

SCOPE

April 2024

USask CPE New Educational Opportunities

Scope of Practice Resources

Update

PEBC Certificate of Qualification Expiration Date



SASKATCHEWAN
COLLEGE OF PHARMACISTS
PROFESSIONALS

Contents

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.

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Welcome New SCPP Staff



Joy Smith, Director of Licensing, Registration and Permits

Joy has over 20 years of regulatory experience involving federal and provincial legislation, bylaws/orders, and policies.

She has worked within the provincial government, developing legislation and regulations, overseeing regulatory agencies, and providing senior policy advice. Within non-government self-regulating bodies, joy had been involved in developing and implementing licensing and other policy areas' regulations and programs over people, places, and corporations/proprietors. Joy is excited to contribute to SCPP's work as a regulator in the public interest.



Pharmacy Appreciation Month

The month of March marked Pharmacy Appreciation Month, and the College acknowledged the impact of Saskatchewan’s 2300+ regulated pharmacy professionals on the health and well-being of patients across the province.

The role pharmacy professionals play continues to grow to meet Saskatchewan’s evolving healthcare needs. Last fall, pharmacists were authorized to prescribe and immunize for Respiratory Syncytial Virus (RSV) to support our most vulnerable patients in the community. Pharmacists, pharmacy technicians and qualified pharmacy students continue to be able to provide immunizations for COVID and influenza to protect the public and pharmacists continue to provide assessments and prescribe treatments for eligible patients for COVID and influenza. In addition, several new minor ailments were launched at the end of 2023 with more coming throughout 2024 to further support patient needs. Finally, bylaw changes were communicated at the end of 2023 and implemented in January of 2024 to assist all pharmacists with tools to support patients including but not limited to the ability to extend stable chronic medications up to three months, the ability to continue

medication in an emergency for up to three months and the authority to adjust prescriptions to ensure antimicrobial and opioid stewardship.

As our health system continues to evolve, pharmacy will evolve along with it and pharmacy professionals will continue to be relied upon to provide quality, ethical and safe pharmacy services.

We also like to acknowledge those pharmacy professionals who have engaged with the College by participating in focus or advisory groups, sharing their feedback through surveys or consultations, serving on Council and committees, sharing their stories for [directions] and engaging in the many initiatives aimed at promoting quality and safe pharmacy care for Saskatchewan patients. We are grateful for their contributions, their dedication to improving the health of patients and their ongoing commitment to providing quality care.

Thank you to Saskatchewan’s pharmacists, pharmacy technicians, interns and students for demonstrating an unwavering commitment to communities across the province. ■



Experience the power of pharmacy #PAM2024

SCPP COUNCIL 2023–2024

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PUBLIC REPRESENTATIVES

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U of S SENIOR STICK

Emily Galey

Spotlight on PREVENTION

Fluzone HD for Underage Patients

SCPP has seen an increased number of underage patients receiving the HD Fluzone due to prescriber recommendation. SCPP wanted to clarify the requirements for eligibility. Eligibility for publicly funded vaccines must meet the parameters set out in the Saskatchewan Immunization Manual (SIM), which state Fluzone HD may only be provided to individuals aged 65 and older.

If it is being provided to anyone outside this criterion it is considered off-label use and not covered through the Drug Plan & Extended Benefits Branch (DPEBB). A pharmacy would be required to purchase private stock and charge the patient.

If the publicly funded vaccine is provided to a patient outside the eligibility criterion it is considered a medication error and needs to be reported in COMPASS.

SCPP STAFF

Executive

JEANA WENDEL
Registrar

LORI POSTNIKOFF
Deputy Registrar

Executive Assistance

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Executive Assistant to the Registrar

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Competency and Quality Assurance
Facilitator

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Director of Corporate Services – Chief
Financial Officer

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Administration and Office Operations
Coordinator

MARIANO RAMIREZ
Manager, Database and Systems

Field Operations, Professional Practice, Quality Assurance, COMPASS

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Assistant Registrar – Field Operations
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Field Officer

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Certified Compounding
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Administrative Coordinator for Field
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Registration Administrator – Member
Relations

CAROLINE ZAREBA
Manager, Pharmacy Permits and
Pharmacy Relations

When a Pharmacy Professional is Dismissed from Employment



The legislation of the Saskatchewan College of Pharmacy Professionals ("the College") requires employers to report employee terminations as follows, pursuant to Section 59:

Report Termination of Employment

59. Any employer who terminates for cause the employment of a member shall report the termination to the college where the employer reasonably believes the cause is professional incompetence or professional misconduct.

The College encourages pharmacy professionals to consider their obligations to the public and to each other as health care professionals when they identify inappropriate or incompetent pharmacy care. Even when the standard for section 59 is not met, the College Regulatory Bylaws, Part H "Code of Ethics" should be considered and state:

The Practice of Pharmacy is a Profession Dedicated to the Service of Public Health

- A member shall hold the health and safety of the public to be of first consideration in the practice of their profession, rendering to each patient the full measure of their ability as an essential health care practitioner.

- A member shall maintain a high standard of professional competence throughout their practice, through continuation of their education and professional experience.
- A member shall observe the law, particularly those affecting the practice of pharmacy; uphold the dignity of the profession; strive for its betterment; maintain a high standard of ethics; and report to the proper authority, without fear or favour, any unethical or illegal conduct which may be encountered within the profession.

While the College maintains a robust inspection process through Quality Improvement Reviews, Field Officers cannot be everywhere at all times and may not be privy to individual pharmacist or pharmacy technician practice concerns.

The College continues to work on the 8 prongs of the Professional Autonomy Framework, including a whistleblower process, and will provide more information when details are finalized.

In the interim, pharmacy managers, as well as individual pharmacy professionals, are to provide relevant information regarding pharmacy professionals at all times and when dismissed from employment due to errors, concerns with knowledge, skills, and/or ability, and overall competency to the College.

Amendments to The Midwifery Regulations



In response to the evolving landscape of midwifery practice, the amendments to *The Midwifery Regulations* were approved by the Ministry of Health on April 10, 2024, addressing key facets, notably in subsection 3(1) and the comprehensive restructuring of Table I, delineating authorized categories of drugs.

A concise overview of the significant updates is outlined below:

Subsection 3(1) is repealed and substituted with:

"(1). Subject to the Act, *The Controlled Drugs and Substances Act* (Canada), *The Drug Schedules Regulations, 1997*, the bylaws, and any terms and conditions set out in the member's licence, a member may, for a purpose within the scope of the practice of midwifery:

- (a) prescribe or administer a drug belonging to any category listed in Table I of the Appendix;
- (b) administer a drug prescribed by a practitioner authorized to prescribe the drug;
- (c) prescribe, possess, or administer a drug in accordance with the *New Classes of Practitioners Regulations* (Canada), SOR/2012-230."

