

SCOPE newsletter

October 2017



SASKATCHEWAN
COLLEGE OF PHARMACY
PROFESSIONALS

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Community Pharmacy Professionals
Advancing **Safety** in Saskatchewan

COMPASS is Coming!

On November 2, 2017, SCPP will be officially launching the COMPASS CQI Program with a media event that will take place during Canadian Patient Safety Week (CPSW), October 30 to November 3. The media event will begin at 10:30 a.m. at the Shopper's Drug Mart in Victoria Square Mall, Regina. All COMPASS pilot pharmacies, pharmacy staff and the public are invited to attend.

Why a CQI Program?

It is critically important to have a standardized CQI program because it provides pharmacy staff with a systematic method to report, discuss and resolve medication incidents as well as to review and improve pharmacy systems in a manner that will ensure safe medication practices. Saskatchewan is the second province in Canada to implement a CQI program and the College is very proud to be one of the leaders in the country.

A Tool for Patients That Helps Promote the Program

The Institute of Safe Medication Practices (ISMP) Canada and the Canadian Patient Safety Institute (CPSI) has developed a tool for patients to help them engage in the process of ensuring safe medication practices. The tool is called, "5 Questions to Ask about Your Medications."

Please use this simple tool as a method of introducing COMPASS to patients and talking about medication safety practices during patient safety week and beyond.

Resource Ready Material for You

- A copy of the 5 Questions poster can be accessed on the [CPSI website](#) or on the [SCPP website](#).
- Other 5 Questions resources, such as patient pamphlets/bag stuffers, can also be accessed on the CPSI website or the SCPP website.
- A [Medication Safety: A Short Guide for Patients](#) brochure has been developed and can be accessed on the SCPP website. Pharmacy staff are encouraged to print off copies of the brochures and display them within the pharmacy or provide them as a bag stuffer to patients.

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Administrative Assistant

COUNCIL HIGHLIGHTS - SEPTEMBER 20 & 21, 2017

Orientation for new Council Members

On September 20, 2017 Council met in Regina at the new College office to welcome their new Council members – Stephanie Miller (Division 1), Margaret Wheaton (Division 3), Peyman Nemati (Division 5), Doug MacNeill (Division 7) and Bonnie Caven (Public Representative member). The Orientation dinner meeting allowed those in attendance an opportunity to tour the new College office. The meeting gave the new Councillors an opportunity to ask questions about the College, Council processes and gain helpful tips from the veteran Councillors who could share their stories of being “new” and what has helped them during their time on Council.

Council then reconvened the next morning, September 21, 2017 for their regular meeting.

Environmental Scan

During our Environmental Scan, each Councillor shared feedback received from the public or colleagues within their Division, common themes emerged throughout the province:

- Concerns about product recalls and drug shortages still seem to be prevalent across the province
- The Public appears to be more aware of minor ailments and the ability to access this service at their local pharmacy
- Pharmacists are having issues with the new SMAP documentation forms
- Councillors have received positive feedback on the COMPASS training

The Registrar reported:

- Flu season will start October 23, 2017 until March 31, 2018
- Opioid crisis is worsening in Canada
 - Although death rate in Saskatchewan is lower than BC and AB we are seeing an increase of overdoses in our Hospital emergency departments
- SCPP reached 2000 licensed members (Pharmacists and Pharmacy Technicians) in August 2017
- Strategic Goals update

Advancing Public Safety in Pharmacy Services

- i. Increase use of standardized quality assurance process
 - COMPASS bylaws have been approved
 - Implementation and training sessions are underway
 - Media launch is being planned
- ii. Introduce competency assurance program to support quality assurance
 - SCPP is pursuing with CPDPP

Ensuring Priorities and Resources are aligned to Achieve Goals

- i. Implement a comprehensive performance management system
 - Administrative re-organization to align resources with priorities in progress
 - Senior Leadership Team meets monthly
 - Governance/Council/Committee underway

New Role for Public Members on Council

Public members of Council have been asked to serve as an advisory panel to provide SCPP with their perspectives on promotional activities of pharmacies. These may be complaints, expressions of concern or inquiries usually from

Continued next page >

colleagues. As a best practice we will ask our public members to provide the College with their perspectives on activities such as asking their opinions on advertisements in all forms of media, promotional and marketing activities.

Regulated Pharmacy Technician on Council

Council has directed that work begin to develop bylaw amendments to address an electoral process to establish one position on Council for an elected Pharmacy Technician.

Vaccines and Travel Clinics

The office continues to receive calls regarding the establishment of Travel Clinics within pharmacies in Saskatchewan as highlighted in the most recent provincial budget discussions. At that time the government raised the issue of transferring travel clinics from public health to the private sector, including pharmacies. We are expecting a survey from the Ministry intended to identify options and issues. In the meantime, we are being asked to develop a framework of expected competency standards and standards of practice. So for those that have been asking the question regarding travel vaccines and clinics please watch for information as it becomes available.

