

MINUTES
MEETING OF COUNCIL
ALBERTA COLLEGE OF PHARMACY
June 13 – June 14, 2023
Edmonton, Alberta

1.1 Call to Order

President Pfeiffer called the meeting to order at 8:03 a.m. She recognized the ancestral lands on which Council gathered, those of Treaty 6 territory. She welcomed Meredith Robertson, Senior Policy and Legislative Advisor, and Gauhar Ali, pharmacy summer student, attending as observers. Joining council discussions were Dr. Jaris Swidrovich, Chair, Indigenous Pharmacy Professionals of Canada for a discussion about Indigenous pharmacy education and patient care; and, Melissa Dechaine, Competence Committee Chair and Pamela Timanson, Director of Competence, who presented the Committee's semi-annual report.

President Pfeiffer asked Council Members to reflect on governance policy GP-8 Code of Conduct and consider any potential conflicts of interest they may need to disclose. No conflicts were disclosed.

The business meeting of Council was held over two days. On Tuesday June 13, the meeting adjourned at 3:47 p.m. On Wednesday, June 14, the business meeting of Council reconvened at 8:30 a.m. and adjourned at 1:57 p.m.

MOTION: to recess the June 13, 2023 business meeting of Council and reconvene on 8:30 a.m. on June 14, 2023.

Moved by **Dana Lyons**/CARRIED

1.2 Roll Call

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

- District 1 - Peter Macek (Past-President)
- District 2 - Patrick Zachar (President-Elect)
- District 3 - Fayaz Rajabali
- District 4 - James Frobb
- District A - Laura Miskimins
- District B - Dana Lyons
- Public Member - Irene Pfeiffer (President)
- Public Member - Christine Maligec
- Public Member - Carmen Wyton
- Public Member - Deb Manz
- Public Member - Jason West

Absent:

- District 5 - Shereen Elsayad
- Public Member - Jane Wachowich (Executive-Member-at-Large)

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
- Jaris Swidrovich, Chair, Indigenous Pharmacy Professionals of Canada (June 14, 8:30-9:30am)
- Melissa Dechaine, Competence Committee Chair (June 13, 11:00-11:30am)
- Pamela Timanson, Competence Director (June 13, 11:00-11:30am)
- Meredith Robertson, Senior Policy and Legislative Advisor (Observer)
- Gauhar Ali, Pharmacy Summer Student (Observer)

1.3 Invocation

Councillor Fayaz Rajabali read the council invocation.

1.4 Adoption of the Agenda

1.4.1 Consent Agenda

Registrar Eberhart provided an Information Update report for Council's review and acceptance. President Pfeiffer invited questions; however none arose.

1.4.1.1 Policy Report - NIL

1.4.1.2 Update Report

MOTION: to accept the Information Update Report presented by the Registrar.

Moved by **Deb Manz**/Seconded by **Christine Maligec**/CARRIED

1.4.2 Additions to the Agenda

MOTION: to adopt the agenda as circulated.

Moved by **Dana Lyons**/Seconded by **Christine Maligec**/CARRIED

1.5 Minutes from Previous Meetings

1.5.1 Minutes - April 27, 2023

MOTION: to approve the April 27, 2023 minutes of council as circulated.

Moved by **Christine Maligec**/Seconded by **Patrick Zachar**/CARRIED

1.6 Disposition of Directives

President Pfeiffer invited questions; however none arose.

MOTION: to approve the April 27, 2023 Disposition of Directives as circulated.

Moved by **Christine Maligec**/Seconded by **Deb Manz**/CARRIED

1.7 In Camera

1.7.1 CR-5 Review of Registrar's Performance

Council reviewed the performance of the Registrar during the past year in context with policy CR-5 Monitoring Registrar Performance. The Registrar and other members of the administrative team excused themselves from the meeting during the review and deliberation about the policy.

MOTION: that Council move "In Camera".

Moved by **Deb Manz**/Seconded by **Christine Maligec**/CARRIED

MOTION: that the Registrar has complied with policy CR-5 Monitoring Registrar Performance.

Moved by **Patrick Zachar**/Seconded by **Deb Manz**/CARRIED

MOTION: to support the establishment of a succession planning committee.

Moved by **Deb Manz**/Seconded by **Patrick Zachar**/CARRIED

MOTION: that Council move “Out of Camera”.

Moved by **Deb Manz**

President Pfeiffer will meet with Registrar Eberhart to discuss and present a written synopsis of Council’s discussion and assessment.

2. Generative

2.1 House of Commons Standing Committee on Health – “Addressing Canada’s Health Workforce Crisis”

Council continued its generative discussion about Canada’s workforce crisis arising from the report from the House of Commons Standing Committee on Health. Within pharmacy, the issue is more than a simple shortage of human resources. Pharmacy professionals want to have a healthier work/life balance and therefore are no longer prepared to work extended hours. The workplace culture and the expectations of employers and patients will need to adapt accordingly.

