
- District 2 - Patrick Zachar
- District 3 - Fayaz Rajabali (Past-President)
- District 3 - Craig MacAlpine
- District 4 - Stan Dyjur
- District 5 - Judi Parrott
- District 5 - Shereen Elsayad
- District A - Don Ridley
- District B - Dana Lyons (President)
- Public Member - Irene Pfeiffer (Executive-Member-at-Large)
- Public Member - Christine Maligec
- Ex-Officio Member - Neal Davies, Dean-Faculty of Pharmacy and Pharmaceutical Sciences
- Ex-Officio Member - Terra Young, Representative-Accredited Pharmacy Technician Colleges
- Ex-Officio Member - Navjot Singh, APSA Student Representative-Faculty of Pharmacy and Pharmaceutical Sciences

**Absent**

- Public Member - Carmen Wyton

**Also in attendance**

- Greg Eberhart - Registrar
- Kaye Moran - Deputy Registrar
- Jeff Whissell - Deputy Registrar
- Rob Vandervelde - Senior Operations and Finance Director
- Leslie Ainslie - Executive Assistant
- Barry Strader - Communications Director
- Melanie Dela Cruz - Pharmacy Student
- Igor Zoric - Pharmacy Student
- Monty Stanowich - Compliance Officer (1:50 - 2:25pm)
- Observers from Pharmacy Technician Society of Alberta (2:25 - 3:40pm)

**1.3 Invocation**

Councillor Stan Dyjur read the invocation.

**1.4 Adoption of the Agenda**

#### **1.4.1 Consent Agenda**

Council reviewed the Consent Agenda material submitted under Agenda Items 1.4.1.1 and 1.4.1.2.

##### **1.4.1.1 Policy Decisions**

**MOTION:** to approve the Consent Agenda report on policy decisions as presented by Registrar Eberhart.

Moved by **Stan Dyjur**/Seconded by **Don Ridley**/CARRIED

##### **1.4.1.2 Reports for Information**

**MOTION:** to lift the issue of COVID-19 vaccinations.

Moved by **Craig MacAlpine**/Seconded by **Fayaz Rajabali**/CARRIED

In early February, Alberta Blue Cross issued a “Benefact” inviting applications from pharmacies to participate in COVID 19 vaccinations. Alberta Health Services selected 102 pharmacies located in Edmonton, Red Deer and Calgary. These locations will support Alberta Health Services’ province wide immunization clinics. Discussions and planning about pharmacy participation in COVID immunization lies with Alberta Health and the Alberta Pharmacists’ Association. ACP provides comment and guidance when invited and has encouraged as much collaboration and communication between government and pharmacies that timing of emerging issues allows. All final decisions have been made by Alberta Health.

**MOTION:** to accept the Consent Agenda “information reports” as presented by Registrar Eberhart.

Moved by **Christine Maligec**/Seconded by **Don Ridley**/CARRIED

#### **1.4.2 Additions to the Agenda**

There were no additions to the agenda.

**MOTION:** to adopt the agenda as circulated.

Moved by **Christine Maligec**/Seconded by **Irene Pfeiffer**/CARRIED

#### **1.5 Minutes from Previous Meetings**

##### **1.5.1 Minutes – January 28, 2021**

**MOTION:** to approve minutes of the January 28, 2021 council meeting.

Moved by **Peter Macek**/Seconded by **Craig MacAlpine**/CARRIED

##### **1.5.2 Ratification of e-Ballot - Nominating Committee Terms of Reference**

**MOTION:** to ratify the January 29, 2021 e-Ballot of Council amending the Terms of Reference for the Nominating Committee.

Moved by **Stan Dyjur**/Seconded by **Don Ridley**/CARRIED

#### **1.6 Disposition of Directives**

The Disposition of Directives was provided for information. President Lyons invited questions from Council.

**MOTION:** to accept the Disposition of Directives as information.

Moved by **Christine Maligec**/Seconded by **Irene Pfeiffer**/CARRIED

## 1.7 In Camera

NIL

## 2. Generative

### 2.1 Board Development - Facilitated by Brian Woodward

Council met the morning of February 25, 2021 to continue its discussions to develop a modernized and relevant framework that can effectively regulate a diversity of practices and practice models. In the first workshop, Council brainstormed potential practice models that are emerging or could emerge in the future. In conjunction, Council described key features of each model. In the second workshop, Council explored patterns that were apparent across the various models. In the third workshop, Council explored which patterns can ACP directly impact, the desired outcomes of these patterns, and explored potential issues or possibilities arising from the patterns. In this fourth workshop, Council focused on key elements to build the foundation for ACP's modernized practice and legislative framework

