



SASKATCHEWAN
COLLEGE OF PHARMACY
PROFESSIONALS



Annual Report 2019

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

109th Annual General Meeting

Agenda

September TBD

WebEx

Past President: Marilyn Younghans

Registrar: Jeana Wendel

1.0 President's Welcome

2.0 Introduction of Councillors and Special Guests

3.0 Motion to Accept 2019 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

7.0 New Business

Adjournment



Contents

Report of the President	5
Report of the Registrar	9
2019-2020 Saskatchewan College of Pharmacy Professionals	33
Minutes of the 108th Annual General Meeting	36
Financial Statements	39



Marilyn Younghans, President

Report of the President

I am pleased to report on my term as President.

In my role as President, I am delighted to provide an update from Council for the Saskatchewan College of Pharmacy Professionals. Like every year, 2019 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, 2017, all community pharmacies met the requirements for participation in COMPASS, our continuous quality assurance program, and continue to do so with 404 community pharmacies meeting the bylaw requirements as of December 31, 2019. An average of 142 pharmacies are actively reporting incidents on a monthly basis and 163 Continuous Quality Improvement (CQI) meetings were conducted throughout 2019. Online training for the COMPASS program is currently available through the Continuing Professional Development for Pharmacy Professionals (CPDPP). The training goal is to provide information on medication safety, as well as training on the online COMPASS tools.

There were 56 pharmacists, two pharmacy technicians and 80 second-year PharmD students that took the online training in 2019.

The infrastructure for Quality Improvement Reviews (QIRs) was developed throughout 2019 and the program is ready to be launched in 2020. Every pharmacy will have a QIR within 18 months which will establish a baseline for the program. Based on results of the QIRs, the COMPASS committee will be making recommendations to Council as we continue to build out this new program. There is more information in the report regarding this initiative and the College’s website contains additional information 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.” A working committee was established in 2019 and conducted a member survey and analysis with respect to competency assurance. Due to other priorities throughout 2019, this initiative was added to our new five-year strategic plan commencing in 2020. Work continues to be explored within the committee around online portfolios and the use of artificial intelligence.

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 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 successful completion of the strategic human resources plan which included the creation of and hiring for a Policy and Legislation Unit, the addition of a field officer, as well as supports within licensing, registration and permits. At the end of 2019, we also said farewell to Ray Joubert, Associate Registrar, as he completed his transition to the Policy and Legislation Unit.

I am also pleased to report that for 2019 we had no vacancies on Council. Kyla Jackson, Rod Amaya, Brandon Krahn and Amy Wiebe continued into their second terms as councillors. We welcomed Bradley Cooper, Jashvant Patel and Scott Szabo to Council effective July 1 after elections in Divisions 1, 3 and 5 respectively. We welcomed Tania Horkoff to Division 7 after Council appointment in August. Stephanie Scott accepted the role of President-Elect, Rod Amaya accepted the role of Vice-President, and we continue with our four appointed public members. Finally, Palima Shrestha



replaced Meghanne Rieder as senior stick and Justin Kosar became Past President. To ensure our commitments to proper governance and strategic-based decision-making, a Council education session on Governance was held on September 24, 2019. This session was held for all regulatory bodies in Saskatchewan and facilitated by The Institute on Governance based out of Ottawa and provided an excellent opportunity to network and learn from our professional colleagues. 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. On September 25, Council participated in a full-day session facilitated by The Institute on Governance to determine the future composition of Council including terms, positions, nomination processes and competency profile. A Council Restructure Task Force was formed and was very active throughout 2019. A new Council structure and administrative bylaws will be further developed throughout 2020 with a new online election process, terms and positions for the 2021 election. Further communication will be provided to members throughout 2020.

Other yearly highlights include:

- Continued to receive quarterly reports from eHealth regarding the integrity of the Pharmaceutical Information Program (PIP) data and pharmacies' roles in ensuring the safety of the people of Saskatchewan.
- Council approved a criminal record check bylaw which received approval from the Ministry of Health and will take effect by the end of the 2020-2021 license year. This will require all members to obtain a criminal record check upon registration and periodically throughout their membership with the College.
- Received final ministerial approval and publication in the Saskatchewan Gazette in April for our travel health bylaws and final Council approval of the supporting policy framework in September. medSask and Continuing Professional Development for Pharmacy Professionals (CPDPP) training sessions were held throughout September and November.
- Held our awards ceremonies on May 3 and our annual general meeting on May 4, 2019, in conjunction with the Pharmacy Association of Saskatchewan (PAS) annual conference.

- Held our 63rd Convocation Luncheon in Saskatoon on June 6, 2019, to congratulate and welcome the pharmacy graduating class of The College of Pharmacy and Nutrition at the University of Saskatchewan.
- Held a Convocation Luncheon in Saskatoon on May 24, 2019, to congratulate and welcome the pharmacy technician graduating class from Saskatchewan Polytechnic.
- Announced SCPP's implementation plan and timelines for the National Association of Pharmacy Regulatory Authorities (NAPRA) model standards of compounding. More information regarding SCPP's CompEX (compounding excellence) program can be found within this report and on SCPP's website.
- We continued with phase II and III of our consultation with respect to the professional autonomy framework throughout 2019. The professional autonomy framework is a significant and important piece of work and as such has been added to our new five-year strategic plan. Council anticipates bylaws for pharmacy managers and a policy framework to be presented at the February 2020 Council meeting.
- Council approved of a strategy for exempted codeine products in 2019, which consists of an updated bylaw, policy documents, education and training provided by medSask/CPDPP, and supports for referrals for patients who may need to transition to alternative therapies. In addition, SCPP worked with our Prescription Review Program (PRP) partners to add exempted codeine to the PRP program for further oversight and monitoring.
- Council reviewed and discussed several proposals for harm reduction training and education for members and approved mandatory training for all practising and non-practising members by June 1, 2021. We continue to work with medSask/CPDPP to build out a training program, which will be communicated to members in early 2020.
- Council received education on indigenous health policy and discussed our role in Truth and Reconciliation and the Calls to Action and what are responsibilities are as leaders in the health care system.
- Council approved updates to Part K of the bylaws to enable disease-prevention and travel-health vaccinations as well as a Registrar exemption for prescribing in emergency situations. More information on both initiatives can be found throughout the report and on the SCPP website.
- Council approved draft bylaws on inducements and incentives for consultation and will be continuing this work throughout 2020.
- Council, staff and external stakeholders contributed to the creation of a new strategic plan for the College. Throughout 2019, with the help of an external consultant, Council approved a new five-year strategic plan that will begin in 2020. More information can be found on SCPP's website with respect to the new strategic goals and objectives and updated vision, mission and values.
- Council reviewed and approved the new Long-Term Care Standards, which is now posted on the website and a draft of the new Opioid Agonist Therapy Standards to be released in early 2020 along with harm reduction training.
- The SCPP Council, Pharmacy Association of Saskatchewan (PAS) Board and the Canadian Society of Hospital Pharmacists (CSHP) Saskatchewan Branch executive and Executive Director of Pharmacy (SHA) held our annual joint meeting on November 29, 2019.

