

SCOPE

newsletter

October 2022



SASKATCHEWAN
COLLEGE OF PHARMACY
PROFESSIONALS

Spot the Difference: Regulators vs Associations	1
National Day of Truth and Reconciliation	4
Council Highlights	5
Enhanced Members-Only Section	9
Who's Who Behind the Counter	10
Doctor Who?	10
Student Spotlight: Jenna Navigates the Verbs in Policy	11
CAPTivate	15
Bylaw and Policy Updates	17
Notes from the Field	18
Transition to Commercially Available Methadone	19
Spotlight on Prevention	20
From the Desk of the Dean	21
Pharmacy Examining Board of Canada (PEBC) Examination Dates	22

Suite 100 - 1964 Park Street
Regina, SK S4N 7M5

Tel: 306-584-2292
Fax: 306-584-9695
Email: info@saskpharm.ca



Spot the Difference: Regulators vs Associations

SCPP often receives questions that show some uncertainty about its role as a regulator versus the role of an advocacy association. Each has its functions, but the biggest difference is that a regulator acts in the best interests of the public whereas an association acts in the best interest of its members.

SCPP's role is established by *The Pharmacy and Pharmacy Disciplines Act* (the Act), working to protect the public by ensuring Saskatchewan residents receive safe and quality pharmacy care. It does this by:

- Registering qualified and competent pharmacists and pharmacy technicians
- Permitting qualified pharmacies to operate
- Setting and administering practice and professional standards and ethics
- Ensuring continuing competence of pharmacy professionals

Continued on next page ►

MISSION

Protecting the public interest by building excellence in professional pharmacy practice through regulation.

VISION

Quality pharmacy care for a healthier Saskatchewan.

VALUES

Professionalism
Collaboration
Leadership
A Culture of Excellence

GOALS

To have functioning competency assurance and quality improvement programs.

To align pharmacy regulation with modern pharmacy practice.

To empower pharmacy professionals to practise autonomously to deliver safe patient care.

To have enhanced transparency to stakeholders, supported by contemporary governance and management practices.

The SCOPe newsletter is published by the Saskatchewan College of Pharmacy Professionals (SCPP) and is emailed to active members of the College. Decisions on matters such as regulations, drug schedule changes, etc., are published in SCOPe. All members are expected to be aware of these matters.

- Ensuring continuous quality improvement of pharmacies
- Investigating concerns brought forward by the public, patients, and other health care professionals

Regulatory authorities are put in place to protect the health and safety of Saskatchewan people.

As one of Saskatchewan's regulatory bodies, the SCPP has a legal obligation to ensure members entering the profession meet the legislated criteria and once admitted, SCPP has an ongoing obligation to ensure members remain competent and meet professional standards. Likewise, SCPP issues permits to operate pharmacies to only those proprietors who meet the requirements under the Act and conducts quality improvement reviews to ensure that patient safety and ongoing standards of practice are met.

As a regulatory body, SCPP has a unique challenge in that while the public interest forms the foundation of all it does, it also needs its members to be engaged and support the policies that impact them. It does this through engagement and consultation opportunities as well as a willingness to review and revise based on member feedback.

Recent restructuring of the SCPP Council has prioritized Council member competencies, attributes, skills, and experience (CASE) over electoral districts and popular votes. While there is a role in bringing perspectives from their electoral category (i.e., urban pharmacist, rural pharmacist, hospital pharmacist, community pharmacy technician, hospital pharmacy technician, etc.), Council members do not represent the members as they do in an association.

Members will also know that in recent years, the SCPP and PAS have separated all joint activities and SCPP has removed all awards, which fall under advocacy and not regulation.

As a regulatory body, SCPP has a unique challenge in that while the public interest forms the foundation of all it does, it also needs its members to be engaged and support the policies that impact them. It does this through engagement and consultation opportunities as well as a willingness to review and revise based on member feedback.

Over the past several years, SCPP has taken a proactive approach to align with regulatory reform that is occurring within Canada and internationally to ensure as a regulator, we are devoting all resources to our mandate.

Stay tuned in the next edition of SCOPe where we explore the privilege of self-regulation.

The table on the next page shows some of the general differences between regulators and associations.

Continued on next page ►

	Regulator	Association
Mandate	Acts in the best interest of the public.	Acts in the best interest of the members of a profession.
Accountability	Accountable to the public through the provincial government, subject to legal obligation (e.g., Acts and Bylaws).	Accountable to its members.
Registration	Registers members based on legislated criteria.	Registers members based on own criteria.
Membership	Mandatory to practise.	Voluntary
Strategic Leadership	Council, which includes public members appointed by the Ministry, sets the direction for the organization.	Board, which usually does not include public members.
Qualifications	Sets registration and licensure requirements.	Facilitates certification requirements (e.g., malpractice insurance).
Continuing Education	Requires members to participate in legislated programs to ensure continuing competence.	Provides members with continuing education opportunities.
Standards of Practice	Sets legal standards of practice to ensure safe, competent, and ethical service to the public.	Advocates opportunities to augment and expand members' practice.
Enforcement of Standards	Has legislated complaints and discipline processes.	Provides support to members by offering programs such as malpractice insurance and member benefits.
Permits	Creates criteria and issues permits for qualifying areas of service (e.g., pharmacies).	Issues no permits.
Advocacy	Performs no advocacy work.	Advocates on behalf of its members to effect changes to service delivery and increase public awareness.
Awards	Issues no awards.	Creates and awards members based on own criteria.

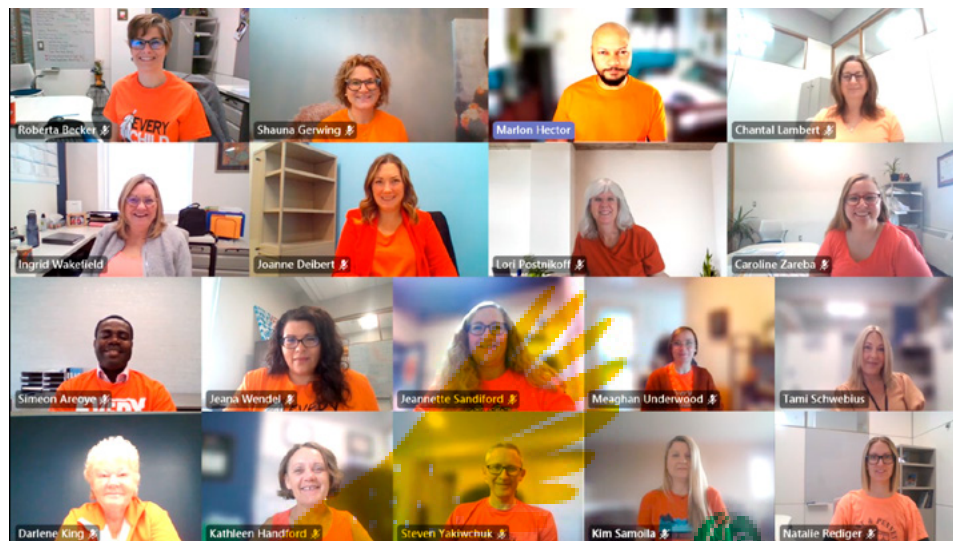


National Day of Truth and Reconciliation

SCPP staff wore orange on Sept. 30 and attended the Indigenous Trauma- and Equity-Informed Practice Webinar and Workshop, presented by CPDPP in collaboration with Alberta College of Pharmacy, College of Pharmacists of Manitoba, and SCPP.