Cannabis for Medical Purposes

Council accepted the [NAPRA Position Statement](#) on the Role of Pharmacy Practitioners and approved in principle the following SCPP Position:

“Subject to federal legislation authorizing pharmacies to distribute cannabis for medical purposes, or cannabis for medicinal use, SCPP supports distribution through pharmacies in a manner consistent with prevailing standards of practice.

These standards include, amongst other things, distributing cannabis for medical purposes according to best practices and evidence. If considered to be a natural health product, this also means that pharmacists and pharmacy technicians must be competent in

the distribution and medical use, not attribute more credibility to these products other than supported by the evidence, and not promote such products as substitutes for approved pharmaceuticals.

Finally, in accordance with the NAPRA position statement, standards for distribution include relationships with credible suppliers of products of acceptable quality, and participating in research and monitoring into the effectiveness or clinical appropriateness of such products. At a minimum pharmacists and pharmacy technicians contribute sales information to patient specific administrative databases that can be used to correlate use with conditions and optimally therapeutic outcomes. This also means the pharmacies shall not become licensed suppliers by Health Canada as authorized under the current regulatory regime.”

CPDPP Funding Proposal

CPDPP presented a proposal to Council for an increase in funding to the Continuing Education Grant. CPDPP has not had an increase since the establishment of a \$60.00/ licensed pharmacist grant in 2004. Council agreed to consider this proposal further as we develop the 2018 budget. With the operational changes, expanded role (including the addition of Pharmacy technicians) and increased outputs of CPDPP Council agreed that this was a reasonable request and approved the increase.

Report from the Complaints Committee

There were 21 files heard during the committee’s meeting on September 12, 2017:

- 2 files were closed
- 1 new file was referred to an Alternate Dispute Resolution (ADR) process (4 in total)
- 4 files were referred to the Discipline Committee
- 11 files remain open for continued investigation

Council’s next meeting will be held December 14th & 15th in Regina.

MISSION

The Saskatchewan College of Pharmacy Professionals serves the public interest by regulating the profession of pharmacy to provide safe, competent pharmacy care in Saskatchewan.

VISION

Advancing quality pharmacy care for a healthier Saskatchewan

VALUES

Professionalism
Accountability
Visionary Leadership
Collaboration
Education

GOALS

Advancing Public Safety in Pharmacy Services
Ensuring Priorities and Resources are aligned to Achieve Goals
Maintaining a Self-Regulated Profession
Increasing Recognition of Pharmacy Professionals as Essential Members of the Health Care Team
Supporting Health Care Public Policy

COMPASS is coming! – continued from page 1

FAQ's. Patients are bound to have questions and SCPP is here to help you provide the answers. See the two FAQs (one for pharmacy professionals and one for patients) designed to help pharmacy staff answer questions about COMPASS and CQI programs. The FAQs are also available on the [SCPP website](#) under the COMPASS Safety Resources.

- An email was sent out last week to assist pharmacies to become COMPASS ready. A copy of the [Be COMPASS Ready!](#) document linked in the email can also be accessed on the SCPP website.

A Program We Can All be Proud to Support

The implementation of the COMPASS program is a milestone event for Saskatchewan community pharmacies. It is an opportunity to collaborate within the profession as well as externally through shared learning to ensure safe medication practices.

We encourage all pharmacy staff to join with SCPP in launching COMPASS during Canadian Patient Safety Week through utilization of the 5 Questions resources as well as the other pharmacy resources.

If you have questions or require further information regarding the launch or any of the resources or tools please contact Jeannette Sandiford at jeannette.sandiford@saskpharm.ca.

COMPASS Bylaw Update

On Aug 25, 2017, the SCPP Continuous Quality Improvement (CQI) regulatory bylaw was published in The Saskatchewan Gazette and will come into effect on December 1, 2017. Once the bylaw comes into effect, all Saskatchewan community pharmacies will be required to meet the requirements set out in the bylaw for a continuous quality improvement program.

The purpose of a mandatory continuous quality improvement program in all Saskatchewan community pharmacies is to ensure that pharmacy staff members have a standardized method to report, discuss and resolve medication incidents. Reporting incidents to a national database also allows for shared learning among pharmacy professionals. As well, the program provides a procedure for pharmacy staff to review their systems and processes, and resolve any issues that may have the potential to contribute to medication incidents.

The following contains the majority of the requirements of the CQI bylaw. The full text of the bylaw can be found in Section 12 of Part I of the [SCPP Regulatory Bylaws](#).

Every pharmacy must have a Continuous Quality Improvement program that meets the following requirements:

- anonymous reporting of Quality Related Events to an independent, objective third party organization for the population of a national aggregate database, in which learnings can be communicated across the profession;

- completion of a Medication Safety Self-Assessment every two years by all pharmacy staff;
- development and monitoring of a Continuous Quality Improvement plan;
- documentation of all Continuous Quality Improvements;
- participation in Continuous Quality Improvement meetings; and
- designation of an individual as the Quality Improvement Coordinator. Only a pharmacist or pharmacy technician employed at that pharmacy can be the Quality Improvement Coordinator.