Table I [Clause 3(1)(a)] is repealed and substituted with:

"Authorized Categories of Drugs

- Abortifacient agents
- Antibiotics
- Antiemetics
- Antifibrinolytic
- Antifungals
- Antihaemorrhoidal agents
- Antihemorrhagics
- Antireflux
- Antivirals

- Benzodiazepines
- Benzodiazepine Receptor Antagonists
- Cervical Ripening/Induction Agents
- Contraceptives
- Corticosteroids (Topical)
- Galactagogues/Lactation Aids
- Histamine antagonists
- Immune globulins
- Inhalants
- Intravenous fluids
- Laxatives
- Local anesthetics
- Narcotic and non-narcotic analgesics
- Narcotic antagonists
- Nitrates
- Non-prescription drugs
- Sympathomimetics
- Uterotonic agents
- Vaccines
- Vitamin and mineral prophylaxis and therapy"

For more information and resources on the scope of practice for midwives, visit the [College of Midwives website](#), or refer to SCPPs reference manual document on [Midwife Prescribing](#).



CAPtivate

[Competency Assurance
Program Updates]

For the 2024/25 license renewal, SCPP wishes to remind members to use the [revised Professional Development Log \(PDL\)](#) when documenting the current requirement of a minimum of 15 CEUs. If you began documenting on a previous version of the PDL in 2023, you should use the revised version to continue documenting your Continuing Professional Development (CPD) and then upload both documents for 2024-2025 renewal. Members are required to upload their completed PDL at license renewal.

Reminders:

- All practising members must annually select and complete learning of their choice from within the [person-centered framework](#). Learning directed toward one of the concepts included in the person-centered framework from within the themes of Harm Reduction, Equity, Diversity, Inclusion, and Cultural Safety, or Indigenous Learning must be documented in your PDL to satisfy this requirement. There are no set hours or continuing education units required. USask CPE has published a list of [suggested resources](#) which members may choose to use.
- There are additional mandatory requirements for some members depending on practice, which can be found on the [Training and Development](#) webpage. For example, pharmacy managers will also take continuing education that is aligned with pharmacy manager responsibilities on an annual basis.

Members should visit the [CAP webpage](#) regularly for program updates and information. The [FAQ section](#) answers questions related to [this year's annual requirements](#). Please email nicole.pulvermacher@saskpharm.ca with any remaining questions you may have about the CAP.

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NEW Continuing Professional Development (CPD) Tool

Development of tools to assist and guide members through their ongoing learning has been an SCPP focus in supporting member CPD. Please see the website to view a [short introduction video](#) that provides an overview of CPD and what it means for your practice.

The following [tools are now available on the website](#) to support members in completing CPD.

- Continuing Professional Development (CPD) Tool
- SMART Goals Guide, a supplement to the Continuing Professional Development Tool

Advisory Groups

In December and January, the Competency Assurance unit convened a Level II Advanced Prescribing B (APB) Advisory Group, made up of pharmacists and other health care professionals. The purpose of this group was to provide recommendations to SCPP Council related to the admission requirements for training and education to become Level II Advanced Prescribing B certified and the maintenance of competency requirements for Level II Advanced Prescribing B certification.

Currently, SCPP is forming a CAP Requirements Advisory Group to consult on the development of the revised CAP, including program requirements, timelines for implementation, and member education/support. Pharmacists and pharmacy technicians from a variety of practice areas are included.

Intermittent Coaching for Practice Improvement

Work continues preparing for pilots of two Structured Feedback Programs: Patient Reported Experience Measures (PREMs) and Peer/Non-Peer Feedback.

Seeking Member Feedback

As we continue to develop the revised CAP, we want to hear from you. Please click [HERE](#) to supply any feedback you may have regarding the program and/or the tools above.

Timeline

- **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.
- **April 2022** – A five-year plan is presented to Council.
- **June 2022** – The Task Force is transitioned from research and design to feedback, consultation, and implementation.
- **June 2022** – New Competency Assurance Director is hired.
- **Sept. 8, 2022** – Special Edition microSCOPE on the proposed CAP is published.
- **Sept. 19 and 21, 2022** – Member feedback sessions on the proposed CAP revisions through two community pharmacy-based focus groups is held.
- **Sept. 30, 2022** – Proposed CAP revisions presented at the CSHP – Saskatchewan AGM.
- **Jan. 19, 2023** – Council approves the proposed framework in principle for the purposes of robust consultations to occur throughout 2023.
- **March 31, 2023** – Consultant Nancy Winslade's contract is fulfilled.
- **June-July 2023** – Three new staff are hired to the Competency Assurance Unit.
- **July 2023** – Baseline review is completed of uploaded PDL for the 2022-2023 licensing year.
- **September 2023** – CAP web-page is published to increase member awareness and enhance communication. Member feedback invited.
- **November-December 2023** – PREMs questions are piloted with patient and family partners for feedback.
- **December 2023-January 2024** – Level II Advanced Prescribing B (APB) Advisory Group meet to develop recommendations regarding entry and maintenance of competency requirements for Level II APB.
- **February 2024** – Further stakeholder consultations with the formation of CAP Requirements Advisory Group. ■

Licensure Renewal Opening May 1st

Please look for your renewal notification email and ensure you have reviewed and prepared everything required for your renewal, which may include (dependent upon your membership category):

- [Malpractice Insurance](#)
- [Criminal Record Checks](#) Audit (if you were notified you were selected this year)
- [Continuing Professional Development](#) requirements
- [Advanced Method Certification \(AMC\)](#)

Membership renewal requirements including membership fees must be received in the SCPP office on or before June 1st, 2024 to avoid late penalty fees, and by June 30th, 2024 to avoid automatic termination of membership.

If you require further information, clarification, or assistance in completing your renewal, or are planning to terminate your membership, please contact the SCPP office at scppregistration@saskpharm.ca or call 306-584-2292.



Infection Control Suite Updates

SCPP's 4th-Year Experiential Learning student recently reviewed the standards and guidelines for [Infection Control](#), [Hand Hygiene](#), and [Respiratory Hygiene and Cough Etiquette](#). Notable updates include:

- Routine Practices:
 - performing point-of-care risk assessment before each patient interaction to determine the appropriate routine practices and additional precautions for safe patient care, and
 - environmental cleaning specific to the level of contact and degree of soiling (e.g., patient care areas, blood pressure machines/kiosks);

- Additional Precautions: implementing patient flow and communication measures when additional precautions are in place to manage high-risk circumstances; and
- New resources (e.g. posters) to assist pharmacies with communicating infection control measures.

Review the infection control suite of documents (located in the [Reference Manual](#)) in full to ensure the infection control measures in place are appropriate for the pharmacy services offered at your practice site.

Scope of Practice *Resources*

In an effort to assist members with their questions regarding Level 1 Prescribing Authority, a variety of resources have been put in place to help you navigate the changes in Part K.

Transition

- [Scope of Practice Updates Webpage](#) – Landing page for all the latest updates on Part K, as they become available. Includes copies of all SCPP communication, links to webinars, and handouts.
- [Overview of Changes to Part K of Bylaws](#) – Changes that complement existing practice.
- [Part K - Frequently Asked Questions](#) – Answers questions received since December 21, 2023 on assorted topics (e.g., prescribing drugs/natural health products/devices, dispensing, pharmacy software data entry, billing, compensation, and Level II prescribing). This document is sectioned into categories, and you can easily search to see if your question or a similar question and response has already been documented before reaching out to the College. Also note, all of the questions received during the live Q and A have been added to this document and have been marked with an asterisk (*).

