

DRAFT MINUTES
Council Meeting
ALBERTA COLLEGE OF PHARMACISTS
December 4 – 5, 2013
Sutton Place Hotel, Edmonton

1. Introduction

1.1 Call to Order

President Olstad called the meeting to order at 1:00 p.m.

The business meeting of Council was held over two days. On Wednesday, December 4th, the meeting opened at 1:00 p.m. and recessed at 5:00 p.m. On Thursday, December 5th the meeting reconvened at 8:00 a.m. and adjourned at 4:30 p.m.

1.2 Roll Call

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

- District 1 – Brad Willsey (President Elect)
- District 2 - Clayton Braun (Executive Member at Large)
- District 3 - Krystal Wynnyk
- District 3 - Rick Hackman
- District 3 – Taciana Pereira
- District 4 - Kelly Olstad (President)
- District 5 - Kaye Moran (Past President)
- District 5 - Kamal Dullat
- Pharmacy Technician - Kelly Boparai
- Pat Matusko - Public Member
- Bob Kruchten - Public Member

Non-Voting

- Jim Kehrer (Dean, Faculty of Pharmacy & Pharmaceutical Sciences)
- Robin Burns (Pharmacy Technician)
- Laura Coleman (APSA Student Representative)

Absent

- Vi Becker – Public Member

Also in attendance:

- Greg Eberhart - Registrar
- Dale Cooney - Deputy Registrar
- Lynn Paulitsch – Operations and Finance Director
- Karen Mills – Communications Director
- Leslie Ainslie - Executive Assistant
- Brad Snodgrass (APSA President Elect) - Observer
- Bill Shores (Shores Jardine, LLP) - Legal Counsel
- Members of the Public – Observers

1.3 Invocation

Taciana Pereira read the invocation.

1.4 Adoption of the Agenda

1.4.1 Consent Agenda

MOTION: to lift the topic of “Preparation of Sterile Products” and “Audit” from the Consent Agenda for discussion.

Moved by **Kamal Dullat**/Seconded by **Kaye Moran**/CARRIED

MOTION: to approve the agenda as amended.

Moved by **Rick Hackman**/Seconded by **Brad Willsey**/CARRIED

1.4.2 Additions to the Agenda

1.4.2.1 Preparation of Sterile Products

ACP prepared draft Guidelines for the Preparation of Sterile Products. The guidelines will provide direction to pharmacists about how to comply with the USP Chapter 797 requirements outlined in the Standards of Practice and the Standards for Operating Licensed Pharmacies.

The guidelines have been reviewed by ACP’s Pharmacy Practice Consultants (PPCs) and with selected pharmacists. The draft guidelines will be shared with NAPRA for consideration in their national project on sterile compounding. The guidelines will affect all pharmacies including those within Alberta Health Services (AHS). ACP has held preliminary discussion with AHS pharmacy leaders about the guidelines, and also work that is being conducted by CSHP (national).

1.4.2.2 Audit

Council received an Audit Planning Report from its auditors KPMG for the year ended December 31, 2013. In fulfilling its fiduciary responsibilities, Council reviewed the plan and provided responses to the following questions posed in the report:

1. *Are you aware of, or have you identified any instances of, actual, suspected, possible, or alleged non-compliance of laws and regulations or fraud, including misconduct or unethical behaviour related to financial reporting or misappropriation of assets? If so, have the instances been appropriately addressed and how have they been addressed?*
 - Council answered “No” to this question.
2. *What are your views about fraud risks in the entity?*
 - Council mitigates fraud risks through its governance policies, the monitoring of governance reports, and planning processes.
3. *How do you provide effective oversight of management’s process for identifying and responding to the risks of fraud?*

Council is committed to its governance and the following Executive Limitation (EL) polices, to provide effective oversight of management's processes as follows:

- a) EL-1 requires an external auditor's report and requires the Registrar to provide an internal report for anything in exception to the policy. The external audit is conducted annually and the required reports are presented to Council in-person by the auditor with the leadership team excluded from that portion of the meeting enabling Council and the auditor to freely discuss any concerns.
- b) EL-4 requires that Council receives quarterly financial reports, including explanations of notable variances and is provided the opportunity to question the leadership team on any item.
- c) EL-4 requires the leadership team to have sufficient controls in place to receive process and disburse funds. The controls are reviewed annually during the external audit and are reported via the external audit report.
- d) EL-8 requires that conflicts of interest be disclosed and reported annually to Council.

President Olstad asked Council if they had any concerns or questions. Council agreed that should any concerns or questions arise, they would be brought to the Registrar's attention and/or to Council for discussion.