Another requirement of the QI Coordinator is to complete COMPASS training at one of the in-person or online training sessions in the Spring or Fall of 2017. **If COMPASS training was completed during one of the pilot phases or prior to 2017 sessions, new training will be required.**

If the designated QI Coordinator changes, the new QI Coordinator, if they haven't already done so, must complete the approved training within six months of being designated the QI Coordinator.

For more information or questions about the CQI bylaw, please contact the SCPP office at jeannette.sandiford@saskpharm.ca.

COMPASS Statistics

Engaged Pharmacies

Our statistical reports provide us with strong, numerical evidence of the engagement of pharmacies with respect to the COMPASS program. These numbers are directly derived from the inputs provided by community pharmacies using one of the COMPASS tools—CPhIR (Community Pharmacy Incident Reporting) system.

Reported Medication Incidents

In the past, the statistical information that has been reported in the SCOPE newsletter has been the top four types of incidents. These top four types continue to be incorrect dose/frequency (2,148), incorrect quantity (1,570), incorrect drug (1,318) and incorrect strength/concentration (701).

However, there are other incidents types being reported, but with decreased frequency. By focusing on the statistics of the less frequently reported incidents, the goal is to bring awareness of the importance of identifying, reporting and discussing these types of incidents.

Statistics

Following are the statistics for incident reporting in the CPhIR system from September 2013 (Phase I) until the end of September 2017. There has been a total of **8,730** incidents reported on the CPhIR system.

A sample of the less frequently reported incidents include:

- 660** incidents with an incorrect prescriber
- 539** incidents with the incorrect patient
- 534** incidents that involved an incorrect duration of therapy
- 442** omitted medication or dose
- 291** incorrect dosage form/formulation
- 90** incorrect route of administration
- 63** drug therapy problem – documented allergy
- 62** drug therapy problem – contraindication
- 43** drug therapy problem – drug-drug/OTC/NHP interaction
- 13** expired drug
- 9** drug therapy problem – drug-disease interaction
- 7** drug therapy problem – adverse drug reaction

The majority or **6,758** of incidents reported continue to have an outcome of NO ERROR, which means the incidents were intercepted BEFORE they reached the patient.

1,842 were NO HARM incidents, which means the incidents reached the patient, but did not cause harm.

There were **130** reported incidents that did result in HARM. Information from ISMP Canada indicated that 117 were MILD and 13 were MODERATE HARM.

98 pharmacies completed or started their online data entry for the MSSA.

104 CQI meetings were held.

98 users have submitted at least one incident.

Has Your Name or Contact Information Changed?

Please remember to keep personal information accurate and up to date with the College, especially your current place of employment, email address and mailing address. Up-to-date information helps determine the electoral divisions for College elections and allows SCPP to inform its members of urgent matters.

The best way to let the College know of any updates to if your email address, mailing address or place of employment is to log into your member portal and make the changes. Log into the "Member Login" section of the website www.saskpharm.ca. The link to the portal can be found on the homepage at the top right of the page.

Pharmacy Assistants in the Workplace

In the January 2016 issue of SCOPe, the College published an article entitled, “Delegating to Pharmacy Assistants” to discuss the question, “What are the standards for delegation of pharmacy functions and tasks to pharmacy assistants?” The content of that article may have been misunderstood by some members.

In the document, “[Licensed Pharmacy Technician Scope of Practice](#),” a comprehensive chart outlines the technical roles that can be performed by pharmacists, those that can be performed by pharmacy technicians and those that can be delegated to a pharmacy assistant or clerk (any non-regulated support personnel in the pharmacy).

The pharmacy assistant’s primary role is to provide support to both the pharmacist and pharmacy technician in carrying out the technical functions of the dispensing process. The pharmacy assistant’s duties, as outlined in the chart, may be performed if the assistant is competent to do so AND with the stipulation that **an assistant works under the direct supervision of a pharmacist or pharmacy technician**. The assistant is not authorized to check the work of other individuals within the pharmacy practice setting nor can they accept accountability for their actions.

Pharmacy assistants are not members of a regulated health profession. Pharmacy assistants do not require malpractice insurance, nor do they have continuing education requirements.

Certain pharmacy functions can only be delegated by a pharmacist or pharmacy technician licensed under *The Pharmacy and Pharmacy Disciplines Act* to a pharmacy assistant if that task falls within the technical roles for a pharmacy assistant. ONLY the tasks indicated in the column “Assistants under the direct supervision of a pharmacist or pharmacy technician” can be delegated to an assistant or clerk and only if ALL of the following are in place:

- a) The pharmacist or pharmacy technician, with their competencies, must assess the patient’s pharmacy care needs to determine if a pharmacy function for that patient may be safely delegated to a pharmacy assistant.
- b) The pharmacy assistant has received all the required training to safely perform the task, and the training has been documented.

