



SASKATCHEWAN
COLLEGE OF PHARMACY
PROFESSIONALS

Annual Report 2018

Professionalism

Accountability

Visionary Leadership

Collaboration

Education





Mission:

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

Vision:

Advancing quality pharmacy care for a healthier Saskatchewan.

Values:

- Professionalism
- Accountability
- Visionary Leadership
- Collaboration
- Education

Goals:

- Goal 1 – Advancing Public Safety in Pharmacy Services
- Goal 2 – Ensuring Priorities and Resources are Aligned to Achieve Goals
- Goal 3 – Maintaining a Self-Regulated Profession
- Goal 4 – Increasing Recognition of Pharmacy Professionals as Essential Members of the Health Care Team
- Goal 5 – Supporting Health Care Public Policy

Professionalism



108th Annual General Meeting

Agenda

May 4, 2019

Elk Ridge Resort (Wapiti Ballroom)

President: Justin Kosar

Registrar: Jeana Wendel

- 1.0 President's Welcome
- 2.0 Introduction of Councillors and Special Guests
- 3.0 Motion to Accept 2018 Minutes as Printed and Distributed
- 4.0 Business Arising from the Minutes
- 5.0 Memorial to Deceased Members
- 6.0 Reports
 - 6.1 President's Annual Report
 - 6.2 Registrar's Report
 - 6.3 Auditor's Report/Report of the Finance and Audit Committee
 - 6.4 Consideration of Annual Report as Printed and Distributed
 - 6.5 College of Pharmacy and Nutrition Report
- 7.0 New Business
- Adjournment

Visionary
Leadership



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Collaboration
Education



Justin Kosar, President

Report of the President

I am pleased to report on my second term as President.

In my role as President, I am pleased to provide the membership an update and outlook from the Council for the Saskatchewan College of Pharmacy Professionals. Like every year, 2018 continued to represent a period of successful change, growth and focus upon ensuring a safe and effective environment for patients to access pharmaceutical services within the province of Saskatchewan. Together, members of the Council have advanced upon many of our central goals and priorities while ensuring pharmacists remain closely linked with other members of our public health care system.

Under our priority goal of “advancing public safety in pharmacy services” is the increased use of a standardized quality assurance process. As of December 1, 2018, all community pharmacies met the requirements for participation in COMPASS, our continuous quality assurance program. By April 1, 2018 all pharmacies had completed their Medication Safety Self-Assessments (MSSA) and by June 1, 2018 all pharmacies had completed their first Quality Improvement (QI) plan. A monitoring process will be developed in 2019 to monitor the effectiveness of the program and identify any areas for improvement. Council has enabled the creation of a COMPASS committee with strong emphasis on participation of members and of Quality Improvement (QI) Coordinators. The College’s website contains more information on this program and how it reflects our commitment to patient safety.

Another objective under this goal was to “introduce a competency assurance program to support quality assurance.” Due to other priorities work began on this objective in the last quarter of 2018 with a plan for the first two quarters of 2019. A working committee will be established in 2019 and a comprehensive survey for members will be developed to create a baseline and assist with directing this important work.

Closer to home, and to comply with our second goal of “ensuring priorities and resources are aligned to achieve goals,” we continue to develop a comprehensive performance management system for Council governance and the office administration roles. Your council does their utmost to stay abreast of developments within our care and service environments as they relate to our three strategic goals of maintaining a self-regulated profession, increasing recognition of pharmacy professionals as essential members of the health care team, and supporting health care public policy.

This year also saw the completion of the successful Registrar transition. Along with this transition, Associate Registrar, Ray Joubert was instrumental in advancing important projects such as the Travel Health bylaws and framework, the Professional Autonomy bylaws and framework among other work. In April, after 20 years with the College, Deputy Registrar, Jeanne Eriksen announced her intent to retire at the end of June. Council was happy to recognize and welcome Lori Postnikoff to her new role as Jeanne’s replacement.

I am also pleased to report that for 2018 we had no vacancies on Council. We have welcomed Kyla Jackson for a second term, Rod Amaya replacing Paul Melnyk, Brandon Krahn (this was a vacant position due to the resignation of Leah Perrault) and Amy Wiebe replacing Marilyn Younghans after elections in Divisions 2, 4, 6 and 8 respectively. We continue with our four appointed public members and Marilyn Younghans accepted the role of President-Elect and Stephanie Miller accepted the role of Vice-President. Finally, Meghanne Rieder replaced Jordan Kalesnikoff as student observer, with Bill Gerla remaining as past-president. To ensure our commitments to proper governance and strategic based decision making a Council orientation session was held on September 26, 2018, for new Councillors with the support of our experienced members. I am very happy to be part of such a strong and committed team of pharmacy leaders dedicated to fulfilling our mandate. I'd also like to thank and recognize departing Councillors for their dedicated service.

In further response to the Council changes and to recognize the role of pharmacy technicians on Council, we directed that work begin to examine the options for electing pharmacy technicians and addressing any disparities within our electoral process. This work was delayed during 2018 as we awaited further progress within the Saskatchewan Health Authority amalgamation and boundaries and pending strategic planning. Further work will be completed on this initiative in the third quarter of 2019 once strategic planning is completed and a review of Council structure can be completed.

Other yearly highlights include:

- Continued support for the addition of minor ailment and self-care conditions to pharmacists' prescribing with the final minor ailment – smoking cessation being completed in December 2018.
- Continued to receive regular reports from Perry Hermanson, our Pharmaceutical Information Program (PIP) Data Quality Facilitator, demonstrating encouraging trends in the improvement of PIP data.
- Began work on developing a travel health bylaw and framework which included numerous external stakeholder consultations and reviews. We continue to work with medSask, Continuing Professional Development for Pharmacy Professionals (CPDPP), Dr. Diener, the Ministry of Health and our external stakeholders as we continue to work towards bylaw and framework approval with an anticipated completion date in the last quarter of 2019.



- Held our awards ceremonies on May 11 and our annual general meeting on May 12, 2018, in conjunction with the Pharmacy Association of Saskatchewan (PAS) annual conference. The College continues to appreciate being included as part of the conference.
- Held our 62nd Convocation Luncheon in Saskatoon on June 7, 2018, to congratulate and welcome the pharmacy graduating class of The College of Pharmacy and Nutrition at the University of Saskatchewan.
- Council received a funding proposal from CPDPP that in part suggests raising the per capita grant and assessing pharmacy technician licence fees. This was approved and implemented in 2018.
- Formed an advisory group to review and recommend implementation strategies of National Association of Pharmacy Regulatory Authorities' (NAPRA) completion of three extensive sets of model compounding standards. The report and implementation plan were provided to Council and approved in December 2018.
- Our professional autonomy consultation paper and survey were provided to members in January as our first phase of consultations. The results were provided to Council for review and consideration and also to PAS in the form of our second phase of consultation. We continue to work on this important initiative including the development of bylaws to support the framework which will begin the third phase of our consultation process and will include members, PAS, Ministry, proprietors and other external stakeholders.
- Council agreed in principle to ban the sale of exempted codeine products from pharmacies and a comprehensive stakeholder consultation was conducted at the end of 2018 for further review by Council prior to finalizing our position.
- Council continued to gather information and examine options with respect to the inducements and rewards on the purchase of prescriptions throughout 2018 with potential bylaws for Council consideration in May of 2019.
- On May 11 Council approved the amendments to the SCPP Administrative Bylaws to remove naloxone hydrochloride injection and nasal spray when indicated for emergency use for opioid overdose from Schedule II to Unscheduled status to further support efforts to combat the opioid crisis.
- On August 23 Council approved the amendments to the SCPP Administrative Bylaws to move epinephrine ampoules from Schedule I to Schedule II for the treatment of anaphylaxis due to allergens in order to increase access to life saving medication due to drug shortages of EpiPen and EpiPen Junior.
- Medical Assistance in Dying (MAID) was successfully launched on November 1, 2018 with the regulations coming into force. We continue to be a part of the committee to support MAID within Saskatchewan.
- On October 17, 2018 Canada saw the legalization of cannabis which included the *Cannabis Act and Cannabis Regulations*.

I am also proud to report on the efforts of the Council recognizing the important role pharmacists and pharmacy technicians have in addressing the opioid crisis. Council accepted a discussion document entitled "Introducing CAMPAIN," an acronym for collaboration in the appropriate management of pain. It discusses a collaborative approach in leveraging the role of pharmacy professionals in effective pain management as a strategy to reduce misuse, abuse and diversion. A major feature of the concept is to initiate dialogue with all involved in pain management to



determine if consensus exists on respective roles and strategies. We continue to work with and align with other health care professionals in this field and will continue this work throughout 2019.

Due to other priorities, substantive development of the patient care areas in pharmacies was delayed until the Fall of 2018 with work continuing into 2019.

The SCPP Council, Pharmacy Association of Saskatchewan (PAS) Board and the Canadian Society of Hospital Pharmacists (CSHP) Saskatchewan Branch executive held our annual joint meeting on December 14, 2018.

Finally, SCPP hosted the annual NABP/ACPP District V meeting in August at the Sheraton Cavalier Hotel in Saskatoon and hosted the annual Tri-Provincial meeting of officers in November at the Double Tree by Hilton in Regina. Both events provided opportunity to share knowledge and collaborate on important initiatives within pharmacy practice.

This report only summarizes the important issues addressed by Council and the College during 2018. Further details can be found in newsletters and other publications at www.saskpharm.ca.

We could not have accomplished as much without the teamwork and collaboration from Council, staff, committees, appointees, members, Ministry of Health, government and other health-related organizations. I am honored to be serving as president of the College. I extend my appreciation to the foregoing for their support. Last but not least thank you to my family at home for allowing me to continue to serve the people of this profession and this province in such a meaningful way.

Respectfully submitted,

Justin Kosar,
President



Jeana Wendel, Registrar

Report of the Registrar

President Kosar and members of the College:

I am pleased to present my first annual report for my first year as Registrar-Treasurer. This report describes how the office contributes towards achieving the College's vision, mission, strategic goals and strategic direction established by Council.

As the secretariat and treasury for Saskatchewan College of Pharmacy Professionals, this office provides administrative support for Council and committees and the activities outlined in the President's report. We also manage issues, communications and our statutory obligations. The latter includes registration and licensing, and monitoring and enforcement activities such as field operations consisting of routine and special evaluation of pharmacies and investigation of complaints, and programming. We also act as liaison between Council, committees and members, government, the public, other professional organizations, the pharmaceutical industry and other stakeholders.

I am pleased to report that the Registrar transition during 2018 was successful due to the mentorship from Ray Joubert, Associate Registrar and support from Council, members, volunteers and the wonderful staff at SCPP. In addition to supporting the Registrar transition the Associate Registrar supported the work on policy issues such as our professional autonomy framework, travel health bylaws and framework and other key projects. The Associate Registrar will continue throughout 2019 as we transition this role to the Director of Policy and Legislation.

To support our strategic direction, a comprehensive performance management system has been implemented consisting of:

- Risk identification, assessment and management strategies using metrics to assess success in managing risks;
- Continued active monitoring of our governance processes;
- Administrative restructuring into operational units with measurements of staff time dedicated to each unit, monitoring changes over time and establishing measurable objectives for each unit's contribution to our strategic direction.

In order to support our strategic plan a strategic human resources review was conducted throughout 2018 and presented to the Finance Committee and Council for approval. The review concluded that additional resources are required to ensure we are meeting our mandate of serving the public interest by regulating the profession of pharmacy to provide safe, competent pharmacy care in Saskatchewan. Additional resources will be added throughout 2019 and early 2020.

There is increasing complexity within the health care system and pharmacy. This complexity and significant policy issues and changes to the landscape require SCPP to have additional in-house resources to ensure we are not only keeping up with the changes but becoming proactive versus reactive in addressing these issues. Therefore, a new division focusing on Policy, Legislation and Professional Practice will be created in 2019 to support this important work.

Our Professional Affairs Administrator received training at Critical Point and earned her Certified Compounding Inspector designation. The training was completed in 2018 in order to facilitate and support the roll out of the NAPRA compounding standards that were approved by Council in December. In addition, she began COMPASS and field officer training to further support her new role in field operations and compounding. Her work in technician registrations will be transitioned to the SCPP registration team in early 2019. Lastly, Council approved the hiring of an additional field officer for 2019 to bring our complement to three staff to ensure we are meeting our strategic goals.

In December we began preliminary work on our strategic goal of competency assurance. The work will continue throughout 2019 and will include a working committee of member volunteers.

During 2018 we began to explore and utilize technology in order to reduce expenses, improve efficiency and strengthen communication. One of the successes was launching virtual inspections for new pharmacy openings, renovations and relocations. The new virtual process allows SCPP increased flexibility with inspection dates and reduces expenses and increases staff productivity. In addition, the office was converted to Office 365 which provides additional suites of technology such as Skype for Business in order to conduct virtual meetings among other useful system tools. Lastly, throughout 2018 we transitioned our professional practice reviews to quality improvement reviews which will be conducted virtually. The virtual visits will begin in 2019 with the goal of all Saskatchewan pharmacies being visited within 18 months and additional assessments either virtually or in-person completed as required.



Highlights from the tables and charts that follow:

- Overall our financial position is healthy. Our assets grew by 5.3% to \$3,653,899. The main contributors were the prepaid expense for the subscription to ISMP for their resources under our COMPASS program and our accounts receivable.
- Although SCPP's operating fund showed a negative balance of \$51,011 the 2018 budget had accounted for using \$347,186 from our reserves. In addition, with the Deputy Registrar retiring in June of 2018 there was an unbudgeted expense that was approved by Council to use reserves to fund the search firm. So, in total \$347,403 was to be funded out of reserves for 2018 however only \$103,675 was used in spite of significant increases in our legal costs.