MOTION: to approve the Consent Agenda report presented by Registrar Eberhart.
Moved by **Kamal Dullat**/Seconded by **Krystal Wynnyk**/CARRIED

1.4.2.3 Report from the Dean

Dean Jim Kehrer provided a brief update about Faculty initiatives:

- PharmD – 10 students from the first group have provided very positive feedback. 20 students have been accepted to enter the program in September 2014.
- The Provost is returning in the spring. One of his priorities will be revenue generation. The Faculty experienced a 7% cutback in funding, and will need to generate revenues on a two for one basis.
- Market Modification – will result in higher tuitions.
- The Faculty has signed an agreement with Kuwait to accept 5 students a year. This is in addition to the quota for nationalized applicants. This agreement will result in \$1M in revenues a year. PharmD students generate \$20,000 of revenue for each student.
- The Dean is working to facilitate a U of A pharmacy satellite faculty in Calgary. Bow Valley College is a potential partner in the initiative. The site would support 3rd and 4th year students by 2016, with a goal to support all years in the future.
- Entry-level Pharm D – implementation of a full-time Pharm D program, to replace the BSc. program is targeted for 2017. It is noted that this will still be an undergraduate program.

1.5 Minutes from Previous Meetings

1.5.1 Minutes – October 2 and 4, 2013

MOTION: that the minutes of the October 2 and 4, 2013 meeting of Council be approved subject to incorporating the following amendments:

- Agenda item 1.4.1 Consent Agenda - replace “family care clinics” in the following sentence “AHS has reviewed its practices and will continue to dispense and sell drugs through *family care clinics* by physicians” with “AHS has reviewed its practices and will continue to dispense and sell drugs through *family planning clinics* by physicians”. Council also requested that “ACP Prize” in Agenda Item 2.3.2.3 Review of GP-14 Criteria for Awards, be italicized.

Moved by **Brad Willsey**/Seconded by **Kaye Moran**/CARRIED

1.6 Disposition of Directives

The Disposition of Directives was provided for information. President Olstad invited questions; however, none arose.

MOTION: to accept the report as information.

Moved by **Brad Willsey**/Seconded by **Kelly Boparai**/CARRIED

1.7 In Camera

MOTION: that Council move “In Camera” at 4:37 p.m.

Moved by **Bob Kruchten**/Seconded by **Krystal Wynnyk**/CARRIED

MOTION: that Council move “Out of Camera” at 4:56 p.m.

Moved by **Bob Kruchten**/Seconded by **Kelly Boparai**/CARRIED

2. Governance

2.1 ENDS Policies and Reports

2.1.1 Policy E (Mega-End) – Priorities for 2014

Registrar Eberhart proposed priorities to Council for 2014 and updated Council on progress to meet the 2013 priorities. The priorities established by Council support the College’s mandate of protecting the health and well-being of Albertans through its strategic plan.

Council approved the following priorities for 2014 as presented by Registrar Eberhart:

- Implement the revised Continuing Competence Program for pharmacists, including online self-assessment, and documentation of learning activities for July 2014.
- Increase use of data intelligence to monitor and improve pharmacist practice using Triplicate Prescription Program data.

- Review comments received through the “review and comment” process required by the *Health Professions Act* and determine whether amendments to the Standards of Practice for Pharmacists and Pharmacy Technicians, the Standards for the Operation of Pharmacies, and the Code of Ethics should proceed. If amendments are approved, establish an effective date for the prohibition of inducements.
- Continue current practices to increase the number of pharmacists with additional prescribing authority.
- Continue to increase registrants’ engagement through technology, including the delivery of a virtual Annual General Meeting.
- Complete the development of a performance measurement matrix for reporting on governance indicators.
- Complete an “Operational Needs and Reporting Analysis “and “GAP” analysis with current association management software.

MOTION: to approve the priorities for 2014 as presented by the Registrar.
Moved by **Pat Matusko**/Seconded by **Krystal Wynnyk**/CARRIED

2.1.2 DRAFT 3-Year Business Plan and Budget 2014

Registrar Eberhart presented the budget and business plan for 2014, including estimates for 2015 and 2016. Council considered the relevance of the plans to ACP’s strategic direction and the relative balance of investment in core programs. Council considered whether the budget adequately addresses its strategic direction and the priorities for 2014. Amendments to the 2014 budget since Council’s review in October include:

- an increase in the expected number of additional prescribing applications, and consequently an increase in expenses to administer the applications;
- an increase in 2013’s surplus to \$150,000;
- increased expenses to reflect the Leadership Forum, that will take place apart from regularly scheduled council meetings;
- reallocation of the grant to the UofA Faculty of Pharmacy and Pharmaceutical Sciences for its Centennial, disbursed in late 2013;
- increased Visa and MasterCard service fees. (Lynn Paulitsch, ACP’s Director of Operations and Finance will prepare an analysis of the credit card fees, and the feasibility of other electronic payment options for Council’s review at a future meeting.)