This took place in honour of the National Day of Truth and Reconciliation and to respond to Call to Action 24 in the Truth and Reconciliation Commission of Canada: Calls to Action Report.

Stay tuned for Equity, Diversity, and Inclusivity training designed for Saskatchewan pharmacy professionals.



SCPP STAFF

Executive

JEANA WENDEL
Registrar

LORI POSTNIKOFF
Deputy Registrar

Executive Assistance

INGRID WAKEFIELD
Executive Assistant to the Registrar

CHRISTINA MCPHERSON
Administrative Assistant to the Deputy Registrar

Administrative Support

SIMEON AREOYE
Administration and Office Operations Coordinator

Registration, Licensing, Permits

ROBERTA BECKER
Registration Administrator – Pharmacy and Member Relations

SHAYNA MURRAY
Registration Administrator – Member Relations

MELISSA WEGER
Registration Administrator – Member Relations

CAROLINE ZAREBA
Manager, Pharmacy Permits and Pharmacy Relations

Field Operations, Professional Practice, COMPASS

JEANNETTE SANDIFORD
Assistant Registrar – Field Operations and Quality Assurance

JENNIFER KOSKIE
Field Officer

BRITTANY SHARKEY
Certified Compounding Inspector – Field Officer

EMILY THOMPSON-GOLDING
Administrative Coordinator for Field Operations and Quality Assurance

STEVE YAKIWCHEUK
Field Officer

Competency Assurance

SHAUNA GERWING
Director of Competency Assurance

Complaints and Discipline

CHANTAL LAMBERT
Assistant Registrar – Complaints Director

TAMI SCHWEBIUS
Complaints Manager

JOANNE DEIBERT
Complaints Investigator - Contract

Policy and Legislation

KATHLEEN HANDFORD
Director of Policy and Legislation

DAVID CHOU
Pharmacy Policy and Practice Consultant

NATALIE REDIGER
Pharmacy Policy and Practice Consultant

KIM SAMOILA
Policy Analyst

Database and Systems

MEAGHAN UNDERWOOD
Manager, Database and Systems

Communications

MARLON HECTOR
Communications Coordinator

Council Highlights

Sept. 21-22, 2022

Council Education and Orientation

- With the first meeting of the new 2022-2023 SCPP Council, Deanna Williams provided education on Regulating in the Public Interest and a Governance overview. Deanna Williams is known nationally and internationally for her work in professional and occupational regulation. She spent 18 years at the Ontario College of Pharmacists, Canada's largest pharmacy regulatory authority, retiring as its Registrar in 2011.

The Minister of Health and Long-Term Care appointed Deanna as Supervisor to the College of Denturists of Ontario during the loss of its regulatory privileges in 2012 and 2013. Since 2011, Deanna has been consulting in areas relating to professional and occupational regulation in Canada, the U.S. and abroad.

Deanna highlighted the role of regulators, how it differs from advocacy, and that regulators must ensure their focus is solely based on regulation. For an overview of Regulators versus Associations, see the front-page article in this issue of SCOPE, which will form the first in a series of articles exploring developments in self-regulation.

- Council members were given an orientation on the role of Council, the vision, mission, and objectives of the College, the collaborative processes used to achieve strategic goals, and the risks and pitfalls to look out for in governance.

Councillors' Environmental Scans

- Uptake was high for the commercial methadone education which was delivered by medSask/CPDPP in August.
- Family doctor shortages are resulting in denied requests for interim/emergency supplies when the pharmacist is the last prescriber, leaving patients without medications.
- Pediatric analgesic supply continues to be a concern; however, limiting the amount individuals can purchase has helped keep supplies on shelves.
- Staff shortages in urban, rural, and remote areas continue to exist and pose challenges to offering pharmacy services. In addition, the College of Pharmacy and Nutrition often struggles to fill their 90 seats with qualified applicants. The College also struggles with space for placing students in SHA facilities for training.

Continued on next page ►



SCPP COUNCIL 2022-2023

PRESIDENT

Amy Wiebe, Saskatoon

PRESIDENT-ELECT, RURAL/ REMOTE PHARMACIST

Tania Schroeder, Warman

PAST PRESIDENT

Rod Amaya, Saskatoon

HONORARY TREASURER, URBAN PHARMACIST

Scott Livingstone, Regina

HOSPITAL PHARMACY TECHNICIAN

Tracy Martens, Weyburn

COMMUNITY PHARMACY TECHNICIAN

Shauna Nowakowski, Saskatoon

RURAL/REMOTE PHARMACIST

Roxanne Bagnall, Watson

URBAN PHARMACIST

Sarah Kozusko, Regina

HOSPITAL PHARMACIST

Kelsey Dumont, Regina

EX OFFICIO

Jane Alcorn, Saskatoon

DESIGNATE EX OFFICIO

Charity Evans, Saskatoon

PUBLIC REPRESENTATIVES

Bonnie Caven, Regina

Mark Hawkins, Regina

Michael Lummerding, St. Brieux

Karen Efthimiou, Regina

U of S SENIOR STICK

Meagan Kielo, University of Saskatchewan

- There are concerns that staff shortages are resulting in pharmacy professionals unable or unwilling to provide professional services.
- Demand for licensed pharmacy technicians outpaces current supply, with a chronic shortage of pharmacy technicians in Saskatchewan hospital pharmacies.
- With the aging population, pharmacists are expressing concern that providing quality care for residents of LTC facilities should be prioritized.

Registrar's Report

- **Saskatchewan Health Human Resources Action Plan** – The province is engaging in aggressive recruitment of health care workers.

- ▶ Prioritization of SCPP work to review Bylaws from Part B to F to align with the new *Licensing and Fair Registration Act* and Regulations.
- ▶ Modernization of the bylaws is required with respect to licensure.
- ▶ Prioritization to create an appraisal and assessment program for internationally trained pharmacy technicians.

- **COVID-19 Updates**

- ▶ 932 Paxlovid dispenses; 69 prescribed by pharmacists.
- ▶ 711,536 COVID immunizations.

- **Pharmacy Manager Course**

- ▶ 93 registered and 16 completed Pharmacy Manager Course.
- ▶ 8.1 rating out of 10 to date.
- ▶ Other provinces are requesting access.

- **NAPRA Updates**

- ▶ Almost all provinces are now signatories to the Cross Jurisdictional Framework.
- ▶ SCPP will need to prepare



regulatory instruments for members and for those who wish to practice in the province. SCPP staff receive many questions about cross jurisdictional practice – pharmacy professionals in all provinces who choose to provide care to patients that reside in other provinces must follow the legislation, bylaws and standards of the province in which the patient resides.