The following contributed to the ability to use less than budgeted amount of reserves:

- Increasing numbers of members, in particular pharmacy technicians (from 195 to 274), and pharmacies (from 381 to 384 where openings exceed closures);
- Financial control strategies to achieve budget targets, such as restraining costs in areas directly under our control; and,
- Sundry revenue increased due to discipline recoveries in spite of decreased interest revenue.

The accumulation of surpluses over the last few years has helped in sustaining our catastrophic discipline cost and operating reserve fund targets to enhance our financial stability. Membership growth continues with a continued high proportion of Saskatchewan graduates along with graduates from other jurisdictions becoming registered, both exceeding attrition. We continue to monitor the sustainability of this latter trend as the deadline approaches for the alternative registration pathway for pharmacy technicians who have not graduated from Canadian Council for Accreditation of Pharmacy Programs (CCAPP) accredited programs;

There was a decrease in administrative costs due to strong financial stewardship.

Overall changes in pharmacies (e.g. manager, ownership, name, relocations and renovations) continue to increase, adding to our revenue and administrative workload.

Routine pharmacy evaluations have decreased due to other priorities such as investigating complaints, transitioning to COMPASS and assisting with issues management, and member inquiries on a wide variety of topics.

Professional Practice Review Indicators – please refer to the Field Officer reports on the pages that follow. While there are some shifts in data, we do not interpret any of them as indicating changing trends requiring different strategies.

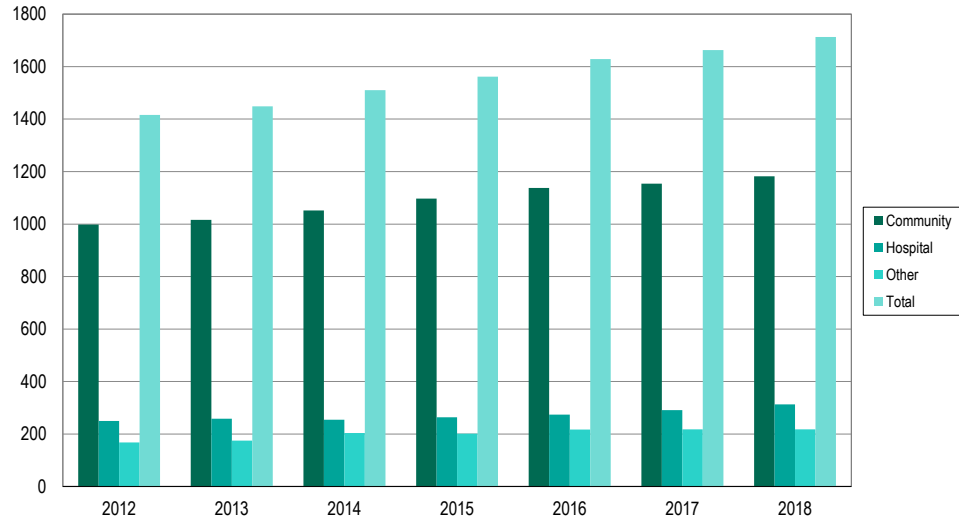
Please refer to **Appendix A** at the end of this report for a more detailed breakdown of our membership and community pharmacy data.

Regarding complaints and discipline as reported on page 22, disturbing trends are:

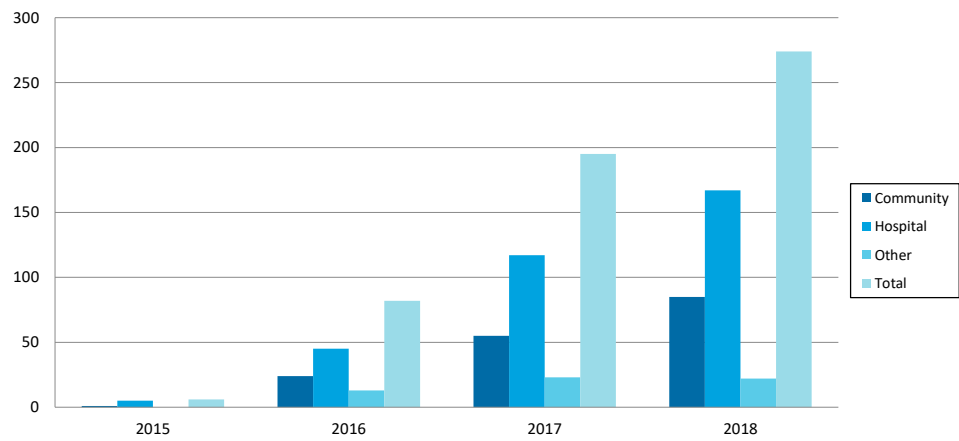
- Formal complaints referred to the Complaints Committee continue to grow in number and complexity;
- Increasing referrals to discipline in spite of increased utilization of our alternative dispute resolution processes continue to be of concern;
- The number of informal complaints not referred to the Complaints Committee, but handled administratively, is also growing in number and complexity; and,
- The significant increase in legal costs.

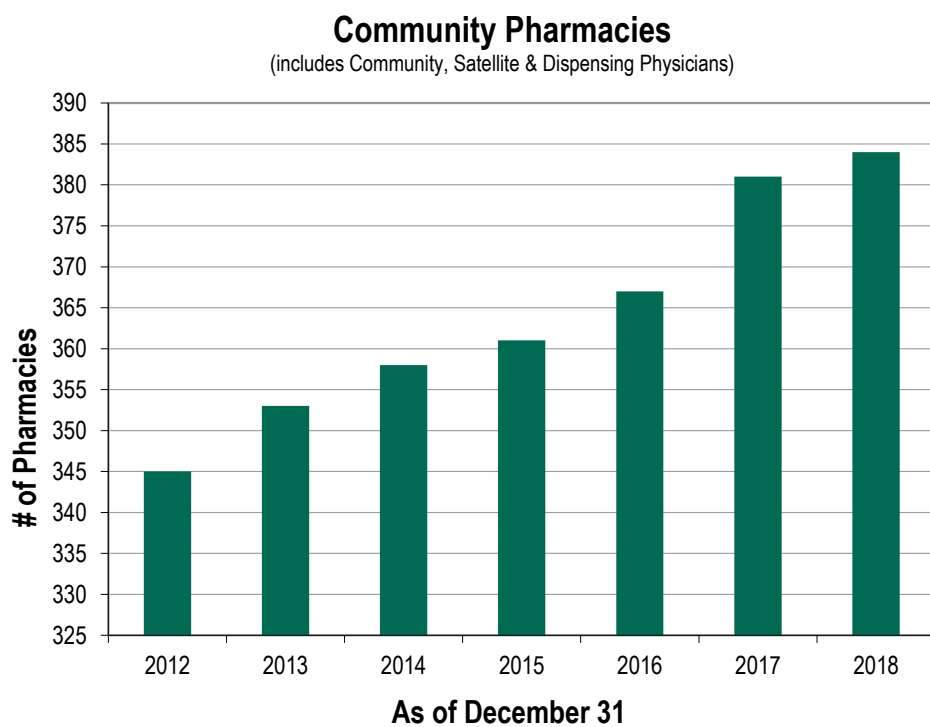
We have reinstated our complaints satisfaction surveys and continue to examine instruments to collect data to help explain these trends and inform preventive strategies. The increasing number of complaints related to attitude and behaviour, plus billing irregularities, are of particular concern.

**Practising Members - Pharmacists
as of December 31**



**Practising Members - Pharmacy Technicians
as of December 31**

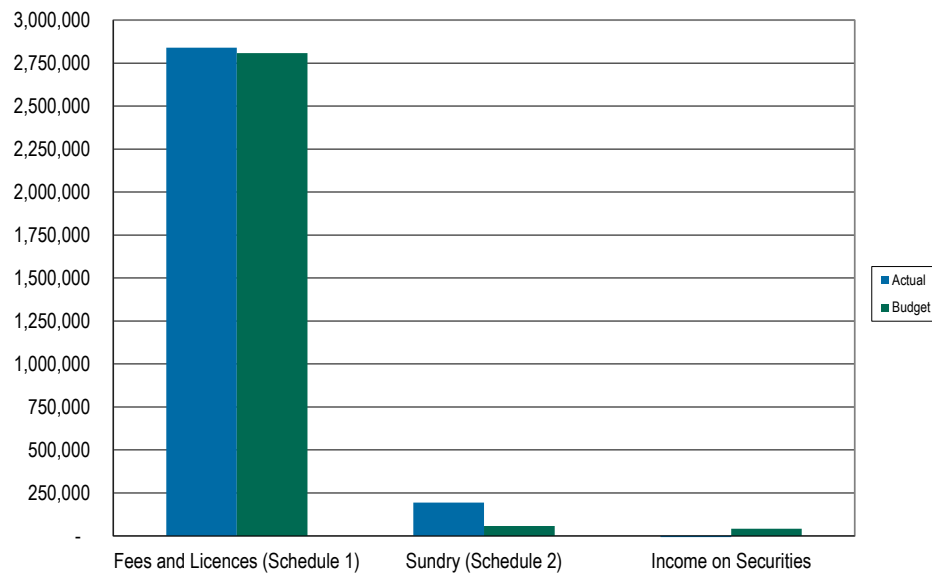




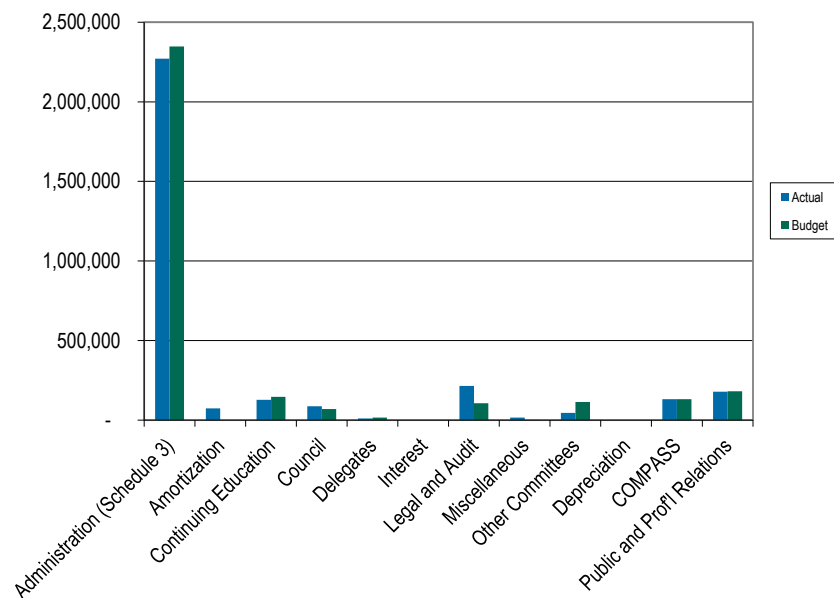
Financial

Please refer to the audited statements at the end of this report for further information and also to **Appendix B** for a more detailed comparison of our actual experience with budget. The following graphs summarize our performance:

Revenue 2018

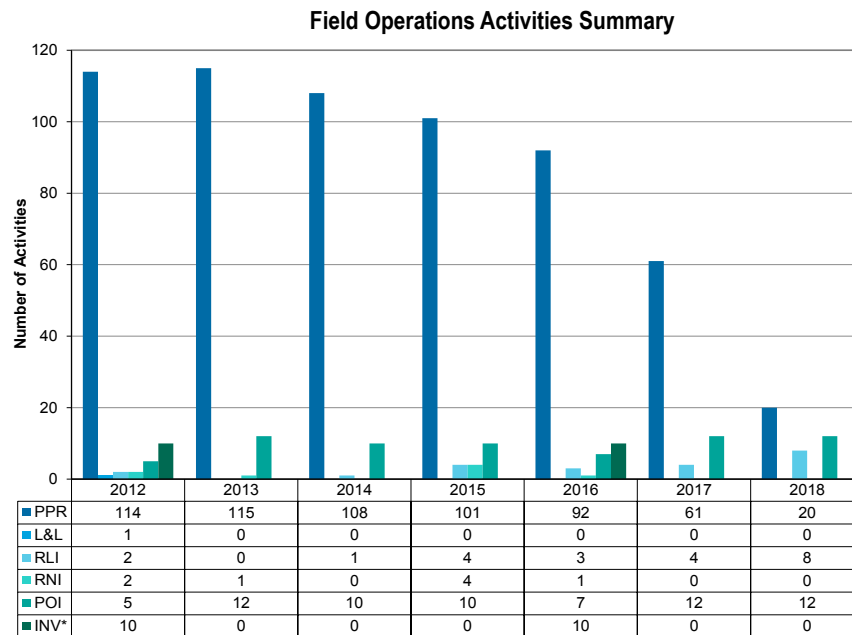


Expenses 2018



Field Operations

Pharmacy Practice Reviews were divided between Jeannette Sandiford in southern Saskatchewan and Lori Postnikoff in northern Saskatchewan from January to August. From September 2018 to December 2018 there were no practice reviews completed as the transition to the Quality Improvement Review (QIR) was initiated. Regular activities are summarized as follows:



Key

PPR = Professional Practice Reviews

L&L = Lock and Leave inspections

RLI = Relocation inspections

RNI = Renovation inspections

POI = Pre-opening inspections

INV = New investigations requiring travel to the pharmacy locations to conduct a review of the records and/or an interview of the member(s)/or members of the public or affected agencies (such as home care, etc.)