Finally, as President I had the opportunity to attend the annual NABP/ACPP District V meeting in August in Duluth, Minnesota, and the annual Tri-Provincial meeting of officers in November in Vancouver. Both events provided opportunity to share knowledge and collaborate on important initiatives within pharmacy practice.

This report only summarizes the key issues addressed by Council and the College during 2019. 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,



Marilyn Younghans,
President





Jeana Wendel, Registrar

Report of the Registrar

President Younghans and members of the College:

I am pleased to present the annual report for the fiscal year 2019 in my capacity as Registrar-Treasurer. This report describes how the office contributes towards achieving the College's vision, mission, strategic goals and strategic direction as established by Council.

As the secretariat and treasury for the Saskatchewan College of Pharmacy Professionals (SCPP), 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 enforcing activities such as field operations (including routine and special evaluation of pharmacies, investigating 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.

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.
- Coming in 2020/2021 will be the creation and implementation of a performance management process within SCPP.

SCPP completed a successful transition from our old location at Sherwood Place downtown to our new location at Leader Place on Park and Victoria. This was a significant project and undertaking and was successfully completed at the end of August. The new location offers increased space, room for growth and an opportunity to reduce costs.

Throughout 2019, the successful implementation of our strategic human resources strategy was completed with the addition of new team members to support the College in meeting its mandate. More detailed information can be found throughout the report. There was additional focus throughout 2019 on finding efficiencies within the office, which included staff training on Microsoft email, in-depth training on our database and TEAMS, as well as a focus on creating standard work and processes for each position. This work remains ongoing to reduce the risk to the organization.

Highlights from the tables and charts that follow:

- Overall, our financial position is healthy. Our assets grew by 19% to \$4,346,468. The main contributing factor was the increase in capital and intangible assets as a result of recent lease hold improvements due to the relocation of the office to the Leader Place Building. Additional factors such as the prepaid expense for the subscription to ISMP for their resources under our COMPASS program, our accounts receivable and better than expected market conditions magnified by portfolio asset adjustments in 2019, contributed to an increase in overall assets.
- SSCP's operating fund showed a positive balance of \$91,919 which was \$67,041 more than the \$24,878 surplus that was expected in the 2019 budget. The increase was primarily attributed to higher than expected interest due to positive market conditions in 2019.
- Revenues increased by \$509,697 over 2018 due to an increased growth of members and pharmacies in addition to the Council-approved fee increases that took effect April 1, 2019.
- Current liabilities are \$666,785 higher than 2018 primarily due to higher accounts payable, higher fees collected in advance, and a deferred lease incentive to be recognized in 2020.
- Sundry revenue was higher than budgeted as the policy is not to budget for discipline fines and costs.
- Administrative costs were overbudget due to the staggered timing of the onboarding of Council approved new staffing throughout 2019.
- Legal costs continue to be high due to the volume of complaints and discipline cases and corporate legal costs. Legal costs related to discipline cases are received as part of the fines and costs payable by the member to the College.

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 attritions.

Overall changes in pharmacies (e.g. 95 pharmacy manager changes, ownership, name, relocations and renovations) continue to increase, adding to our revenue and administrative workload. 2019 also saw an unprecedented number of new store openings (22), which required a significant amount of office resources.

Routine pharmacy evaluations decreased significantly in 2019 due to the transition to Quality Improvement Reviews (QIRs), which were delayed due to external issues with our software vendor. The process for the QIRs was completed at the end of 2019 with a few test stores and will officially kick off early 2020.

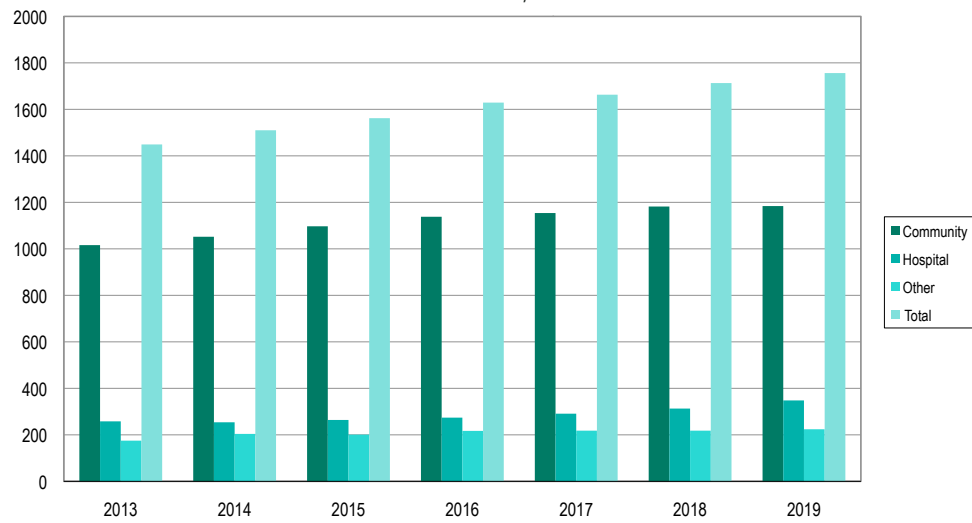
Please refer to Appendix A at the end of this report for a more detailed breakdown of our membership and community pharmacy data.