Understanding Bylaws and Policies for Prescribing Drugs (Part K)

- Webinars – overview of Part K regulatory framework
 - [Level I Prescribing Authority \(Dec 2023\)](#) (60 mins)
 - [Level I Prescribing Authority - Q & A \(Feb 2024\)](#) (30 mins)
 - [Level I Prescribing Authority – Practice Scenarios \(March 2024\)](#) (15 mins)
- Reference Manual Documents
 - [General Provisions for Prescribing Authority](#) – general requirements that apply to all prescribing of drugs.
 - [Level I Prescribing Authority \(Practitioner-Initiated\)](#) - when working off a Rx issued by a practitioner.
 - [Level I Prescribing Authority \(Structured\)](#) – minor ailments and formulary management initiatives enacted jointly by the Ministry of Health and SCPP (these would be special enactments and members would receive specific communication for the

start and stop dates as well as any standards and expectations)

- [Level I Prescribing Authority \(Pharmacist-Initiated\)](#) – initiating prescriptions for self-limiting conditions to obtain private or public coverage permitted by the payor.

Note: It is highly recommended that you read the “General Provisions” plus the document specific to the prescribing authority pertaining to your question or situation (e.g., Pharmacist-Initiated”).

- Handouts
 - [Overview of Prescribing Authority Framework](#) – helps to identify which of the prescribing authority reference documents applies to the situation.
 - [Prescribing Authority Tools for Patient Situations.](#)
 - [Bylaw Examples](#) – Additional scenarios to illustrate application of new bylaws.

Who to contact if you still have questions after using the tools and resources provided above

Billing for Professional Services:

- The Drug Plan and Extended Benefits Branch (DPEBB) has advised that all policies and billing processes for currently available prescribing authority services remain status quo. Contact the DPEBB for questions regarding current policies and billing/fees.
- The DPEBB will communicate directly with pharmacies should there be any updates to the policies and processes in the future.

Compensation for new Pharmacy Professional Services related to expanded scope of practice – contact the Pharmacy Association of Saskatchewan.

If you still have questions about the bylaws/policies after using the resources provided above you can send your question to the appropriate staff member below and they will re-direct your question for a response.

- Policy interpretation questions may be directed to nicole.pulvermacher@saskpharm.ca
- Practice implementation questions may be directed to emily.thompson-golding@saskpharm.ca

Council Highlights

March 14-15, 2024



Environmental Scan

- NAPRA Updates:
 - ▶ NAPRA will delay the removal of single-ingredient ephedrine and pseudoephedrine from the NDS (in accordance with the NAPRA NHP policy) until Health Canada has implemented a measure to address these ingredients, or by no later than June 28, 2024.
 - ▶ NAPRA continues its work on updating the Entry to Practice Competencies and on the NDS Modernization Project.
 - ▶ NAPRA and the PRAs continue to work with Health Canada to create a regulatory framework to address compounding that is beyond that of a permitted pharmacy and less than that of a large-scale manufacturer.
 - ▶ A working group to review the NAPRA Compounding Standards has been established as part of the document review cycle.
- CPhA Primary Care Conference:
 - ▶ SCPP will be participating in an upcoming CPhA summit focusing on Transforming Primary Care in Canada, scheduled for June 6, 2024, in Toronto.
- Ohio Pharmacy Board – CVS:
 - ▶ CVS was fined \$250,000 and placed on three-year probation.
 - ▶ Conditions in place to ensure sufficient staff is always available, not just based on prescription volume.
 - ▶ Prohibition of retaliation against staff for requesting additional personnel.
 - ▶ Prescription filling deadline within three days of receipt, auto-fill prescription within five days.
 - ▶ Pharmacists, pharmacy technicians, and interns are exempted from vaccine administration when only a single pharmacist is on duty, and in that pharmacist's professional judgement, the vaccine cannot be administered safely.
 - ▶ Expansion of medical services offered, including vaccines, blood sugar monitoring, health screenings and other healthcare services impacts staffing.



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- Florida Drug Importation Plan:
 - ▶ January 5, 2024 – U.S. FDA approves Florida’s Section 804 importation program (SIP).
 - ▶ Actuarial Standards of Practice (ASOP) Canada expresses concerns over FDA decision, anticipating impact on Canadian drug supply, expecting other U.S. states to replicate Florida’s program.
 - ▶ January 8, 2024 – Health Canada releases statement on importation in response to FDA decision.
 - ▶ Level II APA – Therapeutic Substitution will assist with managing drug shortages.



Strategic Planning

- SCPP Council appointed L. Edgar from the Institute on Governance as the facilitator of the new strategic plan commencing in January 2025. Preliminary meetings were conducted in January 2024, with SCPP staff to support the Strategic Plan Task Force and to establish work plans, timeline, and survey questions. Council and staff had a two-day strategic planning event in April.



COMPASS and QIR Report

- 537 incidents were reported in January 2024 with a total of 46,615 incidents reported from September 2023 – January 2024 (+1,246) since the last COMPASS report in December 2023.
- Number of users that have submitted at least one incident – 456 (+2).
- Top 3 Types of Incidents:
 - ▶ Incorrect dose/frequency – 10,730 (+259).
 - ▶ Incorrect drug – 8,096 (+246).
 - ▶ Incorrect quantity – 7,365 (+144).
- Outcomes of Reported Incidents:
 - ▶ NO ERROR – 25,041 (+475).
 - ▶ NO HARM – 19,970 (+699).
 - ▶ HARM – 1,569 (+70).
- MSSA
 - ▶ 420 pharmacies have completed an MSSA.
 - ▶ Of the above 420 MSSAs completed, 8 pharmacies are in the process of their next MSSA.
 - ▶ 2 MSSAs have been started but not completed.
 - ▶ 5 MSSAs have not yet been started (new pharmacy).
 - ▶ 18 MSSAs are overdue to be completed again (permit requirement).
- CQI meetings - 1,955 (+95).
- Top Contributing Factors of Incidents:
 - ▶ Interruptions
 - ▶ Workload
 - ▶ Noise
 - ▶ Staffing deficiencies
 - ▶ Clutter
- Quality Improvement Reviews (QIRs)
 - ▶ There have been 29 QIRs completed so far in 2024.
 - ▶ To date, 216 second round QIRs have been completed. Of those, 105 QIRs were completed virtually, with 111 being completed in person.

