Meeting of the Council

November 28, 2003

Present:

President and District 4 Councillor Erica Gregory, District 1 Councillor Wayne Rubner, District 2 Councillor Amin Bardai, District 3 Councillor Caren Heughan, District 5 Councillor Janice Reynolds, District 6 Councillor John Hope, District 7 Councillor Carol Gee, Faculty of Pharmaceutical Sciences Dean Robert Sindelar, Government Appointees Gurmeet Gill, Jo Ann Groves, Marina Ma and Peter Rubin.

Staff (at various times):

Registrar Linda Lytle, Deputy Registrar Brenda Osmond and Administrative Assistant Samantha Lam.

Guests (at various times):

Janice Moshenko, Director, Continuing Pharmacy Education; Marnie Mitchell, CEO, BC Pharmacy Association; Rosey Brenan, President, Rodon Communications; Howard Rose, incoming District 3 Councillor and Shawn Sandhu, NAPRA representative.

CALL TO ORDER

President Gregory called the meeting to order at 9:15 a.m.

She stated the College mission statement:

To ensure British Columbia pharmacists provide safe and effective pharmacy care to help people achieve better health.

and her personal mission statement:

To positively support the pharmacists of BC in achieving safe and effective pharmacy practice outcomes for the people of British Columbia.

The President reviewed the four communication quadrants, which were introduced at the April 2002 workshop: work/career, relationships, community and personal. Each Councillor was asked to update the group, providing brief information pertaining to each of the four quadrants.

AGENDA AND TIMETABLE

The following changes were made to the agenda:

Addition: 6.01 External committee appointments

Relocated from agenda item 9:

7.04 Drug Schedules Regulation amendments

COLLEGE *of* PHARMACISTS

MINUTES OF PREVIOUS MEETING

The minutes of the September 19, 2003 Council meeting were approved by consensus.

OUTCOME DEVELOPMENT ISSUES

Privacy Legislation

As requested by Ralph Lai, current president of the Chain Drug Association of BC, Council discussed the topic of the impending privacy legislation.

The Ministry of Management Services is providing access to training and implementation tools, including a telephone hotline, training sessions on demand, general training sessions in location s around the province, plus checklists, assessment tools and FAQs on its web site (www.mser.gov.bc.ca/FOI_POP/).

Council agreed that pharmacists should be referred to government resources for assistance with implementation questions.

International Pharmacy Services

The Registrar updated Council on discussions held by the National Association of Pharmacy Regulatory Authorities' Council of Pharmacy Registrars of Canada (CPRC) regarding the topic of international prescription services (IPS). CPRC recommended a call for a ban by the federal government on the export of prescription drugs to citizens of other countries until such time as governments (US federal and state, Canadian federal and provincial) can implement systems that will ensure the effective regulation of IPS practice to protect public safety. NAPRA approved this recommendation.

Councillors expressed concern for the impact this position could have on the public, and it developed the following position statement:

The Council of the College of Pharmacists of British Columbia conducted an assessment of the emerging issues relating to the provision of international pharmacy service (IPS) at its meeting on November 28, 2003.

The Council is concerned with reported increases in volume and participation in the IPS industry and the effects the growth may have on health care in British Columbia. The Council is committed to ongoing monitoring of the emerging and complex issues relating to IPS. The Council will base all policy decisions on evidence-based information and will operate with the understanding that shifts in any variables will warrant a timely review of the current regulatory situation.

The following points contributed to the development of this position statement:

- All pharmacists in BC demonstrate their commitment to practice in accordance with the standards of practice outlined in the Framework of Professional Practice, the Code of Ethics and all relevant federal and provincial legislation.
- To date, there is no clear evidence that drug product shortages are directly linked to the transborder shipment of drug products to US patients from Canadian pharmacies.

- Drug product supply concerns of Canadians may be linked to pharmaceutical manufacturers' limitations of supplies to pharmacies involved with IPS.
- The impact and significance of reported increases in drug imports into Canada from Asian, African and European countries has not been quantified.
- Potential negative effects on Canadian drug prices and worldwide pharmaceutical research and development have not been demonstrated.
- Formal data collection initiatives are being launched by Health Canada and the Canadian Association of Chain Drugs Stores to gather current and comprehensive information concerning potential drug product and pharmacist workforce issues.

The Council encourages cooperation between the federal and provincial governments to explore options for Canadian solutions to the issues related to IPS which are beyond the scope and jurisdiction of a provincial regulatory authority. The Council recognizes the possibility that provincial pharmacy legislation may need to be strengthened to place constraints on IPS should evidence-based information warrant it.

Council committed to monitoring this topic at every meeting and requested Registrar Lytle forward all materials regarding developments on the IPS issue.

MONITORING ACTIVITIES

Registrar's Executive Report

Registrar Lytle provided monitoring reports and updates on the following topics:

Stakeholder Relations

Activities and events relating to stakeholder relations were provided and discussed for the information of the Councillors.

Practice Standards: General

Activities and events relating to practice standards: general were provided and discussed for the information of the Councillors.

Practice Standards: Professional Development and Assessment Program

Activities and events relating to practice standards: professional development and assessment program were provided and discussed for the information of the Councillors.