Example: When the pharmacy assistant becomes trained to perform compounding, there should be a documentation chart to sign off that initial training has been completed for that assistant and it should be documented on that chart after each performance audit has been completed. This will show who’s training is up to date, who needs a performance audit and who has not yet been authorized to perform compounding.

- c) The pharmacist or pharmacy technician determines that the pharmacy assistant to whom a pharmacy function is to be delegated is competent to perform the delegated function correctly and safely and accepts delegation of the function.
- d) Performance of the delegated pharmacy function would not require the pharmacy assistant to whom it was delegated to exercise professional pharmacy judgment or knowledge or complex pharmacy skills.
- e) The pharmacist or pharmacy technician provides to the pharmacy assistant, with a copy maintained on record, written instructions that include:
 - A clear description of the procedure to follow to perform each task in the delegated function;
 - The predicted outcomes of the delegated pharmacy task;
 - How the pharmacy assistant is to observe and report complications, or unexpected outcomes, and the actions appropriate to respond to any of these; and
 - The procedure to document the performance of the pharmacy function in the patient’s record.

Example: Compounding procedures are written out in easy to follow steps (recipes) for authorized assistants to easily prepare compounds adequately while under the supervision of the licensed pharmacist or pharmacy technician.

- f) A pharmacist or pharmacy technician who has delegated a pharmacy function to a pharmacy assistant shall provide appropriate direction and supervision of the pharmacy assistant, including the evaluation of patient outcomes and shall remain readily and physically available for consultation by the pharmacy assistant.
- g) The delegation of a pharmacy function to a pharmacy assistant under these standards is specific to that pharmacy assistant and does not authorize any other pharmacy assistant to perform the delegated function.

Example: Authorizing assistant “A” to perform compounding duties does not authorize assistant “B” to also perform compounding duties.

The pharmacist or pharmacy technician who delegated the pharmacy function to a pharmacy assistant remains responsible for the quality of the pharmacy care provided to the patient.

Notes from the Field

Destruction of Narcotics in Hospital upon Death of Patient

Recently, one of the health regions asked SCPP for clarification on how to handle medications brought into hospital by a patient upon the death of that individual. In particular, there were concerns about destruction of narcotics, such as when patients come into the palliative care unit with potent opioids including transdermal fentanyl. Patients may at times bring all the medications they have been prescribed. The region wanted to know if there was a barrier to the hospital pharmacy assuming responsibility and destroying any prescribed medications.

A Regulatory Compliance and Enforcement Advisor from the Office of Controlled Substances at the Healthy Environments and Consumer Safety Branch of Health Canada gave the following response:

Since the Narcotic Control Regulations (NCR) authorize possession of a narcotic by a pharmacist if it was obtained under the NCR and it is required for the pharmacist's business or profession, the pharmacist can assume responsibility for the substances and destroy or arrange to destroy them when they are unserviceable or no longer required (i.e. in the event of a patient death). There wouldn't be any legal ramification for the pharmacist assuming responsibility, since he/she cannot under the Regulations release them to anyone else, and the pharmacist is required to destroy them once no longer serviceable in accordance with NCR 43 (pharmacist taking all reasonable steps necessary to protect narcotics against loss and/or theft).

In regards to releasing the substances to the family, there is no authority in the NCR that would allow this - therefore the pharmacist should refuse to return the substances. NCR 3(2) authorizes possession of a narcotic by "an agent" of any person who has obtained the narcotic for his or her own use - however, this part of the regulation does not apply to a family member, since once the patient is deceased, he/she no longer meets the condition of "person who has obtained the narcotic for his or her own use."

If the pharmacist was still concerned about the legal ramifications of destroying the substances when a family member is attempting to retrieve them or if the pharmacist is concerned as to whether or not he/she has the authority, they may request that a police seizure occur. However, this then triggers the 60-day waiting period before destruction can occur (section 25 of the CDSA).

Stolen Prescription Medication

Recently there have been discussions between law enforcement, SCPP and CPSS about prescription medication which has been reported stolen. Patients have come to believe that they must obtain a police file number in order to obtain a new prescription to replace the supply of stolen medication. Some law enforcement agencies are currently reviewing their policies regarding supplying file numbers.

SCPP encourages pharmacists to speak to patients who have been the victim of a robbery to see what the pharmacist can do to support the patient's ongoing medication management as well as their personal safety. It might be that the person does not have a safe place to store their medications so has the whole prescription with them at all times. This patient might benefit from more frequent fills and less medication dispensed at a time, whether as weekly or daily supplies provided by the pharmacy. The College encourages members to take the time to discuss concerns regarding the safe storage of medications with all patients and work towards positive solutions when a patient's medication is lost or stolen.