## 3. Strategic

### 3.1 Animal Health Standards

To support pharmacy's role in animal health, Council previously approved amendments to the Standards of Practice for Pharmacists and Pharmacy Technicians, the Standards for the Operation of Licensed Pharmacies and introduced supporting guidelines for the purpose of consultation. Substantive feedback was received from the consultation resulting in Council restating the role of pharmacy professionals in supporting animal health. Unfortunately during this time, the Minister of Health did not approve consultation on the first version of the standards; therefore approval of the standards based on the feedback received during the consultation could not occur

In January 2021, the Minister consulted on the proposed amendment to schedule 19 of the *Health Professions Act* (HPA) to accommodate a role for pharmacists and pharmacy technicians in serving animal health. Feedback received from the Minister's consultation was substantively favorable. The Minister intends to further consult on the DRAFT regulation to support the pending amendment to schedule 19 of the HPA; and, ACP's proposed amendments to the standards. The amendments to the regulation proposed by the Minister accommodates existing practices, and do not accommodate an expanded scope of practice for pharmacy's role in animal health.

All feedback received through the initial consultation was reviewed, and a second DRAFT of proposed amendments prepared for Council's consideration. These align with the restated role statement approved by Council, and the DRAFT amendment to the regulations. The guidelines were not updated, pending final approval of the amended standards.

Council reviewed the proposed amendments to the standards for the purpose of a second round of consultation. Feedback on the consultation is not expected from Alberta Health until after the regulation is amended. This is tentatively expected in late spring.

**MOTION:** to approve the DRAFT amendments to the Standards of Practice for Pharmacists and Pharmacy Technicians and the Standards for the Operation of Licensed Pharmacies for the purpose of the Minister's consultation.

Moved by **Craig MacAlpine**/Seconded by **Patrick Zachar**/CARRIED

### **3.2 Administration of Injections in Pharmacies – Optimizing Roles and Capacity**

The advent of the massive COVID immunizations initiatives in Alberta has brought to the forefront the need to explore optimizing the capacity of pharmacy manpower that will support pharmacy teams when required to support the needs of the public, respond to the health system's demand for immunizations, or to engage in other treatments requiring injection procedures.

In recent influenza campaigns, over 50% of Albertans seeking immunization, did so through a community pharmacy. Over 80% of the clinical pharmacists registered in Alberta are authorized to administer drugs by injection. Administering injections is a restricted activity. The Pharmacists and Pharmacy Technicians Regulation enables an authorized clinical pharmacist "to perform, within the practice of pharmacists and in accordance with the Standards of Practice, the restricted activity of administering anything by an invasive procedure on body tissue below the dermis or the mucous membrane for the purpose of administering subcutaneous or intramuscular injections...".

Of late, several concepts are emerging respecting the administration of drugs by injection by pharmacy teams. These include but may not be limited to:

- Pharmacy technicians have expressed interest in an abbreviated authority, being authorized to administer drugs by subcutaneous and intramuscular injection, subject to clinical responsibilities being performed by a pharmacist.
- There is a human resource gap in the shortage of pharmacy technicians available to work in community pharmacies.
- Pharmacists are increasingly inquiring about being enabled to administer injections to children older than two years of age. Many argue that this provides improved access for families, and that this would be more convenient for families. Some public health personnel have expressed concern that this would disrupt the continuity of programs important to infant and early childhood care.
- Alberta Health has received inquiries about pharmacists being enabled to administer drugs intravenously. Pharmacies having particular interest in the infusion of biologics, argue that pharmacists should be able to be trained to perform the infusions, rather than hire nurses. They further argue that this may accommodate access in less populated areas.
- An increasing number of pharmacists are inquiring about and performing esthetic procedures. It's well established that it is reasonable to perform injections for therapeutic purposes; however, no formal policy exists about the role of pharmacy practice in esthetics, including but not limited to scope, training, and potential limitations.

As Council continues its work to develop a relevant and modernized framework, these emerging concepts relating to pharmacy team capacity, and to the act of administering injections; warrants a systemic analysis and focused discussion. Each concept will require either regulatory amendment, amendment to standards of practice, followed by change management and implementation initiatives.

