

SCOPE newsletter

December 2022



SASKATCHEWAN
COLLEGE OF PHARMACY
PROFESSIONALS

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SCPP President's Holiday Message

As the holidays approach, amidst the often-intense hustle and bustle of the season, I am hopeful that the month of December will be filled with sleigh-rides, hot chocolate, and seasonal movies, rather than waiting in long store lineups. It feels like an opportune time to pause to remember those that are closest to us, to delight in the joys which surround us, and to celebrate the hope for the coming year.

As I reflect on being at the mid-point of the presidential year, I am proud of and grateful for the dedication and engagement of the SCPP Council and staff.

Two Councillors are nearing the end of their two-year terms, one of whom has been re-appointed in accordance with the updated Administrative Bylaws, and the other who has chosen to complete their term on June 30, 2023. As such, in the coming months, SCPP will be sending out requests for applicants to put their name forward to fulfill the Council's Electoral Category of a Rural or Remote Pharmacist.

There is great importance in having the perspectives of pharmacists practising in rural/remote communities in deliberations around the Council table. As such,



I would strongly encourage anyone who identifies as representing this perspective, and who is committed to serving the College's mandate of protecting the public interest, to please put their name forward. Additionally, any pharmacy professional who is interested in getting involved in supporting the safe regulation of our profession is encouraged to consider putting their name forward for one of SCPP's committees.

Through the past number of months, there have been successes I wish to acknowledge at the College level. By year-end, the College will have completed Quality Improvement Reviews (QIRs) in 100 per cent of the province's permitted pharmacies.

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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.

We have heard positive feedback from pharmacy professionals who have found these reviews to be helpful in enhancing the safe delivery of pharmacy care.

Additionally, the College has been active in establishing a Public Engagement Working Group to support the strategic goal of enhanced transparency to stakeholders, including the objective of effectively communicating with the public regarding how the College delivers on its mandate.

As we look to the future, the College has been both forward thinking (such as in planning for changes to the Competency Assurance Program), and proactive in responding to elements occurring in the larger health care environment. In the coming year, we expect the College will need to act in a timely and responsive manner to ensure our Bylaws appropriately optimize public safety through the consideration of *The Labour Mobility and Fair Registration Practices Act* now in effect, with the supporting Regulations anticipated in 2023.

The College has also begun surveying its members regarding perceptions, barriers, and potential needs for moving ahead with advanced pharmacist prescribing in the province. There is great potential for further establishing and utilizing the vast knowledge, skills, and abilities of pharmacy professionals in Saskatchewan, and I look to the coming year with excitement and hope to see these aspirations become a reality.

It feels like an opportune time to pause to remember those that are closest to us, to delight in the joys which surround us, and to celebrate the hope for the coming year.

On behalf of the SCPP Council and staff, I wish to extend our warmest wishes that the holiday season will be a time of happiness, healing, and renewed strength. May all that is meaningful, full of love, and brings your heart joy, be yours this holiday season and throughout the coming year. ■



The Privilege of Self-Regulation

SCPP is running an on-going series in SCOPE examining professional regulation. [See the first installment here](#), which outlines the difference between regulators and associations.

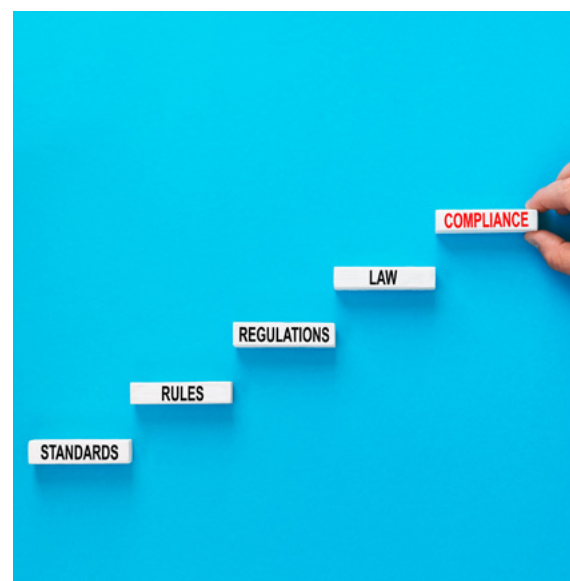
Professional self-regulation in Canada is unique in some key aspects. In other parts of the world, regulatory models differ, but legislative mandates to put public interest first remain constant across professions and jurisdictions. Professional and occupational regulation in the United States is largely government led, and professional regulators in the United Kingdom, Ireland, Australia and New Zealand are subject to considerably more oversight and accountability provisions than we

have seen here. British Columbia, which is currently undergoing regulatory reform, may end up being the beginning of change in Canada.ⁱ

“Sometimes our members do not understand what a privilege we have to self-regulate the way we do,” says Deanna Williams, former Registrar of the Ontario College of Pharmacists and known nationally and internationally for her work in professional and occupational regulation.ⁱⁱ

There are three distinct hallmarks of Canadian self-regulation.

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i <https://www.cbc.ca/news/canada/british-columbia/bc-health-regulation-announcement-1.5702216>

ii Deanna Williams 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.

SCPP STAFF

Executive

JEANA WENDEL
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LORI POSTNIKOFF
Deputy Registrar

Executive Assistance

INGRID WAKEFIELD
Executive Assistant to the Registrar

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Administrative Assistant to the Deputy Registrar

Administrative Support

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Administration and Office Operations Coordinator

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Registration Administrator – Pharmacy and Member Relations

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Registration Administrator – Member Relations

MELISSA WEGER
Registration Administrator – Member Relations

CAROLINE ZAREBA
Manager, Pharmacy Permits and Pharmacy Relations

Field Operations, Professional Practice, COMPASS

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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

STEVEN YAKIWCHUK
Field Officer

Competency Assurance

SHAUNA GERWING
Director of Competency Assurance

Complaints and Discipline

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Assistant Registrar – Complaints Director

TAMI SCHWEBIUS
Complaints Manager

JOANNE DEIBERT
Complaints Investigator – Contract

Policy and Legislation

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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

VACANT
Manager, Database and Systems

Communications

MARLON HECTOR
Communications Coordinator

First, regulated professionals across Canada commonly have the ability to elect members of their profession onto regulatory councils. SCPP members will recall that the College had a Council restructuring two election cycles ago. While previously, Council members were elected based on a popular regional vote, Council nominees are now selected according to a competencies, attributes, skills and experience (CASE) analysis and then voting occurs much like a job application where members review resumes and answers to a [Candidate Questionnaire](#).

Second, regulatory bodies in Canada have autonomy in setting membership fees. Regulatory councils have the ability to set fees according to strategic goals and adjust accordingly each year.

"That a council can determine the things they need to do, and then consider how much it's going to cost, and depending on how many members they have, what the fees need to be, is also a privilege," says Deanna.