Filling a Faxed Prescription from another Province

Q: I am a pharmacist in Nova Scotia. One of my clients is headed to Saskatchewan for work and he needs to know if pharmacies in Saskatchewan can accept a faxed Rx for Adderall from out of province. Please clarify.

A: Yes, a pharmacist in Saskatchewan can fill a prescription for Adderall as long as it is written by a physician who has a practising licence in Canada. It is the responsibility of the pharmacist to confirm that the prescriber does hold a valid licence.

However, it might be a good idea to try to contact the pharmacy in advance as a courtesy to explain the situation.

The College website (www.saskpharm.ca) has a [list of Saskatchewan pharmacies](#) for your reference (under the Pharmacy tab).

Fentanyl Patch-for-Patch Exchange Program

The College was asked if a patch-for-patch exchange program existed to reduce the diversion of fentanyl patches in Saskatchewan. While no formal program has been promoted, in those areas of the province where the abuse of fentanyl patches has become an issue (for example, SCPP has had reports that patients are "smoking" the patches), we encourage pharmacists to implement the patch-for-patch exchange as recommended by the RxFiles: [Opioid Patch Exchange Disposal Tool](#).

The Ontario College of Pharmacists has the [Patch-For-Patch Fentanyl Return Program: Fact Sheet](#) resource available for their program.

Should you have any question or concerns please contact SCPP at lori.postnikoff@saskpharm.ca.

Pharmacy Permit Renewal 2017-2018

Every pharmacy manager must submit the online Permit Renewal Application and fees by **November 1, 2017**, or be subject to a late submission penalty fee. For approval of the application, all requirements must be met and fees paid. The [fee schedule](#) is available on the under the pharmacy tab of the [SCPP website](#). Privacy officer requirements must again be met, and NEW for this coming permit year is the roll-out of the COMPASS program. Details of permit renewal requirements are following.

COMPASS Program and ISMP/CPhIR Enrolment

Every pharmacy must be enrolled in the COMPASS program, which means that the pharmacy manager must complete the following by November 1, 2017 (without penalty):

- pay the COMPASS fee of \$500 plus GST (fee waived for satellite pharmacies)
- be enrolled with the Institute for Safe Medication Practices (ISMP) for the Community Pharmacy Incident Reporting (CPhIR) by either of the following (includes community, satellite and dispensing physician pharmacies):
 - faxing the signed Data Sharing Agreement (DSA) for CPhIR (printable DSA link available in the Pharmacy Manager Portal) OR
 - having been involved in one of the COMPASS Pilot Phases and have an existing login for accessing CPhIR

NOTE: ISMP submits lists of enrolled pharmacies to SCPP for updating pharmacy profiles.

- assign a COMPASS Quality Improvement (QI) Coordinator who is a Practising member (pharmacist or pharmacy technician)
- ensure the QI Coordinator has completed (or will complete) the training provided through the Continuing Professional Development for Pharmacy Professionals (CPDPP). Training taken prior to April 2017 does not qualify.
- declare in the SCPP permit renewal application the date that the QI Coordinator HAS completed or WILL complete the required training
 - a list of members who have completed training will be provided to SCPP by CPDPP for updating member and pharmacy profiles

NOTE: If the pharmacy manager is changing during or outside of permit renewal, obtain the ISMP username and password from the outgoing manager for continuity of CPhIR data.

Privacy Officer

Every pharmacy must have a privacy officer. To meet the bylaw requirements, the pharmacy manager must complete the following by November 1, 2017, without penalty.

- assign a privacy officer who is either the manager or a regular/full-time employee who is a Practising or Conditional Practising member
- ensure that the privacy officer is undertaking the role at only ONE pharmacy (except for a satellite pharmacy when approved by SCPP)
- ensure that the privacy officer has the required training provided through CPDPP valid to at least December 1, 2017
 - training expires three years from the completion date
 - training dates may be viewed by logging into the Pharmacy Manager Portal at the SCPP Website; or if amending the privacy officer, through the Member Portal (of the member being assigned)
 - online training information is available on the [CPDPP website](#)

If you have questions about permit renewal requirements, please contact Pat Guillemain at pat.guillemain@saskpharm.ca or at 306-584-2292 extension 321.



“Do you know someone worthy of an award nomination?”

Deadline for SCPP Award Nominations – January 31, 2018

The SCPP Awards and Honours Committee is calling for nominations for their annual awards. These will be presented to members who have made a significant contribution to the pharmacy profession and/or community. Early submissions are appreciated.

You can nominate either your colleague(s) or yourself for any of the awards.

SCPP Certificate of Recognition

The SCPP Certificate of Recognition recognizes retiring Presidents, Councillors and committee members of SCPP for their dedication and contributions to the Council of SCPP. The nominee must have made a special contribution to SCPP either on a local, provincial or national level.

Presidential Citation

The Presidential Citation recognizes an SCPP member who has made special contributions to pharmacy and/or one outstanding contribution or a specific achievement that has enhanced the profession of pharmacy.