While some Council Members expressed interest in a proposal developed by the Pharmacy Technician's Society of Alberta (PTSA) to be able to administer injections subject to the assessment of a pharmacist, others cautioned that a systems based approach was important to that consideration. There were differing perspectives as to whether performing injections was a clinical or technical function. Alberta's health regulatory structure differs from other jurisdictions, and the clinical and technical responsibilities in performing an injection have not been separated in other

professions authorized to perform the restricted activity. No insight has been provided about the need and potential value of such a proposal to patients, the health system, or to pharmacy workflow.

Council agreed that all proposals intended to build new roles and opportunities should be considered within ACP's new strategic plan; and it would not be wise to address each in isolation. Council requested that the Registrar:

- Invite engagement with PTSA to share ACP's strategic plan and how and where discussions about building capacity fits within this.
- Invite PTSA to research and build a more rigorous proposal that responds to patient and health system needs and that includes "support from other professions".
- Write an article for regulated members, portraying the role and importance of "Compounding Supervisors" introduced in the new compounding standards.

### **3.3 U of A Bridging Program for IPGs – Appendix 1**

A priority of Council is to ensure that internationally educated pharmacist graduates (IEPGs) are qualified to practice safely and effectively in keeping with the standards of practice and Code of Ethics for the Alberta College of Pharmacy. To support this, Council asked ACP administration to develop a bridging program that will provide support and training for IPGs so they may practice safely and successfully in Alberta. Deputy Registrar Moran briefed Council on progress being made with the development of the bridging program

ACP and the Faculty of Pharmacy and Pharmaceutical Sciences (FoPPS) have partnered to build an Alberta based bridging program. The program will be facilitated by the Faculty. Development of the bridging program is underway with a plan to launch the inaugural program offering in September 2021. At the March meeting, Council will consider changes to ACP's registration policies mandating the Faculty of Pharmacy and Pharmaceutical Sciences bridging program as part of the registration process for internationally educated pharmacist graduates.

## **4. Fiduciary**

### **4.1 Governance Policy Compliance Monitoring and Reports**

Governance Policies (GP policies) define how Council conducts itself. Council reviewed the following governance policies, reflecting on its compliance with each policy.

#### **4.1.1 GP-1 Governance Process**

**MOTION:** that Council is in compliance with governance policy GP-1 Governance Process.

Moved by **Craig MacAlpine**/Seconded by **Christine Maligec**/CARRIED

#### **4.1.2 GP-10 Linkage with Other Organizations**

**MOTION:** that Council is in compliance with governance policy GP-10 Linkage with Other Organizations.

Moved by **Irene Pfeiffer**/Seconded by **Christine Maligec**/CARRIED

#### **4.1.3 GP-11 Council Planning/Agenda Control**

**MOTION:** that Council is in compliance with governance policy GP-11 Council Planning and Agenda Control.

Moved by **Fayaz Rajabali**/Seconded by **Peter Macek**/CARRIED

#### **4.1.4 GP-12 Handling of Operational Complaints**

**MOTION:** that Council is in compliance with governance policy GP-12 Handling of Operational Complaints.

Moved by **Fayaz Rajabali**/Seconded by **Peter Macek**/CARRIED

NOTE: It was questioned whether any complaints had been received. It was noted that none had been received.

#### **4.2 Appointment of PEBC Board Member**

Kaye Moran has completed her term as ACP's appointed representative to the Pharmaceutical Examining Board of Canada (PEBC). PEBC is seeking appointment of Kaye's successor to serve a three-year term commencing after the March 2021 PEBC Annual Board Meeting, and extending until the close of the March 2024 PEBC Annual Board Meeting.

**MOTION:** to appoint Dale Cooney as ACP's representative to the Pharmacy Examining Board of Canada's Board of Directors for a three-year term commencing March 2021.

Moved by **Don Ridley**/Seconded by **Peter Macek**/CARRIED

### **5. Evaluation of Meeting**

#### **5.1 Summary of Results from the December 10-11, 2020 Council Meeting**

A summary of the December 10-11, 2020 council meeting evaluation was circulated with the agenda for information. President Lyons thanked Council for contributing their reflections and insights in the survey. Council expressed appreciation for all comments shared as they provide important context for the responses, and insight to improve future meetings and support Council's time for meeting preparation. Council reflected that it was nice to see rich and effective engagement at the council table. Council requested that the Registrar try to post documents further in advance of council meetings; 10 days if possible.

### **6. Adjournment**

#### **6.1 Forthcoming Events and Council Meeting Dates**

- March 25-26, 2021 - Board Development and Videoconference Meeting of Council
- March 25, 2021- APEX Awards (evening)
- May 13, 2021 - Videoconference Meeting of Council
- June 24, 2021 - Videoconference Meeting of Council
- September 28-29, 2021 - Council Meeting, Edmonton (1.5 days)
- September 29, 2021 - Celebration of Leadership and Installation of President (evening)
- September 29-October 1, 2021 - Leadership Forum, Edmonton (EC Members only)

#### **6.2 Adjournment**

The business meeting of Council adjourned circa 4:39 p.m.