A third hallmark in Canada is the ability for a profession to discipline their own. In the United States for example, a pharmacist under discipline is likely to appear before an administrative law judge, who may or may not have any knowledge about the profession and practice of pharmacy.

Self-regulation can be and has been lost in some circumstances even in Canada. Deanna herself has first-hand experience with this. She was appointed as supervisor to the College of Denturists of Ontario during the [loss of its regulatory privileges in 2012 and 2013](#).

Common factors that lead to regulatory failure include insufficient separation from professional advocacy activities and governance issues. In the last few years, SCPP has taken a progressive approach; for example, ending its professional awards and award ceremonies and being discerning about activities that focus on regulating in the interest of the public and not on promoting the interests of the profession.



Deanna Williams

In Deanna's view, the risk of losing the ability to self-regulate can be mitigated.

"It requires a clear and unremitting commitment to putting the public interest first," says Deanna.

This commitment is built on asking the right questions and what has come to be known as right-touch principles – essentially, doing the right things right. This means ensuring that the level of regulation is proportionate to the level of public risk – lowering barriers to health care while prioritizing public safety.

In the next issue of SCOPE, the series will delve into the challenges of self-regulation. Stay tuned. ■

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

Michael Lummerding, St. Brieux

Karen Efthimiou, Regina

U of S SENIOR STICK

Meagan Kielo, University of
Saskatchewan

Council Highlights

Dec. 1–2, 2022

Councillors' Environmental Scans

- Acetaminophen, ibuprofen, and amoxicillin shortages remain a concern and challenge for residents and pharmacies.
- An increase in minor ailment prescribing due to lack of family doctors has been identified.
- Pharmacists have requested search capabilities for information on services offered by pharmacies under the "Find a Pharmacy" section of the website. Work is currently underway on this.
- Hospital and community pharmacy staff shortages continue to be a concern.
- Requests for pharmacists to provide COVID-19 vaccinations has decreased.

Registrar's Environmental Scan

- Regulatory reform in British Columbia continues to move forward with legislative changes including less regulatory bodies (six from 20), the addition of a fully member-funded government oversight body, council/board members appointed by Ministry, a discipline process that is separate from individual regulators, among other reforms.
- **Influenza Epidemic**
 - ▶ With the incidence of influenza above five per cent in Saskatchewan, SCPP has enabled pharmacists to prescribe antivirals for the management of influenza based on the [approved medSask minor ailment guidelines and protocols](#).
 - ▶ This includes a significant update to applicable guidelines by medSask. All medSask minor ailment guidelines are available through the SK Health Information Resources Program (SHIRP).
- **Laboratory Training:** Continuing Education for Pharmacy Professionals (CPDPP) is in the final stages of review of the pharmacy laboratory training and education course for pharmacists.
- Canadian Council on Continuing Education in Pharmacy (CCCEP) has launched their Competency Mapped Accreditation for Compounding, which will help address competency gaps in compounding standards.



Health Canada

- ▶ Health Canada reached out to the National Association of Pharmacy Regulatory Authorities (NAPRA) and PRAs regarding harms to children from compounded acetaminophen and inappropriate dosing of adult medications for children.
- ▶ Issues identified were: hospitalizations; inconsistent concentrations leading to dosing errors; large volumes leading to harm; inappropriate concentrations; confusion on doses between usual concentrations 80mg/ml and 160mg/5ml; lack of safety caps.
- ▶ For Saskatchewan, the provincial Collaborative Practice Agreement (CPA) and accompanying medSask documentation has proved to be a sound approach.

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- **NAPRA Updates:** Work continues on the Cross Jurisdictional Framework, Language Proficiency Requirements, PRA/Health Canada Commercial Compounding, and the NAPRA Entry to Practice Competencies for Pharmacists and Pharmacy Technicians.
- The Ontario College of Pharmacy has reported Ontario has seen an increase in pharmacy robberies and are looking to implement time-delayed safes, which Manitoba is also reviewing. Saskatchewan members should refer to the Pharmacy Safety and Security article in this issue of SCOPE.
- Saskatchewan Polytechnic is implementing strategies with the goal of doubling pharmacy technician enrollment.
- **Bill 120**
 - ▶ This Bill was on the table at the recent sitting of the Legislature and would introduce significant changes in regulation.
 - ▶ The Bill addresses the template legislation of most regulatory bodies in Saskatchewan, including, among others, the authority to address a practitioner's fitness to practice; empowering regulatory bodies to suspend or restrict a member's ability to practise while a complaint is under investigation; enabling councils to adopt bylaws without membership approval; giving investigation committees the authority to properly investigate complaints; authorizing regulatory bodies to establish processes for selecting members of council in bylaw rather than legislation; authorizing regulatory bodies to use non-disciplinary alternatives to address concerns about behaviour that do not warrant formal discipline; etc.
- **Expired COVID Vaccine**
 - ▶ The Drug Plan has sent a reminder about procedures for expired vaccines after an incident where patients received incorrect and expired vaccines.

Registrar's Report

- **Strategic Plan Progress**
 - ▶ SCPP staff have moved through a significant amount of the strategic plan and delivered on the set objectives for the year. There remains a significant amount of work that is not on the strategic plan; however, these must be completed based on operational priorities.
 - ▶ There are still two full years remaining on the strategic plan; however, it is expected most of 2023 will be devoted to *The Labour Mobility and Fair Registration Practices Act* (Bill 81) (modernizing our registration and licensure bylaws, website, and documents), modernizing Part I, K, and M of the bylaws to support advanced prescribing/scope of practice, the NAPRA Cross-Jurisdictional Framework, and SCPP's competency assurance program.
- The annual Pharmacy Permit Renewal season is complete. During this renewal season, SCPP saw:
 - ▶ 37 late permit fees.
 - ▶ 19 pharmacy managers managing more than one pharmacy (excl. satellites) until Nov. 1, 2023, to adjust as per Regulatory Bylaws and Pharmacy Manager Policy.
 - ▶ Some extra pharmacy data being collected in order to increase the usefulness of the online pharmacy register so that the public and health care professionals have searchable, helpful, and relevant information.
- **Staffing Updates**
 - ▶ Meaghan Underwood, Manager, Database and Systems, has resigned effective Dec. 9, 2022, and recruitment for her replacement will be starting shortly.

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- **Committees:** Marshall Salloum has given notice to resign from the Discipline Committee and will not be replaced at this time as the number of members remains at an appropriate level.

Financial and Budget Report

- The Registrar presented a financial report on behalf of the Finance Committee. A draft budget was presented to the Committee along with in-depth discussion and debate on policies, existing staff resources, the addition of resources and proposed changes to fees. In addition, this year a sensitivity analysis table was used to show several years of projected high-level budget to highlight the long-term financial health of SCPP and the impact on staffing and fee-setting decisions.
- Council approved 2023 budget as presented which included the following:
 - ▶ **New fees:** Renovation Fee, Relocation Fee, Registration – Provisional International Candidates, Advanced Prescriber Initial Application Fee, and Advanced Prescriber Annual Fee.
 - ▶ Supporting the Competency Assurance Program including the new CAP and CPDPP support (Strategic Goal 1).
 - ▶ Supporting Quality Improvement Reviews (QIRs) and Field Officer inspections (Strategic Goal 2).
 - ▶ Supporting bylaw amendments and in-house legal expertise (Strategic Goal 3).
 - ▶ Supporting the complaints department, strategic communications, website and systems (Strategic Goal 4).