Member Emeritus Status (MESCPP)

Attention Retired SCPP Member(s): Have you previously been a practising or non-practising member of SCPP in good standing for at least 25 years? If so, you may be eligible to apply for the designation ‘Member Emeritus Saskatchewan College of Pharmacy Professionals’ or ‘MESCPP’.

Any member on the Retired Register may be designated as a ‘Member Emeritus’ of the College and may use the designation ‘Member Emeritus Saskatchewan College of Pharmacy Professionals’ or ‘MESCPP’ if he can declare the following:

- has been a practising or non-practising member continually in good standing with the SCPP or other regulatory body for pharmacists for at least 25 years
- has not been found guilty of professional misconduct or professional incompetence
- understands that his name must remain on the Retired Register of SCPP
- has asked that his designation be confirmed by the Awards Committee of SCPP

NOTE: Where a member is ineligible pursuant to clause (b) herein, Council may, upon receipt of a written request giving reasons, determine that the member is eligible to be designated as a “Member Emeritus.”

Emerald Achievement Award

The Emerald Achievement Award will go to a practising SCPP member in good standing for their dedication and service. The recipient must have been active in our profession for at least 35 years.

Honorary Life Member Award

An Honorary Life Member Award will be presented to recognize a member of SCPP for outstanding contributions to the profession and/or SCPP, beyond the normal call of professional or voluntary obligations. An Honorary Life Member Award may be granted in recognition of:

- a) A distinguished record of professional service to the community;
- b) And/or outstanding contribution to SCPP;
- c) And/or a distinguished record of service to SCPP;
- d) And/or specific achievements that enhanced the profession;
- e) And/or long-term service to the profession with a distinguished record

Honorary Life Members will have their annual personal membership fees waived, but are responsible for all other conditions of membership.

**SCPP Award
nominations
Deadline!**

January 31, 2018

SCPP Award Committee
221A – 1900 Albert Street
Regina, SK S4P 4K8

Fax: 306-584-9695
Email: info@saskpharm.ca

SCPP Award of Merit

Available to the general public, this award recognizes any person, group or organization, who is not a member of the College, and who through his active participation has promoted SCPP and/or the profession of pharmacy in Saskatchewan. The nominee must have made a special contribution to SCPP either on a local, provincial, or national level.

Honorary Member Award

Available to the general public, this award recognizes any person for outstanding contributions to the profession and/or SCPP beyond the normal call of professional or voluntary obligations.

An Honorary Member award may be granted in recognition of:

- a) An outstanding single contribution to SCPP;
- b) And/or a distinguished record of service to SCPP;
- c) And/or a single specific achievement that enhanced the profession;
- d) And/or through long-term service to the profession with a distinguished record.

The nominee must have made a special contribution to SCPP either on a local, provincial, or national level.

Centennial Pharmacy Award

In 2011, SCPP celebrated its Centennial Anniversary. At that time, we invited all pharmacies celebrating their Centennial Anniversary in 2011 and those pharmacies in operation for more than 100 years to celebrate this milestone alongside the College by introducing a new award to recognize the great accomplishment.

SCPP would like to continue to recognize this achievement of operating as a pharmacy for 100 years by making the Centennial Pharmacy Award an annual award which will be given to those pharmacies who can document their roots back 100 years. In each coming year, SCPP will be looking for all Saskatchewan pharmacies that have been in continuous operation by the same or different owners for 100 years or more.

If your pharmacy is celebrating its centennial year, and your pharmacy's history can be traced back more than 100 years, the College would like to hear from you and asks that you forward an outline of your pharmacy's history, including ownership and key dates and changes. The College would also like to know of any outreach and involvement in your community that your pharmacy has done and/or continues to do.

Safety Excellence Award

SCPP Safety Excellence Awards may be presented to recognize a member of SCPP, or a group/organization that the member belongs, who has made a special contribution to pharmacy in the area of increasing safety with one outstanding contribution or a series of achievements that has enhanced patient or medication safety.

The Safety Excellence Award recognizes a special contribution that meets one or more of the following criteria:

- a) Demonstrates enhanced patient/medication safety
- b) Demonstrates safer medication practices
- c) Demonstrates a reduction in risk to patients
- d) Demonstrates innovation in continuous quality improvement in pharmacy practice

How to Nominate

You are invited to nominate your colleague(s) and/or yourself for any of these awards. All nominations must be accompanied by a summary of the qualifications consistent with the [terms of reference](#). If you would like to see who has received an award in the past, please visit Awards on the SCPP website under About Us.

Complete List of Awards and Criteria

Please [click here](#) for a complete list of awards and criteria, including where to send your nomination form. Forms may be requested from the SCPP office and are also available on the website.

Deadline

While the deadline for receipt of nominations for an SCPP award is January 31, 2018, we are encouraging early submissions. In all cases, the final selection must be approved by the SCPP Council, following recommendation from the Awards and Honours Committee.