- ▶ NAPRA has begun work on a review of the language proficiency requirements to ensure it is up to date.
- ▶ Entry to Practice Competencies committee work has started.
- ▶ Provincial Regulatory Authorities (PRAs) are hiring more staff to deal with changing regulatory demands.

- **Staff Updates**

- ▶ Shauna Gerwing joined SCPP on Sept. 6 as the new Competency Assurance Director.
- ▶ Simeon Areoye joined SCPP on Aug. 15 as the new Administration and Office Operations Coordinator as Darlene King retired after 10 years with SCPP at the end of September.

Other Business

- As of Sept. 1, commercially manufactured methadone is covered under the Drug Plan in Saskatchewan and by Nov. 30, compounding methadone will no longer be enabled unless there is a documented allergy. When other provinces switched to the commercially available product, they observed an increase in the number of pharmacies providing OAT. With the continued opioid crisis and increase in overdose deaths, Council hopes to see an increase in the number of pharmacies providing OAT services. SCPP staff will be reviewing the number of pharmacies providing OAT services and reporting back to Council at the next meeting.

- **Council Elections and Appointments**

- ▶ Councillors Sarah Kozusko's and Roxanne Bagnall's terms end as of June 30, 2023.
- ▶ Sarah Kozusko let her name stand for a further three-year term, for which Council voted in favour. Roxanne Bagnall has chosen to end her term and elections will be held in early 2023 to fill the position of Rural/Remote Pharmacist.

Continued on next page ▶



- **Competency Assurance Program (CAP) Update**

- ▶ Consultant Nancy Winslade provided an update on the progress of the revised proposed CAP. Please see details in CAPtivate later in SCOPe.

- Council approved draft Part K Prescriptive Authority bylaws, and accompanying policies, to begin consultation with the Ministry of Health. Stay tuned for broad stakeholder consultation.

- **Public Engagement Working Group**

- ▶ To support Strategic Goal 4 (To have enhanced transparency to stakeholders, supported by contemporary governance and management practices.) and Objective 4.5 (The mandate of the SCPP and how it delivers on its mandate has been effectively communicated to the public and other external stakeholders.), Council approved a working group Terms of Reference at the previous meeting and agreed to appoint two members from Council and to recruit for public members outside of Council.
- ▶ Recruiting process for public members has been started.
- ▶ Council appointed Karen Efthimiou and Kelsey Dumont to the Public Engagement Working Group.

- **COMPASS and QIR Report**

- ▶ 39,607 incidents reported as of Aug 31, 2022.

- ▶ Incorrect dose continues to be the top type of error – 9,179.
- ▶ No Error (Near miss) overall is the most common outcome – 22,283.
- ▶ ISMP provided a new statistic on the top contributing factors of incidents.
 - Interruptions – 121
 - Workload – 91
 - Staffing deficiencies – 47
 - Noise – 42
 - Look/sound-alike names – 32
 - Inefficient workflow – 27
- ▶ Quality Improvement Reviews (QIR)
 - As of September, 97 per cent of all pharmacies have received a QIR and by the time of publishing, all pharmacies will have had their baseline review. The field operations team is now onto the second round of inspections which will follow the risk matrix that Council approved in June.
- ▶ With the five-year anniversary coming for COMPASS and with the QIR program in its third year, Jeannette Sandiford, Asst. Registrar, Quality Assurance and Field Operations, presented to Council an assessment of the program.

- 50 incidents reported per 100,000 rxs at the start compared to average 25 in recent years – the decrease

likely shows COMPASS is having a positive impact.

- 4.2 incidents reported/month/pharmacy vs 3.5 and 2.9 recently.
- 48 per cent of pharmacies reporting at the start vs 33 to 37 per cent recently.
- It was noted that results could have other possible interpretations such as reduced reporting, less incidents occurring, reporting prioritization, and increased workloads lessening reporting. However, the above decreases likely show COMPASS is having a positive impact on overall safety in community pharmacies.
- Overall, positive results include:
 - ▶ Increased awareness of system issues;
 - ▶ Pharmacy teams developing and implementing strategies;
 - ▶ A positive impact on the number of incidents occurring.

Continued on next page ▶

MedSCIM Results Jan. 1, 2020 – May 31, 2022



7.5 %



52.1 %



40.4 %

		Grade D - Pathological	Grade C - Reactive	Grade B - Calculative	Grade A - Generative
Core Event Description	Level 1 - Report fully complete	34	222	467	525
	Level 2 - Report semi-complete	42	686	619	193
	Level 3 - Report not complete	11	98	31	4

MedSCIM Results June 1, 2022 – Aug. 31, 2022



1.4 %



51.6 %



47 %

		Grade D - Pathological	Grade C - Reactive	Grade B - Calculative	Grade A - Generative
Core Event Description	Level 1 - Report fully complete	0	47	66	129
	Level 2 - Report semi-complete	2	124	78	31
	Level 3 - Report not complete	0	5	0	0

The medication incident provides insufficient information to allow meaningful qualitative analysis.

The medication incident provides sufficient information to describe the medication incident. No information is provided about contributing factors.

The medication incident provides sufficient information to describe the medication incident and contributing factors.

The medication incident is treated as an isolated incident. No solutions are offered to prevent future recurrence.

The medication incident focuses on human behaviours instead of a systems-based approach.

The medication incident uses a systems-based approach to describe the root cause. No solutions are offered to prevent future recurrence.