At the spring ACP CONNECT meetings, regulated members were asked how their practices had changed since 2019, what they believe contributed to this, and what changes they had made to adapt to the new environment. Common themes cited by participating registrants were increasing access to registration for internationally trained health professionals, promoting increased capacity and affordability for domestic education and training of health professionals, and improving practice conditions to support the mental and physical well-being of health professionals.

It was observed that we likely don’t know enough about this problem, both qualitatively and quantitatively. More information and data is required to assist in defining the problem; if we don’t fully understand it, then it’s not possible to effectively resolve it. Further, it was suggested that we might catalyze the need for creativity, if we were to assume that it was not likely to significantly increase the current number of pharmacy professionals within a meaningful time period. Council agreed that however the problem is defined, ACP does not “solely own it”. Once better understanding it, there are likely strategies that ACP can undertake to positively impact it, and there are others that ACP may influence other organizations to undertake.

Absent of the definition required, following are some of the discussions of Council.

Opportunities for ACP to Influence Human Resource Capacity

- Engage with government to:
 - encourage the implementation of a fully functional electronic health record.
 - recommend amending labour standards to include pharmacy professionals.
 - where and when appropriate, make recommendations to optimize or expand scopes of practice for pharmacists and pharmacy technicians.
 - recommend increased funding for educational institutions.
- Collaborate with corporate owners to address pharmacy professional burnout.

- Engage with the Faculty of Pharmacy and Pharmaceutical Sciences, University of Alberta and pharmacy technician colleges about prohibitive tuition fees.
- Engage with Indigenous leaders and youth to encourage and support an interest in the pharmacy professions to better serve Indigenous communities.

Opportunities for ACP to Make Changes that could Impact Human Resource Capacity

- Engage with the Alberta Pharmacists' Association (RxA) and the Pharmacy Technician Society of Alberta (PTSA) to develop tools or, jointly direct regulated members to available resources and tools to support workplace wellness.
- Reduce barriers to licensure. Make training and evaluation more accessible and affordable. Consider how access to the CCCAP program may be improved.
- Evaluate the licensing of pharmacies. Are there too many licensed pharmacies in urban settings?
- Consider including some minimum standards in the SOLP to prevent pharmacy burnout.

There was consensus that Council should further explore this problem through an innovative lens. Council agreed that ACP should host a facilitated multi-sectoral forum to further learn about capacity deficiencies in pharmacy human resources, and to explore innovative alternatives to address these. Registrar Eberhart will develop a plan and report to Council in September.

2.2 Virtual Discussion with Indigenous Leader – Dr. Jaris Swidrovich – Chair, Indigenous Pharmacy Professionals of Canada

Council continued its learning journey about Indigenous culture and the Calls to Action in the Truth and Reconciliation Commission's report. With a focus on becoming more inclusive when considering public and pharmacy policy, Council invited Dr. Jaris Swidrovich, Chair of Indigenous Pharmacy Professionals of Canada. Dr. Swidrovich is an Assistant Professor, Teaching Stream, at the Leslie Dan Faculty of Pharmacy, University of Toronto. He is a Two Spirit Saulteaux First Nations and Ukrainian man and pharmacist from Yellow Quill First Nation. Dr. Swidrovich is the first and only self-identified Indigenous faculty member in pharmacy in Canada. His areas of research and practice include HIV/AIDS, substance use disorders, 2SLGBTQ+ health, Indigenous health, social determinants of health, pharmacy practice, and pharmacy/health professions education. Dr. Swidrovich is also a PhD Candidate in Education at the University of Saskatchewan, where he is studying Indigenous Peoples' experiences with pharmacy education in Canada.

Before addressing the Indigenous communities' experiences with pharmacy, he gave a poignant address on the many physical and mental health challenges Indigenous peoples continue to face today. Dr. Swidrovich stressed that in order to support Indigenous peoples to move forward to a place of healing, and not get or remain "stuck" in the past, Canadians truly need to learn, and more importantly understand, the "language" of Indigenous peoples and their communities, brought on by the atrocities enacted in the past.