- ▶ Additional staff: legal counsel, a director of corporate services, a pharmacist for advanced prescribing and competency, and an administrative position.
- ▶ Supporting medSask, CPDPP, and the Prescription Review Program.
- ▶ Supporting items not on the Strategic Plan but are regulatory priorities: *The Labour Mobility and Fair Registration Practices Act* (Bill 81), NAPRA Cross-Jurisdictional Framework, COMPASS CQI Training Updates.
- Council approved the recommendation from the Finance Committee to approve the consequential administrative bylaw fee schedule as presented to replace the current fee schedule. **Please see Fee Schedule which goes into effect on Jan. 1, 2023, later in this issue of SCOPE.**

Other business

- **Strategic Plan**
 - ▶ Council reviewed the 2020-2024 Strategic Plan to ensure it is still relevant.
 - ▶ The proposed strategic implementation plan for 2023 sets the objectives for the office staff for the year in order to meet the desired objectives at the end of the year. Some items were placed on hold due to the volume of work and what is realistic based on size of SCPP staff.
 - ▶ Some operational items not on the plan are items which cannot be put on hold (i.e., *The Labour Mobility and Fair Registration Practices Act* (Bill 81) and Part I, K, and M).
 - ▶ The proposed strategic implementation plan for 2023 will be reviewed by Council at a special January 2023 meeting.
- **Registration and Licensing Policies Committee Report Highlights**
 - ▶ The College continues to receive enquiries from internationally trained pharmacy technicians seeking licensure in Saskatchewan. Developing a pathway for these candidates similar to the Appraisal and Assessment Process for internationally trained pharmacists will be prioritized going forward.
 - ▶ There have also been numerous enquiries from internationally trained pharmacists who have obtained the Pharmacy Technician Certificate of Qualification from PEBC and now wish to register as pharmacy technicians in Saskatchewan. SCPP and the Committee will examine pathways for this category of candidates to obtain licensure, including the necessary legislative amendments.



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- ▶ SCPP has identified gaps in the legislation pertaining to licensing and registration in Saskatchewan. Parts B, C, D, E, and F of the Regulatory Bylaws will undergo a comprehensive and simultaneous review by SCPP and will be a priority of the Registration and Licensing Policies Committee going forward.
- ▶ The Committee has approved moving forward with developing electronic licences and eliminating paper/hard copy licences, which would still be available by request and for a fee.
- ▶ The Criminal Record Check process has completed its first audit of 10 per cent of the membership.

• Human Resources and Governance

- ▶ The Human Resources and Governance Committee finalized the Council Competencies, Attributes, Skills, and Experience (CASE) summary and to determine the CASE being sought for the 2023-24 Council election. The Nominating Committee encourages everyone to apply, and is especially interested in candidates with interest or expertise in any of the following areas:
 - A strong understanding of and commitment to the SCPP mandate.
 - Experience in development, renewal, and/or implementation of legal or regulatory frameworks.
 - Experience in reading financial statements and conducting financial analyses.

• Complaints and Discipline Report

- ▶ At the October Complaints Committee meeting no files were referred to the Discipline Committee (DC). Of the files previously referred to discipline:
 - One file from 2017 remains to be completed and is currently referred to DC.
 - One file from 2019 remains to be completed.
 - Two files from 2021 remain to be completed.
- ▶ Trends include:
 - Complaints related to privacy/breach of confidentiality have increased recently.
 - Complaints related to unprofessional communication have increased recently.

• COMPASS Report

- ▶ 422 pharmacies have completed an MSSA.
- ▶ Of the above 422 MSSAs completed, 18 pharmacies are in the process of their next MSSA.
- ▶ One MSSA has been started but not completed.



- ▶ One MSSA has not yet been started (new pharmacy).
- ▶ 18 MSSAs are overdue to be completed again. Of these, two have started completing their next MSSA.
- ▶ CQI meetings – 1475 (+70).
- ▶ See MedSCIM results below.

• Quality Improvement Review (QIR) Report

- ▶ The Field Operations team continue to perform QIRs. As of September, 99 per cent of all pharmacies have received a QIR. The field operations team is now onto the second round of QIRs keeping in line with the risk matrix that Council approved as amended in June.

• Competency Assurance Program (CAP) Update

- ▶ Council heard the proposed outline for SCPP's Revised Competency Assurance Program and the continuing work necessary to develop and test the proposed CAP components. At a January 2023 meeting, Council will decide the way forward for the new CAP. For more details, please see CAPtivate in this issue of SCOPE.

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MedSCIM Results Sept. 1, 2022 – Oct. 31, 2022



0.9 %



44.2 %



54.9 %

| | | Grade D – Pathological | Grade C – Reactive | Grade B – Calculative | Grade A – Generative |
|---------------------------|---------------------------------------|---------------------------|-----------------------|--------------------------|-------------------------|
| Core Event Description | Level 1 – Report fully complete | 0 | 4 | 26 | 26 |
| | Level 2 – Report semi-complete | 0 | 20 | 26 | 10 |
| | Level 3 – Report not complete | 0 | 1 | 0 | 0 |

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.

• Compounding Report

- ▶ Level A – Field Officers have begun checking in with pharmacies about facility compliance. Compliance with documentation will be reviewed with pharmacies during second round of QIRs.
- ▶ Level B – 50 pharmacies in total are set to be Level B.
- ▶ Level C – seven pharmacies in total are set to be Level C.
- ▶ Council also approved that all pharmacies yet to be inspected by the end of 2022 (including open renovations and those that have declared compliant but have not been inspected) are advised they can no longer do any sterile compounding until:
 - They have been inspected,
 - Environmental sampling has been completed, and results are passing, and
 - The Compounding Inspector has verified facility compliance.

• Advanced Prescribing Scope of Practice

- ▶ Council was presented with the recent survey on advanced prescribing to which over 450 members responded as well as the proposed amendments to Parts I, K, and M.
- ▶ Council approved the following in principle to begin broad stakeholder consultation:
 - Updates to Level 1 prescriptive authority.