The final schedule of fees for 2014 was presented for Council’s approval. The budget proposed no increases to membership fees in 2014. Council approved a 1.7% COLA increase on expenses that are impacted by current economic conditions calculated by the Conference Board of Canada for Edmonton.

Council approved proposed amendments to ACP Bylaws for the purpose of consultation. The proposed amendments recommend the introduction of fees for applying for appeals to a hearing tribunal; and, appeals to the Complaints Review Committee.

Registrar Eberhart proposed the following withdrawals from reserve funds:

- \$10,000 - for pharmacy technician structured practical training (*from information technology restricted reserves*), in 2015 and \$5,000 in 2016;
- \$150,000 - for technology strategy implementation (*from information technology restricted reserves*) in 2015, and \$50,000 in 2016.

Subject to approval of the proposed withdrawals, the annual difference in revenues and expenses will be:

- 2014 - <\$155,927>
- 2015 - <\$150,241>
- 2016 - \$50,422

MOTION: to approve the 2014 budget, estimates for 2015 and 2016, and business plan as per governance policy EL-3 Financial Planning.

Moved by **Rick Hackman**/Seconded by **Brad Willsey**/CARRIED

MOTION: to approve amendments to governance policy GP-7 Council and Committee Expenses.

Moved by **Bob Kruchten**/Seconded by **Kamal Dullat**/CARRIED

MOTION: to approve the schedule of fees proposed in support of the 2014 budget.

Moved by **Kamal Dullat**/Seconded by **Krystal Wynnyk**/CARRIED

MOTION: to approve new fees to the Complaint Review Committee application and appeals of hearing tribunal decisions; for the purpose of consultation and proposed bylaw amendment.

Moved by **Kamal Dullat**/Seconded by **Krystal Wynnyk**/CARRIED

2.2 Compliance and Monitoring Reports

2.2.1 Executive Limitations – Compliance Reports

Reports from the Registrar were provided for each of the following Executive Limitation policies.

2.2.1.1 EL-2 Treatment of Staff

In its ongoing commitment to assess the satisfaction of its administrative team, ACP commissioned Banister Research & Consulting Inc. to conduct its tri-annual survey of all staff members. Tracy With from Banister Consulting presented the results of the survey conducted in October 2013. The purpose of the survey was to measure overall employee satisfaction based on an evaluation of specific facets of the workplace; to identify key strengths and areas for improvement; to provide a benchmark for measuring change in the future; and to encourage dialogue amongst management and

employees towards making ACP a better place to work. Overall, satisfaction of ACP employees was rated very high.

Key areas of strength identified in the survey were:

- employees know what is expected of them at work;
- employees have the materials and/or equipment to do their jobs;
- all ACP employees are committed to doing quality work;
- ACP provides opportunities at work to learn and grow; and
- employees have access to appropriate technology and information systems to support their work.

The survey identified that employees welcomed a review of the following:

- Benefits – an assessment of employees' needs to perhaps provide more benefit options,
- Promotions – ways to increase opportunity for advancement for administration in a pharmacist-centered organization,
- Review of job descriptions – review descriptions annually, and consider changes in title or compensation, if warranted,
- Evaluation of Performance – review and perhaps change the system currently in place.

MOTION: that the external report on EL-2 Treatment of Staff be approved.

Moved by **Kelly Boparai**/Seconded by **Krystal Wynnyk**/CARRIED

2.2.1.2 EL-3 Financial Planning - 2014 Budget and Business Plan

Registrar Eberhart presented the budget for 2014 and estimates for 2015 and 2016 under Agenda Item 2.1.2

2.2.1.3 EL-4 Financial Condition (Internal)

Council received the Internal Financial Statements and Variances for the month ending September 30, 2013.

MOTION: that the Registrar's compliance report on EL-4 Financial Condition of the College be approved.

Moved by **Rick Hackman**/Seconded by **Kamal Dullat**/CARRIED

2.2.1.4 EL-6 Investments

Tom Richards from TD Waterhouse and ACP's appointed investment counsel presented his annual report to Council reflecting the performance of ACP's investment portfolios.

MOTION: to approve the External Report from ACP's investment counsel for compliance with governance policy EL-6 Investments.