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- ▶ Common issues have been identified during the QIRs conducted from Nov. 1, 2023 – Jan. 31, 2024, and the Field Operations team have been working with pharmacy managers to address these issues.
- ▶ Top Safety Issues: The most common issues identified by the Field Operations team during the completion of QIRs (in order of the most common) are:
 - CDSA Related Issues:
 - CDSA Drugs Destruction – Issues with destruction include not documenting the method of destruction, not properly denaturing post-consumer products, and not having the proper witnesses for the destruction.
 - Reporting Losses to Office of Controlled Substances (OCS) & SCPP – Some pharmacies are only reporting losses to OCS and not SCPP. Others are not reporting losses to either OCS or SCPP.
 - Time-Delayed Safes – Some pharmacies are not yet displaying the recommended signage regarding time-delayed safes.
 - CQI plan deficiencies:
 - No CQI Plan – No plan has been developed or documented.
 - Incomplete CQI Plan – The most frequent deficiencies are identifying MSSA improvement initiatives and staff safety training.
 - Lack of Monitoring / Updating CQI Plan – CQI plans are not always monitored and updated at CQI meetings. Once an MSSA Improvement Initiative is complete, a new one is not determined.
 - Prescribing:
 - Lack of Clinical Information on PAR – Most pharmacies are not documenting the clinical reasons that lead to them prescribing (e.g., compliance, lab work reviewed, conversation with patients, etc).
 - Lack of documentation of follow-up with patient on minor ailment algorithm.
 - Compounding:
 - Lack of Policies and Procedures – Not all pharmacies have developed policies and procedures for their compounding activities, including cleaning, personnel conduct, hand hygiene, and skills and training.
- Cleaning Logs and Procedures – Some pharmacies have not developed and are not using cleaning logs, and their procedure for cleaning equipment and supplies does not meet NAPRA Compounding Standards.
- Skills Assessment and Training – Some pharmacies have not yet completed and documented staff skills training and assessment for all staff compounding in the pharmacy.
- Incident Reporting and Analysis:
 - Contributing Factors – Some pharmacies are not identifying the causal/contributing factors of the incidents, so the “why” (or root cause) an incident occurred is not always clear.
 - System-Based Solutions – Some pharmacies are not including a system-based solution to prevent the incident from occurring again.
- PIP Issues:
 - Accuracy – Failed transactions are not being reviewed regularly (daily).
 - Privacy – Some pharmacies do not complete PIP Audits regularly.
- MedSCIM Results
 - ▶ MedSCIM assessments are being completed as part of the QIRs.
 - ▶ See table for the results from the QIRs completed from Nov. 1, 2023 – Jan. 31, 2024. The MedSCIM assessment involves looking at the narratives of medication incidents reported and assessing the report for completeness and maturity.
 - ▶ As a basis for comparison, the MedSCIM results for Sept. 1 – Oct. 31, 2023, are provided. Although a direct comparison cannot be made between these two results as different pharmacies are being assessed, it does allow an opportunity to see any general improvements.
- Other Inspections:
 - ▶ New pharmacies: two completed, three files still open.
 - ▶ Renovation/Relocation: 16 files still open.

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MedSCIM Results November 1, 2023 – January 31, 2024

0.3% 42.6% 57.1%

		Grade D – Pathological	Grade C – Reactive	Grade B – Calculative	Grade A – Generative
Core Event Description	Level 1 – Report fully complete	0	15	90	66
	Level 2 – Report semi-complete	0	27	84	13
	Level 3 – Report not complete	0	1	0	0

MedSCIM Results September 1 – October 31, 2023

0.9% 39.7% 59.4%

		Grade D – Pathological	Grade C – Reactive	Grade B – Calculative	Grade A – Generative
Core Event Description	Level 1 – Report fully complete	1	13	81	44
	Level 2 – Report semi-complete	0	20	56	8
	Level 3 – Report not complete	0	0	2	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.

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Other Business

• Fee Schedule Update:

- ▶ Implementation of 1.75% credit card processing surcharge, in alignment with industry rules, to offset credit card processing fees incurred by SCPP.
- ▶ Introduction of e-Transfer and online bill payments to expand the payment options available to members.
- ▶ Transition to electronic licenses in mid-2024 will save on costs and resources, while providing the member with instant access to their license via the member's portal on the SCPP website. Once electronic licenses are available following the 2024 renewal cycle, members opting for traditional mail delivery of licenses will incur a \$25 charge. Physical copies of licenses will be sent for the 2024 renewal cycle without charge. Members are reminded that the SCPP does not require members to publicly post their licenses.

• Minor Ailments Updates:

Council approved the addition of Lyme disease prophylaxis as a new minor ailment:

- ▶ Assessment of Lyme disease prophylaxis is appropriate when the tick was acquired in a high-risk area, defined as rate of tick infection with *B. burgdorferi* to be at least 20%. Currently, Saskatchewan is not a high-risk area for Lyme disease. The Saskatchewan Ministry of Health has directed that using this definition continues to be appropriate. For this reason, Lyme disease prophylaxis cannot be offered to individuals with tick bites from ticks in Saskatchewan. Individuals who travel to high-risk areas and present for assessment at Saskatchewan pharmacies may be assessed and provided with prophylaxis pending the assessment outcome.

Stay tuned for announcements from medSask, DPEBB and SCPP for the official launch date for the three new minor ailments - Lyme disease prophylaxis, contact dermatitis (allergic and irritant) and pinworm.

- Significant updates to the cold sore guideline were approved, expanding treatment options, referral criteria, and allowing for prescription refills for up to six cold sores per year. According to the guideline:
 - ▶ Treatment can now be initiated based on signs and symptoms in those without a previous diagnosis of a cold sore.
 - ▶ Treatment can now be initiated within 48 hours of prodrome or symptom onset even if lesion is present.

Continued on next page ▶



Complaints Committee Report

- The Complaints Committee met on Dec. 19, 2023, and reviewed all open and active files as follows. Of the 15 files reviewed:
 - ▶ two remained open for continued investigation.
 - ▶ ten were closed.
 - ▶ one was referred to an Alternative Dispute Resolution (ADR).
 - ▶ two were referred to be heard by the Discipline Committee.
- Trends:
 - ▶ There was an increase in complaints related to COVID-19 injection errors in the last few months of 2023.
- The Complaints Committee met on February 13, 2024, and reviewed all open and active files as follows. Of the 18 files reviewed:
 - ▶ two remained open for continued investigation.
 - ▶ fifteen were closed.
 - ▶ one was referred to an Alternative Dispute Resolution (ADR).
- Trends:
 - ▶ There was an increase in the number of concerns related to pharmacies offering incentives for OAT patients.

- ▶ Evidence supports that earlier initiation is more effective, however, initiation of treatment up to 48 hours is common practice.
- ▶ Refills can now be provided on the original prescription.
- ▶ Pharmacists can determine if their patient would benefit from refills for episodic treatment or to assess each cold sore episode individually.
- ▶ Pharmacists can now prescribe any oral (i.e., famciclovir, valacyclovir or acyclovir) or topical option (i.e., acyclovir, acyclovir/hydrocortisone).
- **Note:** There is an SCPP (scope of practice) and DPEBB (payment) difference:
 - ▶ There is no change for the eligible products for DPEBB MSOP-F payment: valacyclovir and acyclovir/hydrocortisone are the only eligible products.
 - ▶ The treatment section of the guideline provides all treatment options.
 - ▶ The Eligible Schedule I Drugs section of the guideline provides the details on which treatment options are eligible for MSOP-F. The following can be prescribed but are not eligible for MSOP-F:
 - Famciclovir is off-label and a single dose.
 - Acyclovir is off-label and inconvenient.
 - Zovirax cream is off-label and Zovirax ointment is off-label for all immunocompetent patients (on-label for immunocompromised, who may be referred).
- Updated Nausea and Vomiting of Pregnancy (NVP) Guideline:
 - ▶ Removal of required 7-day trial of treatment. Pharmacist may determine duration of initial treatment of NVP and provide refills, as necessary.
 - ▶ Prescribing for NVP has been extended to provide treatment for those experiencing mild to moderate NVP with those experiencing severe NVP (PUQE score > 12) needing to be referred.
- Updated Musculoskeletal Sprains and Strains Guideline:
 - ▶ Allow prescribing of 7 to 14 days of treatment initially.
 - Previously the guideline required a 7-day supply with one refill to be provided following the follow up.
 - The guideline is no longer providing dispensing criteria in conjunction with follow up.
 - ▶ Follow up is still recommended at 7 days after initial assessment.
- **Level II Prescribing Advisory Group:**

The Competency Assurance unit formed an Advisory Group to guide Level II Advanced Prescribing B (APB). The purpose of the group was to provide recommendations to Council related to the admission requirements for training and education to become Level II Advanced Prescribing B certified and the maintenance of competency requirements for Level II Advanced Prescribing B certification.