From the Desk of the Dean

Dr. Kishor Wasan

College of Pharmacy and Nutrition: Proud of Our Tradition and Home of Research and Practice Innovation

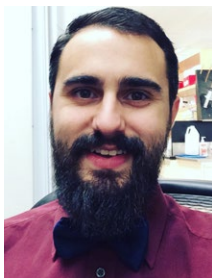
For the latest news from the College, visit our website: pharmacy-nutrition.usask.ca

The College of Pharmacy and Nutrition has been a busy place this fall, and you can feel the energy in the air. I'm proud of all the exceptional people you'll read about below. Here are some of the most remarkable moments from the last few months:

Welcome to our first PharmD class! The college's new Doctor of Pharmacy program began with an orientation week for the first year students on Monday, August 28. This new entry-to-practice degree will replace the existing BSP, which will graduate its final class in 2020.



First year orientation wrapped up on Tuesday, September 5 with a BBQ in front of the Thorvaldson Building. Thanks to the Saskatchewan Pharmacy and Nutrition Students' Society for organizing the event!



Welcome to **Dr. Robert Laprairie**, the new Saskatchewan-GSK Research Chair in Drug Discovery and Development. The chair is made possible through an endowment funded by GlaxoSmithKline, through its Pathfinders Fund for Leaders in Canadian Health Science Research and by the Canadian Institutes of Health Research, the Government of

Saskatchewan, SaskTel, the University of Saskatchewan, and the College of Pharmacy and Nutrition.

The Division of Nutrition and Dietetics would like to welcome two new Assistant Professors to the faculty:

- **Dr. Lesley Moisey** completed her B.A.Sc. and M.Sc. from the University of Guelph, and recently a Ph.D. in Nutrition & Physiology from the University of Waterloo.
- **Dr. Jessica Liefers** completed her B.Sc. and M.Sc. from the University of Alberta, and a Ph.D. in Health Studies and Gerontology from the University of Waterloo.

Congratulations to **Dr. Jonathan Dimmock** who has been awarded the 2017 University of Saskatchewan Retirees Association Continuing Contribution Award. The award recognize and express appreciation to persons who have retired, but have continued to make research, scholarly, artistic or service contributions at an exceptional level.

Congratulations to **Scott Livingstone (BSP 1988; MSc 1994)** on being named the first CEO of new Saskatchewan Health Authority.

Congratulations to **Paul Melnyk (BSP 1987; MSc 1997)** on being named CEO by Pharmasave Drugs (Central) Ltd. In his new role, Paul will oversee the strategic direction of over 55 Pharmasave stores in the Central Region.

Thank you to everyone who joined us at our after-work alumni event in Saskatoon on Tuesday, October 3 at the Delta Bessborough.

Congratulations to our students and one of our alums who were named to the Huskie Athletics All-Academic Team for the 2016-17 season:



- **Brooke Mentanko** (BSP 2017) Huskie Athletics All-Academic Second Team
- **Justine Larson**, second year pharmacy, U SPORTS Academic All-Canadian
- **Rebecca Weckworth**, second year nutrition, U SPORTS Academic All-Canadian
- **Kaylee Halvorson**, first year pharmacy, Huskie Athletics All-Academic First and CIS Academic All-Canadian Team

With the academic year in full swing, I encourage everyone to reconnect with the College through our website, social media, or drop by for a visit. More exciting things are coming throughout the year, and we'll be extending personal invitations for you to join us.

Kish Wasan, R.Ph, Ph.D, FAAPS, FCSPS, FCAHS
Professor and Dean

Upcoming CPDPP Continuing Education

Program	Pharmacists/ Pharmacy Technicians	Provider	Date	For more information:
COMPASS Quality Improvement Coordinator Training	Pharmacists/ Pharmacy Technicians	CPDPP	Online	Register Now!
Update on Immunization (Mandatory for injecting pharmacists)	Pharmacists	CPDPP	Online	Register Now!
Current Options for Managing Pain and Addiction Conference	Pharmacists/ Pharmacy Technicians	CPSS/Health Sciences Continuing Education Group	October 27 & 28, 2017 Saskatoon	Register Now!
Women's Health Day including contraception, EC and UTI prescribing	Pharmacists	CPDPP	November 18, 2017 Regina November 19, 2017 Saskatoon	Register Now
Poison and Drug Information Service (PADIS) Conference 2017	Pharmacists	University of Calgary	November 28, 2017 Calgary or webcast	In-Person - Conference Webcast

Drug Schedule Changes

Minoxidil Now Unscheduled

Effective July 20, 2017, topical minoxidil, in concentrations of 5% or less, is now an **unscheduled** product and may be sold from any retail outlet (including online). The NDSAC has added the condition "in adults" although this is not specified in the Prescription Drug List. The NAPRA office has added the condition "for human use" as the drug remains prescription for any type of veterinary use.