Summary

The Field Officers no longer routinely visit pharmacies undergoing renovations or lock and leave installations. These renovations and lock and leave installations were reviewed during routine pharmacy visits.

Field Officers' Report of Pharmacy Practice Reviews for 2018

Professionals Practice Reviews (PPRs) continued to be completed from January to August. These visits were completed in-person. Starting in September, the transition to the Quality Improvement Review (QIR) was initiated. No PPRs were completed from September to December.

Twenty PPRs were conducted in 2018, which was well below the targeted goal of 60. This was due in part to the work required to initiate the QIR process and an increase in the complexity of complaint investigations. Plans are underway to pursue the continuation of this process for future pre-opening inspections, relocation inspections, and possibly renovation inspections.

There were twelve Pre-Opening Inspection (POI) visits and eight relocation inspections. Some of the POIs were completed in-person and some were completed virtually via the Skype for Business application. In one case where an onsite visit could not be scheduled, the pharmacy manager, on behalf of the proprietor, entered an "Undertaking" agreement and agreed to fulfill all bylaw requirements.

In the following chart, the main Indicator questions #1 through #10 are rated using scale 1 through 4:

- (1) Indicator has no activity/compliance – improvement required (WRITTEN ACTION PLAN within 60 days)
- (2) Indicator has some activity/compliance – improvement required (WRITTEN ACTION PLAN within 120 days)
- (3) Indicator has most/complete activity/compliance
- (4) Indicator was not observed/discussed



Practice Review Chart

Year		2015	2016	2017	2018
Number of Pharmacies		108	101	92	
Indicator	Rating	%	%	%	%
1) Information gathering and documentation	1	0	0	0	0
	2	78	75	72	75
	3	22	24	28	25
	4	0	1	0	0
2) Patient information utilization	1	0	0	0	0
	2	1	12	2	0
	3	97	87	98	100
	4	2	0	0	0
	n/a		1		
3) Medication therapy through patient education	1	0	0	0	0
	2	0	3	0	0
	3	94	97	98	95
	4	6	0	2	5
4) Prescribing in best interest of patient	1	0	0	0	0
	2	1	1	3	0
	3	97	95	97	100
	4	2	2	0	0
	n/a		2		
5) Applying Advanced Scope of Practice	1		0	0	0
	2		0	0	5
	3		77	90	95
	4		22	10	0
	n/a		1	0	
6) Effective use of personnel	1	0	0	0	0
	2	0	10	3	6
	3	98	90	95	94
	4	2	0	2	0
7) Formal system for medication incidents	1			3	0
	2			38	35
	3			59	65
	4			0	0
8) Medication Therapy Management Ensures Optimal Patient Care	1			0	0
	2			8	0
	3			87	100
	4			5	0
9) PIP viewer is accurate and complete (failed transactions)	1		1	0	0
	2		33	39	20
	3		51	61	80
	4		14	0	0
	n/a		1	0	
10) Drug distribution processes ensures safe dispensing of medication	1		0	0	0
	2		0	2	0
	3		99	93	100
	4		0	5	0
	n/a		1	0	

Due to improvements in data collection through the College's in1touch database, SSCP is able to offer enhanced statistics.

The questions which inform the 10 indicator questions are rated using the ISMP Medication Safety Self-Assessment process A through E:

- A – no activity/evidence
- B – discussed for possible implementation
- C – partial implementation or activity
- D – implemented for some patients
- E – implemented for all patients

Indicator #1 – Information gathering and documentation

6 questions were asked regarding indicator #1 and found that:

- 100% of pharmacists/pharmacy technicians captured the patient's demographics into their pharmacy management systems (software) obtaining an E rating ("implemented for all patients");
- 10% of pharmacies obtained an E rating regarding capturing current and relevant medical conditions;
- 10% obtained an E rating (an increase from last year) regarding documentation of relevant social history;
- 15% obtained an E rating (an increase from last year) for the documentation of current medication therapies including prescription drugs, vitamins, herbals, homeopathic and non-prescription drugs/therapies;
- 80% of pharmacies were entering drug allergies and intolerances for all patients, an E rating (a decrease from last year at 92%); and there was a periodic/annual review of patient information in 95% of pharmacies for all patients (an E rating).

Indicator #2 – Patient information utilization

11 questions were rated under indicator #2 with the following results:

- 100% of pharmacies had an E rating for 7 of 11 questions including: determining the indication for medication use, assessing the appropriateness of new medication therapy, identifying drug related problems or inappropriate drug use, assessing patient's profile and PIP/e-Health viewer, reviewing and discussing issues of adherence and referencing best practice guidelines, and resolving computer generated warnings/alerts;

For the remaining four questions, an "E" rating was received in:

- 95% for reviewing medication adherence with each refill;
- 90% for assessing appropriateness related to patient factors/expectations e.g. cost/dosage form;
- 25% of pharmacies for documentation of relevant patient care information for continuity of care;
- 20% for monitoring patient progress towards desired outcomes.

Indicator #3 – Medication therapy through patient education

6 questions are rated under indicator #3 as follows:

- 100% of pharmacies received an E rating for 5 of the 6 questions including: ensuring the patient understands the clinical goals and purpose of their medications, allowing adequate time for patient questions, providing relevant medication information, including common side effects, monitoring patient knowledge upon medication refills, and providing information in an area which allows for confidentiality; and
- 95% of the pharmacies received an E rating for 1 of the 6 questions which included providing information in an appropriate manner for the patient.

Indicator #4 – Prescribing in best interest of patient

6 questions reviewed pharmacist prescribing with the following results:

- 100% of pharmacies received an E rating for 5 of the 6 questions including: PIP is reviewed prior to prescribing, previous medication usage is assessed, treatment algorithms are used, reviewing and ensuring drug therapy is appropriate, and Pharmacist Assessment Record (PAR) contains all required information; and
- 65% of pharmacies received an E rating for one of the six questions which dealt with prescribing decisions, rationale for prescribing, and follow-up being documented on the PAR. 30% of pharmacies received a C rating. 5% received a D rating.

Indicator #5 – Applying Advanced Scope of Practice

9 of the 11 questions reviewed the pharmacist's ability to administer medications by injection and other routes, while two questions reviewed lab results and testing:

- 95% of pharmacies received an E rating for eight of the nine questions under indicator #5 that dealt with advance scope of practice;
- 80% of pharmacies received an E rating for the question that dealt with ensuring policies and procedures were communicated to staff for handling emergencies.
- 60% of pharmacies received an E rating regarding pharmacists routinely monitoring lab values through the eHealth viewer; and
- 85% of pharmacies received an E rating regarding interpreting lab values to identify required changes to therapy.

Indicator #6 – Effective use of personnel

5 questions reviewed pharmacy workflow and provision of pharmacy services:

- 100% of pharmacies received a rating of E ("implemented for all patients") for the pharmacy being neat, orderly and free from clutter;
- 94% of pharmacies received an E rating for having adequate staff to perform all required tasks including medication management for patients and prescribing, as well as additional services such as immunizations, compliance packaging, and long-term care services in a safe environment;
- The same percentage of pharmacies (94%) received a rating of E for ensuring there was a segregated area for activities to be completed that require concentration;
- 81% of pharmacies received a rating of E for their ability to effectively interact with those patients requiring the assistance of a pharmacist; and
- 75% of pharmacies received a rating of E with respect to interacting with each patient at either prescription drop-off/pick up or via phone.

Indicator #7 – Formal system for medication incidents

With the implementation of the COMPASS Continuous Quality Improvement program in December 2017 all community pharmacies were expected to participate. The COMPASS indicator questions were divided into four key elements, all of which dealt with managing medication errors. Information on Key Elements 2, 3 and 4 will be discussed in the COMPASS section of this report:

- 65% of pharmacies had a formal system in place to review medication incidents as assessed in Key Element #1.
- In 6 of 7 questions 100% of pharmacies received a rating of E with respect to medication errors being disclosed to the patient upon discovery, an apology was provided to the patient, adequate information on how to manage any adverse effects was provided to the patient, medication incidents were discussed, potential causes were determined and communicated to the patient, and actions were taken to reduce the likelihood of the error occurring again.
- In 1 of 7 questions 95% of pharmacies received an E rating with respect to notifying other practitioners regarding adverse events/effects of medication errors.

Indicator #8 – Medication Therapy Management ensures optimal patient care

5 questions monitor medication management reviews by pharmacist with the following results:

- 100% of pharmacies received an E rating for 3 of the 5 questions, including: patient education, preparing the best possible medication history, recommending medication management improvements, and discontinuation of inappropriate therapy and 95% received a rating of E for performing follow-up with the patient and patients' health care providers;
- 95% of pharmacies received an E rating regarding providing necessary follow-up with the patient and health care providers to ensure optimal medication management; and
- 65% of pharmacies received an E rating in performing medication reviews for patients identified as a risk for drug related problems.

Indicator #9 – PIP viewer is accurate and complete (failed transactions)

3 questions review Pharmaceutical Information Program (PIP) data quality:

- 100% of pharmacies received an E rating with respect to ensuring all prescriptions are captured into PIP;
- 80% of pharmacies received an E rating with respect to being aware of the requirements for prescription transfers with PIP; and
- 50% of pharmacies received an E rating with respect to checking their "failed transaction report" for PIP data quality daily.

Indicator #10 – Drug distribution processes ensures safe dispensing of medication

7 questions monitor bylaw compliance:

- 100% of pharmacies received an E rating with respect to being in compliance with the review bylaw requirements.

More detailed information regarding the data presented is available upon request.

Thank you to each of the pharmacy managers and pharmacy staff members who took time out of their busy work days to allow a practice review to be conducted.

Other Field Operation Activities:

- Jeannette Sandiford and Lori Postnikoff participated in conferences and convocation ceremonies. They continue to actively collaborate with their counterparts in other provinces.
- As our administrative lead for COMPASS, Jeannette Sandiford also provided support for community pharmacies as they implemented the COMPASS tools and developed the online tools, forms, and processes for the new Quality Improvement Reviews (QIRs).
- Lori Postnikoff, as the Complaints Director from January to September, continued to investigate complaints, usually requiring interviews or visits, and act as a resource for the Complaints Committee.

**Deputy Registrar**

Jeanne Eriksen was our Deputy Registrar from January until the end of June when she retired, and Lori Postnikoff transitioned into this role in September. The Deputy Registrar performs the following duties:

- Oversees our registration, licensing and pharmacy permit system.
- Coordinates drug scheduling changes and bylaw amendments.
- Oversees our communications strategies, including our member-based social media platform, newsletters, bulletins, advisories, annual report and reference manual content.
- Supports the Registration and Licensing Policies, Awards and Honours, Fitness to Practise and Professional Practice committees. This results in preparing reports and important recommendations to Council. For example:
 - Pharmacy technician scope of practice and continuing education/competency requirements
 - Patient private care area and specifications
 - Pharmacy manager eligibility requirements
 - Remote pharmacy service provision
 - Policies on emergency preparedness and needle-stick injuries
- Facilitates the reinstatement of our Appraisal Training and Assessment process for international pharmacy graduates and former members returning to practice.
- Serves on the National Committee on Regulated Pharmacy Technicians and on the National Advisory Committee on Pharmacy Practice (NACPP).
- Represents SCPP on the Pharmacy Association of Saskatchewan (PAS) Professional Practice Committee and the Conference Committee.
- Serves on the Saskatchewan Polytechnic Pharmacy Technician Program Advisory Committee.
- Represents SCPP on the Continuing Professional Development for Pharmacists Advisory Committee and the Structured Practice Experiences Program Advisory Committee.
- Supports our Professional Practice Committee on the proposed private patient care areas, the new NAPRA model compounding standards and updated long term care standards.

Report of the Complaints Committee

The Complaints Committee operates as a Committee of the College pursuant to *The Pharmacy and Pharmacy Disciplines Act*, SS1996, c P-9.1 (the Act) and derives its authority through legislation, including section 28 of the Act:

Investigation

- 28(1) Where the complaints committee is requested by the council to consider a complaint or is in receipt of a written complaint alleging that a member is guilty of professional misconduct or professional incompetence, or that a proprietor is guilty of proprietary misconduct, the committee shall:
- (a) review the complaint; and
 - (b) investigate the complaint by taking any steps it considers necessary, including summoning before it the member or proprietor whose conduct is the subject of the complaint.
- (2) On completion of its investigation, the complaints committee shall make a written report to the discipline committee recommending:
- (a) that the discipline committee hear and determine the formal complaint set out in the written report; or
 - (b) that no further action be taken with respect to the matter under investigation.
- (3) The formal complaint set out in a written report made pursuant to clause (2)(a) may relate to any matter disclosed in the complaint received pursuant to subsection (1) or the investigation conducted pursuant to subsection (1).
- (4) The complaints committee shall provide, or cause the registrar to provide, a copy of a written report made pursuant to clause (2)(b) to:
- (a) the council;
 - (b) the person, if any, who made the complaint; and
 - (c) the member or proprietor whose conduct is the subject of the complaint.

Complaints Committee Activities

In 2018, the Complaints Committee met in person on four occasions and conducted one teleconference to review files.

The Committee, upon review of file, will motion one of the following:

- close the file with no further action;
- close the file and request that the member send a letter of apology to the complainant(s);
- close the file with a letter of caution to the member which is retained in the member's file;
- refer the file to an Alternative Dispute Resolution (ADR) process;
- refer the file to the Fitness to Practise Committee; or
- refer the file to a Discipline Hearing.