- Enabling pharmacists prescribing Schedule II and III drugs.
- Addition of an advanced prescribing category with a required educational component.
- Addition of a second advanced level with a required micro-credential, following best practices in other professions and other parts of the world.
- The ability to add other diseases as approved by the Ministry such as HIV and other conditions that would not fit under a minor ailment or chronic diseases. After an assessment of gaps (skills, knowledge, or abilities), SCPP would be able to ascertain key aspects of the full credentialing program.
- Pharmacists would obtain additional skills to assess and prescribe for conditions that would have clinical decisions tools/algorithms such as otitis media and pharyngitis. This would align pharmacists with other professions and ensure they have the additional competencies to safely assess and prescribe for these conditions.
- Authorizing pharmacists to order medical laboratory tests and also to access, use, order, or interpret the medical laboratory test results, for screening and prophylaxis purposes.
- A proprietor code of ethics. ■



Fee Schedule

Membership, Permit, and Other Fees Effective Jan. 1, 2023

Note: These fees are based on the [SCPP Administration Bylaws](#). In the case of conflict between the Bylaws and below, the Bylaws will preside.

| *Fees subject to change Jan. 1, 2024 | FEE | GST 5% | TOTAL |
|---|---------------|---------|------------|
| Membership – Jan. 1, 2023 | | | |
| Practising Membership – Pharmacists | \$1,499.00 | \$74.95 | \$1,573.95 |
| Non-Practising Membership – Pharmacists | \$1,384.00 | \$69.20 | \$1,453.20 |
| Associate Membership – Pharmacists | \$242.00 | \$12.10 | \$254.10 |
| Retired Membership – Pharmacists | \$118.00 | \$5.90 | \$123.90 |
| Practising Membership – Technicians | \$900.00 | \$45.00 | \$945.00 |
| Non-Practising Membership Technicians | \$784.00 | \$39.20 | \$823.20 |
| Associate Membership – Technicians | \$119.00 | \$5.95 | \$124.95 |
| Retired Membership – Technicians | \$59.00 | \$2.95 | \$61.95 |
| Appraisal Training, Assessment & JP Exam Fees – Jan. 1, 2023 | | | |
| Pre-Registration Application Fee for Non-Members | \$235.00 | \$11.75 | \$246.75 |
| Appraisal Registration – Pharmacists | \$389.00 | \$19.45 | \$408.45 |
| Assessment Registration – Pharmacists | \$964.00 | \$48.20 | \$1,012.20 |
| Jurisprudence Exam – Pharmacists | \$347.00 | \$17.35 | \$364.35 |
| Appraisal Registration – Technicians | \$233.00 | \$11.65 | \$244.65 |
| Assessment Registration – Technicians | \$578.00 | \$28.90 | \$606.90 |
| Jurisprudence Exam – Technicians | \$347.00 | \$17.35 | \$364.35 |
| Fees: Other – Jan. 1, 2023 | | | |
| Letter of Standing | \$123.00 | \$6.15 | \$129.15 |
| Monthly Interest Surcharge | 1.5% | | |
| ADR Cost Recovery Charges | Cost Recovery | | |
| ADR Process Administration | \$475.00 | \$23.75 | \$498.75 |
| Registrar Appeal | \$649.00 | \$32.45 | \$681.45 |
| Proprietor Appeal to Council | \$650.00 | \$32.50 | \$682.50 |
| Discipline Order Appeal to Council | \$651.00 | \$32.55 | \$683.55 |
| Advanced Prescribing Initial Application (NEW) | TBD | | |
| Advanced Prescribing Annual Fee (NEW) | TBD | | |
| Registration & Reinstatement Fees – Jan. 1, 2023 | | | |
| Reinstatement – Pharmacists | \$600.00 | \$30.00 | \$630.00 |
| Registration – Canadian Pharmacist Candidates | \$600.00 | \$30.00 | \$630.00 |
| Registration – Provisional International Pharmacist Candidates (NEW) | \$600.00 | \$30.00 | \$630.00 |
| Registration – Locum Tenens | \$600.00 | \$30.00 | \$630.00 |
| Registration – Dispensing Physicians | \$1,058.00 | \$52.90 | \$1,110.90 |
| Reinstatement – Technicians | \$600.00 | \$30.00 | \$630.00 |
| Registration – Canadian Technician Candidates | \$600.00 | \$30.00 | \$630.00 |
| Registration – Provisional International Technician Candidates (NEW) | \$600.00 | \$30.00 | \$630.00 |

***Fees subject to change Jan. 1, 2024**

| | FEE | GST 5% | TOTAL |
|---|---------------|----------|------------|
| Intern Registration Fees – Jan. 1, 2023 | | | |
| Intern – Pharmacists | \$600.00 | \$30.00 | \$630.00 |
| Intern – Technicians | \$600.00 | \$30.00 | \$630.00 |
| Late Payment Penalty Fees – Jan. 1, 2023 | | | |
| Late Payment Penalty – Pharmacy | \$2,999.00 | \$149.95 | \$3,148.95 |
| Late Payment Penalty – Pharmacists | \$525.00 | \$26.25 | \$551.25 |
| Late Payment Penalty – Technicians | \$300.00 | \$15.00 | \$315.00 |
| Pharmacy Permit Fees – Jan. 1, 2023 | | | |
| Pharmacy Permits | | | |
| Basic Community Pharmacy | \$3,000.00 | | |
| COMPASS Surcharge | \$500.00 | | |
| TOTAL | \$3,500.00 | \$175.00 | \$3,675.00 |
| Satellite Pharmacy Permits | \$2,000.00 | \$100.00 | \$2,100.00 |
| Permit Amendments | \$495.00 | \$24.75 | \$519.75 |
| Lock & Leave Permits | \$558.00 | \$27.90 | \$585.90 |
| Pharmacy Renovations (NEW) | \$700.00 | \$35.00 | \$735.00 |
| Pharmacy Relocations (NEW) | \$750.00 | \$37.50 | \$787.50 |
| Subsequent Pre-Opening Inspection(s) | \$951.00 | \$47.55 | \$998.55 |
| Quality Improvement Reviews (unable/unwilling to conduct virtually) | Cost Recovery | | |
| Permit Failure to File Fee After Seven (7) SSCP Business Days – Jan. 1, 2023 | | | |
| Pharmacy Manager Changes | \$100/day | \$5.00 | \$105/day |
| Proprietor Name Changes | \$100/day | \$5.00 | \$105/day |
| Ownership Changes | \$100/day | \$5.00 | \$105/day |
| Trade Name Changes | \$100/day | \$5.00 | \$105/day |
| Director Changes | \$100/day | \$5.00 | \$105/day |
| Location Changes | \$100/day | \$5.00 | \$105/day |
| Expense Reimbursement – Jan. 1, 2023 | | | |
| Per Diem Full Day | \$400.00 | | \$400.00 |
| Per Diem Half Day | \$200.00 | | \$200.00 |
| Per Diem Per Hour | \$50.00 | | \$50.00 |
| Meal Allowance Breakfast | \$22.80 | | \$22.80 |
| Meal Allowance Lunch | \$23.05 | | \$23.05 |
| Meal Allowance Supper | \$56.60 | | \$56.60 |
| Travel per Km (first 5,000 Kms) | \$0.61 | | \$0.61 |
| Travel per Km (after 5,000 Kms) | \$0.55 | | \$0.55 |

Equity, Diversity, Inclusion Strategy



Pharmacy professionals and SCPP Council have identified that education is needed for better understanding of equity, diversity and inclusion (EDI), societal racism, and how these issues impact person-centred care. These concepts are complex issues that have many contributing factors. For training to be effective, it must inspire systemic change and encourage thoughtful self-examination.