New National Drug Schedule (NDS) listing:

Drug Name	Sch
Minoxidil , when sold in preparations for topical use in adults in concentrations of 5% or less, for human use only	U
Minoxidil , <small>PDL</small> except when sold in preparations for topical use in concentrations of 5% or less, for human use only	I

Begin a Conversation about Pain Management

An infographic called [The 4P's of Pain Management](#) was developed by the Pain Quality Improvement and Research department of the Saskatoon Health Region.

The colourful poster was created with multidisciplinary clinician and patient/family advocate input as a patient education tool to encourage people living with chronic pain to consider a balanced approach to pain management that includes pharmacological, physical, psychological, and preventative strategies (the 4P's). It is meant to be used to begin the conversation with patients about appropriate alternatives to medications for pain management.

The Saskatoon Health Region [pain management webpage](#) provides information on services offered and additional resources for patients and healthcare providers on pain management, including a [Speak UP video](#) encouraging patients to speak up about their pain.

Reference Manual Updates

The following document has recently been edited.

[Satellite Proprietary Pharmacy Permit Criteria](#)

Pharmacy Examining Board of Canada (PEBC) Examination Dates

Pharmacist Schedule of Exams

Examination Name	Examination Date	Application Deadline Date*
Fall Pharmacist Qualifying Examination	MCQ: Nov. 10 to 15, 2017	Registration Closed
	OSCE: Nov. 12, 2017	
Winter Pharmacist Evaluating Examination	Jan. 3 & 4, 2018	Registration Closed
Spring Pharmacist Qualifying Examination	MCQ: May 22 to May 29, 2018	Feb. 23, 2018
	OSCE: May 27, 2018	
Summer Pharmacist Evaluating Examination	July 4 & 5, 2018	March 29, 2018

Pharmacy Technician Schedule of Exams

Examination Name	Examination Date	Application Deadline Date*
Fall Pharmacy Technician Evaluating Examination	October 14, 2017	Registration Closed
Winter Pharmacy Technician Qualifying Examination	OSPE: April 7, 2018	Dec. 8, 2017
	MCQ: April 8, 2018	
Spring Pharmacy Technician Evaluating Examination	April 29, 2018	Jan. 12, 2018

*Applications must be RECEIVED by the PEBC office no later than the application deadline date

Shared Learning Opportunity

Missed Repeated Antibiotic Prescriptions

A pediatric patient was admitted to hospital with a severe urinary tract infection that required IV antibiotics for treatment. After reviewing the patient's profile upon admission, the pharmacist noted that the patient had received the same antibiotic (Sulfamethoxazole/Trimethoprim) three times within the previous month before being admitted to the hospital. The patient also had lab work completed each time the antibiotic was prescribed. The Culture & Sensitivity results (available on the eHealth Viewer) showed that the bacteria causing the urinary tract infection were resistant to Sulfamethoxazole/

Trimethoprim the last two times it was filled. The Culture & Sensitivity report also showed which antibiotics the bacteria were sensitive to, which would have helped direct more appropriate therapy. An early start with appropriate treatment may have prevented the progression of the infection and subsequent admission to hospital.

The above example underscores the importance of the pharmacy team's role in the health care system. The story highlights the value of the eHealth Viewer in allowing pharmacists to view important information such as lab and microbiology results that were not accessible in the past.

Survey Request from Health Canada Regarding Cannabis with Youth and Vulnerable Populations



Health Canada and the Public Health Agency of Canada will be developing resources that will provide information and advice on how to have informative and engaging conversations about cannabis with youth and vulnerable populations. These conversations might include the facts about cannabis use, the risks and the proposed changes to federal legislation.

We are seeking input from health professionals on the types of information that would be most helpful to you and to your patients. We would appreciate if you could take the time to complete this short online survey. Your input will help inform the development of cannabis public education resources.

[Click here for the survey.](#)

The survey should take you about 5 minutes to complete. Your participation is completely voluntary and your responses will be treated in confidence. The results of this survey will be reported in aggregate form and will no answers will be attributed to specific individuals.

For more information on Health Canada's Privacy Policy, please visit <http://www.hc-sc.gc.ca/home-accueil/important-eng.php>

SCPP Members Facebook Group – Join Us!



The SCPP Members Facebook Group gives members quick access to important notices and drug schedule changes. As well, members can enjoy notices of upcoming events, training, answers to frequently asked questions and more. Members are encouraged to take an active role in the group and post items and questions they think will benefit the community.

The group is available only to SCPP members who request access. Because it has been set up as a "secret" group, it is not viewable by non-members or even findable. This makes it a more secure platform to convey information and for members to ask questions.

Join the Group

Any SCPP member who is a Facebook user is encouraged to join the group. To join, email info@saskpharm.ca with "Join SCPP Members Group" in the subject line. Please include a first and last name, licence number along with the email address associated with your Facebook account in the body of the email. An invitation to join the group will be sent via Facebook. Participants can leave the group at any time.