Although there are good intentions for truth and reconciliation, Indigenous peoples remain at the bottom of almost every available index of socio-economic well-being. Pharmacy professionals have a role to play in providing accessible care to Indigenous peoples to close the gaps in health outcomes between Indigenous and non-Indigenous peoples. He suggested that pharmacy should embrace all 94 Calls to Action in the TRC. Dr. Swidrovich emphasized that these are "calls to action" not "recommendations for action". Relevant to the health professions, he noted that Calls to Action 23 and 24 state:

23. We call upon all levels of government to:
 - i. Increase the number of Aboriginal professionals working in the health-care field.
 - ii. Ensure the retention of Aboriginal health-care providers in Aboriginal communities.
 - iii. Provide cultural competency training for all healthcare professionals.
24. We call upon medical and nursing schools in Canada to require all students to take a course dealing with Aboriginal health issues, including the history and legacy of residential schools, the United Nations Declaration on the Rights of Indigenous Peoples, Treaties and Aboriginal rights, and Indigenous teachings and practices. This will require skills-based training in intercultural competency, conflict resolution, human rights, and anti-racism.

Indigenous youth face many challenges pursuing a secondary education with little support from the grossly underfunded resources available for all youth struggling with mental health issues. Another issue is when Indigenous youth consider opportunities for secondary education, exposure to pharmacy professionals is limited or non-existent. Across Canada there are less than 10 pharmacies on reserves. Most prescriptions are mailed to patients without ever having an assessment, so the Indigenous youth are not seeing themselves reflected in these professions.

Dr. Swidrovich recommended the following strategies to encourage enrolment in pharmacy education and training programs:

- increased pharmacy visibility in Indigenous communities,
- early intervention and career guidance from peers and mentors,
- financial support,
- equitable education seats in educational institutions,
- shifting to a less unilateral focus on Western medicines and knowledge systems,
- guaranteed entry and work experience opportunities upon graduation.

In closing, he encouraged Council and ACP staff to continue their learning journey by following these good practices:

- be curious,
 - what does equity actually mean,
 - learn about the “Treaties” and how they impact Indigenous and non-Indigenous peoples,
 - continue to invite Indigenous folks to strategic discussions and engage in sharing or talking circles with elders, knowledge keepers and communities,
 - research papers with western and Indigenous worldviews in pharmacy, education, and practice.
- evaluate organizational practices to support truth and reconciliation by doing something “with” instead of “for” Indigenous peoples,
- celebrate and share what you’re doing as an organization to recognize National Indigenous Peoples Day,
- reflect on the celebratory practices of Canada Day and its impact on Indigenous peoples,
- support Indigenous pharmacy scholarships,

At conclusion of the discussion, Council recommended a continuum of EDI training for regulated members, Council and ACP administration. Registrar Eberhart will engage with the Faculty of Pharmacy and Pharmaceutical Sciences and pharmacy technician colleges to consider ways to

foster and support increased awareness and enrolment of Indigenous youth in the pharmacy professions.

2.3 Improving Patient Care – Exploring the Feasibility of System-based Opportunities

Council's generative discussion focused on opportunities for safe and effective patient access to narcotics and controlled substances; in a manner that mitigates risk to individuals, our communities, the health system, and the practice of pharmacy.

Controlled substances are therapeutically useful providing that prudence is exercised by health professionals when prescribing and dispensing these drugs. Therefore, safety and effectiveness depend on human and system factors. In the case of pharmacy, risk may be escalated when:

- pharmacy teams fail to provide ethical and professional services in compliance with ACP standards;
- pharmacy teams do not have current and complete information about patients using drugs, and in this case, controlled substances; and,
- pharmacies fail to upload data to NETCARE in a timely manner, or when incorrect data is uploaded to NETCARE, resulting in incomplete or incorrect records.

ACP does not have data to quantify the relative risk of any one of these sources. Some data is available about the number of forged prescriptions (those identified and reported), the number of pharmacies having real-time integration with NETCARE, Controlled Drug losses, and prescribing trends by pharmacists.

Council members observed that:

- Approximately 50% of pharmacies have real time integration to NETCARE, enabling “live” updates of patient data as it is collected. Why is the other 50% not uploading; and what are the possible consequences?
 - Real time integration provides more timely and accurate information, to identify individuals who may be “doctor shopping” for prescriptions or generating fraudulent/forged prescriptions.
- Although pharmacy teams are doing an incredible job in intercepting forged prescriptions;
 - how many of these prescriptions are too sophisticated to identify?
 - are there trends with forged prescriptions, i.e. more written in urban versus rural communities?
 - what proportion of these prescriptions are faxed to pharmacies?
 - what proportion of pharmacies are targeted that don't use NETCARE?

Council agreed that more information is required to understand the problem that we are trying to solve. While society is being negatively impacted by drug misuse and abuse, Council did not have information to understand what arose from within the health system, and specifically pharmacy practice, versus criminal activity. Future discussions and information provided must be through the lens of patient risk versus patient care.

Striking the balance between providing controlled substances and narcotics essential to support patient care, while minimizing the potential for misuse or abuse, is important to health and public safety. Controlling diversion and non-medical use must not interfere with the proper use of these often essential medicines. Across Canada governments and regulators continue to develop and deploy strategies and programs to mitigate risk and support patient care. ACP will continue to inform and support pharmacy teams through a continuum of education and resources.