Disposition of files during the year was as follows

Continued an ADR process for one file which was opened in 2017.

Reviewed 14 files which remained open from 2017 (excluding the ADR):

- 8 files closed with no further action
- 1 file remained open for investigation*
- 5 files were referred to discipline

*file was closed after consideration by the Committee as to its appropriateness as a complaint

Reviewed 51 files from 2018, closing 26 files as follows:

- 18 files closed with no further action
- 2 files closed with a request for a letter of apology to the complainant
- 6 files closed with a cautionary letter to the member

Of the 25 files which remained open in 2018:

- 3 files were referred to ADR
- 1 file was referred to FTP (Fitness to Practice)
- 7 files were referred to the Discipline Committee for a hearing
- 14 files remain open for further investigation

Discipline Hearings

One file referred to a Discipline Hearing in 2015 was heard in 2018. Five files referred to a Discipline Hearing in 2017 were heard in 2018 and one file referred to a Discipline Hearing in 2018 was heard. There are eight files to still have a Discipline Hearing in 2019.

More information regarding discipline decisions and orders can be found on the CanLII website at <https://www.canlii.org/en/sk> with summaries in the SCOPE newsletter.

The Committee wishes to thank all members who received correspondence throughout 2018 for your cooperation in responding to the Committee.

Complaints

The disposition of the complaints files is summarized as follows:

COMPLAINTS SUMMARY	2012	2013	2014	2015	2016	2017	2018
New files	60	49	32	37	38	33	51
Closed files	49	45	38	32	32	33	26
Files referred to Discipline Committee	10	7	0	2	5	7	7
Files referred to Alternative Dispute Resolution Process (ADR)	2	3	1	4	3	6	4
Files open for investigation	10	9	5	7	12	14	14

The trends in the types of complaints by allegation are summarized as follows:

TYPE OF COMPLAINT BY ALLEGATION	2012	2013	2014	2015	2016	2017	2018
Advertising	1	0	0	0	2	1	1
Alcohol/Drug Abuse	0	1	2	1	2	1	1
Communication/Unprofessional Behavior	12	8	24	26	30	23	25
Medication Errors	27	8	11	12	17	14	22
Record Keeping	1	1	1	4	1	5	1
Bylaws/Standards/Guidelines/Ethical Infractions	1	4	7	11	9	16	6
Prescription Transfers	1	1	2	0	0	0	2
Billing Irregularities/Overcharging	5	1	4	2	1	11	9
Inappropriate Product Selection	0	0	1	0	0	1	0
Unsupervised Assistant	0	2	4	2	0	1	0
Prescription Short Fills	1	4	4	0	2	1	1
Pharmacist Not on Duty	0	0	1	0	0	3	0
Dispensing Without Authority	1	1	2	2	2	3	1
Breach of Confidentiality/Privacy	6	11	6	7	7	3	6
Adverse Drug Reaction (otc)	–	2	0	2	0	3	0
Refusal to Fill	–	7	4	3	3	3	1
Patient's Right to Choose Pharmacy	–	5	6	2	0	1	2
Privacy/Pharmacy Assistant	–	–	4	8	0	0	1
Miscellaneous/Other	7	2	12	16	29	5	24
Proprietary						8	0
Injection						5	1
TOTAL	*63	*58	*95	*98	*105	108	104

* **Type of Complaint by Allegation** total exceeds the number of actual complaint files due to more than one allegation per file in some of the complaint files.



Community Pharmacy Professionals Advancing **Safety** in Saskatchewan

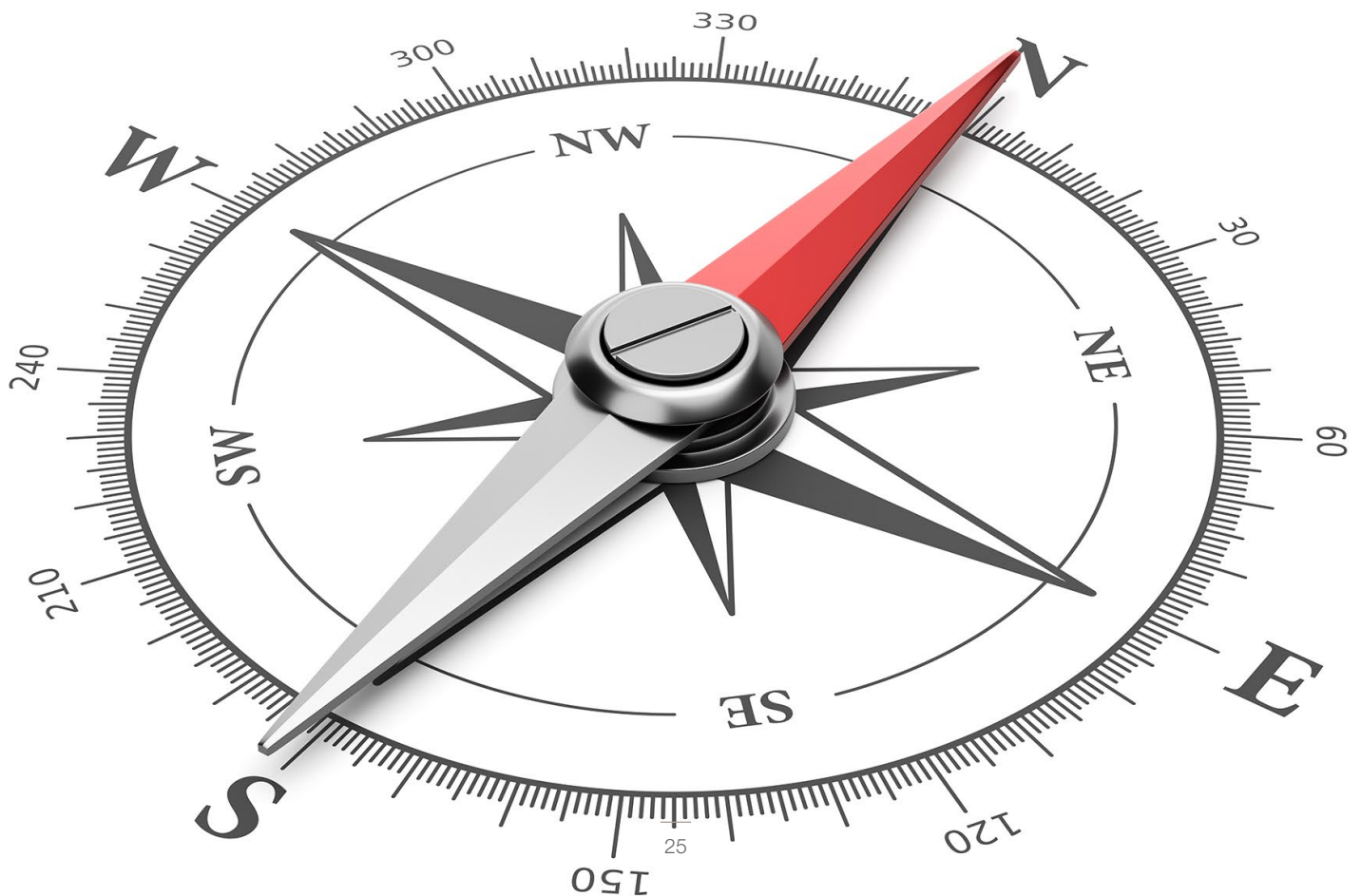
This past year saw the staggered implementation of the COMPASS (**COM**munity **Pharmacy Professionals Advancing Safety in Saskatchewan**) Continuous Quality Improvement (CQI) program tools in all community pharmacies starting December 1, 2017, with full implementation of all the tools in June 2018.

Standardized Continuous Quality Improvement Tools for COMPASS

The standardized continuous quality improvement tools used for COMPASS were developed by Institute for Safe Medication Practices (ISMP) Canada. They include:

- CPhIR (Community Pharmacy Incident Reporting) system (<http://www.cphir.ca>) for reporting medication errors and near misses (medication incidents)
- MSSA (Medication Safety Self-Assessment) tool (<http://www.ismp-canada.org/mssaf>) for identifying proactively any potential safety issues
- Continuous Quality Improvement (CQI) tool for developing the agenda for CQI meetings and developing and monitoring the pharmacy improvement plan

Each pharmacy was surcharged for the cost of subscribing to the ISMP resources to meet the Continuous Quality Improvement bylaw requirements.



Number of Participating Pharmacies

As of December 1, 2018, all community pharmacies (384) had met the bylaw requirements for participation in COMPASS.

Field Operations Assessment

The online version of the Professional Practice Review (PPR) form, which included a revised section for Continuous Quality Improvement, was utilized for all PPRs completed in 2018. One of the added benefits of the online version is that the results of the Continuous Quality Improvement section (Indicator #7) can be viewed by the pharmacy staff by logging into the CPhIR website, going to the MSSA section and viewing the pharmacy's results as compared to other Saskatchewan pharmacies.

Training

Online training for the COMPASS program is currently available through Continuing Professional Development for Pharmacy Professionals (CPDPP). The goal of the training is to provide information on medication safety, as well as training on the online COMPASS tools, for the QI Coordinators to meet their regulatory obligations.

There were 130 individuals (57 pharmacists/pharmacy technicians and 73 2nd year PharmD students) that took the online training in 2018.

The University of Saskatchewan, College of Pharmacy and Nutrition added the COMPASS training to the curriculum for the second year of the PharmD program in September 2018. Therefore, it is mandatory that all second year Pharm D students take the COMPASS training.

Communication

To ensure pharmacy staff members were well informed about the implementation and requirements of the COMPASS program, communications were provided throughout 2018, via emails, newsletter articles in SCOPE, SMART Medication Safety agendas and the **[directions]** newsletter.

To facilitate communication between SCPP and the COMPASS pharmacies, the **[directions]** newsletter was developed in 2015. The newsletter is intended to provide pharmacies with information about implementing the COMPASS tools, upcoming deadlines, relevant safety information, other initiatives (example, PIP-QIP), and any "good catches." The **[directions]** newsletter had three editions distributed in 2018.

Pharmacy Safety Resources

To assist pharmacy staff with implementing the COMPASS program, several online resources were added to the College website (www.saskpharm.ca). The primary resource posted was the COMPASS Pharmacy Manual. The original manual that was created during the first pilot phase has been updated to reflect the current requirements of the program.

Other resources added to the COMPASS tab on the website include:

- A Quality Improvement Review tab;
- A Tech Talk CE on How to Prevent Medication Incidents;
- MSSA Quick Start Guide;
- Disclosure and Reporting Medication Incidents handout; and
- Solutions Development Framework for CQI Activities.

Statistics

Statistics for incident reporting in the CPhIR system from September 2013 (Phase I) until the end of December 2018:

Total # of Incidents Reported: 18,506

Total # of pharmacies that have entered at least one incident: 357

The top five types of incidents:

Incorrect dose/frequency:	4,433
Incorrect quantity:	3,205
Incorrect drug:	3,005
Incorrect strength/concentration:	1,767
Incorrect patient:	1,458

Outcomes of reported incidents are as follows:

NO ERROR:	12,408
NO HARM:	5,696
HARM:	399

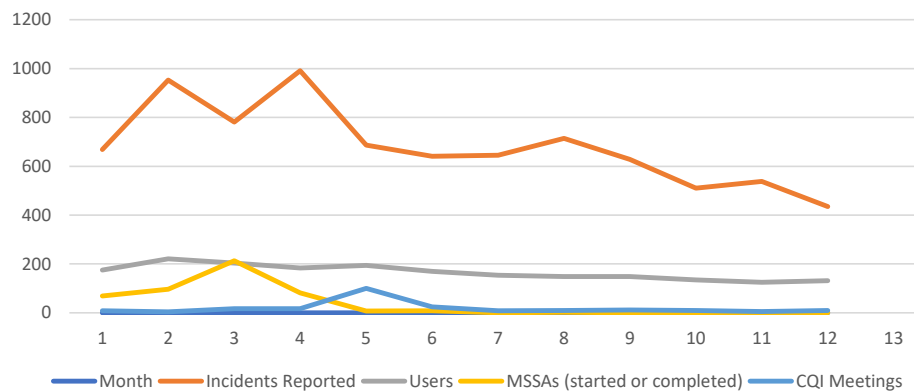
The total number of pharmacies that have started or completed their MSSA was 336. As well, the total number of CQI meetings held was 336.

COMPASS Statistics

Number of incidents, users and COMPASS activities for 2018

Month	Incidents reported	Users	MSSAs (started or completed)	CQI Meetings
January	668	175	69	8
February	953	221	97	4
March	781	204	213	17
April	991	183	82	17
May	686	194	7	100
June	641	170	8	24
July	645	154	0	8
August	714	149	2	10
September	628	149	0	12
October	510	135	1	9
November	538	125	0	5
December	435	131	0	10

COMPASS Activities – 2018



The above chart shows the number of pharmacies submitting incidents (users) was the highest in February and March and then a slight decrease and leveling off for the rest of the year. The number of incidents reported had peaks in February and April and then a general decline in reporting for the rest of the year. The Medication Safety Self-Assessments (MSSA), as outlined in the staggered implementation plan, were to be completed by April 1, 2018, therefore a spike in MSSAs completed was observed in March as pharmacies attempted to comply with the implementation plan. The Quality Improvement (QI) plan was to be completed by June 1, 2018. This resulted in a spike in the number of Continuous Quality Improvement (CQI) meetings that were held in May as pharmacies attempted to complete their QI plan.