The Council approved the following recommendations:

 - ▶ Entry requirements to complete the Level II B training:
 1. The applicant must be in good standing with SCPP.
 2. Successful completion of Advanced Level II A training (therapeutic substitution).
 3. Successful completion of lab courses and requirements, as determined.
 4. Provide a letter of intent including outlining evidence of collaboration with other HCP and intent of how APB will be implemented into their individual practice.
 5. Recent (within last 3 years) practice experience including the equivalent of one year of practice in a direct patient care environment, or 2,000 hours in the last 3 years.
 - ▶ Maintenance of competency requirements for those who have received the APB certificate:
 1. APB prescribing pharmacists will not be required to complete additional CE/CPD requirements within the revised CAP program (to be phased in). However, they will have to provide evidence of CPD aligned with their prescribing practice.
 2. SCPP will audit APB pharmacist records, cases, and documentation in addition to verifying CPD requirements.

Members with this credential will self-declare at renewal that they practice in direct patient care. The regulator will determine requirements for those that have the APB certificate credential that are away from direct patient care for extended periods to ensure competency. ■

Record Retention and Destruction

The [Record Retention and Destruction](#) reference manual document has been updated to reflect federal and new provincial requirements for the retention and destruction of personal health information, including *The Health Information Protection Act* and *The Health Information Protection Regulations, 2023*.

Records containing personal health information must be retained:

1. For at least **10 years** from the last date of service, or until **age 20** if the patient is a minor, whichever is longer; or

2. In accordance with a detailed retention schedule that sets out all legitimate purposes for retaining the prescription and the retention period for each purpose.

Minimum requirements in federal and provincial legislation may be found in the Record Retention and Destruction document to assist those who opt to create their own detailed retention schedule.

When destroying records containing personal health information, a destruction log must be made. [FAQ #1](#) in the document for the information that must be captured in the destruction log.



Community Pharmacy Practice Enactments

Community pharmacy practice has been impacted by many timebound enactments in the last 4 years, such as emergencies, extraordinary circumstances or Other Diseases prescribing.

To assist pharmacy professionals with tracking all current enactments, the SPCP maintains a list in [Community Pharmacy Practice Enactments](#) (located in the Reference Manual). It covers all scopes of practice, including administration by injection, laboratory practices and prescribing drugs.



Reminder

Prescription Review Program (PRP): "Office-Use" Prescriptions

A reminder that at Councils' September 2023 meeting, they approved a policy requiring that all "office use" prescriptions for PRP medications must be faxed to the PRP. SPCP's PRP policy was recently updated to clarify that this includes all practitioners, regardless of PRP-partnership (e.g., veterinarians). This policy is another proactive step in addressing the Provincial Auditor's concerns by strengthening the monitoring of inappropriate prescribing and dispensing of opioids.

Post-Exposure Prophylaxis (PEP) Kit Medication Change

SHAs Staged Approach, Beginning March 2024

The SHA distributes Post-Exposure Prophylaxis (PEP) kits for preventing HIV transmission to many health-care locations across Saskatchewan. The kit contents are slowly being changed for Adults/Children 35kg or over. Because the current and existing kits are still considered appropriate therapy, this change is occurring in a staged approach with new kits slowly replacing existing kits, once they are used or expire. Please do not return kits unless they are expired. This change occurs under the Ministry's direction in order to optimize patient care and resourcing.

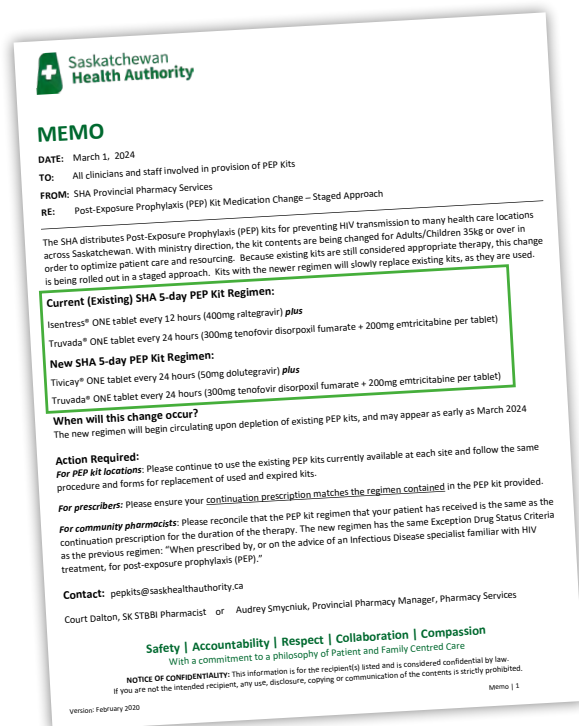
For PEP kit locations: Please continue using existing PEP kits currently available at each site and follow the same procedure and forms for replacement of used and expired kits.

For prescribers: Please ensure your continuation prescription matches the regimen contained in the PEP kit provided on site.

For community pharmacists: Please reconcile that the PEP kit regimen that your patient has received is the same as the continuation prescription for the duration of the therapy.

The new regimen has the same Exception Drug Status Criteria as the previous regimen: When prescribed by, or on the advice of an Infectious Disease specialist familiar with HIV treatment, for post-exposure prophylaxis (PEP).

Please send questions to pepkits@saskhealthauthority.ca.



Click to enlarge memo from SHA for more information

PEBC Certificate of Qualification Expiration Policy Update

As published in the [October 2023 edition of SCOPE](#), SPP Council approved the recommendation by the Registration and Licensing Policies Committee of an expiration on the validity of the PEBC Certificate of Qualification for candidates who have not obtained a licence to practise in Saskatchewan or from another pharmacy regulatory authority in Canada within three years of completion of the PEBCs.

In March 2024 SPP Council reviewed this policy further and determined that applicants who are actively engaged in the SPP Appraisal and Assessment Program, Structured Practical Training and Assessment/Experience, or other pathway to licensure in Saskatchewan may request the Registrar grant an exemption to this three-year requirement at the Registrar's discretion.

Notes from the Field

Ensuring Opening Hours are Accurate

Most community pharmacies use external signage. External signage provides patients with not only the ability to immediately identify a pharmacy, but also information on the hours of operation and services that can be accessed. As such, it is important that the information provided on external signage is accurate.