3. Strategic

3.1 Ownership Linkage – What’s on the Minds of our Moral Owners? - Engagement with Albertans

Council identified the importance of Council’s engagement with interested parties and Albertans outside of their daily practice to learn about their pharmacy experiences, their beliefs about pharmacy practice and services that pharmacy professionals may provide to better address their personal health needs. During the discussion, the following observations were made:

- The consultation on the proposed standards is garnering a lot attention most of which is centered around ‘personal services’. That said, the comments have been received from registrants, who have failed to recognize that personal services can be provided by anyone who meets the requirements of the Personal Service Regulation.
- A Council Member recognized and shared a story about a pharmacist who supported a vulnerable Albertan; waiting 45 minutes after close of their pharmacy to support their care. Vulnerable communities need extra help.
- Council inquired about support for fire victims requiring assistance, similar to those put in place for the Fort McMurray fires and the pandemic (i.e.: section 56 exemptions). ACP needs to communicate with registrants about how to support these patients in times of crisis.
- The issue of single use plastics in pharmacies is an environmental issue whether that be with respect to prescription bottles, inhalers, etc. What role can ACP play to influence pharmaceutical companies to use other means of delivering these to patients. Is there any information or research showing the environmental impact of pharmacy practices.
- How might we get a broader public perspective about their awareness of the college, and to the extent they feel “protected”?
- What is the public’s risk tolerance? Does the public understand risk that is associated with various procedures and services? Is this important to better understanding roles that pharmacists and pharmacy technicians pursue?
- Might ACP consider a “patient advisory committee” or can ACP benefit from the effort of patient advisory committees established by other groups?
- Optimally, we might identify important discussions through engagement with our morale owners, to stimulate generative discussions.

3.2 Standards for the Operation of Licensed Pharmacies (SOLP) – Proposed Domains

Prior to amending the DRAFT Standards of Practice for Pharmacists and Pharmacy Technicians, Council approved the principles to guide their development. A similar methodology is proposed in developing the SOLP.. Deputy Registrar Whissell referred Council to the briefing document that outlines the five domains proposed for developing the SOLP. He noted that a common graphic and language were used to build connectivity between the SPPPT and the SOLP.

Descriptions for each domain are in a preliminary DRAFT form, and subject to amendment.

- Professionalism and leadership - demonstrated by regulated members through altruism and ethical conduct to promote the health of individuals and their communities across the continuum of care. Proprietors and licensees understand their distinct roles and responsibilities and regulated members are empowered and enabled to exercise professional judgement to fulfill their professional responsibilities.

- Practice environment - licensed pharmacies provide an environment for the delivery of healthcare services to patients. They are required to be professional in design and appearance. Proprietors ensure the safety of staff, patients, and the public by providing pharmacy teams the necessary infrastructure, equipment, technology, and resources.
- Professional services - professional services are delivered in a manner that adheres to the legislative framework, and supports the health, safety, privacy, and wellbeing of patients, pharmacy staff, and the public. Proprietors and licensees staff the pharmacy with the appropriate number of trained staff required to safely and effectively provide the professional services offered in the pharmacy.
- Information management - patient care is supported by proprietors providing regulated members the equipment and technical solutions they need to deliver professional services in their pharmacy. Information management systems allow regulated members to securely create, maintain, store, retrieve, and share required records.
- Continuous quality assurance and quality improvement - continuous quality assurance and quality improvement enable the safe delivery of patient care which enhances patient trust in pharmacy practice. Continuous quality improvement identifies risks from pharmacy practice and operational activities in an effort to mitigate them before practice incidents occur.

Council accepted the five domains to support the development of the amended DRAFT Standards for the Operation of Licensed Pharmacies. The DRAFT standards will be brought before Council at the December 2023 meeting.

MOTION: to accept the five domains presented to develop the DRAFT Standards for the Operation of Licensed Pharmacies.

Moved by **Peter Macek**/Seconded by **Dana Lyons**/CARRIED

4. Fiduciary

4.1 ENDS and Executive Limitation Policies

4.1.1 Policy E-2 (Resource Allocation) – Priorities for 2024

Registrar Eberhart and Senior Director of Operations and Finance Rob Vandervelde provided a status update on priorities for 2023, identified potential priorities for 2024, updated Council on business plan development; and identified critical success factors, and risks that could impact the plan. Council did not provide direction to amend the proposed draft priorities. These will be incorporated in the draft budget and business plan that Council will consider at the September meeting.

Proposed 2024 Priorities

Legal Framework

- SPPPT standards come into effect with commencement of implementation activities.
- Consultation, approval and implementation of SOLP.
- Review legislation in context with emerging practices and health system needs, and develop policies to support recommended legislative changes.