Moved by **Irene Pfeiffer**

# Update: Bridging Program for Internationally Educated Pharmacist Graduates

## Background

Providing better assurance that internationally educated pharmacist graduates (IEPGs) are qualified and able to practice safely, effectively, and responsibly to the standards of practice and ethics required in Alberta is a priority for the Alberta College of Pharmacy (ACP). In particular, ACP wishes to ensure that individuals registered in Alberta have the appropriate training and commitment to the standards of practice and ethics, so that they may practice safely and successfully in Alberta.

In 2019, council expressed its intention to have a bridging program become a registration requirement for all Internationally Educated Pharmacist Graduates (IEPGs) when the rules of the Structured Practical Training (SPT) program for provisional pharmacists were amended. In 2020, ACP and the Faculty of Pharmacy and Pharmaceutical Sciences (FoPPS) at the University of Alberta partnered to complete a rapid analysis to subsequently build an Alberta-based bridging program for IEPGs. Development of the bridging program is now underway with a plan to launch the inaugural offering in 2021.

## Plan for Inaugural Offering of the Bridging Program

- It is currently estimated, although not finalized, that the program will be parttime blended learning over a ten-month period. This will leave opportunity to complete structured practical training (SPT) concurrently, or fulfill caregiver responsibilities, or work part-time, or whatever else may be necessary for IEPGs completing registration requirements. The draft outlined of the program is included in Appendix 1.
- The SPT program requires a minimum of 25 weeks to complete if the provisional pharmacist is participating full-time. If SPT is completed on a part-time basis it may take 50 weeks, or perhaps more depending on the performance of the provisional pharmacist. It will be up to the IEPG to identify a preceptor for their SPT, as well as coordinate the timing of this commitment according to other priorities that may be unique to their situation. Whether someone chooses parttime or fulltime completion of SPT will not impact their progress through the bridging program.
- The intention of both ACP and FoPPS is to optimize the time required for completion of these programs. This will be achieved by:
  - The FoPPS developing an assessment to place the learner in an appropriate starting point of the bridging program, perhaps at the beginning or somewhere part way through the program.
  - The ACP reducing the minimum number of hours required within the SPT program. As experience with the bridging program is gained, we will determine where SPT activities are expected to be performed acceptably with less practice in SPT given the experience gained through the bridging program.
- The cost of the program is not yet known but will be comparable to the programs at UofT (\$13,650+) and UBC (\$13,000+).

## Comparison to Other Provinces

Province	Bridging Program	SPT (or similar)	Notes
AB	FoPPS at UofA 10 months ~\$13,500 (TBD)	Minimum 25 weeks (fulltime) or 50 weeks (parttime) for a minimum of 1000 hours	
BC	CP3 at UBC 12 weeks \$13,000+	CP3 at UBC 12.5 weeks (500 hours)	
ON	IPG program at UofT 8 months \$13,650+	PACE program: Orientation – 35 hours Assessment – 70 hours (over 2-3 weeks) Development – required before another attempt at the assessment is permitted (when required)	<ul style="list-style-type: none"> <li>Bridging program is not required if an IEPG passes the PEBC Qualifying Examination Part I (MCQ) and Part II (OSCE) on the first attempt.</li> <li>OCP observes many IEPGs are not successful in PACE and were one of the driving forces behind NAPRA establishing the mentorship component of the P4T (pilot program to prepare for practical training) program.</li> </ul>
SK	None	Appraisal training (\$350): 1 month – 2 years depending on competence. Assessment (\$880): 2-week assessment completed after competency standards are met within appraisal training.	<ul style="list-style-type: none"> <li>Program is under review given recent increase in demand noted within Saskatchewan.</li> </ul>
MB	None	600 hours completed within 15-21 weeks	<ul style="list-style-type: none"> <li>There is a limit of 5 applications/month accepted from IEPGs at CPhM</li> <li>Interns find their own preceptors, but CPhM may assign an assessor for a second opinion</li> </ul>
NS	None	20 weeks (800 hours) completed with Dalhousie University. 1-week competency-based assessment coordinated by NSCP.	
NB	100 discussion questions completed with the NBCP SPT preceptor during 4-week structured training.	20 weeks training 16 weeks unstructured 4 weeks structured according to the NBCP training manual. The 4-week structured training must be completed within 12 weeks of the start date (i.e., it appears parttime arrangements are permitted). 2 weeks assessment	<ul style="list-style-type: none"> <li>Successful completion of PEBC Qualifying Exam Part I (MCQ) or Part II (OSCE) needed before registration and training.</li> <li>An apprenticeship agreement submitted to the NBCP prior to starting training.</li> <li>Preceptor criteria for training is similar to ACP requirements.</li> <li>Assessors for the 2-week assessment are assigned by NBCP.</li> </ul>