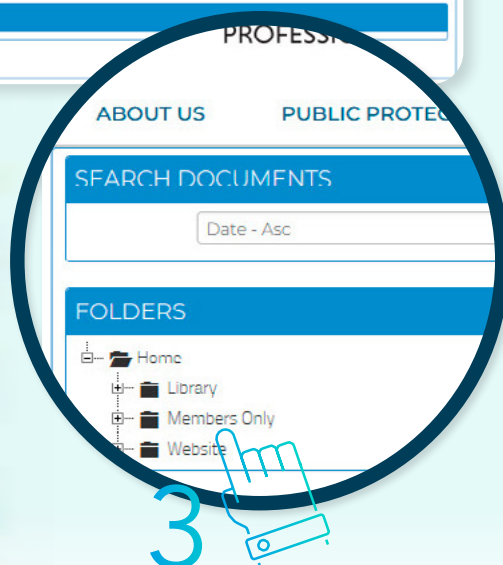
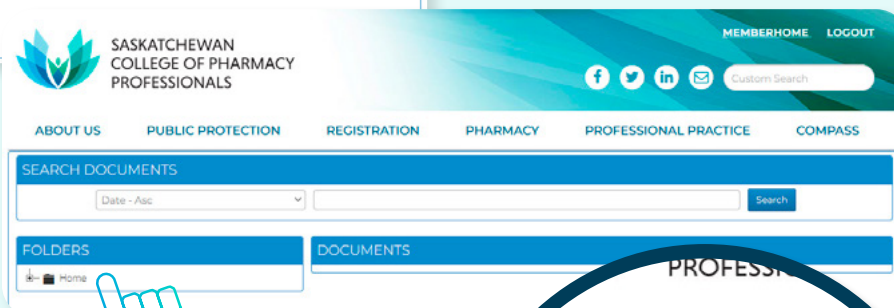
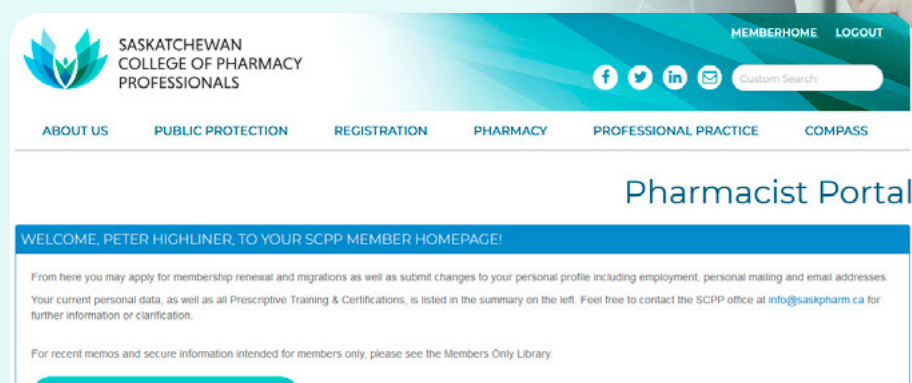
The medication incident uses a systems-based approach to describe the root cause and develop possible solutions to prevent future recurrence.

Enhanced Members-Only Section

Enhancements have been made to the members-only section of the database, which will now include folders where you can access correspondence that you have received from the College such as:

- forgery notifications
- Health Canada restriction letters
- memos sent by the College for easy access

Easy as:





Who's Who Behind the Counter

It's important for optimum patient care for the patient to know which of the staff in the pharmacy are pharmacists, pharmacy technicians, or pharmacy assistants and who they can talk to about their medications.

The Human Resources section of the Pharmacy Manager Responsibilities Reference Manual document states:

6.1.5. All pharmacy staff members have a name tag with

their professional designation, so the public is able identify the pharmacy professional (e.g., pharmacist, pharmacy technician, pharmacy assistant).

Pharmacy professionals are reminded that name tags play an important role in delivering safe and effective pharmacy care. It's equally important when pharmacy staff answer the phone, that they identify themselves as pharmacist, pharmacy technician, or pharmacy assistant.

Doctor Who?

Having a degree in pharmacy is one of several requirements needed for a certificate of registration, in order to practise as a licensed pharmacist in Saskatchewan. It does not, in itself, confer the right to practise pharmacy.

Should an individual wish to make reference to their educational credentials, this information should be presented in a manner that is not ambiguous, confusing, or misleading to the public.

SCPP has not established any additional policy or guideline restricting how a degree or credential may be used; however, it must be evident whether an individual is licensed by the College and able to practise pharmacy or not.

Pharmacy graduates who possess a PharmD (Doctor of Pharmacy) degree should be aware that use of the title "Doctor" (or an equivalent abbreviation, such as Dr.) is restricted by *The Medical Professions Act*, [Section 80](#). A

person or pharmacist cannot use any titles, affix or prefix listed in [Section 80](#) (1)(c) in the course of providing, or offering to provide, treatment of human ailments, or advertise or hold themselves out as such to an individual.

The regulated health professionals who may use this title in practice are defined in the Act. Pharmacists should be mindful when referring to their Doctor of Pharmacy/ PharmD degree of the potential for misinterpretation by a patient that the individual is, for instance, a Medical Doctor (MD) or dispensing physician.

Once registered with the College as a pharmacist, they are permitted to use the title of "Pharmacist" or any other protected title as defined in *The Pharmacy and Pharmacy Disciplines Act*, [Section 22\(1\)](#). Similarly, "Pharmacy Technician" (and its abbreviation PhT) became a restricted title under the Act in 2015.



Student Spotlight: Jenna Navigates the Verbs in Policy

Estevan native Jenna Kreklewich spent the first of four rotations with SCPP at the start of summer. She is heading back to Estevan for her next rotations at St. Joseph's Hospital and Pharmasave and is set to graduate in April 2023. We sat down with her and got her thoughts on her experience.

What first made you decide to become a pharmacist?

My path to deciding to pursue pharmacy as a career is likely different than most others. I knew I wanted to be in healthcare, but I didn't know where my "best fit" would be. So, I started at the University of Regina doing a biology degree with the goal of getting into a pre-professional program, I just wasn't exactly sure which one yet. So, during my time at the U of R, I self-reflecting, wrote the LSAT, investigated different career options numerous times, and ultimately, landed on the conclusion that pharmacy was the career path for me.

I came to that conclusion because it was the trifecta of what I wanted my career to be: being in the healthcare field, endless and vast career options, and making a positive impact on people's lives.

What made me choose SCPP for my practical?

I always knew I wanted to gain experience and exposure in a non-direct patient care rotation so when I saw SCPP as an option I was excited because of the educational opportunities it can provide. Being at SCPP would also provide me with an opportunity to see other non-direct

patient care jobs a pharmacist can have, which intrigued me even more. Specifically, with SCPP, I wanted to gain a better understanding of what goes into the policy and the decision-making processes about the pharmacy profession.

Continued on next page ►



I also wanted some knowledge on what it is like to work at SCPP, including what their day-to-day work looks like to see if this is something I would potentially enjoy doing during my career.

How would you describe your experience working at SCPP?

My experience working at SCPP was eye opening. After this rotation, I am able to read and understand the bylaws and regulations exceedingly better than I could before this rotation. I have also gained so much knowledge on SCPP as a whole. I enjoyed that the staff at SCPP included me in as much as possible during my rotation so I could gain as much experience as I could here.

How does week one Jenna compare to Jenna at the end?

Week one Jenna was very uninformed about what SCPP does. I was very confused on what SCPP does and in meetings, I did not speak up as often as I could have as I was still learning about SCPP. Now, at the end of my eight weeks, I am confident in my ideas and sharing them with different groups during meetings and I have a lot better idea on how to read the regulations and bylaws. I have confidence in my ability to provide insight on projects as the rotation progressed.

What is your biggest takeaway?

My biggest takeaway is when reading regulations and bylaws, it is critical to read and understand the differences between verbs. For example, “may” and “must” have two very distinct and different meanings when reading policy.

What do you wish would have been different?

I wish this rotation was longer as SCPP has numerous different projects and work going on at the same time and by having more time here I would have been able to be involved in more. Overall, I was able to participate in as much as I could at SCPP but having more time would have allowed for even more.



Policy implementation and changes occur after a very careful and considerate amount of discussion and investigation. The process to make changes often involves many people working numerous hours to come to fruition.

What do you wish other students knew about SCPP?