Continuing Professional Development for Pharmacy Professionals (CPDPP), with support from the Saskatchewan College of Pharmacy Professionals (SCPP) and other pharmacy provincial regulatory bodies, has [developed a strategy](#) that incorporates education, provides opportunities for needed self-reflection, and anticipates potential future learning needs.

PART 1

Online mandatory module introducing the concepts of cultural safety, EDI, and their relationship to person-centred care:

- The EDI and Cultural Safety training helps learners explore their own beliefs, practices, and histories and further reflects on how they impact patients and communities. Part of the module focuses on cultural safety for Indigenous people.
- This training offers concepts that all pharmacy professionals must engage in to improve patient experiences.
- The module content was created in collaboration with Alberta College of Pharmacy. It reflects EDI learning strategies occurring across Canada.

- **Completion of this module is mandatory** for all Practising and Non-Practising pharmacy professionals licensed in Saskatchewan. It should take approximately four (4) hours and is required for the 2023-2024 licence renewal year.

Self-reflection of needed areas for personal growth and education:

PART 2

- CPDPP has adopted a framework that combines assessment of current knowledge and goals of learning. This framework and guide is introduced in the Part 1 online module.
- Upon completion of the 2023-2024 [mandatory education module](#) and on a go-forward basis, Council policy requires that members complete education that is [focused on the themes and concepts of EDI and Indigenous wellness](#) (e.g., discrimination, racism, stigma, Indigenous trauma and equity, etc.). There are no set hours or CEU limitations for this requirement, and it would be recorded like all other CEUs.
- The goal is to help pharmacy professionals choose learning opportunities that fit their personal needs and interests.
- CPDPP has collected a [variety of quality learning opportunities and resources](#) on their website that reflect these topics.
- Pharmacy professionals may also choose their own learning opportunities.

Continued on next page ►

Future objectives and learning activities...

...will be informed by the needs of Saskatchewan pharmacy professionals and the patients they serve.

Mandatory EDI and Cultural Safety Learning Module

To be completed by the 2023-2024 licence renewal year.
Registration is now open.

[Register Now](#)



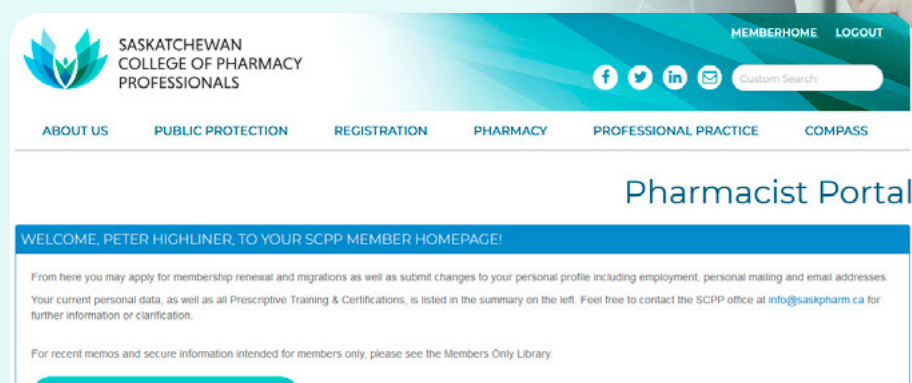
A culturally safe pharmacy environment is one where people feel secure, supported, and free to draw strength from their personal identity, culture, and community. In culturally safe practice sites, pharmacy professionals continually engage in self-reflection and hold themselves and their peers accountable for continued learning about what makes people feel valued, respected, and acknowledged. Functional knowledge about different groups of individuals and different lived experiences is encouraged and facilitated in the practice environment. The unique stereotyping and biases faced by Indigenous peoples in Canada and how pharmacy professionals may support Indigenous wellness specifically is also considered.

Enhanced Members–Only Section

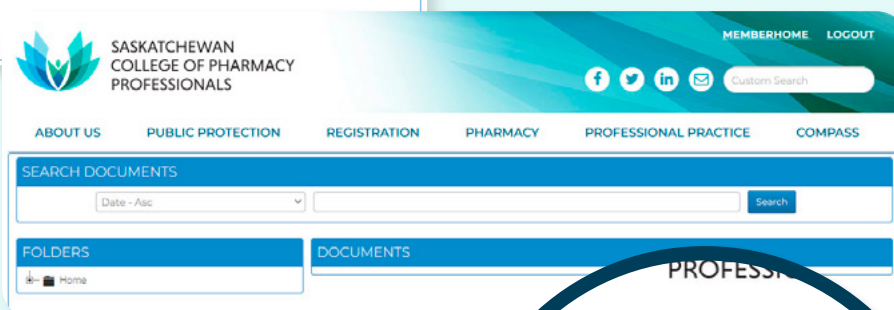
Enhancements have been made to the members–only section of the database, which will now include folders where you can access correspondence that you have received from the College such as:

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

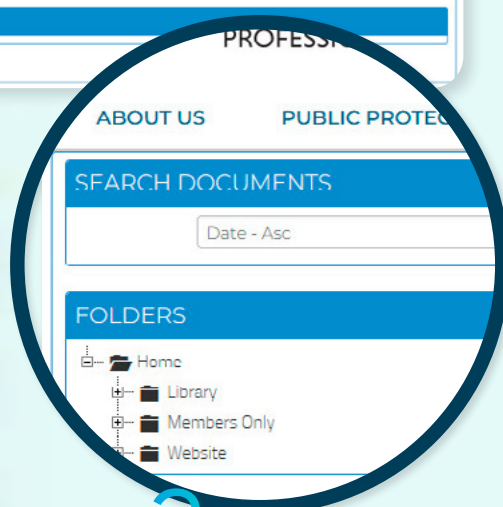
Easy as:



1



2



3





Reminders

Public Pharmacy Profiles

Part of the service of the SCPP website is providing the public information that is useful to them about the services each pharmacy offers.

As a start, SCPP is including compounding services in the pharmacy public register. Pharmacy and pharmacy professional services will be added in the future.

For this information to be useful to the public, it needs to be accurate. Pharmacy managers and individual pharmacy professionals are asked to ensure their SCPP profile is accurate and to update it regularly and when any services are added or removed from their pharmacy.

COVID-19 Vaccine Expiry Dates

COVID-19 vaccines have, in some cases, multiple expiry dates and extensions related to their storage and use. Pharmacy staff must be diligent in their understanding of expiry dates and create internal processes to ensure that accurate information

is shared, reviewed and updated as per the various requirements of the COVID-19 Immunization Program.