Meeting Practice Expectations

- Build a new platform to implement the revised SPT programs to pilot in 2025.
- Work with U of A Faculty to improve accessibility of the CCPP program.
- Launch the next generation of the Licensee Education Program with introduction of licensee assessment tools.

- Full operationalization of the PIP and all strategic development work to date (training, assessment, program rules) including potential changes to the Continuing Competence portal.

Data Intelligence

- Undertake Medication Incident Reporting project plan in order to develop platform and resources to pilot in 2025.
- Refine and populate operational dashboards, with commencement of first analytics projects.
- Undertake governance reporting project plan and receive direction from Council on the content and format of a governance reporting tool.

Senior Director Vandervelde provided an update on the progress of the Strategic Plan goals within the materials provided with the agenda. He advised that “ACP has made significant progress in advancing the new Strategic Plan, despite the demands of implementing the myACP system and responding to other externally mandated legislative and regulatory requirements. While delays and challenges have arisen, the milestones are significant steps forward in creating a modern legal and regulatory framework, ensuring that all practitioners are prepared for practice to deliver consistent patient experiences, and building a foundation for business intelligence.”

Queries posed by Council during this discussion include:

- How do we capitalize on “thought leadership”.
- Are there additional steps that ACP can take to be fiscally responsible?
- Can regulated members keep up with the current pace of change?
- Does ACP have the capacity to deliver on this aggressive strategic plan?
- If we wish to add new initiatives, we need to understand why they are important; do they fit with our current strategic goals, and if they don’t and are determined to be more important, what should be deleted?
- ACP should consider 3 year plans in the future, as commitment to a 5 year plan limits flexibility and nimbleness to respond to emerging issues and needs.

Council accepted the proposed priorities for 2024. Final approval will be sought in September when Council considers the three-year business plan, and budget for 2024. In 2024, Council will begin its discussions to develop a three-year strategic plan for 2026-2028.

4.2 Compliance Monitoring and Reports

4.2.1 Executive Limitations – Compliance Reports

A report from the Registrar was provided for the following Executive Limitation policy.

4.2.1.1 EL-4 Financial Condition - Internal

Council received internal Financial Statements and a Statement of Variances for the month ending April 30, 2023.

Rob Vandervelde, Senior Director of Operations and Finance shared that myACP bridged people, processes and technology. He verified that data shared externally was registration information that is legally publicly accessible. Further, registrants provide consent at the time of annual permit renewal to allow other uses of their registration information.

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

Moved by **Christine Maligec**/Seconded by **Patrick Zachar**/CARRIED

4.2.2 Council-Registrar Relationship Policies (CR) Compliance Reports

Council-Registrar Policies (CR) define the working relationship between the Council and the Registrar. Council reviewed policy CR-4 Delegation to the Registrar and CR-5 Monitoring Registrar Performance and reflected on its compliance with the policies.

4.2.2.1 CR-4 Delegation to Registrar

MOTION: that Council is in compliance with CR-4 Delegation to the Registrar.

Moved by **Laura Miskimins**/Seconded by **Patrick Zachar**/CARRIED

4.2.2.2 CR-5 Monitoring Registrar Performance

This agenda item was discussed under Agenda Item 1.7.1.

4.3 ACP Strategic Plan – Semi-annual Update

Rob Vandervelde, Senior Director of Operations and Finance provided a semi-annual update on the strategic plan under Agenda Item 4.1.1. He referred Council to the briefing document included with the agenda for details.

4.4 Business of Council

4.4.1 Corporate Assurance – Exercising Diligence in Corporate Appointments

In April, Council was introduced to assurance work undertaken to support decisions about the appointment of ACP's auditors, bankers, and investment counsel based on industry best practices. Senior Director Operations and Finance Rob Vandervelde briefed Council with a about his findings.

4.4.1.1 Auditors

Further to Council's discussion at the April 2023 council meeting, ACP leadership recommended that Council reappoint KPMG as ACP's auditor for the 2023-2024 council term. This recommendation is based on considerations of audit quality (supported by KPMG's integrity, independence, knowledge & skills, and rigorous audit processes) and quality of service (evidenced by flexibility in scheduling, good communications, and value for money).

4.4.1.2 Bank

Rob Vandervelde, ACP's Senior Director of Finance and Operations, performed an environmental scan on banking and investment services and fees of major Canadian financial institutions. ACP leadership recommended that Council appoint the Royal Bank of Canada (RBC) as its financial institution and Philips, Hager & North (PH&N) as investment counsel for the college. In addition, based on the findings of the RFPs from the financial institutions, ACP administration will conduct a further environmental scan to determine an equitable solution to manage its merchant accounts..