Moved by **Rick Hackman**/Seconded by **Brad Willsey**/CARRIED

2.2.1.5 EL-12 Public Image

ACP surveys its registrants, stakeholders, and the public on a rotating cycle, every three years. ACP conducted its tri-annual survey of the public to collect information about their views of ACP, pharmacy practice in Alberta, and needs they would like addressed in the future. The survey was conducted by NRG Research Group, who surveyed 1200 members of the public aged 18 years and older by telephone during September/October 2013. The objectives of the survey were to:

- understand the public's impressions and understanding of the pharmacist's role in health care;
- collect information about current use of pharmacy services;
- gauge the public's comfort in speaking with a pharmacist about certain issues;
- assess awareness, perceptions, and expectations of pharmacy service;
- measure awareness of ACP, including elements of ACP's mandate;
- determine whether the public is in favour of inducements on pharmacy services, and investigate reasons why or why not;
- explore reasons for choosing a pharmacy;
- identify respondent profiles; and,
- where possible, compare 2013 results with 2010 and 2007 results.

The survey shows that Albertans are satisfied with the delivery of pharmacy services and they consider their pharmacist to be important to their overall health care. Ninety-two percent (92%) of the public is satisfied with the pharmacy care they received in the last year, however there remains some confusion over what pharmacists can do, including but not limited to:

- administering immunizations (flu shots or vaccine boosters),
- discussing lab results important to treatment,
- writing care plans, and
- administering other drugs by injection.

There are also two practices that the public feels are important, but they are less satisfied with:

- working with the patient's health team to coordinate their drug therapy, and
- following up with the patient to monitor their response to drug therapy and to provide additional support in using their drugs properly.

Survey participants were asked, "When it comes to taking care of your health and that of your family, what services or help would you like that you aren't getting now?" Even though the question was not directly related to pharmacy care, two of the top answers were pharmacist prescribing (including refill authorizations) and better coordination between pharmacists and other healthcare professionals.

Observations made by Council when discussing the results included:

- future surveys should consider segmenting Alberta's rapidly changing demography, as immigrants may have different expectations and/or may not fully understand the health system;
- patients are more likely to change their perception once they have experienced a new service. Therefore, the fact that many Albertans base their satisfaction on traditional roles, it is highly likely that these are the services that they continue to experience; and,
- ACP should continue to monitor these trends in 3 years, and seek to understand the impact of:
 - ACP's pharmacy practice consultants, and
 - the significant changes in pharmacy economics and the advent of the new service model.

MOTION: that the Registrar's compliance report on EL-12 Public Image be approved.

Moved by **Brad Willsey**/Seconded by **Kamal Dullat**/CARRIED

2.2.2 Governance Policies – Compliance Reports

Council considered the following GP policies and discussed its compliance with each.

2.2.2.1 GP-7 Council and Committee Expenses

MOTION: that Council is in compliance with governance policy GP-7 Council and Committee Expenses.

Moved by **Kaye Moran**/Seconded by **Kelly Boparai**/CARRIED

2.2.2.2 GP-9 Investment in Governance

MOTION: that Council is in compliance with governance policy GP-9 Investment in Governance.

Moved by **Brad Willsey**/Seconded by **Krystal Wynnyk**/CARRIED

2.3. Policy Review and Amendment

2.3.1 GP Policies – Policy Review and Amendment

Council reviewed these policies and provided recommendations for amendment as appropriate.

2.3.1.1 GP-7 Council and Committee Expenses

A motion to approve amendments to governance policy GP-7 Council and Committee Expenses as per the 2014 budget, was made in conjunction with Agenda Item 2.1.2.

2.3.1.2 GP-11 Council Planning Cycle and Agenda Control

Council had requested the Executive Committee review this governance policy and provide recommendations for Council's consideration.

Amendment was recommended to point 1.2 and 1.3 as follows:

- (1.2) "Collect data and information from multiple sources, including engagement with moral owners and registrants, to support informed

decision making. ~~Consultations with the ownership, or other methods of gaining ownership input, prior to the above review.~~”

- (1.3) “Scheduled time for education related to for generative (long term) visionary thinking to inform *Ends* determination...”

MOTION: to approve the recommended amendments to governance policy GP-11 Council Planning Cycle and Agenda Control.

Moved by **Kelly Boparai**/Seconded by **Kamal Dullat**/CARRIED

2.3.1.3 GP- 12 Handling of Operational Complaints

MOTION: to approve governance policy GP-12 Handling of Operational Complaints as written.

Moved by **Kaye Moran**/Seconded by **Rick Hackman**/CARRIED

2.3.1.4 GP-13 Handling of Alleged Policy Violations

MOTION: to approve governance policy GP-13 as written.

Moved by **Kamal Dullat**/Seconded by **Krystal Wynnyk**/CARRIED

Council has completed its three year review of all its governance policies, and will review the policies for relevancy and possible amendments on a continual three year cycle.

2.3.2 CR Policies - Policy Review and Amendment

CR Policies define the working relationship between the Council and the Registrar. Council reviewed these policies and did not recommend amendments.