There are multiple expiry date scenarios for a COVID-19 vaccine, that include but are not limited to the following:

- Manufacturer expiry date provided on the vial of each vaccine.
- Unpunctured vial fridge stability/ expiry date (e.g., 30 days at 2°C to 8°C).
- Unpunctured vial "room temperature" stability/expiry date (e.g., 24 hours at 8°C to 25°C).
- Punctured vial stability/expiry date
- There are also numerous instances of when the manufacturer extends the expiry date due to viability testing over time.

It is very important to check the Vaccine Distribution Tracking System (VDTS) every time a COVID-19 vaccine is received to confirm its manufacturer expiry date. Do not rely on the vial as an accurate expiry date due to possible expiry date extensions.

The VDTS is the only place where up-to-date manufacturer expiry dates for COVID-19 vaccine are documented.

Once the manufacturer expiry date has been confirmed and documented from the VDTS, the fridge expiry date should be documented on each vial. Sometimes due to inventory constraints, short-dated manufacturer expiry dates are sent to pharmacies. As a result, do not assume every vial of vaccine has the maximum number of "fridge days" before it expires, and be sure to check VDTS first before calculating the fridge expiry date.

Finally, each punctured vial should be documented as a time stamp to ensure it is not administered beyond the manufacturer's instructions.

The above processes can be used as a foundation for an internal work standard and shared with pharmacy staff to help prevent expired vaccine being administered.

The Ministry of Health

Continued on next page ►

Reference Manual Help:

[Vaccine Storage, Handling and Transport Guidelines](#)





Vaccine Errors

There has been an increase in reported vaccine errors including:

- monovalent vaccines given when bivalents were requested;
- as above, expired vaccines administered;
- age inappropriate doses administered.

A reminder that medSask drug cards, charts, consent forms are all helpful in preventing errors. [These can be found here.](#)

Updating CRC Details

Per the [Regulatory Bylaws](#) and the [Criminal Record Check Policy Statement and FAQs](#), members and candidates for Practising and Non-Practising membership are required to provide SCPP with an initial Enhanced Police Information Check (E-PIC).

A randomly selected 10 per cent of members will be audited each year in addition to their initial E-PIC.

Members are **also required** to inform SCPP of any offences or violations of the Criminal Code of Canada, provincial laws, and *Controlled Drugs and Substances Act* resulting in charges, bail conditions or restrictions, or findings of guilt **within 30 days** of receiving them.

The policy document states:

Are members required to report new charges and criminal convictions?

Yes. As soon as reasonably possible, and not more than 30 days from the date of the charge or conviction, the member or member's representative should contact the SCPP Registrar to report the offence. The College recommends the reporting of all offences to SCPP, regardless of their nature. Failure to report a new charge or criminal conviction could result in disciplinary action that could include the revocation of a member's licence.

While a charge is not a conviction, SCPP requests that members report to the Registrar any charges received under the Criminal Code or any federal or provincial legislation governing the sale of drugs as soon as reasonably possible.

Highway Traffic Act offences (bylaw infractions, speeding tickets, etc.) do not require reporting.

Failure to report new charges may result in an official investigation of misconduct and could result in disciplinary action that could include the revocation of a member's licence.

Information pertaining to member/registrant charges or convictions is kept confidential in adherence with [SCPP Privacy Policies](#).

For questions or to make a confidential report of charges or convictions contact SCPP Deputy Registrar Lori Postnikoff at lori.postnikoff@saskpharm.ca. ■

CAPtivate

[Competency Assurance
Program Updates]

As the framework for the revised Competency Assurance Program (CAP) is developed, SSCP Council heard from consultant Nancy Winslade on continuing work necessary to develop and test the overall strategy which includes the following:

- Transition of Continuing Education (CE) to Continuous Professional Development (CPD), and development of the guided Practice Improvement modules and processes through CPDPP.
- In-patient hospital peer and non-pharmacy colleague feedback.
- Community pharmacy pilot testing of the PREMs (Patient Reported Experience Measures) feedback process.

Council will discuss a way forward at a January 2023 meeting.

The proposed revised CAP has also seen some external interest and support. The Medical Council of Canada continues to provide SSCP ready access to their expertise and advice, in particular relating to their 360 feedback programs that are used by medical regulatory authorities across Canada, including in Saskatchewan. Requests for information from additional organizations both within and beyond pharmacy, national and international, are responded to quickly and are consistently positive.

As information on SSCP's proposed revised CAP has become available through SCOPE, MicroSCOPE and presentations, interest from other pharmacy organizations is increasing.

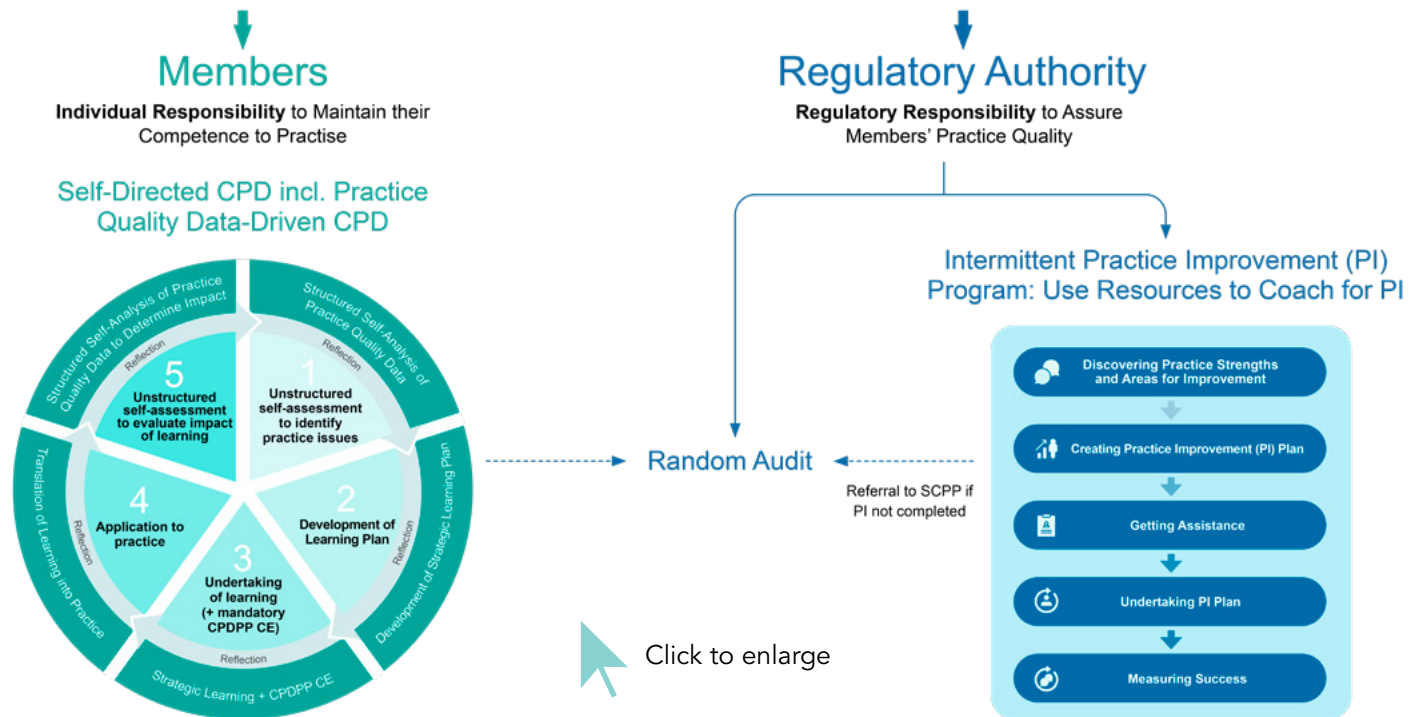


Strong support from faculty and allied health organizations continues for the revisions SSCP is proposing to the CAP.