Regarding complaints and discipline, disturbing trends are:

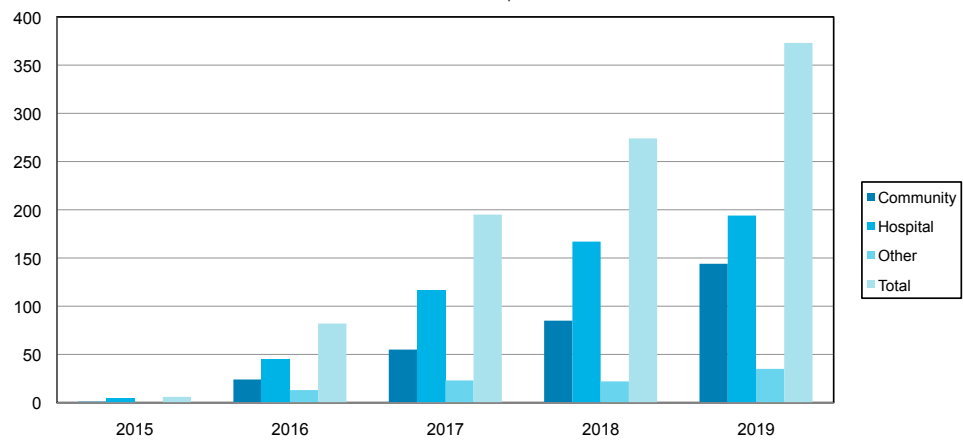
- Formal complaints referred to the Complaints Committee remain heavy and continue to increase in complexity;
- Increasing referrals to discipline in spite of increased utilization of our alternative dispute resolution processes continue to be of concern;
- The number of informal complaints not referred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

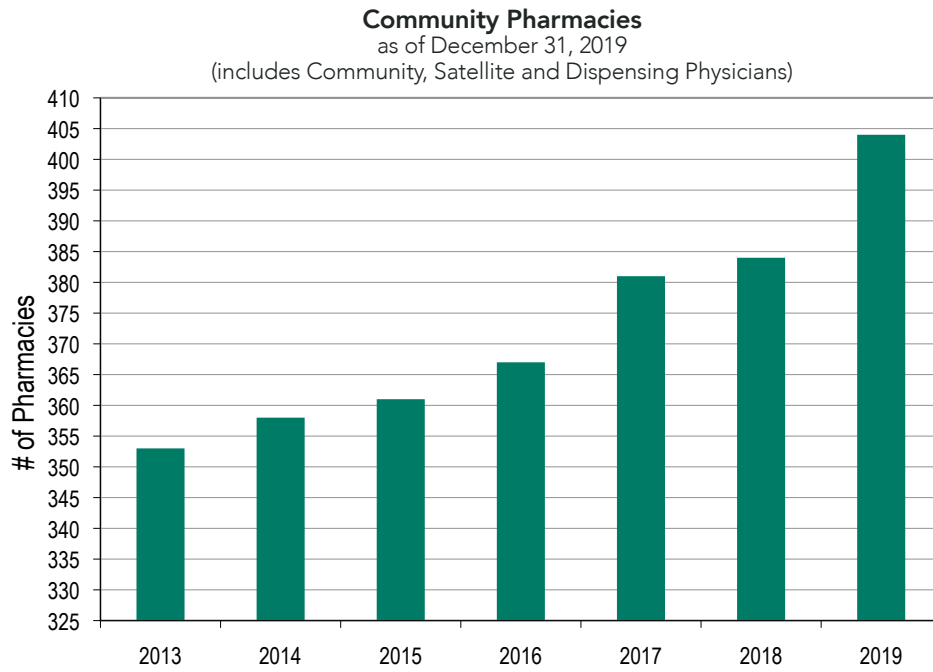
We have reinstated our complaints satisfaction surveys and continue to examine instruments to collect data to help explain these trends and inform preventive strategies. The increasing number of complaints related to attitude and behaviour, plus billing irregularities, are of particular concern.

Practising Members – Pharmacists as of December 31, 2019



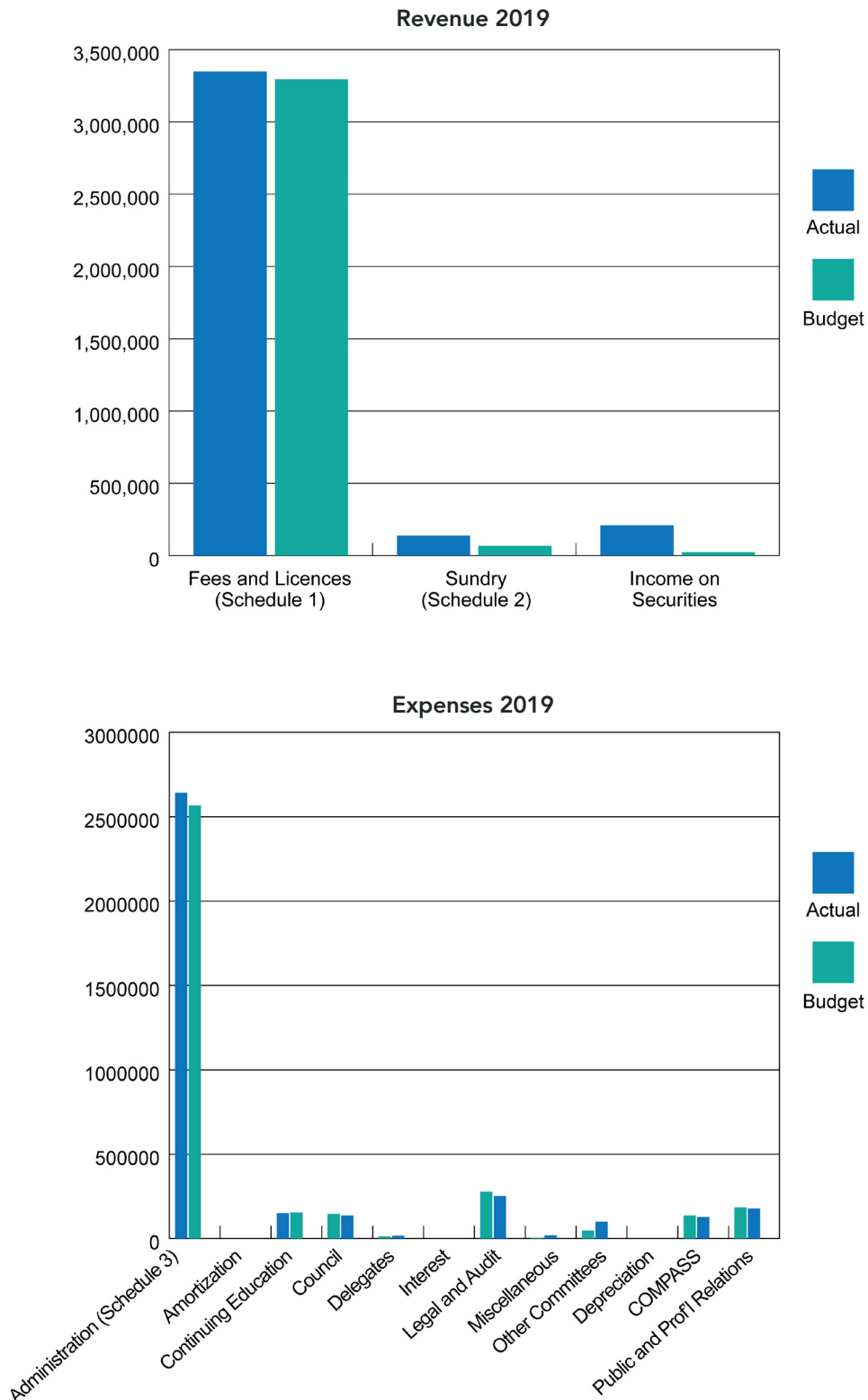
Practising Members – Pharmacy Technicians as of December 31, 2019