2.3.2.1 CR-1 Global Council-Registrar Relationship

2.3.2.2 CR-2 Direction from Council

2.3.2.3 CR-3 Accountability of the Registrar

OMNIBUS MOTION: to approve as written; CR policies CR-1 Global Council-Registrar Relationship, CR-2 Direction from Council, and CR-3 Accountability of the Registrar.

Moved by **Kelly Boparai**/Seconded by **Kamal Dullat**/CARRIED

2.4 Appointments

2.4.1 Appointment to PEBC Board of Directors

Jeff Whissell’s term as ACP’s representative on the Pharmacy Examining Board of Canada (PEBC), expires March 2014. PEBC is seeking appointment of Jeff’s successor to serve a three-year term commencing the end of March 2014.

MOTION: to appoint Kaye Moran as ACP’s representative on the Pharmacy Examining Board of Canada for a three-year term commencing March 2014.

Moved by **Pat Matusko**/Seconded by **Kelly Boparai**/CARRIED

Abstained: Kaye Moran

2.5 Ownership Linkage

2.5.1 Engagement with Albertans Since Last Meeting

Council identified the importance of Council's engagement with the public and registrants. Council agreed to regularly engage with the public and registrants in a structured way. Council engaged in round table discussions on the following issues:

- Registrants raised questions about expectations for disclosure by pharmacists to patients when substituting their medications. It was suggested that registrants be referred to ACP's Code of Ethics, with emphasis on the value of transparency. While judgment is required on a case to case basis, patients should be included in the discussion, and fully informed about any treatment (medication) that they receive.
- Council discussed the Alberta Health Act and the Health Charter, anticipating the release of DRAFT regulations for consultation.

2.6 Generative Discussion (Appendix)

Generative thinking enables Council to be strategic and more effective. Council is committed to long term generative thinking to maintain the relevance and sustainability of the College and the professions it governs. Council considered amendments to governance policies GP-3 Governing Style, GP-4 Council Responsibilities, GP-5 President's Role, and GP-8 Code of Conduct, to incorporate the concept of generative thinking into Council's responsibilities.

MOTION: to approve amendments to governance policies GP-3 Governing Style, GP-4 Council Responsibilities, GP-5 President's Role, and GP-8 Code of Conduct. Moved by **Brad Willsey**/Seconded by **Kaye Moran**/CARRIED

Council was provided a dossier of background documents about changes in the health sector and the role of pharmacists. Council members were asked to consider the role of pharmacists in 2025 and beyond. Council divided into four working groups, and each was invited to discuss and capture their thoughts on the following three questions:

- What were your key insights and learnings from the video and the background documents circulated with the agenda?
- In 3-4 sentences describe the role of pharmacists in Alberta's health system in 2025 and beyond.
- Provide context to your role statement by describing the 3-5 most important behaviors that pharmacists will need to demonstrate to fulfill the role statement.

A collation of the discussion from each working group is appended for future reference (Appendix).

3. Legislated Responsibilities

3.1 Hearing Tribunal Decisions

3.1.1 Anonymized Report

An anonymized copy of a Hearing Tribunal Committee decision was provided to Council for information. Due to the merits of the case, and to protect third party identity, the Committee and the Registrar both felt that this report should be put on record in an anonymous form.

3.1.2 Calvin Boey - Registration Number 8117

A copy of the Hearing Tribunal Committee decision was provided to Council for information.

MOTION: that Council accepts the Hearing Tribunal reports as information.
Moved by **Rick Hackman**/Seconded by **Kaye Moran**/CARRIED

3.2 Competence Program – Rules

The Competence Committee proposed “Rules for ACP’s Continuing Competence Program” that were developed consistent with the philosophy and principles approved by Council. Council requested the following amendments to the DRAFT rules:

- That candidates successfully completing their application for “additional prescribing authorization” be required to complete annual requirements; however, that their records be exempt from “random audit” for 5 years after achieving additional prescribing authority;
- Remove rule 12;
- Amend rule 15 to read “A clinical pharmacist can document a maximum of eight unaccredited continuing education units on each learning record; and,
- Amend rule 38 by including “category 2” in conjunction with categories 3 and 4 in the root of the rule.

MOTION: to approve the rules for the Continuing Competence Program as amended.

Moved by **Clayton Braun**/Seconded by **Kamal Dullat**/CARRIED

The Continuing Competence Program will be implemented for the 2014-2015 membership year. ACP will develop a comprehensive communication plan to support implementation of the new program. Council recommended that the implementation plan needs to be supported with complementary communication and educational components. The plan should inspire and empower members so that it is seen as an opportunity to demonstrate professionalism, rather than as additional work that is not purposeful.