There is a lot more that goes on at SCPP than often realized by students and others. Policy implementation and changes occur after a very careful and considerate amount of discussion and investigation. The process to make changes often involves many people working numerous hours to come to fruition. I would also like the students to know the amount of thought and collaboration that goes into every decision at SCPP. I wish other students were able to get to know the staff at SCPP as I have as they are all so incredibly knowledgeable and welcoming.

What does the next few years look like for you?

That is a very difficult question to answer. After this rotation I will continue with my fourth year by completing my next three rotations and graduate in April 2023. What happens after April 2023 is currently unknown and I am hoping the next three rotations will give me a better idea of my future in pharmacy.

I would enjoy starting work in either Saskatoon or Regina, in any role whether that is hospital, community, or in a role at an organization like SCPP, MedSask, or the Drug Plan.

For my first year(s) out of school, I want to gain as much experience and confidence in my abilities as possible to allow myself to grow into a competent and confident pharmacist, in turn allowing me to provide my patients with the best care possible. I want to allow myself to gain as much knowledge as I can from as many people as possible.

Outside of work, I would love to start traveling, with Peru, Thailand, and Oregon at the top of my extensive list. I also would love to get a dog as soon as possible.

In the next few years, I hope to be making a positive impact on my patients' care, traveling as much as possible, and ultimately, being happy with the life and career I am starting to create. ■



Reminders

Is Your Profile up to Date?

Members are responsible for keeping their profiles up to date. This includes address, contact details, employment, location, name, valid email address, etc.

This ensures communications can reach you and the public register of pharmacy professionals required by legislation is up to date.

One Privacy Officer per Pharmacy

Pharmacy managers should note that on Dec. 21, 2012, SCPP committed to the requirement of the Office of the Privacy Commissioner of Saskatchewan that there be a privacy officer in each pharmacy that is either a manager or works close to full-time hours. A pharmacist cannot be a privacy officer of more than one pharmacy.

This requirement has no exceptions and cannot be appealed.

Permit Renewal

- As of Nov. 1, 2022, new applications to be the pharmacy manager in more than one location will follow criteria set out in the [Pharmacy Manager Policy](#), where a licensed pharmacist shall not be named as the pharmacy manager of more than one pharmacy at a time, unless they meet the criteria set in section 3 and have been approved by the Registrar.

- The [Community Pharmacy Manager Course](#) must be completed by all managers on or before April 30, 2023. New and former pharmacy managers must complete the course prior to being approved as the pharmacy manager in the permit.
- Permit renewal in 2022 will include new declarations for:
 - Central fill,
 - Medical lab licenses,
 - LTC or other contracts,
 - Collaborative Practice Agreements
 - Pharmacy services – Travel Health (ISTM) and or vaccine preventable disease prevention, OAT (Opioid Agonist Therapy), Partnership to Assist with Cessation of Tobacco (PACT), Certified Asthma Educator or Diabetic Educator
 - Compounding – current level, and non-hazardous sterile or hazardous sterile, compliant with NAPRA Model Standards

Pharmacy Manager Training

Members have been asking for clarification on the new pharmacy manager training.

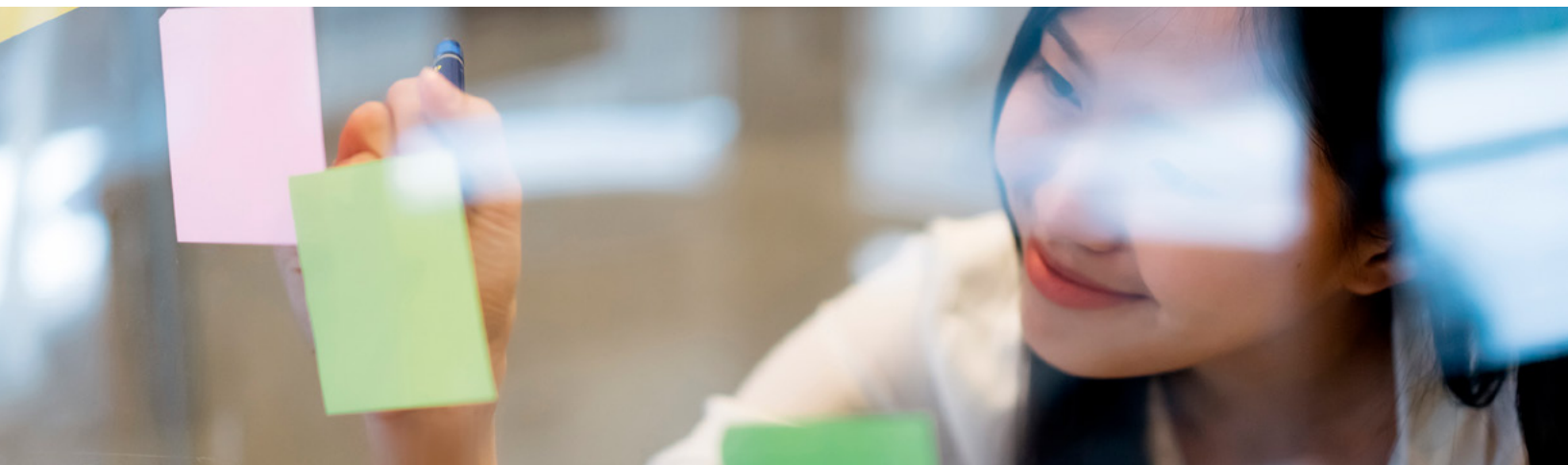
For any **current pharmacy managers** (members whose name currently

appears on an active pharmacy permit), the Community Pharmacy Manager Course completion deadline is April 30, 2023.

For any **new/incoming pharmacy managers** (members whose names do not currently appear on an active pharmacy permit) as of July 25, 2022, or after, the Community Pharmacy Manager Course must be completed prior to applying to be a pharmacy manager.

SCPP encourages you to complete the Community Pharmacy Manager Course through CPDPP as soon as possible, regardless of whether you are a current or new/incoming pharmacy manager or someone who may aspire to be a future pharmacy manager, as it does take time for CPDPP to provide you with the Certificate of Completion:

- CPDPP will provide the member with a Certificate of Completion via email approximately five to 10 business days following the completion of the course.
- Members must upload their Certificate of Completion to their SCPP member portal (not SCPP pharmacy manager portal).
- SCPP will update the member and pharmacy profiles with training completion within one to three business days of upload.



focus Pharmacy Permits

This year's annual Pharmacy Permit Renewal online application form is open to pharmacy managers. The deadline for submission of the Pharmacy Permit Renewal online application form, which includes submission of the applicable fee(s), legislated requirements and certifications, is **Nov. 1, 2022. Current permits expire Nov. 30, 2022.**

☐ Online application form and fees

Any other outstanding [fees](#) that have not yet been paid will need to be paid before permit will be approved.

☐ Pharmacy Manager Policy

New requirements for training, physical presence, managing absences, etc. See [Pharmacy Manager Policy](#) and [SCOPE Special Edition](#).

Current permits expire

Nov. 30, 2022

☐ Privacy Officer certification

If certification is expiring prior to Jan. 1, 2023, re-certification must be completed prior to Nov. 1, 2022.