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:



Policy and Legislation Unit

In 2019, the College created a Policy and Legislation Unit to support a risk management approach to achieving its vision, mission, mandate and goals. Building on steps taken in 2018 to strengthen its health care policy-making capacity (with the hiring of a part-time policy analyst), three additional staff were hired including a Director of Policy and Legislation in May, and two new Policy Pharmacy and Professional Practice positions (one full-time permanent and one two-year term position) in September and November. Associate Registrar, Ray Joubert was acting in this role early in 2019 and assisted with the transition to the team at which point he officially retired at the end of 2019.

Deliverables of the Policy and Legislation Unit in 2019 include:

- Five new and/or amendments to regulatory bylaws:
 - Part I, Section 8(4) – Privacy Officer – setting training requirements for every privacy officer in a proprietary pharmacy. (February)
 - Part K, Subsection 12(2)(a) and 12(6) – Continuous Quality Improvement – setting anonymous reporting and training requirements to support the COMPASS program. (February)
 - Part K, Section 9 – Prescribing for Minor Ailments, self-Care and Preventable Diseases – authorizing pharmacists to prescribe certain drugs and vaccines for preventable diseases subject to meeting guidelines and other training requirements, forming part of a disease prevention and travel health services framework. (July)
 - Part K, Section 10 – Prescribing of Drugs – authorizing pharmacists to prescribe in extraordinary circumstances as determined by the College, when it is in the public interest. (November); and
 - Administrative edits to Part N – Schedule I Drugs.
- Steps have also been taken to update and develop a document control system to ensure that expectations and requirements are clearly articulated for members, pharmacy managers and proprietors. To assist with this, the following have been developed:
 - Risk Matrix to assist with the prioritization of Reference Manual documents to be updated;
 - Standard Template for Reference Manual documents with consistent terms, so that members, pharmacy managers and proprietors understand the expectations and the degree of enforceability (i.e. standards, guidelines, policy);
 - A database has been created to track progress.
 - As of December 2019, there were 122 Reference Manual documents, of which 38% have been confirmed and updated. The breakdown includes:
 - 8 documents have been removed;
 - 6 new documents were created to support the new Travel Health and Preventable Diseases framework, the seasonal flu program and the new exemptions to prescribing authority
 - 33 documents were confirmed up to date within the past four years.

These processes will build the foundation for addressing the strategic and operational priorities identified for 2020 and beyond.

Field Operations

New Quality Improvement Reviews (QIRs)

With the implementation of the COMPASS Continuous Quality Improvement Program in 2017, a new Quality Improvement Review (QIR) process was developed for practice reviews. The change in name from Professional Practice Reviews (PPRs) reflects a change in the focus of the review process — moving from confirming compliance, to coaching and assisting pharmacy staff in their quality improvement efforts. This change is intended to help achieve the desired culture of safety within Saskatchewan pharmacies.

The focus of the new reviews centres on safety activities within community pharmacies, including medication incident reporting and reviewing the Medication Safety Self-Assessment (MSSA), reviewing the improvement plan and employing a MedSCIM (Medication Safety Cultural Indicator Matrix), with the goal of ensuring all pharmacy staff are actively looking for ways to decrease incidents and ensure medication safety is continually reviewed and addressed.

The new QIR process contains several similarities to the previous PPR process, such as the pharmacy manager completing a self-assessment prior to scheduling a review and a report being provided at the end of the QIR, summarizing any recommendations and follow-up issues.

Virtual Pharmacy Visits

One significant difference in the QIR process is that most QIRs will be performed virtually via an internet application (ConnectWise) instead of in-person. There may be situations that still require an onsite visit.

During the virtual visit, the field officer connects to the community pharmacy's computer to review safety-related tools. The field officer asks the pharmacy manager or Quality Improvement (QI) coordinator to go to the CPhIR website to assess the safety work completed. The objective is to review the narrative of incidents to assist pharmacy staff in improving the completeness of their reporting and help them better identify the root cause of the incidents. The MSSA graphics and improvement plan are also reviewed.

Once the review is complete, the pharmacy manager is provided with a report of the review that includes recommendations for improvement and potential resources that can help the pharmacy staff with quality improvement efforts.