3.3 Review Proposal from Dietitians – adjusting insulin and oral hypoglycemic

The College of Dietitians of Alberta has proposed that dietitians' scope of practice be expanded to allow dietitians to prescribe schedule 1 drugs for the purpose of adjusting insulin and oral hypoglycemic agents. Council had many questions and concerns about the proposal and requested Registrar Eberhart to ask the College of Dietitians to make a presentation to Council at its April meeting.

4. Miscellaneous Business for Council's Consideration

MOTION: to invite Brad Snodgrass, president-elect of APSA to the closed meeting of Council.

Moved by **Brad Willsey**/Seconded by **Pat Matusko**/CARRIED

4.1 Discussion with Minister of Health Fred Horne

Minister Horne was unable to attend the council meeting. In the Minister's absence, Council reflected on its engagement with seniors held on the evening of Wednesday, December 4th. Council hosted leaders from the Alberta Council on Aging, Seniors United Now, and the Seniors Advisory Council for Alberta, to discuss healthcare issues facing seniors. Issues arising from the engagement included:

- access to drug benefits,
- the prescribing of drugs to the elderly, in particular CNS drugs used to treat anxiety, insomnia, depression and dementia, and
- concerns about the proposed "Provincial Drug Program" and the use of means testing to determine eligibility.

Seniors expressed a need to be heard and respected by government and decision makers. They spoke highly of the care provided by their pharmacists, and identified pharmacists as critical members of their health team.

Council will meet with board members from the Health Quality Council of Alberta the evening of April 9, 2014.

4.2 Report from APSA

APSA President Laura Coleman presented the following report to Council outlining APSA's achievements and initiatives during her term presidential term:

Advocacy

1. Formation of a new advocacy committee (SAF-Pharm Committee):
 - a. Currently in the development stage/pilot phase.
 - b. Will be fully implemented September 2014 after committee structure and purpose has been fully established.
 - c. Constitutional amendments to reflect new committee in the winter of 2014.
2. Mixer Event
 - a. Collaboration with working pharmacists and students to set up a Mixer Event.
 - b. Social evening to bridge connections and develop relationships between working pharmacists and students (mentorship opportunity).

- c. Goal of working pharmacists was to establish a sense of unity and camaraderie.
 - d. Next Mixer is being planned for Lethbridge (APSA has minimal role but will be informing students of the opportunity in the Lethbridge area)
3. Pharmacy Awareness Month
- a. In the development process, schedule soon to be finalized.
 - b. More focus on clinical services (blood pressure clinics, osteoporosis screening) and community outreach (volunteer opportunities with community charity groups, NPOs, and homeless shelters).
 - c. Professional development opportunities also a priority this year for students.
 - d. Looking to have a greater attendance of pharmacy community members in addition to student body.
4. Independent Night
- a. January 2014, an evening to promote independent pharmacy to students and learn about different opportunities for future career.
5. ACP Inducements initiative:
- a. APSA Executive met with Greg Eberhart and Kelly Olstad to discuss inducements.
 - b. Once the changes are released, APSA will serve as a valuable resource for educating students of this new change.

Presence

1. Fundraised over \$24,000 for the CIBC Run for the Cure and had over 60 students participate in addition to Faculty members.
 - a. Goal this year was to raise awareness of breast cancer across campus and within the Health Sciences disciplines.
 - b. Held a breast cancer Survivor Talk from our own Marlene Gukert.
2. Mr. Pharmacy 2013 – third annual Mr. Pharmacy (November 23rd 2013)
 - a. Fundraising totals TBA
3. Social Events
4. Collaboration with Graduate Students' Association (PGSA)
5. Presentation and guided tours by pharmacy students at the Alumni Weekend

Student Services

1. Wellness Initiatives.
2. Making the most of our space in ECHA, provision of services to students has increased.
3. Almost 100% membership from first year class.
4. Bulk textbook orders - students have access to the most essential practice resources for a reduced price.

Academic Excellence

1. New Practice Based Learning rooms have created a much needed space for group work and collaboration, as well as inter-year communication.
2. Academic complaints are being addressed promptly and appropriately.
3. Awards Committee has developed a scoring system for a more objective method of evaluating applicants for awards and ensuring transparency and minimal bias in decision making.

4. New PharmD program is peaking student interest in furthering their education after graduation.
5. Changes to ACP Awards to come with the goal of fostering student leaders for the profession well received by Council.

The APSA changeover meeting between President and President-Elect occurs December 6, 2013. Laura Coleman thanked ACP for welcoming her as a member of Council and for creating a positive learning environment, rich discussion, and a greater understanding of the profession as whole. She looks forward to opportunities to work with Council and ACP in the future.

OMNIBUS MOTION: to accept as information, reports under Agenda Items 4.2, 4.4 and 4.6.