4.4.2 Corporate Appointments

4.4.2.1 Legal Counsel

MOTION: to appoint Shores Jardine LLP as ACP legal counsel for the 2023-2024 council term, and to appoint Field Law and Reynolds, Mirth, Richards and Farmer, as independent legal counsel to tribunals, appeals and review panels for the 2023-2024 council term.

Moved by **Christine Maligec**/Seconded by **Peter Macek**/CARRIED

NOTE: ACP will do an environmental scan of legal firms in Edmonton with experience in regulatory law. Success depends on accessibility to services, capacity to deliver quality, and the firms effectiveness.

4.4.2.2 Auditors

MOTION: to appoint KPMG as auditors for the Alberta College of Pharmacy for the 2023-2024 council term.

Moved by **Deb Manz**/Seconded by **Peter Macek**/CARRIED

4.4.2.3 Banking Institution

This agenda item was considered under Agenda Item 4.4.1.2.

MOTION: to appoint the Royal Bank of Canada (RBC) as financial institution for the college; to be transitioned by January 1, 2024, and, that the college will further research a provider for its investment account that may be separate from RBC.

Moved by **Carmen Wyton**/Seconded by **Deb Manz**/CARRIED

Note: ACP will research alternatives to fulfill its merchant account requirements, with lower fees for credit card processing.

4.4.2.4 Investment Counsel

This agenda item was considered under Agenda Item 4.4.1.2.

MOTION: to appoint Philips, Hager & North (PH&N) as investment counsel for the college; to be transitioned by January 1, 2024.

Moved by **Carmen Wyton**/Seconded by **Deb Manz**/CARRIED

4.4.2.5 Signing Authority

MOTION: that Greg Eberhart, Kaye Moran, Jeff Whissell, Rob Vandervelde, and Patrick Zachar, be granted signing authority on behalf of the college for the 2023-24 council term. ACP requires dual signatures on all financial transactions. All cheques for amounts greater than \$15,000 must include the signature of the Registrar; or in his absence, a Deputy Registrar's signature.

Moved by **Peter Macek**/Seconded by **Dana Lyons**/CARRIED

4.4.3 Committee Appointments

4.4.3.1 Hearing Tribunal Pool

The Hearing Tribunal Pool consists of pharmacists and pharmacy technicians from which ACP's Hearings Director selects panels to consider hearings under the *Health Professions Act* and the *Pharmacy and Drug Act*. Registrar Eberhart recommended the following appointments to the Hearing Tribunal Pool.

- That Tanner Bengry, Rhonda Bodnarchuk, Brad Couldwell, and Lisa Lix, be reappointed to the Hearing Tribunal Pool for an additional three-year term, commencing July 1, 2023 and ending June 30, 2026.
- That Dana Lyons, Fayaz Rajabali and Don Ridley, be appointed to the Hearing Tribunal Pool to serve a three-year term, commencing July 1, 2023, and ending June 30, 2026, with each being eligible to be appointed for a second three-year term.
- That Kelly Olstad be reappointed to the Interim Condition/Suspension Committee (Section 65) for an additional three-year term commencing July 1, 2023 and ending June 30, 2026.
- That Naeem Ladhani and Jennifer Teichroeb be appointed to the Interim Condition/Suspension Committee (Section 65) for a three-year term commencing July 1, 2023 and ending June 30, 2026.

It was noted that vacancies remained on the Hearing Tribunal Pool, and that these would be addressed after council elections concluded.

4.4.3.2 Nominating Committee

The Nominating Committee is responsible for:

- Searching for and recommending applications for nominations for election to council;
- nominating Council Members to executive positions for the college; and,
- to provide stewardship over the nomination and selection process for public members.

It was recommended that Deb Manz (Chair)(Public Member), Peter Macek (Council Member) Jason West (Public Member), and Dana Lyons (Past Council Member) be appointed to ACP's Nominating Committee for the 2023-24 council term.

This recommendation is aligned with the Committee's revised Terms of Reference approved by Council at the January 28, 2021 meeting.

4.4.3.3 Competence Committee

The Competence Committee is responsible for its role within the Continuing Competence Program established under the *Health Professions Act*, and as approved by Council.

Registrar Eberhart recommended the following appointments to the Continuing Competence Committee.

- That Brittany Audette be re-appointed to a second three-year term, commencing July 1, 2023, and ending June 30, 2026.
- That Jennifer Teichroeb serve as chair of the Competence Committee for a one-year term commencing July 1, 2023 and ending June 30, 2024,
- That Brittany Audette be appointed for a one-year term as vice-chair of the Committee commencing July 1, 2023 and ending June 30, 2024.
- That Randeeep Kaur be appointed for a two-year term, commencing July 1, 2023 and ending June 30, 2025.