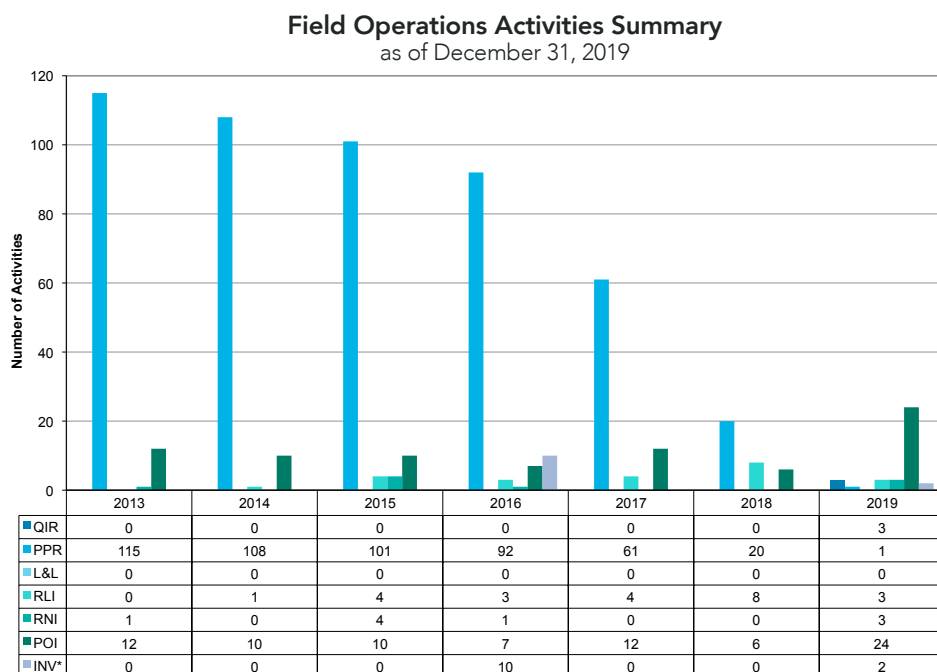
Field Operations Summary

Due to the transition from Professional Practice Reviews (PPRs) to Quality Improvement Reviews (QIRs), there were no formal PPRs completed in 2019 other than one narrowly focused practice review.

During 2019, online processes and forms were developed. Testing also began and three reviews were conducted with test pharmacies as part of the implementation of the new QIR process.

Additional staff members were added to the Field Operations team in anticipation of the transition from PPRs to QIRs: two field officers — Brittany Sharkey (PhT) and Fatima Khan (BSP); and Meaghan Underwood as the Administrative Coordinator for Field Operations and Quality Assurance.

Regular activities are summarized as follows:



Key

PPR = Professional Practice Review

QIR = Quality Improvement Review

L&L = Lock and Leave Inspection

RLI = Relocation Inspection

RNI = Renovation Inspection

POI = Pre-opening Inspection

INV = Complaints Follow-up Inspection

Summary

The new process for the virtual completion of pre-opening, renovation and relocation inspections via the Skype for Business application that was initiated in 2018, continued in 2019. The number of inspections completed via Skype increased and were similar to the number inspections completed in person.

In-Person	Skype
13 pre-opening inspections	11 pre-opening inspections
2 renovation inspections	1 renovation inspection
1 relocation inspection	2 relocation inspections

The process of using virtual (Skype) inspections was well received by pharmacy managers and field officers. Virtual inspections for pre-opening, renovation and relocation will continued to be used. However, when appropriate, some inspections will be completed in person.

Other Field Operation Activities

- Jeannette Sandiford participated in the Canadian Pharmacists Association (CPhA) conference including presenting a poster at the conference and participates on the National Association of Pharmacy Regulatory Authorities (NAPRA) Medication Incident Reporting (MIR) Working Group. Jeannette also provides support to the COMPASS Committee and collaborates with counterparts in other provinces when appropriate.
- Brittany Sharkey participated in two conferences including being on a panel for the Pharmacy Association of Saskatchewan (PAS) conference and presenting at the Pharmacy Technician Society of Saskatchewan (PTSSK) conference. Brittany also participates on the NAPRA Sterile Compounding Working Group and NAPRA Non-Sterile Compounding Working Group. She is a staff resource for the Professional Practice Committee and has been involved with preparing videos and webinars for Compounding Excellence (CompEX).
- Fatima Khan has prepared documents for SCPP's newsletters and reference manual.

All field officers have been involved with answering member inquiries and questions.

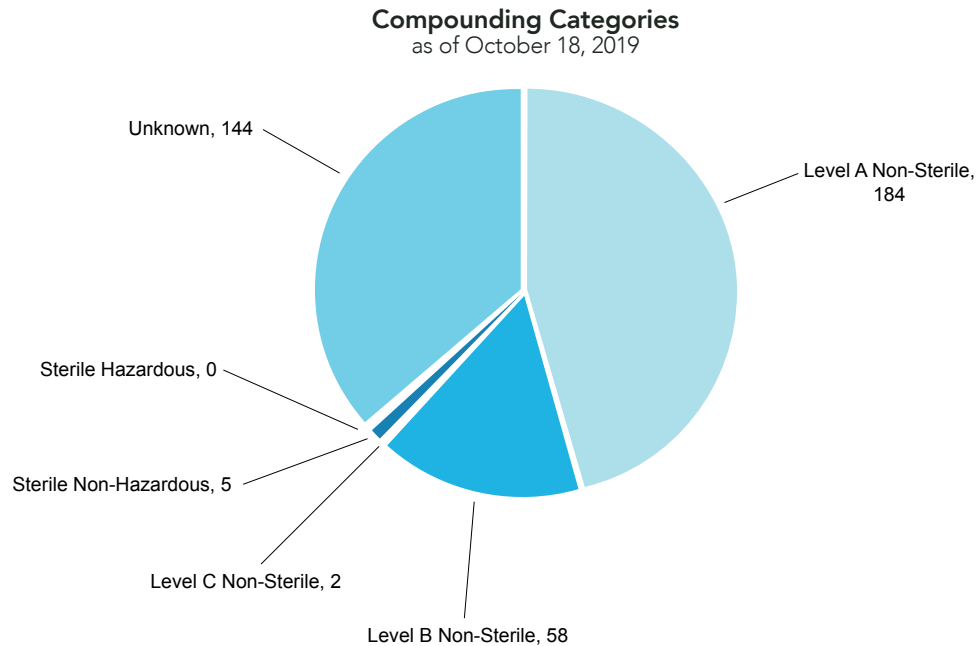
CompEX – Compounding Report

SCPP announced the implementation schedule for the NAPRA Model Standards for Pharmacy Compounding of Hazardous Sterile Preparations, Non-Hazardous Sterile Preparations and Non-Sterile Preparations in a special edition of the MicroSCOPE newsletter on February 19, 2019. SCPP branded the implementation of the NAPRA standards as CompEX, which stands for Compounding Excellence.