See the graphic presentation of the proposed framework below.

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Proposed Outline for SCPP'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 learning 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.
- ▶ 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, SCPP Council President Amy Wiebe, SCPP 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.
- ▶ Dec. 1, 2022 – Council is presented a summary of work to date to inform decisions and priorities to be made at a January 2023 special Council meeting.
- ▶ Upon the completion of an in-depth review and approval in principle by Council, robust consultations to occur throughout 2023.

Bylaw and Policy Updates

Registrar Enables Pharmacists to Prescribe Antivirals for Influenza

On Nov. 14, the Public Health Agency of Canada (PHAC) declared an influenza epidemic for Canada with test positivity rates well above the five per cent threshold.

With the test positivity rate being above five percent, the Registrar is enabling the authority for pharmacists to prescribe antivirals for the management of influenza based on the approved medSask minor ailment guidelines and protocols.

This is effective immediately and will remain in effect in Saskatchewan until such time as either the PHAC communicates that influenza cases have stabilized under the five per cent seasonal threshold or until such time as the test positivity rate in Saskatchewan is below the five per cent threshold.

For accessing medSask minor ailment guidelines and protocols for influenza, please see instructions below.

As a reminder, Minor Ailment guidelines are locked – SK pharmacists can access them through their personal SHIRP account.

- Log into [SHIRP](#) and click on the medSask link.
- When accessing SHIRP [through PIP](#), go to the References tab and click on "Saskatchewan Health Information Resources Partnership" under links. Do not click on medSask.
- From the [medSask home page](#), this Minor Ailment guideline can be found:
 - ▶ Under Professional Practice – Minor Ailment and Self-Care Guidelines – Influenza OR
 - ▶ Click on the Influenza Minor Ailment Prescribing green button located under What's New on the home page.

Any questions about the guidelines can be directed to medSask and any questions about the Bylaw enactment can be directed to the [SCPP office](#).



National Drug Schedules: Final Recommendations for Brimonidine Tartrate Ophthalmic Solution in Concentrations up to and Including 0.025%

The recommendations made by the National Drug Scheduling Advisory Committee (NDSAC) below were approved by NAPRA's Board of Directors and finalized effective Nov. 10, 2022.

- Brimonidine tartrate ophthalmic solution in concentrations up to and including 0.025%, used for the relief of redness of the eye due to minor eye irritations caused by environmental allergies, dryness and fatigue for adults of 18 years and older remain in Schedule III
- Brimonidine or its salts, except when sold as brimonidine tartrate ophthalmic solution in concentrations up to and including 0.025%, used for the relief of redness of the eye due to minor eye irritations caused by environmental allergies, dryness and fatigue for adults of 18 years and older will remain in Schedule I (as per the [Prescription Drug List](#)).

Health Canada Extends Clozaril® Flexibilities

Health Canada issued important guidance regarding clozapine bloodwork monitoring during the pandemic. While the situation has improved, Health Canada recognizes that challenges may still exist that hinder access to testing for some patients. Consequently, the current flexibility around hematological testing has been extended by an additional 12 months (until Sept. 30, 2023). [See full details here.](#)

It has also been confirmed that this extension applies to all Clozapine products.



Notes from the Field

How is Advertising Regulated for Drug Products or Services

Advertising practices of prescription drugs is legislated through the *Food and Drugs Act* and the *Food and Drug Regulations*. Advertising for pharmacy services is administered through the authority of *The Pharmacy and Pharmacy Disciplines Act* and the SCPP Regulatory Bylaws. A previous article from [November 2019 SCOPE](#) discussed examples of possible inappropriate advertising practices related to pharmacy services.

Regarding advertising for prescription drug product and non-prescription drug products, Health Canada allows two types of prescription drug messages directed to consumers.

1. Reminder advertising that are limited to the name, price and quantity of a prescription drug, and do not contain any reference to a disease state.
2. Help seeking messages that discuss a disease state and make no reference to a specific prescription drug product.

Members are encouraged to review information posted on Health Canada websites regarding Health Provider responsibilities related to advertising or promoting health products.

- [Advertising requirements for drugs and medical devices](#) – Canada.ca
- [Illegal marketing of prescription drugs](#) – Canada.ca
- [Illegal marketing of natural and non-prescription health products](#) – Canada.ca

Advertising for Compounds or Compounding Services

With the NAPRA Model Standards for Compounding being adopted in Saskatchewan, members should consider how this legislation impacts advertising practices around compounding services or specific products.

Compounds are prepared and dispensed pursuant to a prescription as per [Health Canada's Policy on Manufacturing and Compounding Drug Products](#), and any compounded drug is covered under Health Canada advertising regulations related to prescription products. Advertising for compounding services is regulated under SCPP Regulatory Bylaws and the Code of Ethics.

All pharmacies in Saskatchewan are required to meet the NAPRA Model Standards for Compounding and be able to compound at a minimum Level A standard.

Compounding is an enabled practice under the *Pharmacy and Pharmacy Disciplines Act*.

Field Officers have seen recent examples of pharmacy advertising relating to compounding services and compounded products that do not meet the regulation standards.

Compounding pharmacies are not recognized in the SCPP Regulatory Bylaws to receive a unique permit, and advertising as such would be false, misleading and inappropriate. Media articles, as well as statements posted through social media platforms, would also be considered advertising and be subject to the same standards.

From the SCPP Code of Ethics

8. A member shall be governed in advertising practices by the highest level of professional integrity.

From the SCPP Regulatory Bylaws Part J Section 17 Advertising

(2) General Prohibition. No pharmacist, pharmacy technician, or any firm, corporation, partnership, organization, or clinic operating a pharmacy, shall publish, display, distribute, or use or cause or permit, directly or indirectly, the publication, display, distribution or use of any advertisement, announcement or information related to professional services, which:

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(a) as a result of its content or method or frequency of dissemination, may be reasonably regarded as likely to demean the integrity or dignity of the profession or bring the profession into disrepute; (b) includes information that: (i) is false, misleading, fraudulent, deceptive, ambiguous or confusing or likely to mislead or deceive the public because, in context, it makes only partial disclosure of relevant facts; (ii) is not relevant to the public's ability to make an informed choice, or is not verifiable by facts or can only be verified by a person's personal feelings, beliefs, opinions or interpretations; (c) is likely to create expectations of favourable results or to appeal to the public's fears; or (d) makes any reference to the prices, fees or services of any other member or pharmacy or which would be reasonably regarded as making such reference.