☐ COMPASS QI Coordinator training

If certification is not yet completed, must be completed prior to Nov. 1, 2022.

☐ Medication Safety Self-Assessment (MSSA)

If last submission was prior to Jan. 1, 2021, a new MSSA must be completed prior to Nov. 1, 2022.

☐ Directorship (not applicable to co-operatives)

- Pharmacy manager must be a director.
- Majority (over 50 per cent) of directors must be SCPP members.

☐ Appeal to remain as the manager of more than one pharmacy

Will be able to manage existing pharmacies until Nov. 1, 2023, to allow enough time to secure a new manager who meets the requirements.

☐ New applicants to manage more than one pharmacy

Follows the [Pharmacy Manager Policy](#), where a licensed pharmacist shall not be named as the pharmacy manager of more than one pharmacy at a time, unless they meet the criteria set in section 3 and has been approved by the Registrar.

Deadline for permit renewal

Nov. 1, 2022

CAPtivate

[Competency Assurance Program Updates]

Substantive effort was dedicated over the summer to clarifying the relationship between the current SCPP Competency Assurance Program (CAP) and the proposed vision for the CAP, and to creating visuals to describe the vision for the revised CAP.

It's important to note that nothing is changing right now. One of the priorities in the development of a new CAP is to ensure that members are given ample time and opportunity to adjust.

Proposed changes are being developed to **members' individual responsibilities** to maintain competency relative to **SCPP's responsibilities** for programs to assure maintenance of competence.

This information and process flowchart (see next page) were reviewed at the Council meeting. More detailed information can also be found in the recently published [MicroSCOPE Special CAP Edition](#).

The program would be developed slowly with pilot testing of various components over the next year:

- It would begin with measuring Patient Reported Experience Measures (PREMs) in community pharmacy; draft PREM are ready for consideration and potential pilot project testing in the new year at a limited number of community pharmacies.
- These PREMs would focus on patients' experience with pharmacy teams over the previous six to 12 months and not with an individual pharmacy professionals.



- Peer and non-pharmacy colleague feedback for in-patient hospital pharmacy professionals would be developed next year.
- Ultimately, these measures could be considered for both sites.

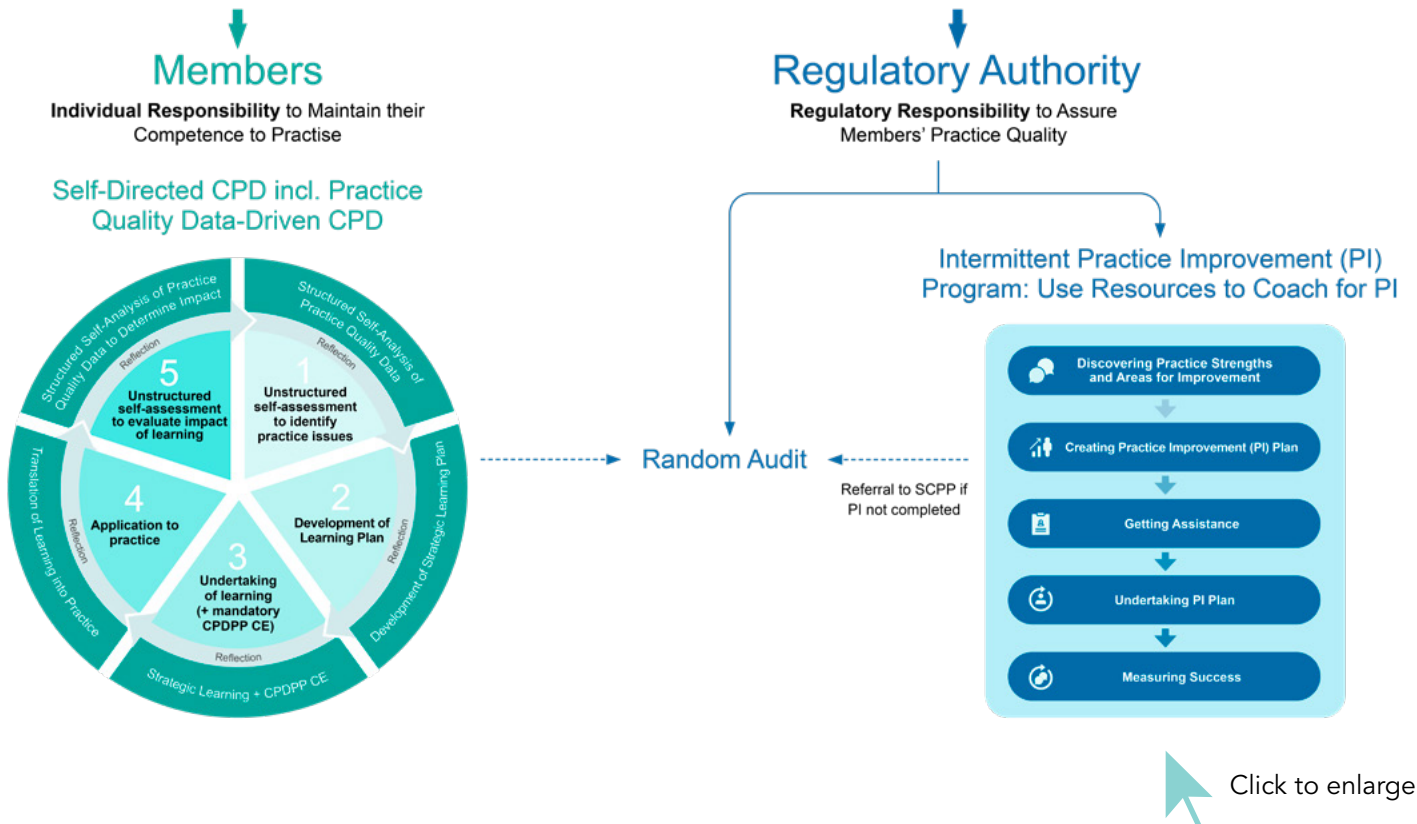
In developing the new CAP, SCPP is using best practices from existing programs that have developed standardized processes for managing both PREMS and peer/other health care professional feedback.