Throughout March, April and May, members were expected to read the standards applicable to their pharmacy practice, complete a risk assessment to identify the Level of non-sterile compounding and complete and submit a Compounding Declaration and Gap Analysis. SCPP developed a risk assessment video using methadone as an example to support members in understanding the required steps to completing a risk assessment. As of October 18, 2019, 144 (36%) of pharmacies had yet to submit their Compounding Declaration and Gap Analysis to SCPP. These pharmacies were sent a reminder email on December 3, 2019, to bring compliance to 100%.

Compounding Practice Breakdown

- Level A (simple non-sterile compounds where the ingredients present minimal exposure risk to pharmacy personnel) = 184 pharmacies
- Level B (non-sterile compounds that pose a greater exposure risk to pharmacy personnel) = 58 pharmacies
- Level C (non-sterile compounds involving hazardous drugs or hormones) = 2 pharmacies
- Sterile Non-Hazardous = 5 pharmacies
- Sterile Hazardous = 0



To address common questions being raised by members and to further aid in understanding the Standards for Pharmacy Compounding, SCPP held a live Compounding Q&A Webinar on June 13, 2019, with support from Continuing Professional Development for Pharmacy Professionals (CPDPP). The webinar was recorded and is posted on the SCPP website and available as a free Continuing Education opportunity for both pharmacy technicians and pharmacists. Feedback provided on the webinar was very positive and there are plans to arrange more throughout 2020.

To ensure consistency across Canada, SCPP's Certified Compounding Inspector – Field Officer sits on the NAPRA Working Groups for Sterile and Non-Sterile Compounding. The focus of these groups has been to ensure consistency across Canada.

Following the announcement of the implementation schedules, several pharmacy managers consulted with the Certified Compounding Inspector – Field Officer. From these inquiries, six compounding specific visits (four in Saskatoon, one in Melfort and one in Prince Albert) were conducted to provide clarity and support to the pharmacy teams. In addition to pharmacy visits, pharmacies have been submitting pictures and videos of their spaces to the Certified Compounding Inspector – Field Officer for consultation. This has been offered as an option to support pharmacy managers who have called or emailed with questions around their facility compliance.

Over the summer, the Compounding Declaration and Gap Analysis submissions were reviewed, which identified the need for more education on defining the requirements of the NAPRA Model Standards for Pharmacy Compounding. During this time the NAPRA compounding working groups identified the need for National competencies to be developed. NAPRA has since contracted Nancy Winslade to develop these competencies by the end of 2020. The established competencies will guide the development of education to support competency in compounding.

Deputy Registrar

Lori Postnikoff is our Deputy Registrar and in this role:

- Oversees our registration, licensing and pharmacy permit system.
- Oversees 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, Competency Assurance and Professional Practice committees. This results in preparing reports and important recommendations to Council. For example:
 - Supported our Professional Practice Committee on the proposed private patient-care areas, advisory committees to update the long-term care standards and, in collaboration with Continuing Professional Development for Pharmacy Professionals, updated guidance for members in terms of new Opioid Agonist Therapy Standards.
- Supported our Registration and Licensing Committee on updating the policies and recommended legislative changes to the Appraisal Training and Assessment process for internationally trained pharmacists and former members returning to practice and developed a policy and recommended bylaw requirements for criminal record checks.
- Continues to support the Competency Assurance Committee in the development of a new competency assurance program and process for Saskatchewan pharmacy professionals.
- Serves on the National Association of Pharmacy Regulatory Authorities (NAPRA) Pilot Program to Prepare for Practical Training (P4T) working group for mentorship program development for internationally trained pharmacy graduates.
- 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.
- Provides instruction to the College of Pharmacy and Nutrition students in the PHAR112 class regarding issues of drug diversion and drug misuse.



Community Pharmacy Professionals Advancing **Safety** in Saskatchewan

The Community Pharmacy Professionals Advancing Safety in Saskatchewan (COMPASS) Continuous Quality Improvement (CQI) program became mandatory in Saskatchewan community pharmacies, December 1, 2017. Since this implementation date, there have been over 25,000 medication incidents reported into the Community Pharmacy Incident Reporting (CPhIR) system. On average, 142 pharmacies are reporting each month.

Standardized Continuous Quality Improvement Tools for COMPASS

The standardized continuous quality improvement tools used for COMPASS were developed by the 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. The surcharge also includes an administrative fee for the program.

Breakdown of surcharge:

CPhIR subscription	\$ 340.00
Administration fee	<u>\$ 160.00</u>
Total COMPASS surcharge	\$ 500.00



Number of Participating Pharmacies

As of December 31, 2019, there were a total of 404 community pharmacies that met the bylaw requirements for participation in COMPASS.

Training

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

There were 138 individuals, 56 pharmacists, two pharmacy technicians and 80 second-year PharmD students that took the online training in 2019.

The College of Pharmacy and Nutrition at the University of Saskatchewan added the COMPASS training to the curriculum for the second year of the PharmD program, September 2018, thereby making COMPASS training mandatory for all second year PharmD students.

Communication

To ensure pharmacy staff members were well-informed about emerging trends, standards of practice and requirements of the COMPASS program, communications were provided throughout 2019, by email and via newsletter articles in SCOPE, SMART Medication Safety agendas and the [directions] newsletter.

To facilitate communication between the Saskatchewan College of Pharmacy Professionals (SCPP) and the COMPASS pharmacies, the [directions] newsletter was developed in 2015. The newsletter is intended to provide pharmacies with information about using the COMPASS tools, relevant safety information, education opportunities around safety, other initiatives [example, Pharmaceutical Information Program's Quality Improvement Program (PIP QIP)], and any "good catches." Four editions of the [directions] newsletter were published and distributed in 2019.