Moved by **Brad Willsey**/Seconded by **Krystal Wynnyk**/CARRIED

4.3 Report from PEBC

Jeff Whissell, ACP's representative on the Pharmacy Examining Board of Canada (PEBC) provided a 2013 mid-year report from the board meeting held October 26, 2013. The following are excerpts from the report highlighting issues addressed, and recommendations made by the Board:

- Feasibility Study on Computerized Testing

The PEBC Board considered the Report of the Feasibility Study on Computerized Testing and recommendations of the Steering Committee which held its final meeting in June 2013. Steering Committee members consisted of Registrar Eberhart, Sam Lanctin, Registrar from the New Brunswick Pharmaceutical Society, Dr David Hill, Dean, University of Saskatchewan and Chair of the Panel of Examiners for the Pharmacist Evaluating Examination; Sharyl Estabrooks, Member of the Panel of Examiners for the PT Qualifying Examination; PEBC Board Members, Dr Lavern Vercaigne (past Board member) and Dr Shawn Bugden; and PEBC staff.

The study consisted of five phases:

- Phase 1: Strategic planning and initial data gathering
- Phase 2: Data gathering: Survey of PRAs and Schools
- Phase 3: Analysis of costs and time frames
- Phase 4: Identification of stakeholder deal breakers
- Phase 5: Development of Feasibility Report

The PEBC Board of Directors accepted, in principle, the recommendations of the Steering Committee. These recommendations included transiting sequences and activities, testing delivery methods, and test models. The Board supported additional work on transitional activities necessary for the development of a business and project plan to be brought forward to the Board for consideration.

- Citizenship and Immigration Canada Federal Skilled Worker Program

Citizenship and Immigration Canada (CIC) Federal Skilled Worker Program (FSWP) will soon be announcing the designation of PEBC as the credential assessment agency for the pharmacy profession in Canada. Last year, PEBC

applied to CIC for recognition in conducting credential assessments for pharmacists under the FSWP. By PEBC assessing credentials under the FSWP, International Pharmacy Graduates avoid duplication as well as additional costs in having their credentials evaluated by a third part agency, in addition to PEBC.

CIC has recently removed pharmacy from the list of needed professionals. As a result, International Pharmacy Graduates applying under the FSWP will need to have a firm job offer endorsed by a province in order to be accepted.

- Canada Not For Profit Act
PEBC has received notice that that Industry Canada has processed PEBC's application for continuance under the Canada Not for Profit Act (CNCA). PEBC will function primarily as a Board of Directors under the new Act.
- PEBC Strategic Plan 2011-2014
As part of the 2011-2014 Strategic Plan, PEBC is exploring the use of electronic drug information references in OSCE stations, as well as electronic scoring in the PEBC performance (OSCE/OSPE) examinations. PEBC is also exploring potential involvement in assessments related to specialty certification and is working with a Blueprint for Pharmacy working group to consider specialty certification in Canada.
- PEBC 50th Anniversary Celebrations
On December 21, 2013, PEBC will turn 50. PEBC is planning a number of events throughout 2014

MOTION: to receive the report from PEBC as information.

Moved by **Kaye Moran**/Seconded by **Brad Willsey**/CARRIED

4.4 Report from NAPRA

Anjali Acharya, ACP's appointee to the Board of Directors for NAPRA submitted the following NAPRA report:

- Entry to Practice Competencies for Pharmacists and Pharmacy Technicians
Both documents have been approved pending acceptance of an amended glossary definition of "physical assessment" and "care plan".
- International Pharmacy Graduate Gateway Project
The International Pharmacy Graduate Gateway Project is ready for launch. Support for IPG's accessing the gateway will be provided by NAPRA. It is hoped that this will provide a clearer and more streamlined process for IPG's when seeking to gain Canadian licensure. NAPRA will launch a communication campaign in the New Year.
- Technician Bridging Program
The Technician Bridging Program continues to be a primary project with NAPRA. NAPRA must consider the following in moving forward:
 - number of students are lower than projected,

- the French language perspective greatly impacted the time and resource commitment and wasn't adequately estimated in sustainability plan,
- waiving fees for access to national curriculum in jurisdictions previously involved not sustainable,
- licensing fees charged may need to be increased with will impact costs to students,
- Alberta, BC and Ontario are provinces that have had fees waived for their resource and time donation to the national bridging program. Changes in the fee structure will have impact in each of these provinces. NAPRA will monitor numbers to keep costs to a minimum and will be talking to provinces about fees and recognition of investments. An alternative in fee structure will be presented in spring/summer and a national funding program for French education will be investigated.

- Key Areas of Activity

- NAPRA underwent a board exercise to evaluate key areas to focus resources in the upcoming year. Those key areas include:
 - o the rolling out of core documents such as the Pharmacy and Pharmacy Technician Entry to Practice Competencies, The National Pharmacy Practice Management Systems, and to begin the process of reviewing the National Standards of Practice for Pharmacists and Pharmacy Technicians.