Next Steps

- October/November – review of focus group feedback and comments
- December 2022 – presentation to Council
- 2023 – broad member and stakeholder consultations

Continued on next page ►

Proposed Outline for SSCP's Revised Competency Assurance Program



Timeline to Date

- ▶ May 2019 – Members participate in a Competency Assurance Survey to assess pharmacy professionals' needs and preferences in continuing professional development.
- ▶ June 2019 – First meeting of the newly formed CAP Task Force (formerly Competency Assurance Committee/ Working Group) tasked with revamping the College's Competency Assurance Program (CAP).
- ▶ 2020 – Delays due to the COVID-19 pandemic.
- ▶ March 2021 – Consultant Nancy Winslade is contracted to lead the working group in developing a comprehensive, supportive CAP.
- ▶ May 2021 – Research and development by the Task Force gets underway.
- ▶ September 2021 – Draft program is formulated and reviewed.
- ▶ Updates presented to Council at the December 2021 meeting.
- ▶ April 2022 – A five-year plan is presented to Council and recruitment for a Competency Assurance Director begins.
- ▶ May 20, 2022 – The posting closes for the Competency Assurance Director position.
- ▶ June 2022 – The Task Force composition is reviewed and is transitioned from research and design to feedback, consultation, and implementation.
- ▶ June 2022 – New Competency Assurance Director is hired and set to on-board Sept. 6, 2022 (see Staffing Comings and Goings later in SCOPE).
- ▶ July 2022 – Planning takes place for robust virtual stakeholder consultation to begin in the fall with members and other key stakeholders.
- ▶ Sept. 8, 2022 – Special Edition Microscope on the proposed CAP is published.
- ▶ Sept. 9, 2022 – In preparation for the Focus Groups, SSCP Council President Amy Wiebe, SSCP Council President-Elect Tania Schroeder, CPDPP Associate Director Danielle Larocque and consultant Nancy Winslade prepare a webinar that explains the rationale for and details of proposed CAP changes.
- ▶ Sept. 19 and 21, 2022 – Member feedback on the proposed CAP revisions through two community pharmacy-based Focus Groups is held.
- ▶ Sept. 30, 2022 – Amy Wiebe, Nancy Winslade, and Yvonne Shevchuk present the proposed CAP revisions at the CSHP-Saskatchewan AGM.

Bylaw and Policy Updates

Pharmacists Enabled to Prescribe Pediatric Acetaminophen

The Saskatchewan College of Pharmacy Professionals, the College of Physicians and Surgeons of Saskatchewan, and the College of Registered Nurses of Saskatchewan have worked together to create a provincial collaborative practice agreement (CPA), enabling pharmacists to prescribe for compounded pediatric acetaminophen products.

With the shortage of pediatric acetaminophen products, pharmacies offering compounding services are able to compound acetaminophen with a prescription as per Health Canada policy. However, pharmacists could only prescribe these products under limited conditions without a Collaborative Practice Agreement (CPA) in place.

With this provincial collaboration, Saskatchewan residents will be able to speak to their pharmacist about their pediatric acetaminophen needs and receive a prescription, which can then be filled at any pharmacy that compounds acetaminophen.

Please see the Joint Statement, Pharmacist Assessment Record, and Guidelines below:

- [Joint Statement](#)
- [Pharmacist Assessment Record and Guidelines](#)

This will continue until the shortage is resolved.

Registrar's Enactment of Part K – Extending a Drug Previously Issued by a Pharmacist

To ensure patients have continued access to their medications for chronic conditions, the SCPP Registrar is enacting section [10\(5\)\(b\) of Part K](#) of the SCPP Regulatory Bylaws, effective immediately.

This will allow pharmacists to prescribe (extend) a prescription for a patient, when the previous prescription for that drug was issued by a licensed pharmacist, as long as the following conditions are met:

- **Patient Eligibility**
Only patients with chronic diseases/conditions who are stable on their medications. This means:
 - ▶ Each request must be judged on an individual basis

and only after considering the patient's medical history and medication profile. The pharmacist must be satisfied that the treatment with the medication has remained relatively stable (i.e., no significant changes to dosages or drug therapy).

- **Prescription Duration**
Pharmacists may prescribe a maximum duration of three (3) months, and thereafter the patient must see their practitioner. This means a pharmacist may prescribe:
 - ▶ a 34-day supply, up to three (3) times;
 - ▶ a three-month supply as a single fill; or
 - ▶ a 100-day supply for a drug listed in the SK Formulary's [100 Day List](#).

As per the [NAPRA/SCPP Standards of Practice](#), pharmacists must review the information in all of the patient's available health records, and assess the patient's health status and unique circumstances, including an assessment of the appropriateness of therapy when prescribing (extending). Also see [Prescriptive Authority – Pharmacists](#) for other standards that apply.

As a reminder, [section 2\(2\)\(i\) of Part K](#) of the SCPP Regulatory Bylaws requires pharmacists to document their rationale for exercising this exemption on the Pharmacist Assessment Record (PAR).

This emergency exemption is being enacted in collaboration with the College of Physicians and Surgeons of Saskatchewan to help address concerns with patient access to family physicians. (See [Emergency Exemptions for Prescribing Authority](#)). It will remain in effect until Sept. 30, 2023, or until revoked by the SCPP Registrar.

Prescription Regulations Summary Chart

The Prescription Regulations Summary Chart has been updated and renamed as [Drug Distribution by Prescription](#).

This chart is a synopsis of federal and provincial acts and regulations governing distribution of drugs by prescription in Saskatchewan, including Health Canada's Section 56 Exemption.

Members should consult the applicable acts, regulations, bylaws, and policies for further details.

Notes from the Field

Landmarking Injections

The Complaints Committee and SCPP Complaints team have noted a trend in complaints and concerns involving improperly landmarked injections.

The concerns have described injections administered as low as the lower bicep area and as high as near the shoulder joint. Some patients have experienced significant pain and bursitis following the improperly landmarked injections, while other patients have required another vaccination be administered after consultation with Public Health.

As we head into a new influenza immunization season and continue administering COVID-19 vaccinations, the College reminds all members who provide injections to ensure they are up to date on their competencies to perform injections, and handling emergencies related to providing injections.

Continuing Professional Development for Pharmacy Professionals (CPDPP) offers a number of educational offerings, including live workshops and online resources and videos for your review:

- [Injection Training](#)
- [Injection Resources](#)

In addition, SCPP has multiple resources available for its members related to injection administration:

- [COVID-19 Resources](#)
- [Administration of Drugs by Injection and Other Means](#)
- [Hand Hygiene](#)
- [Infection Control Guidelines](#)

Transferring a Prescription When a Pharmacy is Closed

The Field Officers have received a number of questions lately regarding whether a prescription may be transferred when the transferring pharmacy is closed.

SCPP Regulatory Bylaws Part N Section 6 – **Prescription Transfer Conditions** states:

A licensed member to whom a prescription has been transferred under section 4 of Part N shall not sell a drug pursuant thereto until: (a) he has obtained from the licensed member transferring the prescription his name and address, the number of authorized refills remaining and the date of the last refill; and (b) he has: (i) received a copy of the prescription as written by the practitioner or as reduced to writing as required by sections 2 and 3 of Part N as the case may be; or (ii) where the prescription has been transferred to him verbally, reduced the prescription to writing indicating therein the information specified in section 3 of Part N.

The applicable section of the Food and Drug Regulations states:

C.01.041.1 Subject to paragraph C.01.041.3(2)(b), a pharmacist or pharmacy technician may transfer to another pharmacist or pharmacy technician a prescription for a prescription drug.

Therefore, it follows that if a pharmacy is closed, another pharmacy cannot initiate a transfer from that pharmacy as there is no ability to communicate with the other licensed pharmacist or pharmacy technician regarding the details of the prescription or any other information that may need to be provided. There is also no ability to receive a copy of the prescription record.