Next Steps

A monitoring process will be developed to monitor the effectiveness of the program and identify areas for improvement. To achieve this, a COMPASS Committee will be formed comprised primarily of Quality Improvement (QI) Coordinators.

Monitoring of quality improvement activities in pharmacies will be completed by the Field Officers during Quality Improvement Reviews (QIRs) through virtual visits. The QIRs are scheduled to start in February 2019. The process and forms are being finalized for use during the virtual visits. It is anticipated that each pharmacy will be “visited” within an 18-month time frame: February 2019 to August 2020. Other tools for assessment will be used, such as the Medication Safety Cultural Indicator Matrix (MedSCIM) tool. The MedSCIM tool measures the completeness of the reporting of medication incidents and the maturity of the safety culture within a pharmacy.

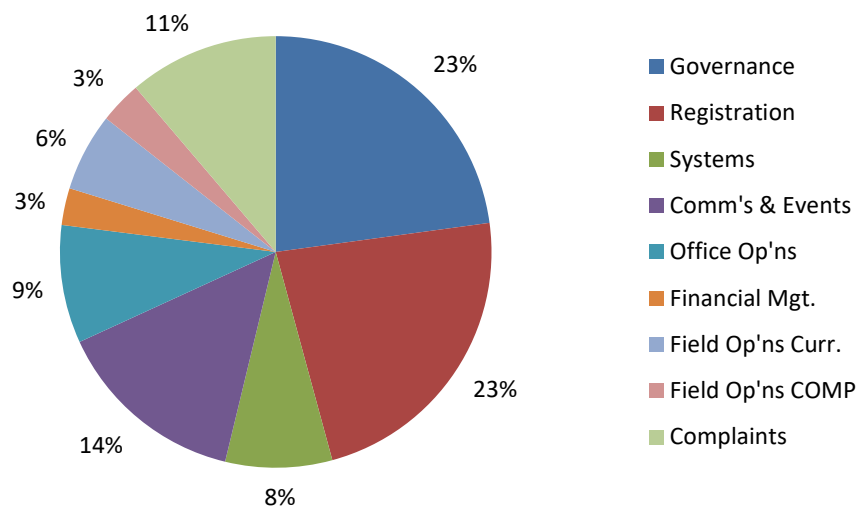
To measure the baseline Safety Culture within all Saskatchewan pharmacies, a Safety Attitudes Questionnaire (SAQ) was administered and overseen by ISMP Canada in November 2018. Pharmacists and pharmacy technicians were asked to participate. Results will be compared to future results of the survey to identify advancement of the safety culture. The final report with the results of the survey will be available around February 2019.

Other Activities of the Registrar's Office

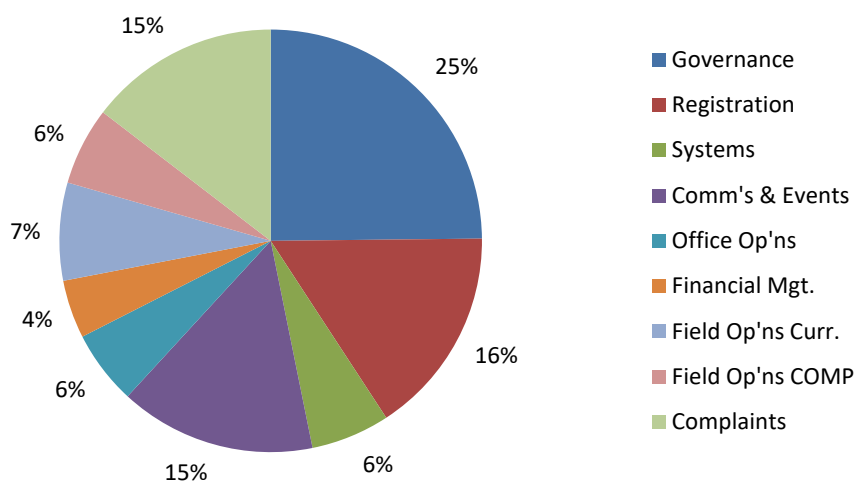
Developed operational plans for the two priority goals under our new 2016-19 strategic plan. This included a performance management and development system for Council and staff. As a first step we defined staff responsibilities within functional units and estimated the amount of time devoted to each. The results below reflect 2017 and 2018, respectively.

Staff Time Per Organizational Unit

2017



2018



Each unit is developing objectives to meet these two priorities that will be measured over time to demonstrate how much administration is focused on Council's priorities. The majority of units have created their objectives however due to staffing changes throughout 2018 further development of unit objectives has been put on hold until 2019.

In 2018:

- Published five regular editions of SCOPE, our e-newsletter, plus a special edition for pharmacy technicians and our first microSCOPE e-newsletter in December.
- Continued to update the documents in our Reference Manual.
- Conducted our 107th Annual General Meeting at the Double Tree by Hilton in Regina in conjunction with the PAS Conference.
- Continued collaboration with the College of Pharmacy and Nutrition to facilitate professional development activities for members, in particular the design and delivery of our privacy officer re-certification, minor ailments, oral contraception and smoking cessation agent prescriptive authority for pharmacists and administration of drugs by injection training sessions.
- Continued electronic data collection and submission to the Canadian Institute for Health Information (CIHI) "Pharmacist Database Project."
- Continued to electronically submit member and pharmacy data to the Provider Registry System of Saskatchewan Ministry of Health.
- Continued the development of our in1touch information collection and data processing system for our pharmacy professional practice review process and the conversion to quality improvement reviews.
- Remained actively involved in the PIP Quality Improvement Project and continued the engagement of Perry Hermanson in a term position as PIP Data Quality Facilitator until December 31, 2018. In July of 2018 Perry accepted a position with eHealth and as such worked with Jeannette and Lori to create a PIP FAQ document for members and transitioned his work into our new QIR process to continue the momentum and important work on improving the quality of data in the PIP system. His work and PIP data improvement trends continue to be reviewed at each Council meeting and SCPP will continue to collaborate with eHealth on this important initiative.
- Continued to participate in collaborative initiatives such as:
 - the Network of Interprofessional Regulatory Organizations (NIRO). NIRO consists of representatives from the governing bodies for all health professional in Saskatchewan and Saskatchewan Health;
 - a yearly joint Board/Council meetings with the Pharmacy Association of Saskatchewan (PAS) and the Canadian Society of Hospital Pharmacists SK branch (CSHP);
 - meetings with the College of Physicians and Surgeons Prescription Review Program; all to share information and discuss issues of mutual interest.
- Continued to chair and support the Pharmacy Coalition on Primary Care.
- Continued as a founding and funding partner in the Saskatchewan Institute of Health Leadership, continued liaison and sponsorship of two candidates.
- Staff members maintained a strong relationship and liaison with the College of Pharmacy and Nutrition. We continued to teach law and ethics, and conducted guest lectures on a variety of professional issues. This liaison also includes serving on the Advisory Board of medSask Drug Information Service and the Continuing Professional Development for Pharmacy Professionals Unit.
- Researched, developed and coordinated policy documents involving considerable staff resources.

- Continued to liaise with the funding partners of the Prescription Review Program.
- Provided administrative support to Council and the Audit and Finance Committees.
- Contributed to a provincial working group developing protocols for Medical Assistance in Dying (MAID). in the province and assisted with roll out and provincial communication plans.
- Continued to sit on the Provider Advisory Committee for the upcoming launch of the Citizen Health Portal for Saskatchewan.
- Continued to regularly meet with the Opioid Health Stakeholders to collaborate on initiatives for combatting the opioid crisis.
- Initiated quarterly meetings with CPSS, SMA and PAS to increase communication and collaboration.
- Hosted the NABP/AACP District V Annual Meeting at the Sheraton Cavalier in Saskatoon in August.
- Hosted the Tri-Provincial meeting between BC, AB and SK at the Double Tree by Hilton in November to continue to collaborate with our provincial counterparts.

Conclusion

On behalf of all staff, I extend our sincere appreciation to President Kosar and members of Council and all committees and appointees for your vision, leadership, loyalty and dedication. We acknowledge and sincerely appreciate the sacrifices you have made to serve the College. You have contributed significantly to our successes this year. We are privileged to work with such competent and dedicated volunteers.

Sincere thanks are also extended to Dawn Martin and staff of PAS for their cooperation on issues of mutual interest, and to SCPP staff who worked so hard for us during the year (Jeanne Eriksen, Nick Fattore, Pat Guillemin, Perry Hermanson, Ray Joubert, Darlene King, Chantal Lambert, Christina McPherson, Heather Neirinck, Lori Postnikoff, Kim Samoila, Jeannette Sandiford, Tami Schwebius, Brittany Sharkey, Audrey Solie, Meaghan Underwood, Ingrid Wakefield, Cheryl Wyatt, and Caroline Zareba) for your dedication and excellent support. The College is fortunate to have such gifted staff.

Respectfully submitted,



J. Wendel, Registrar-Treasurer 2018

Appendix A

Membership Statistics								
As of December 31	2012	2013	2014	2015	2016	2017	2018	
PHARMACIST								
Practising								
Community:	996	1016	1049	1097	1128	1154	1174	
Hospital:	250	258	254	264	274	286	312	
Other:	168	175	204	201	217	217	218	
Conditional:	2	5	3	6	10	6	9	
Total Practising	1416	1454	1510	1568	1629	1663	1713	
Non-Practising	43	45	42	43	46	51	51	
Retired	93	97	99	104	102	106	108	
Associate	55	51	48	47	44	41	37	
Suspended							1	
PHARMACY TECHNICIAN*								
Practising								
Community:				3	24	55	85	
Hospital:				3	45	117	167	
Other:				0	13	23	22	
Conditional:				0	0	0	0	
Total Practising				6	82	195	274	
Non-Practising					0	2	1	
Retired					0	0	0	
Associate					0	0	0	
TOTAL MEMBERS:	1607	1641	1699	1762	1903	2058	2185	
PHARMACIES								
Community:	330†	337	343	346	351	365	370	
Satellite:	8	8	8	8	9	10	8	
Dispensing Physician:	7	7	7	7	7	6	6	
Internet:	0	0	0	0	0	0	0	
TOTAL PHARMACIES:	345†	352	358	361	367	381	384	

* Regulation of pharmacy technicians did not begin until October 2015

† Adjusted 2012 statistics according to renewal

Pharmacy Changes During 2018

- 12 Openings
- 8 Closures
- 79 Manager Changes
- 21 Pharmacy Ownership Changes
- 69 Corporate Share Purchases
- 9 Trade Name Changes
- 8 Relocations
- 18 Renovations
- 4 Lock and Leave Permits Issued
- 41 Lock and Leave Amendments

Prescriptive Authority – % of Licensed Pharmacists

- 81% Qualified to Prescribe Emergency Post-Coital Contraception
- 100% Prescriptive Authority Level I Trained
- 97% Prescriptive Authority Minor Ailments Trained

Registration and Membership Statistics 2018

- 130 International Pharmacy Graduates (IPG's) made 420 inquiries
 - 30 approved for Appraisal Training
 - 30 engaged in Appraisal Training
 - 21 completed Appraisal Training/Assessment process

PHARMACIST

Total Registration: 126

- Saskatchewan BSP Graduates: 67
 - 52 Registered as Conditional Practising
 - 15 Registered as Practising
- Candidates from Other Jurisdictions: 55
 - 35 Candidates from other Canadian Provinces
 - 20 International Pharmacy Graduates
- Reinstatements: 4
- Total Terminations: 84
 - 53 Non-Payment of Dues
 - 31 By Request

Members Deceased: 3

Converted to Retired Membership: 20

PHARMACY TECHNICIAN

Total Registration: 103

- Saskatchewan Polytechnic Graduates: 9
- Non-CCAPP Graduates: 70
- CCAPP Graduates: 21
- Candidates from Other Jurisdictions: 3
- Reinstatements: 0
- Total Terminations: 22

Appendix B

Financial: For the Fiscal Year Ended December 31, 2018				
	Actual	Budget	Variance	Comments
REVENUE				
<i>Fees and Licenses (Schedule 1)</i>				
Pharmacy permit amendments	13,870	10,800	3,070	Significant changes and increased workload
Non-Practising members	62,156	58,608	3,548	Increased number
Other fees	83,878	60,630	23,248	increased IPG, JP exams BSP and Techs
Pharmacy permits	589,441	565,027	24,414	Increased number
Practising members (licences)	1,831,315	1,828,951	2,364	Increased number
COMPASS Surcharge	169,125	193,778	(24,653)	Lower number of pharmacies versus budget and 11/12th deferral
Registration	90,210	90,170	40	
Sub-total	2,839,995	2,807,964	32,031	
<i>Sundry (Schedule 2)</i>				
Expense recoveries	12,011	3,085	8,926	Recovery of travel costs
Other	62,881	57,670	5,211	Budget included \$347,186 capture from reserves; PAS Lease; Parking
Recovery of discipline costs	118,875	-	118,875	Policy is to not budget
Sub-total	193,767	60,755	133,012	
Investment Income	(10,389)	41,736	(52,125)	Low rates of return market downturn
Total	3,023,373	2,910,455	112,918	
EXPENSES				
<i>Administration (Schedule 3)</i>				
Accounting	19,091	17,226	1,865	
Automobile (lease, operating)	8,244	18,204	(9,960)	Sold lease back
Building operations	196,844	210,769	(13,925)	Includes condo expenses and interest
Employee benefits	145,733	169,940	(24,207)	Includes Councillor & committee CPP
Equipment rental/maint./software	101,774	121,270	(19,496)	
General office	229,723	178,413	51,310	Includes Deputy Registrar search (was not budgeted for in 2018) and temporary administrative staff
Postage	14,052	13,106	946	Includes courier
Printing and stationery	33,668	30,371	3,297	Development of microSCOPE and two extra newsletters
Registrar and Inspectors	112,869	136,970	(24,101)	Incorporation of technology - reduction of travel due to reduced PPR's
Salaries	1,387,556	1,424,435	(36,879)	
Telephone and fax	21,509	27,170	(5,661)	
Sub-total	2,271,064	2,347,874	(76,810)	
Amortization	74,280		74,280	Leasehold Improvements Sherwood Place
Continuing education	126,986	145,919	(18,933)	Increased in 2018 and travel health grant split over 18/19
Council	87,398	70,099	17,299	Council size
Delegates	10,250	15,980	(5,730)	Less travel due to two in province meetings
Interest			-	Captured in building costs
Legal and audit	215,477	106,572	108,905	Increased complaints, discipline and corporate legal consultations
Miscellaneous	16,284	247	16,037	Gold medals and SIHL sponsorship
Other committees	45,937	114,785	(68,848)	Projects completed
Public and professional relations	178,409	181,388	(2,979)	
COMPASS	131,184	131,769	(585)	To be reconciled. See note below*
Total	3,157,269	3,114,633	42,636	
Deficit or Excess of revenues over expenses	(133,896)	(204,178)	70,282	Less reserves were required due to reduction of expenses within our control and increased revenues

* NOTE: COMPASS surcharge is accounted as collected in advance while ISMP subscriptions as prepaid expenses, both as of December 1.