OMNIBUS MOTION: to approve the appointments to the Hearing Tribunal Pool, the Interim Condition (Sec.65) Suspension Committee, the Nominating Committee and Competence Committee as presented.

Moved by **Christine Maligec**/Seconded by **Jason West**/CARRIED

4.5 Unconscious Bias

Council has been on a journey to explore “unconscious bias” with a goal to better inform and support its discussions and policy decisions. Often, the framing of discussion includes “assumptions” that may or may not be an indicator of bias. If so, the bias may be explicit within the assumption (and therefore no longer unconscious), or it may be implicit, inviting more exploration.

In September 2022, at conclusion of ACP’s board development session on “unconscious bias”, some Council Members suggested that ACP was unconsciously biased toward pharmacy technicians. In the interest of the overall culture of Council, President Pfeiffer and Registrar Eberhart engaged Dr. Brian Woodward to explore this further to understand the root of the commentary.

Council was provided a briefing note outlining the findings of Dr. Woodward, including opportunities for learning., Ultimately, we wish to continue growing and improving council “as a whole”. Council has potential to make better decisions when everyone is conscious of our unconscious biases. Council will invest in a continuum of board development sessions that supports personal self-reflection, learning, and opportunities for enhanced group dynamics.

During the discussion, Council provided the following comments and questions:

- How do we improve “teamwork?”
- Council Members must want to be here. Why have some chosen to not attend meetings?
- How do we carry on a culture of respect?
- How do we know if we have asked the right questions?
 - Can the college benefit from a structured policy analysis tool?
- Bias is normal; everyone has it.
 - Good practice is to accept that it exists, and to be disciplined to reveal it.
- We don’t know what we don’t know.
- How do we address “behavioral and structural” opportunities?

4.6 Report from the Governance Policy Review Committee

Councillor Fayaz Rajabali, Chair of the Governance Policy Review Committee, provided the Committee’s final report on its review of the governance policies conducted during the 2022-23 council term. The Committee’s report included a summary of the proposed amendments and with a redline and clean version of each governance policy. The Committee found that most of ACP’s governance policies were highly relevant; however, amendment was warranted in many to minimize redundancy and enhance clarity. In addition, one new policy was proposed.

MOTION: to accept the report and recommendations of the Governance Policy Review Committee.

Moved by **Carmen Wyton**/Seconded by **Christine Maligec**/CARRIED

OMNIBUS MOTION: to approve the minor amendments to policies E-1, E-2, GP-1, GP-2, GP-5, GP-6, GP-11, GP-12, GP-13, GP-14, CR-2, CR-3, and CR4.

Moved by **Christine Maligec**/Seconded by **Jason West**/CARRIED

OMNIBUS MOTION: to approve the substantive amendments to policies GP-3, GP-4, GP-8, GP-10, CR-5 and the new Council Relationship policy CR-6.

Moved by **Carmen Wyton**/Seconded by **Deb Manz**/CARRIED

MOTION: to retain AD&D coverage or equivalent coverage for Council and Committee Members.

Moved by **Dana Lyons**/Seconded by **Christine Maligec**/CARRIED

MOTION: Council will establish a separate process to review the appendix of GP-14 Recognizing Excellence.

Moved by **Peter Macek**/Seconded by **Dana Lyons**/CARRIED

MOTION: to appoint a standing Governance Committee.

Moved by **Carmen Wyton**/Seconded by **Dana Lyons**/CARRIED

Note: ACP administration will explore tools to track annually, Council's monitoring of its governance policies for compliance and potential amendment.

Registrar Eberhart will develop Terms of Reference for a Standing Governance Committee and a Working Group to review the Appendix to policy GP-14 Recognizing Excellence, for consideration at the September council meeting.

4.7 Report from the Competence Committee

Melissa Dechaine, Competence Committee Chair, and Pamela Timanson, ACP Competence Director, provided the Committee's semi-annual report, providing a review of the Committee's activities and trends observed within the Program for pharmacy technicians.

The Committee observed that:

- Less than 1% of pharmacy technicians are referred to the program, and only one has been referred to the Competence Committee.
- Pharmacy technicians continue to submit very traditional activities for their competence profiles, suggesting that a large number of pharmacy technicians do not like to work outside the traditional scope of practice, so their competency portfolios are more "skills based". If this is done year after year, pharmacy technicians will always meet the criteria of the program but will not necessarily be assessed for competence. The program needs to use other sources to measure competence in the learning portfolio, such as submitting a video or audio story instead of a written submission.
- The Committee has developed tools to provide better support on an individualized basis when pharmacy technicians are referred through the program.
- Promoting peer mentorship is important, either through a peer assessment group, or facilitating one-on-on mentorship opportunities.