Pharmacies should review their advertising policies and existing advertisements to ensure that all legislative requirements, both federal and provincial, are followed and that the Code of Ethics is adhered to when determining any advertising campaigns.

The Proprietor Agreement speaks to this.

Section 7.4the Proprietor shall ensure that eligible Saskatchewan residents are offered and receive any and all reductions and discounts which are available to any other client for the same prescription and/or pharmaceutical service.

For greater certainty, the Proprietor agrees that it will offer eligible Saskatchewan residents the usual and customary dispensing fee on the day of the transaction where that dispensing fee is less than the maximum amount. ■

Employee-Discounted Dispensing Fees

There have been recent questions on appropriate ways for pharmacies to provide a "no dispensing fee" discount for employees.

Pharmacies are not allowed to offer a discounted dispensing fee to select individuals (e.g., employees). If they offer that discount to employees, they will need to offer the same discount to all dispenses provided that day.



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

Children's Analgesic Shortage

In Case You Missed it:

While Health Canada has waived the requirement (see [communication here](#)) for a prescription for compounded acetaminophen and ibuprofen, a patient-health care provider relationship must exist, including documentation. As such, an effective solution has already been determined in Saskatchewan through the [current provincial CPA](#) and the medSask assessment documents which support the documentation requirement for a patient-health care relationship.

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

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

If a pharmacy receives or provides a prescription for an acetaminophen or ibuprofen pediatric suspension that they are not able to compound, the prescription may be transferred to a pharmacy that is able to provide the service or, alternatively, the patient may be provided with a list of pharmacies that are able to provide the service.

SCPP recommends that pharmacy teams compound children's acetaminophen and ibuprofen to the same concentration as commercially available products.

Preparing for the Safe Use of Imported Acetaminophen for Children

Acetaminophen and ibuprofen products for pediatric patients have been in short supply across Canada. Health Canada is reviewing foreign-authorized products to mitigate the shortage and has granted a temporary exemption to import an Australian acetaminophen product for hospital inpatient use only, with a different concentration from the Canadian product.

The differences between the acetaminophen products from Canada and Australia will require a coordinated risk management strategy. Read this bulletin to learn how to reduce the risk of mix-ups and dosing errors in hospitals.

Health Canada has also authorized the importation of different acetaminophen products for

retailers. The bulletin sidebar shares recommendations for community pharmacists to support the safe administration of imported acetaminophen products.

[Read the Institute for Safe Medication Practices \(ISMP\) Canada safety bulletin here.](#)

Pharmacy Safety and Security

In two recent successful robberies in Calgary, police noted to the Alberta College of Pharmacy that the time-delayed safe was left open on both occasions. Keeping the safe closed and locked at all times is a good deterrent for potential robbers.

Saskatchewan can not only take lessons from its neighbouring provinces, but very often robbery trends and perpetrators spill over provincial borders.

Calgary police have reported that perpetrators of robberies have been "casing" pharmacies, looking for those pharmacies that are not careful in keeping their safes closed and locked.

Since the time-delayed safe mandate has come into force in Alberta, police services have reported a significant decrease in the number of pharmacy robberies occurring in the province. However, robberies are still taking place. To help prevent future robbery activity, pharmacy teams must remain vigilant in complying with the time-delayed safe requirement as well as using other safety and security measures. This includes signage and following safe-related procedures.

Note that other provinces (i.e., Ontario and Manitoba) are reviewing making time-delayed safes a permit requirement and this might have an effect on availability of these safes.

There are other security measures your pharmacy can take to help prevent robberies, including installing an alarm system, using a video surveillance system, having policies and procedures in place for safety and security, and stocking smaller amounts of narcotics and other at-risk drugs.

In a 2020 newsletter, the College of Physicians and Surgeons of



| Year | Total # of Prescription Forgeries Reported | # of Cotridin Forgeries |
|------|--|-------------------------|
| 2020 | 7 | 3 |
| 2021 | 19 | 2 |
| 2022 | 24 | 3 |

Saskatchewan (CPSS) advised its members to ensure that only one copy of a prescription is active (especially Prescription Review Program (PRP) prescriptions). Prescriptions faxed to a pharmacy and also provided as hard copies to patients may be filled by the patient at one pharmacy and filled again at a later date at the faxed pharmacy as prescriptions are valid for one year. If a prescription is faxed and the patient decides to obtain the medication from a different pharmacy, practitioners should cancel the original fax.

With cold and flu season, some patients may make specific and frequent requests for codeine liquid preparations like cotridin (triprolidine + pseudoephedrine + codeine). Liquid preparations are often mixed with alcohol, soda and candy, and

consumed in large quantitiesⁱ. Termed "lean" because of the physical positioning following consumptionⁱⁱ, recreational use, especially in combination with alcohol and other central nervous system depressants, can be fatal.

Saskatchewan's forgery numbers (see table) together with occurrence of robberies in the prairie provinces should encourage pharmacy teams members to be diligent with safety and security measures and procedures.

With information from the Alberta College of Pharmacy and the College of Physicians and Surgeons of Saskatchewan.

i Watkins M (Ed.). Cough Syrup with Codeine Abuse, Also Known as Lean and Purple Drank. American Addiction Centers; 2019. Available from <https://americanaddictioncenters.org/codeine-addiction/cough-syrup>.

ii Lean, Sizzurp, Purple drank – What's It All Mean? Healthline; 2019. Available from <https://www.healthline.com/health/what-is-lean>.

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* |
|--|------------------------|----------------------------|
| January 2023 Pharmacist Evaluating Examination | Jan. 11, 2023 | Deadline passed |
| May 2023 Pharmacist Qualifying Examination | MCQ: May 23 – 27, 2023 | Feb. 16, 2023 |
| | OSCE: May 28, 2023 | |

Pharmacy Technician Schedule of Exams

| Examination Name | Examination Date | Application Deadline Date* |
|--|---------------------|----------------------------|
| September Pharmacy Technician Qualifying Examination | MCQ: April 5, 2023 | Deadline passed |
| | 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!





To our committee volunteers, members,
Council, and partner organizations...

Happy Holidays
and a safe and prosperous new year

from all the Staff at SCPP



In keeping with the
season's spirit of giving, a
donation has been made
to a local charity in lieu of
sending holiday cards.



Holiday Office Schedule

Closed Dec. 26 to Jan. 2.
Regular office hours resume
Tuesday, Jan. 3, 2023