2018-2019 Saskatchewan College of Pharmacy Professionals Council, Committees, Appointees and Administration

Legend

*Chair
 O = Officer
 P = Public Member
 A = Advisory (Non-Voting)

Council/Executive

Justin Kosar, President* (O)
 Marilyn Younghans, President-Elect (O)
 Stephanie Miller, Vice-President & Division 1 (O)
 Bill Gerla, Past-President
 Kyla Jackson, Division 2
 Margaret Wheaton, Division 3
 Rod Amaya, Division 4
 Peyman Nemati, Division 5
 Brandon Krahn, Division 6
 Doug MacNeill, Division 7
 Amy Wiebe, Division 8
 Kishor Wasan, Ex Officio
 Yvonne Shevchuk, Designate Ex Officio
 Bonnie Caven (P)
 Mark Hawkins (P)
 Michael Lummerding (P)
 George Thomas (P)
 Jonina Code, Pharmacy Technician Observer (A) (until May 2018)
 Lyndsay Brakstad, Pharmacy Technician Observer (A)
 Meghanne Rieder, Senior Stick (A)

Committees

Audit

Justin Kosar*
 Marilyn Younghans
 Stephanie Miller
 Paul Bazin
 Bill Gerla
 Ray Joubert (A)
 Jeana Wendel (A)

Awards and Honours

Monica Lawrence*
 Zack Dumont
 Shauna Gerwing
 Arlene Kuntz
 Bridget Zacharias
 Jeanne Eriksen (A) (until June 2018)
 Lori Postnikoff (A) (as of September 2018)

Complaints

George Furneaux*
 Kim Borschowa (until September 2018)
 Stan Chow
 Lori Friesen
 Michael Hewitt
 Darryl Leshko (until December 2018)
 Janet Markowski
 Manan Patel (as of September 2018)
 Jenna Soehn (as of September 2018)
 Barbara deHaan (P)
 Chantal Lambert (A) (as of October 9 2018)
 Tami Schwebius
 Lori Postnikoff (A)

Discipline

Mike Davis*
 Janet Bradshaw (until February 2018)
 Lyle Brandt (as of September 2018)
 Brad Cooper
 Dean German
 Christine Hrudka (until September 2018)
 Spiro Kolitsas
 Cheryl Lalonde (as of September 2018)
 Michael Lummerding (P)
 Eric Pederson (as of September 2018)
 Marshall Salloum
 Tyler Sutter
 Jeana Wendel (A)
 Ray Joubert (A)

Finance

Justin Kosar*
 Marilyn Younghans
 Stephanie Miller
 Ray Joubert (A)
 Jeana Wendel (A)

Fitness to Practise

Melanie McLeod*
 Beverly Brooks
 Shannan Neubauer
 Robin Sander
 Kelly Vinge
 Jeanne Eriksen (A) (until June 2018)
 Lori Postnikoff (A) (as of Sept. 2018)

Pharmacy Coalition on Primary Care

Kim Borschowa
 Derek Jorgenson
 Darcy Lamb
 Shannan Neubauer
 Brenda Schuster
 Yvonne Shevchuk
 Jeana Wendel* (A)
 Myla Wollbaum*

Professional Practice

Peyman Nemati*
 Kelly Babcock
 Nicole Bootsman (as of June 2018)
 Kristjana Gudmundson (as of October 2018)
 Karen Jensen (until September 2018)
 Deven Johnson
 Kelly Kizlyk (as of October 2018)
 Don Kuntz
 Tamara Lange
 Sue Mack-Klinger
 Lindsey McComas
 Shauna Nowakowski (as of March 2018)
 Colleen Thurber (as of March 2018)
 Bindu Shebi George (until June 2018)
 Myla Wollbaum (until Oct. 2018)
 Jeanne Eriksen (A) (until June 2018)
 Lori Postnikoff (A) (as of Sept. 2018)
 Brittany Sharkey (A)

Registration and Licensing Policies

Glenn Murray*
 Kim Borschowa
 Danielle Larocque
 Andrea Lockwood
 Sharon Lyons
 Carol Pannell
 Maitrik Patel
 Jeanne Eriksen (A) (until June 2018)
 Lori Postnikoff (A) (as of September 2018)

Appointees

Canadian Council on Continuing Education (CCCEP)

Danielle Larocque

National Association of Pharmacy Regulatory Authorities (NAPRA)

Jeana Wendel

Council of Pharmacy Registrars of Canada (CPRC)

Jeana Wendel

Pharmacy Examining Board of Canada (PEBC)

Suzanne Gulka (as of February 2018)

Saskatchewan Registered Nurses Association/NEPAC Committee

Lana Dean (as of August 2018)

University of Saskatchewan Senate

Christine Hrudka

University of Regina Senate

Linda Sulz (as of May 2018)

STAFF

SENIOR LEADERSHIP TEAM

Registrar

Jeana Wendel

Associate Registrar

Ray Joubert

Deputy Registrar

Jeanne Eriksen (until June 2018)

Lori Postnikoff (as of Sept. 2018)

Assistant Registrars

Lori Postnikoff (Complaints)
until September 2018

Chantal Lambert (Complaints)
as of October 2018

Jeannette Sandiford (COMPASS)

Professional Affairs Administrator

Brittany Sharkey

SPECIAL PROJECT

PIP Data Quality Facilitator

Perry Hermanson (until July 2018)

ADMINISTRATIVE STAFF

Nick Fattore, Pharmacy Practice Consultant
(until December 2018)

Pat Guillemin, Pharmacy Permits and Systems
Manager Pharmacy Relations

Darlene King, Reception and Office Operations
Coordinator

Christina McPherson, Administrative Assistant
to the Deputy Registrar

Heather Neirinck, Registration and Systems
Administrator Member Relations

Kim Samoila, Policy Analyst (as of September
2018)

Tami Schwebius, Complaints Manager

Audrey Solie, Registration Administrator
Member Relations

Meaghan Underwood, Administrative Assistant
COMPASS (as of September 2018)

Ingrid Wakefield, Executive Assistant to the
Registrar (as of March 2018)

Cheryl Wyatt, Communications Coordinator

Caroline Zareba, Administrative Assistant
COMPASS (on leave)



Minutes of the 107th Annual General Meeting

Saturday, May 11, 2018

DoubleTree by Hilton Hotel & Conference Centre Regina

Chairman – Justin Kosar

1. Welcome and Opening Remarks

Chairman Kosar called the meeting to order and welcomed those members present to the 107th Annual General meeting of the Saskatchewan College of Pharmacy Professionals.

2. Introduction of Councillors and Special Guests

Chairman Kosar of Saskatoon introduced the Council members:

Officers: Vice-President, Stephanie Miller, Weyburn; Past-President, Bill Gerla, Humboldt

Councillors: Stephanie Miller, Weyburn; Kyla Jackson, Hudson Bay; Margaret Wheaton, Biggar; Paul Melnyk, Saskatoon; Peyman Nemat, Regina; Doug MacNeill, Lanigan, Marilyn Youngmans Lloydminster (regrets)

Ex-Officio: Dean Kishor Wasan, Saskatoon

Dean's Designate: Dr. Yvonne Shevchuk, Saskatoon

Public Members: Mark Hawkins, Regina (regrets); Michael Lummerding, St. Brieux; and George Thomas, Regina (regrets)

Pharmacy Technician Observers: Janina Code, Foam Lake and Lyndsay Brakstad, Tisdale

Senior Stick Observer: Jordan Kalesnikoff, Saskatoon

Chairman Kosar extended a special thank you to Paul Melnyk for his years of commitment and dedication to the College, as he retires from Council. Chairman Kosar also thanked Jordan Kalesnikoff, Senior Stick, who represented the students over the past year.

This year SPCPP held elections in Divisions 2, 4, 6 and 8. In Division 2, Kyla Jackson won by acclamation. In Division 4, 6 and 8 the winners were Rod Amaya for Division 4, Brandon Krahn for Division 6 and Amy Wiebe for Division 8.

Numerous special guests were welcomed and introduced to the assembly.

3. Motion to Accept 2016 Minutes as Printed and Distributed

MOTION: P. Robertson/Y. Shevchuk

THAT the Minutes of the 107th Annual General Meeting of Saskatchewan College of Pharmacy Professionals, held on Saturday, May 11, 2017 in DoubleTree, Regina, be adopted as printed and distributed.

CARRIED

4. Business Arising from the Minutes

There was no business arising from the minutes.

5. Memorial to Members who we have lost this year

Chairman Kosar asked the assembly to rise for a moment of silent tribute to the following deceased members:

Edmund Belcourt	Curt Bitner
Robert Boxall	James Cameron
Ronald Currie	Ronald Dixon
Donald Dodsworth	Giselle Emery
Derek Grant	Larry Iverson
M. Alexander Kilburn	Dean Paul
Peter Pereverzoff	Marie Sim
Michael Taylor	Wesley Taylor
James Trembley	Roman Wozniak

6. Reports

6.1 President's Annual Report

Past-President Gerla assumed the chair, introduced President Kosar and invited him to present the Annual Report.

President Kosar referred members to his published report beginning on page 5 of the printed Annual Report, which summarizes the activities of the College and demonstrates how we monitor and evaluate performance according to the strategic goals.

Past-President Gerla invited questions from the floor arising from the President's report. There were no questions.

MOTION: R. Amaya /P. Melynk

THAT the President's report be accepted as presented.

CARRIED

Chairman Kosar resumed the Chair.

6.2 Registrar's Report

Chairman Kosar invited the Registrar, Ray Joubert, to present his report. Mr. Joubert referred to his printed report beginning on page 9 of the Annual Report, which includes statistical information and projections.

Mr. Joubert invited questions from the floor arising from his published report. There were no questions.

MOTION: J. Bradshaw/ B. Lyons

THAT the Registrar's report be accepted as presented and published.

CARRIED

6.3 Auditor's Report

Chairman Gerla invited Ray Joubert to present the Auditor's report and answer questions respecting the published Audited Financial Statements for the fiscal year ended December 31, 2017. He directed those assembled to the Auditor's report and audited financial statements for 2017 published in the Annual Report beginning on page 43.

MOTION: K. Borschowa/D. MacNeill

THAT the audited Financial Statement of the College for fiscal period ended December 31, 2017, be approved as printed and distributed.

CARRIED

6.4 Consideration of Annual Report as Printed and Distributed

Chairman Gerla called for questions or comments on the Annual Report. There were no questions.

MOTION: Y. Shevchuk/D. McLeod

THAT the balance of the Annual Report be approved as printed and distributed.

CARRIED

6.5 College of Pharmacy and Nutrition Report

Dean Kishor Wasan highlighted his report as printed in the Annual Report on page 39.

7. New Business

Chairman Kosar called for any other new business. There was no new business.

8. Concluding Remarks

Chairman Kosar thanked those present for attending and thanked members of all committees for their work.

9. ADJOURNMENT

Chairman Kosar declared the Annual General Meeting adjourned.



J. Kosar, President



Jeana Wendel, Registrar



UNIVERSITY OF
SASKATCHEWAN

College of Pharmacy and Nutrition

Proud of Our Tradition and Home of Research and Practice Innovation
2018 Annual Report to the Saskatchewan College of Pharmacy Professionals

University News

New University Strategic Plan

Based on three strong commitments and 12 courageous goals, the University Plan is a forward-thinking, strategic document that guides our aspirations for the next seven years to 2025. In the summer of 2018, the Indigenous community gifted a name to the plan; *nīkānītān manācihitowinihk* in Cree and *ni manachihitoonaan* in Michif which translates as “Let us lead with respect.”

Full details of the university's new strategic plan can be found at <http://plan.usask.ca>

College News

New College Strategic Plan

The college's strategic plan “**Preeminence 2025**” is a bold and progressive plan to address society's health care concerns and to enable the college to be a leader in pharmacy and nutrition education. In the past several years the college has been a national leader in indigenous student recruitment, fundraising and research and this plan builds on these achievements.