Pharmacy Safety Resources

To assist pharmacy staff with education for the COMPASS program, a number of online resources are available on the College website (www.saskpharm.ca).

Resources added to the COMPASS tab on the website include:

- [Summary: An Assessment of Safety Culture in Saskatchewan Community Pharmacies](#)
- [Full Report: An Assessment of Safety Culture in Saskatchewan Community Pharmacies](#)

Statistics

Statistics for incident reporting in the CPhIR system from September 2013 (Phase I) until the end of December 2019:

Total number of incidents reported: 25,085

Total number of pharmacies that have entered at least one incident: 373

The top five types of incidents:

Incorrect dose/frequency:	5,934
Incorrect quantity:	4,465
Incorrect drug:	4,105
Incorrect strength/concentration:	2,475
Incorrect patient:	2,101

Outcomes of reported incidents:

No error:	15,956
No harm:	8,514
Harm:	615

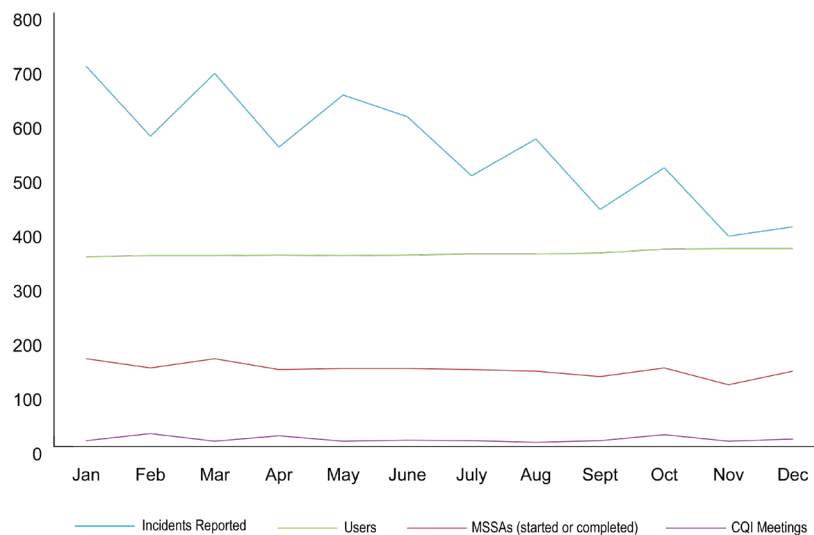
The total number of pharmacies since Phase 1 that have started or completed their MSSA was 365. As well, the total number of CQI meetings held during that time was 493.

COMPASS Statistics

Number of incidents, users and COMPASS activities for 2019

Month	Incidents reported	Users	MSSAs (started or completed)	CQI Meetings
January	701	162	350	11
February	572	145	352	24
March	688	162	352	10
April	552	142	353	20
May	648	144	352	10
June	608	144	353	12
July	499	142	355	11
August	567	139	355	8
September	437	129	357	11
October	514	145	364	22
November	388	114	365	10
December	405	139	365	14

COMPASS Activities – 2019



The above chart shows the number of pharmacies (users) submitting incidents have remained fairly steady over the year. On average there were 142 pharmacies reporting each month to the CPhIR program. The highest number of users was seen in January and March, which corresponds with the highest number of incidents reported. There was an overall decline in the number of incidents reported over the year. However, there was a lot of variation and some increases seen from one month to the next.

Medication Safety Self-Assessments (MSSA) completed or started saw a steady increase over the year. This was likely due to the number of new pharmacies that were opened. Because most of the MSSAs were completed initially in 2017, and they must be completed every two years, pharmacies should be in the process of completing their second MSSA. CQI meetings held month to month remained fairly steady throughout the year. The highest number of meetings were held in February and lowest number in August.

Monitoring Effectiveness of COMPASS

To monitor the effectiveness of the COMPASS program and identify areas for improvement, the COMPASS Committee was created, which met for the first time in October 2019. The committee is comprised primarily of Quality Improvement (QI) Coordinators, but also includes hospital representation and academia.

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. It is anticipated that a SAQ will be completed about every two years. Results from subsequent questionnaires will be compared to the initial results to monitor advancement of the safety culture within Saskatchewan community pharmacies. The final report of the initial survey is available on the SSCP website for review.

Monitoring quality improvement activities in pharmacies during the Quality Improvement Reviews (QIRs) was anticipated to begin early in 2019. However, due to issues with the online form development, test QIRs did not begin until November 2019. Three test QIRs were completed by the field officers using the ConnectWise™ program. It is anticipated that each pharmacy will be "visited" within an 18-month time frame from January 2020 to August 2021.

The Medication Safety Cultural Indicator Matrix (MedSCIM) tool is one of the assessment tools that will be used during the QIR process. The MedSCIM tool measures the completeness of the medication incident reporting and the maturity of the safety culture within a pharmacy.

Report of the Complaints Committee

The Complaints Committee operates as a Committee of the College pursuant to *The Pharmacy and Pharmacy Disciplines 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.

Complaint Committee Activities

In 2019, the Complaints Committee met in person on four occasions and conducted two teleconferences to review files.

The Committee, upon review of the 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 members 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:

Reviewed 1 file which remained open from **2017**, closing 0 files:

- 1 file remains open for investigation

Reviewed 16 files which remained open from **2018**, closing 10 files:

- 8 files closed with no further action
- 2 files closed with cautionary letters to the member(s)
- 3 files were referred to ADR
- 3 files were referred to the Discipline Committee

Reviewed 40 files from **2019**, closing 21 files:

- 8 files closed with no further action
- 8 files closed with an apology
- 5 files closed with cautionary letters to the member(s)
- 9 files remain open for investigation
- 3 files were referred to ADR
- 1 file was referred to Fitness to Practise
- 6 files were referred to the Discipline Committee

Of the 40 files received in 2019, 12 files were initiated by SCPP while 28 files were submitted by members of the public.

Discipline Hearings

Three files referred to a Discipline Hearing in 2017 were heard in 2019. Five files referred to a Discipline Hearing in 2018 were heard in 2019. There are seven files remaining to have a Discipline Hearing in 2020.