Council made the following observations and recommendations:

- what can ACP do to support pharmacy technicians in their quest for learning opportunities,
- retired practitioners are valued resources, is this an opportunity to develop mentorship opportunities.

- is this an opportunity for ACP to communicate about the pharmacy technicians' scope of practice to educate pharmacy teams and the public?
- Can we determine if there is a correlation between audit deficiency, competence deficiency and/or practice deficiency?

The Committee sought approval to amend the Terms of Reference for the Competence Committee. The changes are a result of amendments to legislation that shifts legislative authority for continuing competence programs from legislation to the standards of practice.

MOTION: to approve the proposed amendments to the Terms of Reference of the Competency Committee.

Moved by **Carmen Wyton**/Seconded by **Peter Macek**/CARRIED

4.8 Highlights from the Registration/Competence Portfolio

Deputy Registrar Moran shared insights from the Registration and Competence portfolios and, provided an environmental scan to support Council's stewardship of pharmacy practice in Alberta. She referred Council to the briefing document included with the agenda for details.

4.9 Highlights from the Professional Practice/Complaints Portfolio

Deputy Registrar Jeff Whissell shared highlights from the professional practice and complaints portfolio. He referred Council to the briefing document included with the agenda for details.

4.10 September 13-15, 2023 Council Meeting and Board Development

Registrar Eberhart briefed Council about preliminary plans for the September 13-15, 2023 board development and council meetings. Council expressed their interest in:

- Small group discussion.
- Learning about ourselves; our preferences and how we communicate with others.
- Securing Kathi Irvine with Watershed Inc. to facilitate the September board development session; and,
- Building trust as a foundation for collaboration.

4.11 Highlights from the CLEAR International Conference

President-Elect Patrick Zachar and Deputy Registrars Kaye Moran and Jeff Whissell attended the 7th Annual CLEAR International Conference in Dublin, May 3-6, 2023. This was an opportunity to join regulatory leaders to learn about global trends in professional regulation. The conference included discussion about DEI (diversity, equity and inclusion) initiatives amongst regulators, what it means to demonstrate "compassionate regulation", how regulators are viewing their health HR and capacity challenges; and how global regulatory changes are leading regulators to redefine their roles. More specifically:

- The General Medical Council in Great Britain has developed a methodology to identify individuals whose practice may present risk;
- The Royal College of Veterinary Surgeons Academy has established a program to support veterinarians requiring practice improvement/assistance.
- Regulators need to be "human" in our approach; we must be sensitive to time, our approach, context and prevent our language from being stigmatizing.
- Regulators are redefining their role in addressing HR challenges amongst registrants and potential registrants.

New opportunities for follow-up from the conference include:

- A review of ACP forms through the lens of harm reduction or stigma.

- Consideration of how to best support a registrant who has contributed to a significant medication error that causes serious/long term morbidity or mortality.

4.12 Report from the President

President Pfeiffer reflected on the last six months of her term as President and the business of the College during this time. She shared that her highlight was connecting with registrants during pharmacy visits with President-Elect Zachar and Past-President Macek. She appreciated the innovative and out of the box thinking that pharmacy teams have used to respond to the pandemic and demands that have lingered since. She reflected on the opportunity to communicate with government and noted the significance of pieces of legislation proclaimed such as the *Labour Mobility Act*. She suggested that ACP will need to remain nimble as it rises to meet the requirements and challenges of legislative amendments.

President Pfeiffer appreciated the insights and engagement of registrants at the ACP Connect meetings. To say that pharmacy practice is consistently inconsistent is an understatement and she reflects if Council really knows what this means. She was honored to participate in the White Coat ceremony and celebrate recipients of the RxA APEX Awards.

President Pfeiffer extended her thanks to those that supported her during her term as ACP president. She was grateful for the encouragement and many teachable moments. She recognized the significant contributions of Councillors Dana Lyons and Fayaz Rajabali who served on Council from 2017-2023 and both in the capacity of President. Although absent at the meeting, she thanked Councillor Shereen Elsayad for her contributions on council during her council term from 2022-2023.

5. Evaluation of Meeting

5.1 Meeting Evaluation

Council briefly reflected on their experience at this meeting. Collectively they observed that the agenda was well-designed, and that the necessary information and time was allotted for each discussion to ensure everyone was able to contribute. They recommended that generative discussions be supported with more background information, so that appropriate context for the discussion can be provided.

6. Adjournment

6.1 Forthcoming Events and Council Meeting Dates

- September 13-15 - Board Development and Council Meeting, Buffalo Mountain Lodge, Banff
- December 7-8 - 1.5 day In-Person Council Meeting, Edmonton

6.2 Adjournment

Motion: to adjourn the meeting of council circa 1:47 pm on June 14, 2023.

Moved by **Peter Macek**