It has come to the attention of SCPP that there have been some pharmacies that have incorrect hours of operation listed on the external signage, largely due to the hours of operation in the pharmacy changing and signage not being updated to reflect those changes.

It is important to ensure that when anything changes (e.g., hours of operation), that either any external signage (including lighted signs) is updated, or the incorrect signage is removed. This is to ensure that patients are aware of the times in which they are able to access services so they do not attempt to access a pharmacy in an emergency, only to find that it is closed.

USask CPE New Educational Opportunities

USask CPE has new educational opportunities for pharmacy professionals including:

Patient-Centered Care Courses:

1. Buprenorphine Extended-Release Subcutaneous Injection Course

This course covers everything needed to know about the use of buprenorphine extended-release subcutaneous injection in opioid agonist therapy as well as dispensing and administration procedures. Several case scenarios are also discussed, allowing learners to apply their new knowledge. 2 CEUS.

2. Accessible Pharmacies: Understanding Disability and Creating Inclusive Spaces

The course is designed to introduce you to concepts related to disability equity and to give you resources to ensure the pharmacy you work in is accessible and inviting to your disabled patients and colleagues. 2 CEUS.

3. Pharmacy Perspective: Providing Safe Spaces

A limited podcast series exploring what culturally safe spaces look and sound like in the pharmacy environment. Connect these conversations with your own practice environment by using the tools, resources, and strategies discussed by our experts, and by using our guided self-reflection questions in the associated course. Approx. 4 CEUs.

4. Maternal/Prenatal & Perinatal HIV Management

This course provides a comprehensive overview of maternal/paternal and perinatal HIV management. 1 CEU.

Injection Training:

Visit the USask CPE website for information on [Injection Training](#).

- Reminder; Pharmacists upon licensure with SCPP, are required to attend the Live Injection Refresher Workshop through USask CPE in order to transition from AMSC to AMC. Pharmacists cannot administer injections after licensure until transition to AMC.
- Injection training for 3rd year pharmacy students (PharmD 2026) will be held August 30th, 2024.

COMPASS Continuous Quality Improvement Coordinator Supplementary Training

Any CQI Coordinator who has been appointed on or after September 18, 2023, including those who have previously completed training, need to complete the full [COMPASS Continuous Quality Improvement Coordinator Training Course](#) within six months of designation. All other CQI Coordinators will need to complete the [COMPASS Continuous Quality Improvement Coordinator Supplementary Training](#) course by April 30, 2024.

Privacy Officer Certification/Recertification

The Privacy Officer Course is currently being updated to reflect new HIPA changes. Registration for the course is currently on hold. If you register for the course, you will be enrolled once the updates are complete which is estimated to be the end of July 2024.

Bylaw and Policy Updates

Amended Bylaws:

The Regulated Health Professions Act

In December, SCPP provided extensive feedback to the Ministry of Health on the proposed *Regulated Health Professions Act*. The feedback was well received and SCPP has recently been advised that further consultations are now planned for late spring of this year. The Ministry has delayed the original timeline of introducing this Bill in the 2024 Spring Session of the Legislative Assembly and it is now expected to occur in the 2024 Fall Session.

Ephedrine and Pseudoephedrine

NAPRA has been working on modernizing the National Drug Schedules (NDS) and one of the changes that has been gradually occurring over the past few years is to remove natural health products (NHPs) from the NDS. The final removal was to be ephedrine and pseudoephedrine in both single entity and combination products as of January 31, 2024. NAPRA has been working with Health Canada to ensure a comprehensive framework is created to protect Canadians from the risks of all NHPs. As this framework was not completed in time for the January 31, 2024 deadline, SCPP put forward administrative bylaw amendments to support public safety until such time as the framework from Health Canada can be completed.

SCPP Council approved amendments on January 24, 2024 to the Administrative Bylaws to ensure all forms/concentrations of **single entity ephedrine and pseudoephedrine** remain as scheduled drugs in Saskatchewan and to correct administrative oversights.

As of March 1, all **ephedrine and pseudoephedrine combination products** have been de-scheduled as per the NAPRA [February 8, 2024 press release](#).

We anticipate that as of June 28, 2024, all remaining forms/concentrations of single entity ephedrine and pseudoephedrine will be removed from the NDS, and that Health Canada will have their framework in place. SCPP will amend our administrative bylaws when it is deemed safe to do so in the public interest and provide communication to members.

Council Structure

The Miscellaneous Statutes (Health Professions) Amendment Act, 2022 (Bill 120) became effective May 15, 2023. This legislation removed specific Council membership requirements from *The Pharmacy and Pharmacy Disciplines Act (the Act)*, improved SCPP's flexibility to revise Council structure, and authorized the appointment (versus election) of councillors to Council. As a result of these legislative amendments, the SCPP Council approved amendments to the Administrative Bylaws to revise Council structure (add the Past President as an Officer), remove references to elections, authorize Officers to serve two (or more) terms, and to remove outdated references to the Act.

Seal of the College

The SCPP Council approved amendments to the Administrative Bylaws to prescribe a seal of the College. These amendments ensure clarity and align with the authority provided by legislation.

Fee Schedule

The SCPP Council approved amendments to the Administrative Bylaws: Fee Schedule to add a credit card surcharge and a fee to print and mail member licenses. The College continues to pay significant fees to credit card merchants of over \$120,000 per year, which has exceeded our threshold. In order to offset costs, a 1.75% surcharge will be applied for all credit card payments effective May 1. In addition to this new surcharge, SCPP has increased payment offerings to include no cost options such as e-Transfers and online bill payments. SCPP will also be modernizing and moving to a fully electronic member license over the summer months. Once the e-licenses are in place, any member who still wishes to have a license printed and mailed will incur a \$25.00 fee. This moves SCPP to a real time model for member licenses, reduces printing and mailing costs and supports the environment.

The Labour Mobility and Fair Registration Practices Act

The Minister of Health approved amendments to the Regulatory Bylaws to align with the requirements pursuant to The *Labour Mobility and Fair Registration Practices Act* (and its Regulations). This legislation requires SCPP to ensure our registration processes are transparent, objective, timely, and procedurally fair. It promotes interprovincial credential recognition and limits the registration information SCPP can require from applicants licensed in other jurisdictions. The Regulatory Bylaw amendments also authorize the registration of new Canadian pharmacy graduates, authorize physicians and nurse practitioners to supervise pharmacy students during their practicums, add the drug identification number (DIN) to prescription labelling requirements, and correct administrative oversights.

New Policies:

Language Proficiency

SCPP Council has adopted the English language proficiency requirements, including the education as evidence, language proficiency tests, acceptable test scores, and triggers specified in the new [NAPRA Language Proficiency Requirement Policy \(February 2024\)](#). Concurrently, they have introduced exceptions and clarifications specified in a new SCPP Language Proficiency policy. Language proficiency tests completed on or after September 1, 2024 will be assessed based on [NAPRA's policy](#) and the tests and minimum passing test scores in that document will apply.