NAPRA has approved terms of reference and the committee structure to review the current compounding guidelines and work towards national standards for sterile and non-sterile pharmacy compounding. Ms. Acharya submitted copies of the NAPRA Annual Report for 2012 that outlined a further detailed review of NAPRA activities.

See Omnibus Motion under Agenda Item 4.2.

4.5 Report from Lisa Guirguis – Update on the 2013 Prescribing Research, and the 2013 Chat Check Chart Research Program

Lisa Guirguis, Associate Professor & Director of Graduate Studies at the U of A Faculty of Pharmacy and Pharmaceutical Sciences, and Dr. Shao Lee, ACP's Professional Practice Director, made a presentation to Council about research they conducted during 2013: "Supporting the Pharmacists Transition from a Product to Patient Focused Practice" and the 2013 Partnership to Enhance Routine Pharmacy Practice: Chat, Check, & Chart.

The 2013 prescribing research was a qualitative exploration into pharmacists' adoption of prescribing in Alberta, also addressing how to help the entire profession move forward with adopting their expanded scope of practice.

Thirty-eight pharmacists from a variety of practice settings were randomly or purposively selected to discuss their prescribing practices in semi-structured interviews.

The findings noted that a majority of those surveyed, prescribed at least on a weekly basis and there was a variety of reasons why pharmacists would not prescribe such as:

1. In collaborative team practice:
 - pharmacists' recommendation for medication therapy are integrated into the physician's prescription
 - not approved by hospital or region.
2. In community pharmacy:
 - delayed prescribing by faxing the doctor for a refill request.
 - reminding patients to come in early to avoid running out a vital medications.

The research identified three types of prescribing models:

- Product focused - where a pharmacist expends stable therapy or ensures an adequate supply,
- Disease focused - pharmacist adapts prescription that are protocol or disease driven,
- Patient focused - pharmacists care is focused on initial patient assessment.

Consensus was reached that it is a personal choice whether a pharmacist adopts the practice of prescribing, however there are factors that influence that choice:

- Innovation,
- A pharmacist's beliefs shaped their prescribing,
- System readiness including support, time and dedicated resources as well as system-innovation fit,
- Communication: Across all practice settings, "Relationships with Physicians" impacted prescribing behaviors.

In the majority of cases, prescribing has not altered core patient care practices, however often a pharmacist's practice shapes the use of prescribing.

4.6 A Review of the Oncology Underdosing Incident – Thiessen Report

Registrar Eberhart updated Council on discussions with NAPRA and Alberta Health about adoption and implementation of recommendations from this report. Ontario has accepted all the recommendations in the report. Individual recommendations may be considered in each province by government and the respective pharmacy regulatory authority. NAPRA will consider the recommendations when reviewing policies and standards.

Alberta Health has not prioritized consideration of the recommendations. Further discussion is warranted as to whether amendment to the *Pharmacy and Drug Act* should be pursued, allowing ACP to regulate hospital pharmacies; and if not, what alternative approach to accountability might government consider.

See Omnibus Motion under Agenda Item 4.2.

4.7 Introduction to Social Media

ACP launched its presence on Facebook and Twitter on August 15, 2013. Facebook targets members of the public, while Twitter is targeted at registrants and complements the other communication tools used by ACP to enhance our ability to provide news, information and current events about pharmacy practice. Engagement through social media continues to grow and to date has been a great success. ACP has developed policies and good practices to support Council's use of these new mediums for communication.

5. Evaluation of Meeting

5.1 Self-Evaluation of Council Performance at this Meeting

President Olstad requested that all Council Members complete the electronic meeting evaluation form and submit them to Leslie Ainslie for collation and review at its next council meeting.

5.2 Summary of Results for the October 2 and 4, 2013 Council Meeting

A summary of the October 2013 council meeting was circulated with the agenda for information.

6. Adjournment

6.1 Next Meeting Dates

- 6.1.1 April 9-10, 2014** - Council meeting - Edmonton
- 6.1.2 May 22-23, 2014** - Tri-Profession Symposium - Edmonton
- 6.1.3 June 11, 2014** - Annual General Meeting – Edmonton
- 6.1.4 June 12, 2014** - Council meeting - Edmonton
- 6.1.5 June 12, 2014** - Installation of President - Edmonton
- 6.1.6 June 13-14, 2014** - Inaugural leadership forum - Edmonton

6.2 Adjournment

MOTION: that this meeting of Council be adjourned.

Moved by **Pat Matusko**/Seconded by **Kamal Dullat**/CARRIED

Meeting was adjourned at 4:38 p.m.