Full details of the college's new strategic plan can be found at <http://pharmacy-nutrition.usask.ca>

RxFiles comes to USask

RxFiles Academic Detailing Program has joined the College of Pharmacy and Nutrition at the University of Saskatchewan. The Government of Saskatchewan will provide annual funding of \$450,000 to the college to operate RxFiles.

The program provides objective and unbiased comparative drug information to doctors and pharmacists through reference materials and in-person training.

RxFiles was established in 1997 under the former Saskatoon Health Region and grew to serve the province, with 12 pharmacists in academic detailing positions as of last year. The program is best known for its drugs comparison charts, which provide information on similar drugs side-by-side on one page.

The program is co-located with medSask, which provides on-demand drug information to healthcare professionals and the public through phone and email. These complimentary programs now have more opportunities to collaborate to enhance patient care through accurate drug information.

Remillard Retires

On Friday, July 13 faculty, staff and guests gathered at the University Club to celebrate one final time before **Dr. Alfred Remillard** officially retired after 35 years on campus and a distinguished career in psychiatric pharmacy.

The college is pleased to announce the new Dr. Alfred Remillard Scholarship in Pharmacy Mental Health. The award will recognize academic excellence and research potential of a student in third or fourth year of the pharmacy program in the area of mental health. One annual award with a value of \$1,000 will be available upon Remillard's retirement.

Berenbaum Retires

On Wednesday, June 20 faculty, staff and guests gathered at the University Club to celebrate one final time before **Dr. Shawna Berenbaum** officially retired after an academic career that spanned more than 30 years.

Dr. Berenbaum began her faculty career at the University of Saskatchewan in 1986 firstly holding a limited term position in the College of Home Economics before moving to what is now the College of Pharmacy and Nutrition. She initially was in part-time term positions in the college, but upon completing her PhD she was granted tenure and promotion to associate professor. In 2005 she was granted promotion to full professor.

Faculty and Staff News

New Faculty

The college would like to welcome three new assistant professors to the faculty:

- **Dr. Jaris Swidrovich** joined the college in the Division of Pharmacy on June 1. He has been a Lecturer in the college since August 2015.
- **Dr. Allison Cammer** joined the college in the Division of Nutrition on July 1. She was previously at Ryerson University as an assistant professor at the School of Nutrition, Faculty of Community Services.
- **Dr. Katelyn Halpape** joined the college in the Division of Pharmacy in the areas of psychiatric medicine, mental health and neurology on December 1.

Promotion and Tenure

Congratulations to the following faculty members on their promotions, which were effective July 1, 2018:

- **Dr. Holly Mansell** promoted to Associate Professor with Tenure
- **Dr. Ildiko Badea** promoted to Full Professor
- **Dr. Anas El-Aneed** promoted to Full Professor
- **Dr. Ed Krol** promoted to Full Professor
- **Dr. Hassan Vatanparast** promoted to Full Professor

Reappointments

Congratulations to **Drs. Kerry Mansell** and **Carol Henry** who have been reappointed in their roles as assistant deans in the college. Their two-year terms were effective July 1, 2018.

Retirements

The college bid farewell to the following staff during 2018:

- **Jean Oakley**, Graduate Programs Administrator
- **Erling Madsen**, Stores Manager
- **Karen Jensen**, medSask Manager

Graduate Studies and Research

Notable Grants

- **Holly Mansell** and her colleagues also received \$160,000 in funding from SHRF's Sprout grant program and CIHR SCPOR for Improving Health Outcomes of Kidney Recipients: A Randomized Controlled Trial of a Pre-Transplant Education Intervention.
- **Carol Henry** and her colleagues were awarded a \$150,000 3-year grant from Saskatchewan Pulse Growers for the project "Pulse Positive: An educational campaign to increase awareness and consumption by integrating pulses into elementary schools.
- **Hassan Vatanparast** received \$105,000 in funding from the Mitacs Accelerate program for interns Seyed Hamzeh Hosseini and Pardish Keshavarz. "Grain consumption patterns, their respective nutrient contribution and related health outcomes in Canadians" is a partnered project with the Saskatchewan, Alberta, and Ontario Wheat Development Commissions.
- **Dr. Charity Evans**, and her colleagues, were awarded a \$1.2 million grant from the Canadian Institutes for Health Research for their project "Prescription Drug Safety and Effectiveness in Multiple Sclerosis [DRUMS]: a population-based, multi-province platform for comprehensive pharmacovigilance."
- **Dr. Holly Mansell**, and co-investigator **Dr. Dave Blackburn**, received a Saskatchewan Health Research Foundation SPROUT grant for \$160,000 for the project "Improving Health Outcomes for Kidney Recipients: A randomized controlled trial of a pre-transplant education intervention."
- **Dr. Ellen Wasan**, and co-investigator **Dr. Kishor Wasan**, received a \$255,000 grant from the Agriculture Development Fund and the Saskatchewan Cattleman's Association for their project "Enhanced Vaccine Adjuvant Platform for Nasal Administration in Livestock".
- **Robert Laprairie** was awarded a \$120,000 Establishment grant from the Saskatchewan Health Research Foundation for the project *Modulation of the Endocannabinoid System in the GAERS Rat Model of Absence Epilepsy*.
- **Jessica Liefers** was awarded a \$120,000 SHRF Establishment grant for the project *Nutrition and Tooth Decay in Children: An Analysis of Parental Perspectives and Publicly Available Written Information*.
- **Phyllis Paterson** and co-applicants, Drs. Mariam Alaverdashvili, Gillian Muir, Fred Colbourne (University of Alberta), and Lindsay Robinson (University of Guelph), received a CIHR Operating Grant of \$100,000 from the Priority Announcement for Sex, Gender & Health Research - Integration & Innovation for their research entitled *Nutritional Intervention: Targeting Multiple Systems To Enhance Post-Stroke Recovery*.
- **Kate Dadachova** and Gordon Sarty (Psychology) were awarded a 3-year \$200,000 grant from the Canadian Space Agency's Flights and Fieldwork for the Advancement of Science and Technology Announcement of Opportunity for the project Protecting astronauts from space radiation-induced carcinogenesis and CNS damage with melanin-containing food and materials.
- **Jonathan Dimmock** was awarded \$180,000 from the Maunders McNeil Foundation in continued support of the project *Creation of tumour-selective compounds*.
- **Jane Alcorn** and **Robert Laprairie** received \$100,000 from Innovation Saskatchewan to support research activities conducted under the Cannabinoid Research Initiative of Saskatchewan.

Service Activities

With Karen Jensen's retirement, updates have been made to the organizational structure of medSask and Continuing Professional Development for Pharmacy Professionals as these organizations work closely together:

- **Dr. Charity Evans** is now the Director of both medSask and CPDPP
- **Danielle Laroque** is now the Associate Director of both medSask and CPDPP
- **Dr. Yvonne Shevchuk** is now the Director of RxFiles Academic Detailing Program

Communications, Alumni Relations, and Development

Communications

News and information from the College is posted to our website and social media on a regular basis, and you can stay connected to us with the following links.

Website: pharmacy-nutrition.usask.ca

Facebook: www.facebook.com/usaskPharmNut

Twitter: www.twitter.com/usaskPharmNut

Instagram: www.instagram.com/usaskPharmNut

The College release its **Dean's Newsletter** every two months, which summarizes all of our news and events. The newsletter is posted to our website and social media, and emailed to our alumni. If you haven't received the newsletter in 2018, please contact **Kieran Kobitz**, Communications and Alumni Relations Specialist, at kieran.kobitz@usask.ca to update your email address and other contact information.

Alumni Engagement

2018 Alumni Hall of Fame

The college is pleased to announce six inductees into the new Alumni Hall of Fame for 2018. This new initiative recognizes alumni who have made significant and sustained contributions to their profession. Each year a new group of inductees will be selected to be recognized for their achievements.

Congratulations to the following inductees to the Alumni Hall of Fame who will be formally recognized at the college's awards ceremony in March 2019.

- Dr. Jim Blackburn (BSP 1960)
- Patricia Chuey (BScNutr 1989, MSc 1994)
- Dr. Dennis Gorecki (BSP 1969, PhD 1973)
- Dr. Lynn Kirkpatrick (BSP 1978, PhD 1981)
- Darcy Stann (BSP 1978)
- William (Bill) Wilson (BSP 1969)

Alumni Events

The college held alumni events throughout 2018, including Sask Night at the Canadian Pharmacists Association Conference in Fredericton, the dessert and hospitality suite at the Pharmacy Association of Saskatchewan Conference in Regina, a reception at the Dietitians of Canada Conference in Vancouver and an alumni and friends mixer during the Canadian Society of Hospital Pharmacists Conference in Toronto.

Dates and locations for our upcoming alumni events in 2019 will be announced in our newsletter, on our website, and on social media.

Development

The Marguerite Eleanor Read & Charles Henry Kouri Memorial Award

Marguerite Eleanor Read bequeathed \$100,000 from her estate to the College of Pharmacy and Nutrition to establish an award in memory of her brother, Charles Henry Kouri (BSP 1957).

The Marguerite Eleanor Read & Charles Henry Kouri Memorial Award will provide financial assistance to students pursuing a pharmacy degree who have demonstrated financial need.

After receiving his pharmacy degree, Kouri moved to Ottawa where he lived for more than forty years. He purchased Lynwood Pharmacy in the suburb Bell's Corners in 1965, and owned three pharmacies at one time. He was actively involved with the Ottawa area alumni and proudly wore his university ring. Kouri passed away on August 6, 2009 in Moncton, New Brunswick.

Concluding Remarks

Our faculty, staff, and students were all very busy in 2018, and 2019 promises to be just as busy and exciting. We've reconnected with alumni, the new PharmD program launched, and our faculty and students have been recognized on the national and international level for their hard work. I look forward to continuing work in 2019 as the College grows and the pharmacy profession evolves.

This report is respectfully submitted,

Kishor M. Wasan,
Professor and Dean

Saskatchewan College of Pharmacy Professionals Financial Statements December 31, 2018





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Independent Auditor's Report

To the Members of
Saskatchewan College of Pharmacy Professionals

Opinion

We have audited the financial statements of Saskatchewan College of Pharmacy Professionals (the "College"), which comprise the statement of financial position as at December 31, 2018, and the statements of operations and changes in fund balances and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies (collectively referred to as the "financial statements").

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the College as at December 31, 2018, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards ("Canadian GAAS"). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the College in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the College's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the College or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the College's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian GAAS will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian GAAS, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the College's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the College's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the College to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

(To be signed Deloitte LLP)
Chartered Professional Accountants
Date of auditor's report
Regina, Saskatchewan

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS**Statement of Financial Position**

As at December 31, 2018

	2018			2017
	Operating Fund	Capital and Intangible Asset Fund	Total	Total
CURRENT ASSETS				
Cash	\$ -	\$ -	\$ -	\$ 191,754
Marketable securities (Note 3)	2,803,692	11,266	2,814,958	2,481,296
Accounts receivable	174,024	-	174,024	87,889
Due from the SCP Centennial Scholarship Fund Inc. (Note 10)	6,609	-	6,609	6,609
Government remittances receivable	15,852	-	15,852	2,375
Prepaid expenses	153,246	-	153,246	143,833
	3,153,423	11,266	3,164,689	2,913,756
CAPITAL AND INTANGIBLE ASSETS (Note 4)	-	489,210	489,210	556,001
	\$ 3,153,423	\$ 500,476	\$ 3,653,899	\$ 3,469,757
CURRENT LIABILITIES				
Bank overdraft	\$ 278,405	\$ -	\$ 278,405	\$ -
Accounts payable (Note 5)	99,748	-	99,748	90,724
Fees and licences collected in advance	1,662,024	-	1,662,024	1,594,774
Current portion of obligations under capital leases (Note 6)	-	40,440	40,440	36,642
	2,040,177	40,440	2,080,617	1,722,140
OBLIGATIONS UNDER CAPITAL LEASES (Note 6)	-	24,923	24,923	65,363
	2,040,177	65,363	2,105,540	1,787,503
FUND BALANCES				
Invested in capital and intangible assets	-	423,847	423,847	453,996
Externally restricted for building development	-	11,266	11,266	11,337
Unrestricted	1,113,246	-	1,113,246	1,216,921
	1,113,246	435,113	1,548,359	1,682,254
	\$ 3,153,423	\$ 500,476	\$ 3,653,899	\$ 3,469,757

Commitments (Note 9)

See accompanying notes

Approved by Council

.....
Councillor.....
Councillor

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS
Statement of Operations and Changes in Fund Balances