The new SCPP Language Proficiency policy acknowledges Council's adoption of [NAPRA's policy](#) and aligns with the requirements of [The Labour Mobility and Fair Registration Practices Act](#) and its Regulations. An applicant for registration with the SCPP who is currently registered with another Canadian pharmacy regulatory authority may demonstrate English language proficiency by submitting a letter or statement, directly from the regulatory authority to the SCPP, confirming that they successfully demonstrated English language proficiency as a condition of registration in that jurisdiction.

NDS Final Recommendations for Ophthalmic Brimonidine 0.025% and FDC of Acetaminophen and Ibuprofen

The interim recommendations made by the National Drug Scheduling Advisory Committee (NDSAC) on December 3-4, 2023 that:

- Acetaminophen and ibuprofen in oral, fixed-dose combinations, in package sizes containing 20,000 mg or less of acetaminophen and 6,000 mg or less of ibuprofen, remain in Schedule III and
- Acetaminophen and ibuprofen in oral, fixed-dose combinations, in package sizes containing either more than 20,000 mg of acetaminophen or more than 6,000 mg of ibuprofen, remain in Schedule II
- 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 be granted Unscheduled status
- 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)

were finalized effective January 23, 2024. Final approval of the interim recommendations was made by NAPRA's Board of Directors, in consideration of comments received during the 30-day consultation period. The National Drug Schedules will be revised accordingly.

Time-Delayed Safe

In August 2022 SCPP notified members of Council's decision to implement a requirement for all pharmacies to have a time delayed safe. The time-delayed safe policy was published October 2023.

In keeping with the deterrent aspect of the policy, SCPP requires pharmacies to display an SCPP standardized signage that there is a time-delayed safe on the premises. Decals were sent to all pharmacies with their 2023-24 permit.



From the Desk of the Dean

Dr. Jane Alcorn,
Professor and Dean,
College of Pharmacy and Nutrition,
University of Saskatchewan

The beginning of the 2024 academic term saw us welcoming new employees into the college. Dr. Kelsey Cochrane, a former graduate of our BSc Nutrition program, has joined us as an Assistant Professor (tenure track) in the Division of Nutrition. Her research will focus on human milk, maternal nutrition, and developmental origins of health and disease. Simone Downer will provide administrative support to the undergraduate and graduate programs. Some important upcoming events include our Academic Awards Ceremony, which will be held on March 10 in room 1,150 of the Health Sciences Building. Also in March, the students will be contributing to Nutrition Awareness Month and Pharmacy Appreciation Month. Below are some highlights of the college compiled by our Communications Specialist, Jason Belhumeur. Enjoy!

Professional Development Week Hosted by the University of Toronto

[Professional Development Week \(PDW\)](#) is an annual conference hosted by a different Canadian pharmacy school each year.

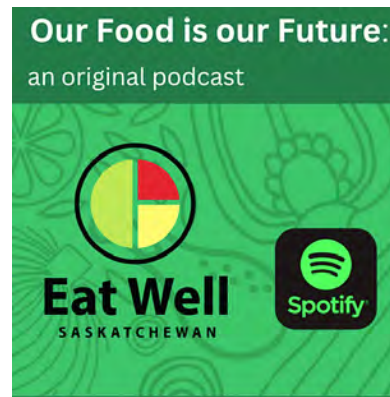


This four-day conference brings pharmacy students together from across the country to network, apply their practical skills and expand their knowledge on various healthcare topics. Overall, we had 33 delegates from USask who represented our school proudly. [Read More](#)

medSask Nationwide A Tool That Supports Pharmacists

medSask is gaining nationwide reach! The tool is supporting pharmacists with prescribing for various minor ailments and self-care conditions and is now used by thousands of students and professionals in every province across Canada. See what director Charity Evans and associate director Danielle Larocque have to say about medSask. [Full Article](#)

Our Food is our Future A Podcast by Eat Well Saskatchewan



Our Food is our Future, is an original podcast produced with Eat Well Saskatchewan and graciously funded by the Community Initiatives Fund. It's a 20-part series that explores food as medicine and the wellness of our communities with an Indigenous perspective.

Food explorer and host Moe Mathieu will bring you along on his quest to share stories, knowledge and excitement about traditional foods and the role food plays in our culture here in the province of Saskatchewan. Our Food is Our Future has collaborated with inspiring guests, community leaders, and food experts. [Listen to the Podcast Here](#)

PDW Indigenous Pharmacy Student Award Sasha Merasty

The USask-PDW Indigenous Pharmacy Student Award supports one Indigenous [USask pharmacy student](#) to attend [Professional Development Week 2024](#), a



student conference aimed at providing the student recipient opportunities to gain valuable knowledge, network with peers and experts, and share their unique perspectives on Indigenous culture, heritage, and contemporary issues.

The award conceptualization was inspired by the inaugural Bridging the Gaps Fund created by the [CAPSI National Executive Council](#) 2022-2023.

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College Information Handbook The Handbook Resource is Now Available Online

The Handbook contains information on college governance and structure and summaries of College policies and procedures with specific emphasis on equity, diversity, and inclusion principles.

A link to the College's Strategic Plan is contained herein and information regarding the monitoring of the college strategic plan can be made available if requested.

We intend to update the handbook yearly and we encourage your suggestions and comments in regard to the material contained within this handbook, as well as recommendations on policy revisions.

Featured Research Dr. Robert Laprairie

INNOVATOR: Research at USask enters uncharted territory every day. Dr. Robert Laprairie (BSc'10) is the Saskatchewan-GlaxoSmithKline Chair in Drug Discovery and Development in the College of Pharmacy and Nutrition.



His team's research is focused on the development of new therapies from cannabis and other natural sources. The objective is to develop therapies for people who suffer from epilepsy, depression and anxiety that are not effectively treated by existing treatments.

Dr. Laprairie's innovative lab research has long-standing benefits for families in Saskatchewan and all over the world who are suffering from illnesses. This research can dramatically change lives, but it needs the support of donors to have maximum and immediate impact.

Alumna Feature Amanda Geradts

Amanda graduated from the college of Pharmacy and Nutrition in 2018. Since then, she has worked in a variety of settings including clinical, outpatient, and private practice.



As part of the Nutrition Program team, Amanda and her colleagues partner with community-based organizations to deliver free cooking classes to individuals and families experiencing food insecurity. Through both in-person and online classes, they teach a combination of food skills and nutrition concepts tailored to the needs of the group. [Read More.](#)

U Sports & BNI Athletes on Track bursary Amou Madol

Amou Madol, a third-year PharmD student, won the U Sports & BNI Athletes on Track bursary. U SPORTS, in conjunction with BlackNorth Initiative (BNI), announced today the recipients of the Athletes on Track bursary. Eight Black student-athletes from across Canada, within the U SPORTS ecosystem, were awarded the bursary in the program's second year of operation. The initiative offers a \$5,000 bursary to eight Black student-athletes. BNI will additionally assign a mentor to each student, providing assistance and guidance in various general skills like resume construction and public speaking. ■





Discipline Matters

The Discipline Committee considers the primary purpose of a discipline proceeding to be the protection of the public and the pharmacy profession as a whole. The Discipline Committee is aware that the public must have confidence in the profession's ability to regulate itself in a manner that protects the public. All Decisions and Orders of the Discipline Committee are posted on the [CanLII website](#) in their entirety.