Involving Pharmacists in Key Initiatives

The Registrar reported full compliance with this policy's requirements.

Financial Strategy

The Registrar reported full compliance with this policy's requirements.

Financial Health: College

The third quarterly financial and variance report will be distributed in mid-December for Council's Information.

Employee Salary and Perquisites

The Registrar reported full compliance with this policy's requirements.

Compensation: Contractors

The Registrar reported full compliance with this policy's requirements.

Reimbursement of Budgeted Expenses

The Registrar reported full compliance with this policy's requirements.

Relationship with the Public and Other Key Stakeholders

Activities and events relating to relations with the public and other key stakeholders were provided to demonstrate compliance with the policy

Council Meeting Observer Policies

The requirements of the Council policy on Council meeting observers have been met.

District Meetings

District meetings held in Districts 5, 6 and 7 were conducted in compliance with the policy requirements.

Committees

Registrar Lytle informed Council that the Pharmacy Examining Board of Canada (PEBC) would be requesting the reappointment of Kathy McInnes or the appointment of a new member.

It was moved, seconded and carried.

Council reappoints Kathy McInnes to the Pharmacy Examining Board of Canada for a three-year term.

Sale of Tobacco Products by Pharmacies

Council convened an *in camera* session to discuss the tobacco-free pharmacy initiative, due to the provision of policy and operational strategy advice by the registrar.

Drug Interchangeability

Registrar Lytle advised the Council that it would be helpful to amend the previously approved policy statement regarding drug interchangeability to provide more detailed information.

Council approved by consent the following revised Drug Interchangeability policy:

Drug product interchangeability decisions can be based on Health Canada's Declaration of Equivalence, as indicated by the identification of a Canadian Reference Product in a Notice of Compliance for a generic drug.

Pharmacists may also use their professional judgement in interchanging other products if the products meet the definition of an interchangeable drug. An interchangeable drug is defined as follows in the *Pharmacists, Pharmacy Operations and Drug Scheduling Act:*

Interchangeable drug means a drug that:

- Contains the same amount of the same active ingredients
- Possesses comparable pharmacokinetic properties
- Has the same clinically significant formulation characteristics
- Is to be administered in the same way as the drug prescribed

Council Monitoring Reports

Code of Conduct

Councillors confirmed their compliance with the requirements of Policy CG-4.

NONPOLICY DECISIONS

Specialist Designation

College staff have reviewed the issue of specialist designation being currently prohibited by College bylaws. While an amendment will need to be implemented to enable credentialed pharmacists to use the term "specialist," it is unlikely that the government will consider amendments to the current *Pharmacists, Pharmacy Operation and Drug Scheduling Act* (PPODS Act), since the contents of the act are being transitioned to the new *Pharmacy Operations and Drug Scheduling Act* (PODS Act). Council agreed that the Advanced Practitioner Credentialing Program development and implementation can go forward without an immediate change to the legislation prohibiting the use of the term "specialist."

Council tabled this topic until the new *Pharmacy Operations and Drug Scheduling Act* is finalized.

Pharmacy Corporate Directors

A proposal to amend the current legislation requiring that a majority of the directors of a corporation that owns a pharmacy be registered pharmacists was considered at an earlier Council meeting. Due to the transition issues identified above, Council tabled this topic until the new *Pharmacy Operations and Drug Scheduling Act* is finalized.

Emergency Department Medications

A proposal to amend the bylaws to permit the provision of controlled drug substances from hospital emergency departments has been made by the Hospital Pharmacy Committee. Due to the transition issues identified above, Council tabled this topic until the new *Pharmacy Operations and Drug Scheduling Act* is finalized.

Drug Schedules Regulation Amendments

Levonorgestrel, when indicated for use as an emergency contraceptive

Council reviewed a federal proposal to remove levonorgestrel from Schedule F and the National Drug Scheduling Advisory Committee's (NDSAC) recommendation that provinces add the drug to Schedule II. Following a discussion of the current status of the drug in British Columbia (pharmacist prescribing schedule) and the implications of supporting deregulation of the drug, the Council agreed by consent to support the federal proposal to maintain the harmonization concept, but requested that the Registrar correspond with NDSAC to express the Council's concern with the effect of the Schedule II recommendation on the pharmacist prescribing initiative in BC.

Schedule F amendments

It was moved, seconded and carried.

Council approves the following drug schedule amendments in order to harmonize the BC Drug Schedules Regulation with the national schedules:

Delete:

- 1 Amfebutamone and its salts
- 1 Bupropion
- 1 Melarsomine and its salts
- 1 Omeprazole
- 1 Praziquantel

Add:

- 1 Bupropion and its salts
- 1 Melarsomine and its salts, when sold for the treatment of heartworm in dogs
- 1 Omeprazole and its salts
- 1 Praziquantel, except when sold for the treatment of the tapeworm Anoplocephala perfoliata in horses

COUNCIL DEVELOPMENT

The College's communications consultant, Rosey Brenan, presented an update on strategic communications efforts, highlighting the newly published Consultation Project Report contents.

ADJOURNMENT

The meeting was adjourned at 2:00 p.m. opeiu15/sl

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