## Next Steps

### FoPPS Bridging Program

Continue to work with the FoPPS at UofA to develop the bridging program for the inaugural offering, as well as plan revisions. Work towards desired approach of supporting learners to complete only courses deemed necessary by initial assessment. Please see Appendix 1 for the draft outline of the program. Development is still in the very early stages, so this information is subject to change.

### Office of the Fairness for Newcomers

Arrange a meeting with the Office of the Fairness of Newcomers to:

- Create awareness for the differences in pharmacy education in Canada compared to other parts of the world.
- Create awareness for the differences in pharmacist practice in Alberta compared to other parts of Canada.
- Create awareness of the experiences and observations of ACP with IEPGs over the last 7 years.
- Create awareness of, and support for, the intended approach of the bridging program, as well as SPT, to support IEPGs to practice successfully upon joining the clinical pharmacist register.

### Registration Policies

Return to council in March with changes to registration policies to require the FoPPS Bridging Program at the UofA as a mandatory part of the registration process for IEPGs. The policy decision will include:

- Whether the bridging program will be a requirement for admission to the provisional pharmacist register or the clinical pharmacist register.
- When the policy will come into effect. This will contemplate how to avoid a “rush” of applications prior to the coming into effect date, as well as sufficient notice for individuals to be prepared for the tuition costs associated with the Bridging Program.

## Appendix 1

- Faculty of Pharmacy and Pharmaceutical Sciences IPG Program Outline

Area	Course (or Module) Title	Term (or "Block")	Topics / Description	Format
Pharmacotherapy	Pharmacotherapy I	1 (Fall)	Patient Care Process; Pharmacotherapy of common chronic illnesses encountered by pharmacists	online
	Pharmacotherapy II	2 (Winter)	Pharmacotherapy of common illnesses (continued)	online
BASE	BASE I (Patient Centred Communication and Evidence in Pharmacy)	1 (Fall)	Focus on *Communication* , Language ; Impact of Canadian Culture on health care; Patient Safety; Cultural Diversity, Integration CORE communication skills: empathy, question asking, listening, non-judgmental approach; Patient Education; Risk communication; Health literacy ; Social determinants of health; Presentation skills; Patient vs Clinician centred; All with time for rehearsal etc. Evidence Based Medicine (EBM): Intro: Evidence Hierarchy; Summary Sources, Observational/ Experimental design, Risk Communication, RCTs/Non-Inferiority Studies	likely online, blended if possible(?)
	BASE II	2 (Winter)	Canadian Healthcare System, Culture / Context; Alberta's healthcare system; Alberta's scope of practice for Pharmacists (+ <a href="#">Compenstion plan for pharmacy services in Alberta</a> ), Jurisprudence Learning Module Professionalism, Ethics & Jurisprudence ; Leadership, Decision Making; Collaborative Practice Drug coverage, drug approval in Canada	online
	BASE III	3 (Spring)	Communication: Group Education; Trauma informed care; Communication Challenges - language, vision/hearing loss/ children/ elderly, handling microaggressions; Law: Medical Directives, Consent, etc. Canadian Culture / Context: Social determinants of health in Canada; Indigenous in Canada EBM: Clinical Practice Guidelines, Pharm Epidemiology, Systematic reviews, Pharmacoeconomics, Pharmacy Practice Research, Pharmacists' Roles in Research Life-long learning; Goal setting; Self-assessment. Advanced topics that integrate skills: Shared Decision; Motivational Interviewing; Managing an angry patient/ physician; Literature Evaluation; Informatics: Netcare Training; Advanced Ethical Situations	in-person / blended?
Skills	Patient Care Skills I	1 (Fall)	Foundational skills related to patient care and drug distribution process	online
	Patient Care Skills II	2 (Winter)		
	Patient Care Skills III	3 (Spring)	Expand on Patient Care Skills I & II related to clinical reasoning and decision making, professional communication, collaborative practice and team-based interactions	in-person; simulated pharmacy setting