Year ended December 31, 2018

	Operating Fund 2018	Operating Fund 2017	Capital and Intangible Asset Fund 2018	Capital and Intangible Asset Fund 2017	Total 2018	Total 2017
REVENUES						
Fees and licences (Schedule 1)	\$ 2,839,995	\$ 2,532,716	\$ -	\$ -	\$ 2,839,995	\$ 2,532,716
Sundry (Schedule 2)	193,767	86,524	-	-	193,767	86,524
Investment (loss) income	(10,318)	37,588	(71)	3,857	(10,389)	41,445
	3,023,444	2,656,828	(71)	3,857	3,023,373	2,660,685
EXPENSES						
Administration (Schedule 3)	2,262,530	1,936,432	-	-	2,262,530	1,936,432
Amortization	-	-	74,280	41,077	74,280	41,077
COMPASS subscription	131,184	10,653	-	-	131,184	10,653
Continuing education	126,986	101,443	-	-	126,986	101,443
Council	87,398	108,535	-	-	87,398	108,535
Delegates	10,250	6,671	-	-	10,250	6,671
Interest	-	-	8,533	3,858	8,533	3,858
Legal and audit	215,477	90,660	-	-	215,477	90,660
Miscellaneous	16,284	4,295	-	-	16,284	4,295
Other committees	45,937	72,601	-	-	45,937	72,601
Public and professional relations	178,409	179,170	-	-	178,409	179,170
	3,074,455	2,510,460	82,813	44,935	3,157,268	2,555,395
(Deficiency) excess of revenues over expenses	(51,011)	146,368	(82,884)	(41,078)	(133,895)	105,290
Fund balance, beginning of year	1,216,921	1,315,555	465,333	261,409	1,682,254	1,576,964
Interfund transfers (Note 7)	(52,664)	(245,002)	52,664	245,002	-	-
FUND BALANCE, END OF YEAR	\$ 1,113,246	\$ 1,216,921	\$ 435,113	\$ 465,333	\$ 1,548,359	\$ 1,682,254

See accompanying notes

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS**Statement of Cash Flows****Year ended December 31, 2018**

	2018	2017
CASH FLOWS (USED IN) FROM		
OPERATING ACTIVITIES		
(Deficiency) excess of revenues over expenses	\$ (133,895)	\$ 105,290
Items not affecting cash		
Amortization	74,280	41,077
Unrealized (gain) loss on marketable securities	(66,048)	51,293
Net change in non-cash working capital balances (Note 8)	(32,751)	87,834
	(158,414)	285,494
CASH FLOWS USED IN		
INVESTING ACTIVITIES		
Capital asset purchases	(7,489)	(324,113)
Purchase of marketable securities	(2,437,614)	(1,800,000)
Redemption of marketable securities	2,170,000	1,955,000
	(275,103)	(169,113)
CASH FLOWS USED IN		
FINANCING ACTIVITIES		
Capital lease principal payments	(36,642)	(17,715)
	(36,642)	(17,715)
(DECREASE) INCREASE IN CASH DURING THE YEAR	(470,159)	98,666
CASH, BEGINNING OF YEAR	191,754	93,088
(BANK OVERDRAFT) CASH, END OF YEAR	\$ (278,405)	\$ 191,754

See accompanying notes

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

Notes to the Financial Statements

December 31, 2018

1. PURPOSE OF THE COLLEGE

Saskatchewan College of Pharmacy Professionals (the “College”) is the statutory governing and self-regulating body for the pharmacy profession in Saskatchewan. It is incorporated under the Pharmacy Act as a not-for-profit organization and is exempt from income tax under Section 149 of the Income Tax Act.

2. SIGNIFICANT ACCOUNTING POLICIES

These financial statements have been prepared in accordance with Canadian accounting standards for not-for profit organizations. The following accounting policies are considered to be significant:

a) Fund accounting

The College follows the restricted fund method of accounting for contributions. The accounts of the College are maintained in accordance with the principles of fund accounting in order that limitations and restrictions placed on the use of available resources are observed. Under fund accounting, resources are classified for accounting and reporting purposes into funds with activities or objectives specified. For financial reporting purposes, the accounts have been classified into the following funds:

i) *Operating Fund*

The Operating Fund consists of the general operations of the College.

ii) *Capital and Intangible Asset Fund*

The Capital and Intangible Asset Fund has been established for the purpose of funding capital acquisitions and is an accumulation of direct contributions and that portion of the operating fund, which has been allocated to the fund at the discretion of the College’s Council. The fund is increased by investment income earned on the investment of contributions and is reduced by amortization and interest on related lease obligations.

b) Use of estimates

The preparation of financial statements requires management to make estimates and assumptions that affect reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the period. Actual results could differ from those estimates.

c) Cash

Cash consists of cash on hand, balances with banks and bank overdraft.

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

Notes to the Financial Statements

December 31, 2018

2. SIGNIFICANT ACCOUNTING POLICIES (continued)

d) Revenue recognition

Fees are recorded as revenue over the applicable membership period or when the fee is fixed or determinable and collectability is reasonably assured. Fees and licenses received in advance are recorded as fees and licenses collected in advance and recognized into revenue during the appropriate period.

Fees and licenses collected in advance at December 31, 2018 relate to the membership year July 1, 2018 through June 30, 2019 and to the permit year December 1, 2018 through November 30, 2019.

e) Financial instruments

The College initially measures its financial assets and financial liabilities at fair value. The College subsequently measures all its financial assets and financial liabilities at amortized cost, except for marketable securities that are quoted in an active market (money market pool funds, bonds and equities) which are measured at fair value. Changes in fair value are recognized in the statement of operations and changes in fund balances.

Transaction costs, except for those assets measured at fair value, are added to the carrying value of the asset or netted against the carrying value of the liability and are then recognized using the effective interest method. Any premium or discount related to an instrument measured at amortized cost is amortized over the expected life using the effective interest method and recognized in net earnings as investment income or interest expense.

With respect to financial assets measured at cost or amortized cost, the College recognizes in net earnings an impairment loss, if any, when it determines that a significant adverse change has occurred during the period in the expected timing or amount of future cash flows. When the extent of impairment of a previously written-down asset decreases and the decrease can be related to an event occurring after the impairment was recognized, the previously recognized impairment loss shall be reversed in net earnings in the period the reversal occurs.

f) Capital assets

Capital assets are recorded at cost. When capital assets are sold or retired, the related costs and accumulated amortization are removed from the respective accounts and any gain or loss is reflected in the statement of operations and changes in fund balances. Expenditures for repairs and maintenance are charged to operations as incurred.

Capital assets are amortized over their estimated useful lives using the following methods and rates:

Building	straight line over 30 years
Equipment	33% declining balance
Equipment under capital lease	straight line over 3 to 4 years
Furniture and fixtures	20% declining balance
Leasehold improvements	straight line over the term of the lease, including planned extensions

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

Notes to the Financial Statements

December 31, 2018

2. SIGNIFICANT ACCOUNTING POLICIES (continued)

g) Intangible assets

Intangible assets consist of software and are accounted for at cost. The software is amortized over its useful life of 5 years using the straight line method.

h) Impairment of long lived assets

When an item in capital assets no longer has any long-term service potential to the College, the excess of its net carrying amount over any residual value is recognized as an expense in the statement of operations and changes in fund balances. Write downs are not reversed.

3. MARKETABLE SECURITIES

Marketable securities consist of Canadian and International Bonds and Canadian, US, International and Global Equities. The fair values which represent the carrying values are as follows:

Operating Fund	2018	2017
	Fair Value	Fair Value
Fixed income	2,803,692	2,469,959
	\$ 2,803,692	\$ 2,469,959
Capital and Intangible Asset Fund	2018	2017
	Fair Value	Fair Value
Fixed income	\$ 7,537	\$ 3,205
Equities	3,729	8,132
	\$ 11,266	\$ 11,337
Total	2018	2017
	Fair Value	Fair Value
Fixed income	2,811,229	2,473,164
Equities	3,729	8,312
	\$ 2,814,958	\$ 2,481,476

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS**Notes to the Financial Statements**

December 31, 2018

4. CAPITAL AND INTANGIBLE ASSETS

	2018			2017
	Cost	Accumulated Amortization	Net Book Value	Net Book Value
Land	\$ 15,000	\$ -	\$ 15,000	\$ 15,000
Building	336,039	296,213	39,826	51,027
Equipment	255,764	252,052	3,712	5,540
Equipment under capital lease	14,704	14,704	-	-
Furniture and fixtures	212,106	121,602	90,504	113,129
Leasehold improvements	419,543	79,374	340,169	371,305
Software	99,150	99,150	-	-
	\$ 1,352,306	\$ 863,095	\$ 489,211	\$ 556,001

5. ACCOUNTS PAYABLE

	2018	2017
Trade	\$ 75,084	\$ 66,060
Funds held in trust	24,664	24,664
	\$ 99,748	\$ 90,724

Funds held in trust are held on behalf of the Integrated Primary Health Care Working Group ("IPHCWG"). The College is responsible to ensure all funds are expended exclusively on primary health services workshops and education. Any unused funds may remain with the College for use by the IPHCWG and documentation regarding the actual costs will be submitted to Saskatchewan Health upon request.

6. OBLIGATIONS UNDER CAPITAL LEASES

The following is a schedule of future minimum lease payments under capital leases:

2019	45,176
2020	25,776
	70,952
Less amount representing interest	(5,589)
	65,363
Less current portion	(40,440)
	\$ 24,923

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

Notes to the Financial Statements

December 31, 2018

7. INTERFUND TRANSFERS

Amounts transferred from the Operating Fund of \$52,664 (2017 - \$245,022) to the Capital and Intangible Asset Fund were made in order to fund the cash outlays for capital asset acquisitions and the obligations under capital leases.

8. NET CHANGE IN NON-CASH WORKING CAPITAL BALANCES

	2018	2017
INCREASE IN ASSETS		
Accounts receivable	\$ (101,390)	\$ (46,417)
Government remittances receivable	1,778	(2,375)
Prepaid expenses	(9,413)	(108,227)
INCREASE (DECREASE) IN LIABILITIES		
Accounts payable	9,024	18,400
Government remittances payable	-	(22,415)
Fees and licences collected in advance	67,250	248,868
	\$ (32,751)	\$ 87,834

9. COMMITMENTS

The College is committed under an operating agreement relating to system support as long as the system remains in operation or until the contract is terminated. The annual aggregate commitment is \$11,600.

In 2017, the College had entered into a ten-year office lease agreement. The contractual annual rent payments for the next five years are:

2019	\$53,355
2020	\$53,355
2021	\$53,355
2022	\$61,358
2023	\$61,358

In addition to basic rent, the College is also responsible for paying a share of realty taxes, operating costs, utilities and additional services that are related to the office rental.

See Note 13 for subsequent events relevant to this matter.

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

Notes to the Financial Statements

December 31, 2018

10. RELATED PARTY TRANSACTIONS

The College and the SCP Centennial Scholarship Fund Inc. are common control organizations since they have the same board of directors.

All transactions were carried out in the normal course of operations and are recorded at the exchange value. This value corresponds to the consideration agreed upon by the parties and is determined based on the costs incurred.

11. FINANCIAL INSTRUMENTS

Credit risk

The College's principal financial assets are cash, marketable securities and accounts receivable, which are subject to credit risk. The carrying amounts of financial assets on the statement of financial position represent the College's maximum credit exposure at the statement of financial position date.

The credit risk on cash and marketable securities is limited because the counterparties are chartered banks with high credit-ratings assigned by national credit-rating agencies and fixed term investments of a high credit quality. The College also limits its exposure by ensuring that it has invested in a diversified portfolio and that there is no large exposure to any one issuer.

Liquidity risk

Liquidity risk is the risk of being unable to meet cash requirements or to fund obligations as they become due.

The College manages its liquidity risk by constantly monitoring forecasted and actual cash flows and financial liability maturities, and by holding assets that can be readily converted into cash.

Accounts payable are generally repaid within 30 days.

Interest rate risk

The College is exposed to interest rate risk on its fixed and floating interest rate financial instruments. Fixed-rate instruments subject the College to a fair value risk while the floating rate instruments subject it to a cash flow risk. The College is exposed to this type of risk as a result of investments in money market pool funds and bonds.

Other price risk

Other price risk associated with investments in equities is the risk that their fair value will fluctuate because of changes in market prices. The College mitigates the risk by regularly rebalancing its portfolio and keeping the equity portfolio below 2% of the entire marketable security portfolio.

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

Notes to the Financial Statements

December 31, 2018

12. Comparative figures

Certain figures for 2017 have been reclassified to conform to the presentation adopted in 2018.

13. Subsequent events

Subsequent to December 31, 2018, the College prematurely terminated its existing 10-year office lease agreement. Under the termination terms, the lease will now expire on December 31, 2019.

The College has also entered into a new 10-year office lease agreement. The minimal annual rent payments are \$101,920 per year during the first five years of the lease term and \$109,760 per year for the second five years of the term. In addition to basic rent, the College is also responsible for paying a share of realty taxes, operating costs, utilities and additional services that are related to the office rental.

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

Schedule of Fees and Licences - Schedule 1

Year ended December 31, 2018

	2018	2017
Amendments	\$ 13,870	\$ 10,540
COMPASS Surcharge	169,125	14,875
Non-practising members	62,156	60,818
Other fees	83,878	77,165
Pharmacy (permits)	589,441	562,704
Practising members (licences)	1,831,315	1,720,309
Registration	90,210	86,305
	\$ 2,839,995	\$ 2,532,716

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SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS**Schedule of Sundry Revenue - Schedule 2****Year ended December 31, 2018**

	2018	2017
Expense recoveries	\$ 12,011	\$ 3,880
Other	62,881	13,649
Recovery of discipline costs	118,875	68,995
	\$ 193,767	\$ 86,524

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SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

Schedule of Administrative Expenditures - Schedule 3

Year ended December 31, 2018

	2018	2017
Accounting	\$ 19,091	\$ 19,023
Automobile	8,244	17,903
Building operations	188,311	113,939
Employee benefits	145,733	133,930
Equipment rental and maintenance	101,774	86,893
General office	229,723	208,404
Postage	14,052	15,675
Printing and stationary	33,668	28,011
Registrar and inspector	112,869	112,599
Salaries	1,387,556	1,177,207
Telephone and fax	21,509	22,848
	\$ 2,262,530	\$ 1,936,432



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