Consensual Complaint Resolution Agreement – Summary – Saber Pharmacy Ltd. Operating as Shoppers Drug Mart #415, and Members Ahmed Saber (D5022), Ian Guion (D5090) and Ankesh Virani (D5021)

The Saskatchewan College of Pharmacy Professionals (the College) considers the primary purpose of an Alternative Dispute Resolution process to be the protection of the public and the pharmacy profession as a whole. The College is conscious of the fact that the public must have confidence in the profession's ability to regulate itself in a manner that protects the public and has determined that a digest of Alternative Dispute Resolution processes will be published.

Agreement

Where there is evidence to support the allegation of professional incompetence, professional misconduct or proprietary misconduct the Chair of the Complaints Committee, on behalf of the Complaints Committee, shall determine whether there is an opportunity to use an Alternative Dispute Resolution to resolve the complaint. A resolution or remedy may result in Consensual Complaint Resolution Agreement (CCRA), which is one form of an Alternative Dispute Resolution (ADR).

An ADR process, while not a discipline hearing, will result in an agreement between the College and the signatories of the agreement which meets the public protection mandate. Should the member and/or proprietor not agree to participate in an ADR the file is referred back to the Complaints Committee, which may result in referral to the Discipline

Committee for a hearing. The SPP Regulatory Bylaws Part P.1 section 3(12) and (13) state the ADR processes.

The Complaint

On November 6th and 7th, 2023, two pharmacists, Ankesh Virani and Ian Guion, practicing at Shoppers Drug Mart #415 injected 28 patients with Pfizer Bivalent vaccine with the lot number "GK0936" and expiry date of Feb/2024 instead of the expected Pfizer XBB.1.5 formulation.

The College was informed of the error on November 10th, 2023, by the Saskatchewan Drug Plan Immunization Branch. Ahmed Saber, as pharmacy manager, self-reported the error to the Saskatchewan Drug Plan on November 8th, 2023.

After investigating the complaint, the Committee had a number of significant concerns related to vaccine administration, management, and policies and procedures.

The Agreements

The Committee recommended individual Agreements for the members who administered the vaccines and the pharmacy manager/proprietor to:

- Improve and monitor the practice environment at the pharmacy, ensure updated injection training for all members involved to ensure competency, and provide required support to the pharmacy staff.

The members Ankesh Virani and Ian Guion agreed to individual CCRA's in February 2023 and the pharmacy manager/proprietor Saber Pharmacy Ltd. agreed to a CCRA in April 2023, which, while an alternative to the discipline process, meets the mandate of the College and provides general deterrence for the profession.

In summary, the members and proprietor agreed to the following provisions:

1. Ankesh Virani and Ian Guion's Advance Method Certification (AMC) to provide injections remain suspended until they complete the full USask Continuing Pharmacy Education (CPE) Advanced Method Certification (AMC) online training and complete the live

Continued on next page ►

injection training workshop. Any costs associated with the training will be the responsibility of the members.

2. Ahmed Saber must complete the full USask Continuing Pharmacy Education (CPE) Advanced Method Certification (AMC) online training and complete the live injection training workshop. Any costs associated with the training will be the responsibility of the member. Mr. Saber's AMC was not suspended.
3. A complete review of the pharmacy's vaccine policies and procedures by the College field officer, including confirmation that all staff have reviewed the policies and will be part of onboarding of all new pharmacy staff training.
4. A minimum of two inspections to be conducted by a College field officer over a 1-year period, the costs to be borne by the proprietor. All deficiencies noted in the inspection will be rectified within a time period set out by the field officer.

Consensual Complaint Resolution Agreement – Summary – Rizwan Ali (D3629)

The Saskatchewan College of Pharmacy Professionals (the College) considers the primary purpose of an Alternative Dispute Resolution process to be the protection of the public and the pharmacy profession as a whole. The College is conscious of the fact that the public must have confidence in the profession's ability to regulate itself in a manner that protects the public and has determined that a digest of Alternative Dispute Resolution processes will be published.

Agreement

Where there is evidence to support the allegation of professional incompetence, professional misconduct or proprietary misconduct the Chair of the Complaints Committee, on behalf of the Complaints Committee, shall determine whether there is an opportunity to use an Alternative Dispute Resolution to resolve the complaint. A resolution or remedy may result in Consensual Complaint Resolution Agreement (CCRA), which is one form of an Alternative Dispute Resolution (ADR).

An ADR process, while not a discipline hearing, will result in an agreement between the College and the signatories of the agreement which meets the public protection mandate. Should the member and/or proprietor not agree to participate in an ADR the file is referred back to the Complaints Committee, which may result in referral to the Discipline Committee for a hearing. The SCPP Regulatory Bylaws Part P.1 section 3(12) and (13) state the ADR processes.

The Complaint

- In December 2022, the Complaints Committee received a complaint with allegations of Rizwan Ali disregarding Opioid Agonist Therapy (OAT) standards of practice and Prescription Review Program (PRP) requirements, as well as concerns regarding discounting prescriptions and crossing professional-patient boundaries by lending money to patients.
- Upon completion of the investigation, the Complaints Committee recommended that the concerns be addressed through a Consensual Complaints Resolution Agreement.

The Agreement

The Committee recommended an Agreement to:

- Ensure ethics and boundary training is completed, updated harm reduction training is completed, and additional measures to instill confidence to the public that Rizwan Ali has taken the concerns seriously and appropriate actions have been taken to address the concerns.

Rizwan Ali agreed to a CCRA in April 2023, which, while an alternative to the discipline process, meets the mandate of the College and provides general deterrence for the profession.

In summary, Rizwan Ali has agreed to the following provisions:

1. Mr. Rizwan Ali shall voluntarily step down and be ineligible to serve as a Pharmacy Manager at any pharmacy in Saskatchewan for a period of five months.
2. Mr. Rizwan Ali will complete the PROBE Ethics & Boundaries Program – Canada. All costs to complete the course will be borne by the member.
3. Mr. Rizwan Ali will complete the full USask Continuing Pharmacy Education (CPE) online Advanced Harm Reduction Training and OAT course. All costs to complete the course will be borne by the member.
4. Mr. Rizwan Ali will pay \$17,500 as partial recovery for the costs and expenses incurred as a result of the investigation.

Mr. Rizwan Ali will pay a fine of \$10,000 in recognition of the seriousness of the concerns and potential risk of harm to the public. ■

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 pebc.ca.

Pharmacist Schedule of Exams

Examination Name	Examination Date	Application Deadline Date*
May 2024 Pharmacist Qualifying Examination	MCQ: May 21 – 25, 2024	Deadline passed
	OSCE: May 26, 2024	
June 2024 Pharmacist Evaluating Examination	June 19 – 20, 2024	Deadline passed
November 2024 Pharmacist Qualifying Examination	MCQ: November 4 – 8, 2024	August 1, 2024 12 pm ET
	OSCE: November 9, 2024	

Pharmacy Technician Schedule of Exams

Examination Name	Examination Date	Application Deadline Date*
April 2024 Pharmacy Technician Qualifying Examination	Part I – MCQ: April 3, 2024	Deadline passed
	Part II – OSPE: April 6, 2024	

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

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