The pharmacy that has received the request to transfer the prescription may utilize prescriptive authority if appropriate, following relevant bylaws described in [Part K section 5](#), Continuing Existing Prescriptions.

Transition to Commercially Available Methadone

Commercially available methadone 10 mg/ml oral concentrates for OAT will be listed as benefits of the Saskatchewan Formulary of the SK Drug Plan and Extended Benefits Branch (DPEBB), effective Sept. 1, 2022.

These products are already listed on the Non-Insured Health Benefits (NIHB) Drug Benefit List.

All patients receiving compounded methadone will require a new prescription to transition to commercially available products before Nov. 30, 2022. Compounded methadone will only be approved by the SK DPEBB in exceptional circumstances after Nov. 30, 2022, under the Exception Drug Status (EDS) Program.

While Metadol D is the preferred product, it is not the only viable option. In the medSask Methadone Webex, pros and cons were presented for various commercial products. Prescribers should consider products based on whether they are beneficial to the patient and depending on individual patient factors and patient choice.

The transition to commercially available methadone may come with many questions for health care providers and

patients. CPDPP and medSask have developed resources to help providers and people taking methadone through this transition:

- [Information and Resources](#)
- [Webinar: Supporting People Taking Methadone](#) – What Saskatchewan Health Care Providers should know about Changing to Commercial Products (recording)



Facebook private group open to members, interns, and students. Get up-to-the-minute news and alerts. Click here.

Spotlight on PREVENTION

Entering Correct Lot Numbers for COVID-19 Vaccinations

The Complaints team at SPP has been addressing ongoing issues surrounding the incorrect input of COVID-19 vaccine lot numbers into the SIG field. Despite previous communications, this appears to continue to occur among many pharmacies.

Incorrectly entered or missing LOT information causes an increase in workload for eHealth, pharmacy staff, and increases anxiety for patients by delaying access to their records. It is very important to accurately submit these records.

Pharmacies are reminded that only the correct vaccine lot number should be included in the SIG field when processing the COVID-19 vaccine injections. The correct way to enter the LOT number into the SIG field is to only include the numbers of the LOT. Do not include the word LOT or the # sign or any other information.

TIP: Some members have reported difficulty deciphering a "B" and an "8" and ended up with Lot# errors. Going forward, they decided to check on the Vaccine Distribution Portal to confirm LOT numbers prior to transmitting the vaccine.

eHealth has indicated the errors do not need to be adjusted if they have already occurred but wishes to

remind pharmacy staff to be more diligent going forward.

See the [eHealth communication here](#).

Location of Graval™

The College received a concern from a member of the public regarding the location and availability of Graval™ (dimenhydrinate) products when visiting their local pharmacy. The products were located in an area that was visible and accessible to young children, and the public member was concerned with the ease of access to a potentially harmful product.

While dimenhydrinate products are classified as Schedule III, NAPRA also notes that "Pharmacists are advised that in areas where there is evidence of abuse or particular concern about abuse, dimenhydrinate products should not be located in a self-selection area of the pharmacy."

It is recommended that pharmacies review the location of their Graval™ and dimenhydrinate products and consider relocation of the products to ensure a higher level of patient safety, such as out of the reach of small children or out of the self-selection area of the pharmacy.





From the Desk of the Dean

For the latest news from the college, [visit our website](#).

The College of Pharmacy and Nutrition has returned to an in-person learning and working environment, and all the activity in the college has been positive for our students, faculty and staff. The university's current safety measures can be found on the COVID-19 response website. [Read more](#).

Dr. Charity Evans was appointed Associate Dean, Academic as of July 1. Thank you to Dr. Yvonne Shevchuk who has served in the role since 2010. [Read more](#).

The following faculty members (pictured below, left to right) have been promoted effective July 1:

- Dr. Robert Laprairie: Tenured and Promoted to Associate Professor
- Dr. Meena Sakharkar: Promoted to Professor
- Dr. Brian Bandy: Promoted to Professor

Congratulations to Shauna Gerwing on her new role with SCPP as the Director of Competency Assurance. Shauna spent more than 11 years with the college and served as SPEP Coordinator and Associate Director of Experiential Learning during her time with us.

Kirsten Bazylak has assumed the role of Associate Director of Experiential Learning and Taylor Raiche has also joined the college as an Experiential Learning Coordinator.

The university held its convocation ceremonies in-person this spring, and 79 pharmacy and 15 nutrition degrees were awarded, along with four graduate degrees. Three more pharmacy graduates will receive their degrees at the fall convocation ceremony. Kathrine Neville and Meg Fotheringham were recognized as the most distinguished graduates in pharmacy and nutrition at convocation.



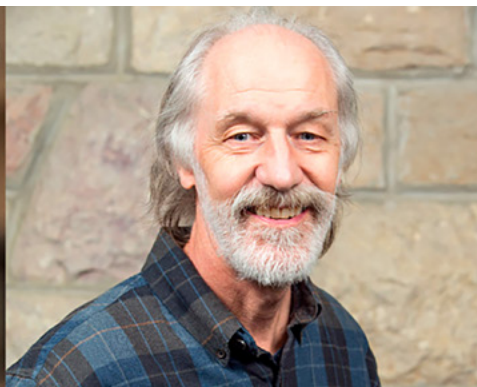
Dr. Charity Evans

Two of our students were recognized at the 2022 Canadian Society for Pharmaceutical Sciences Awards and Poster Awards:

- Abdul Salama received a CSPS National Undergraduate Student Research Program Award. (Supervisor: Dr. Ellen Wasan)
- Saniya Alwani received a Trainee Poster Award. (Supervisor: Dr. Ildiko Badea)

In June, Amy Lamb (BSP '12) and Dr. Jaris Swidrovich (BSP '10) announced the creation of the Indigenous Pharmacy Professionals of Canada during the Canadian Pharmacy Conference. [Read more](#).

*Dr. Jane Alcorn,
College of Pharmacy and Nutrition*



Pharmacy Examining Board of Canada (PEBC) Examination Dates

Below are the exam dates at time of publishing. For the most up-to-date exam schedules, please visit www.pebc.ca.

Pharmacist Schedule of Exams

Examination Name	Examination Date	Application Deadline Date*
October-November Pharmacist Qualifying Examination	MCQ: Oct. 31 – Nov. 4, 2022	Deadline passed
	OSCE: Nov. 5, 2022	
January 2023 Pharmacist Evaluating Examination	Jan. 11, 2023	Deadline passed
May 2023 Pharmacist Qualifying Examination	MCQ: May 23 – 27, 2023	Feb. 16, 2023
	May 28, 2023	

Pharmacy Technician Schedule of Exams

Examination Name	Examination Date	Application Deadline Date*
September Pharmacy Technician Qualifying Examination	MCQ: April 5, 2023	Nov. 24, 2022
	OSPE: April 1, 2023	

Connect with us to get the latest news and updates from the College, helpful practice tips, key resources, important reminders, and more!