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 2019 for your cooperation in responding to the Committee.

Complaints

The disposition of the complaints files is summarized as follows:

COMPLAINTS SUMMARY	2013	2014	2015	2016	2017	2018	2019
New files	49	32	37	38	33	51	40
Closed files	45	38	32	32	33	26	21
Files referred to Discipline Committee	7	0	2	5	7	7	6
Files referred to Alternative Dispute Resolution Process (ADR)	3	1	4	3	6	4	4
Files open for investigation	9	5	7	12	14	14	9

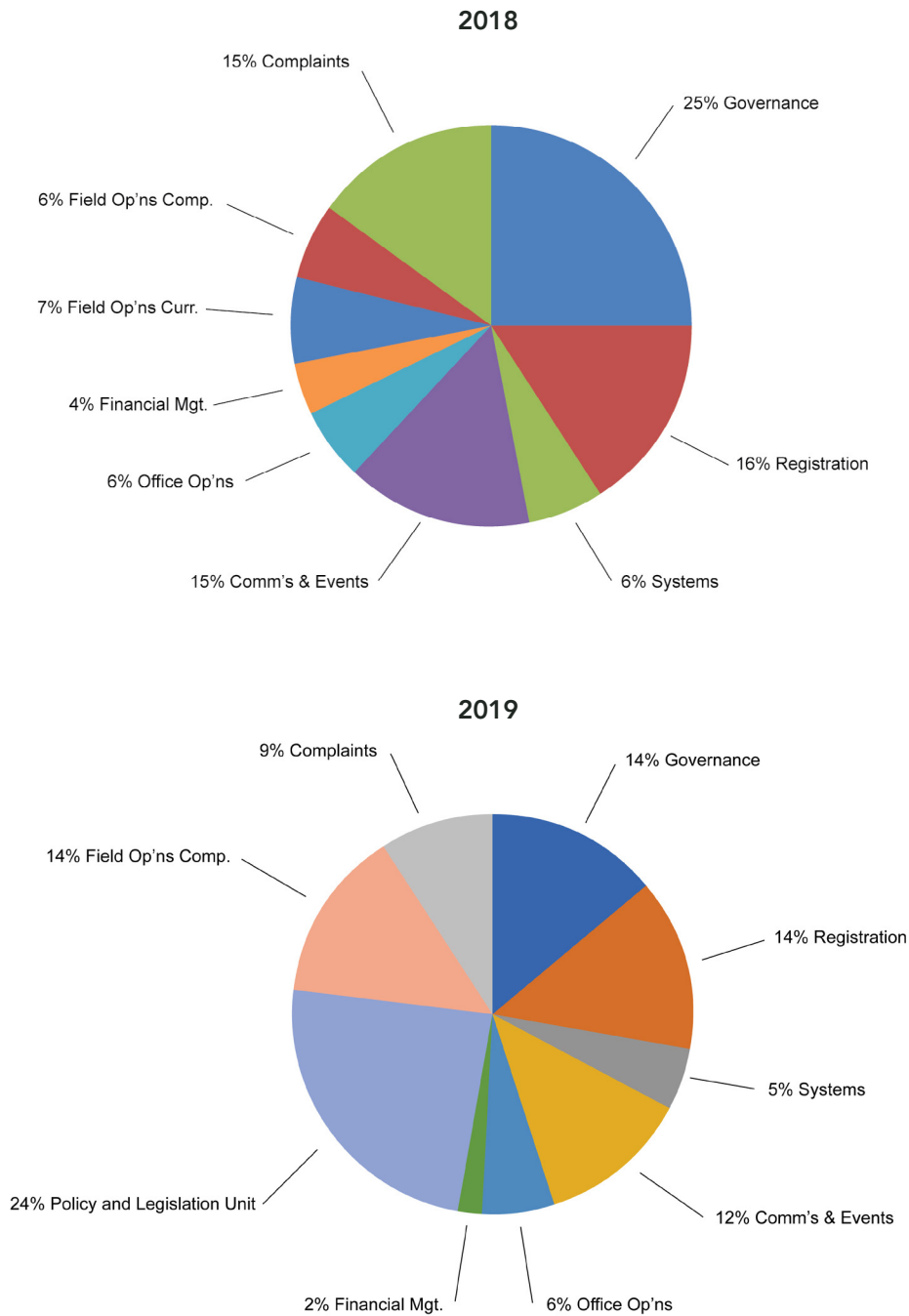
The trends in the types of complaints by allegation are summarized as follows:

TYPE OF COMPLAINT BY ALLEGATION	2013	2014	2015	2016	2017	2018	2019
Advertising	0	0	0	2	1	1	0
Alcohol/Drug Abuse	1	2	1	2	1	1	1
Communication/Unprofessional Behavior	8	24	26	30	23	25	17
Medication Errors	8	11	12	17	14	22	10
Record Keeping	1	1	4	1	5	1	1
Bylaws/Standards/Guideline/Ethical Infractions	4	7	11	9	16	6	16
Prescription Transfers	1	2	0	0	0	2	2
Billing Irregularities/Overcharging	1	4	2	1	11	9	1
Inappropriate Product Selection	0	1	0	0	1	0	0
Unsupervised Assistant	2	4	2	0	1	0	0
Prescription Short Fills	4	4	0	2	1	1	1
Pharmacist Not on Duty	0	1	0	0	3	0	3
Dispensing Without Authority	1	2	2	2	3	1	4
Breach of Confidentiality/Privacy	11	6	7	7	3	6	5
Adverse Drug Reaction (otc)	8	0	2	0	3	0	2
Refusal to Fill	7	4	3	3	3	1	2
Patient's Right to Choose Pharmacy	5	6	2	0	1	2	1
Privacy/Pharmacy Assistant	-	4	8	0	0	1	1
Miscellaneous/Other	2	12	16	29	5	24	22
Proprietary					8	0	5
Injection					5	1	3
TOTAL	*58	*95	*98	*105	108	104	97

*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

Other Activities of the Registrar's Office

As part of the 2016-2019 strategic plan, staff responsibilities were defined within functional units to measure and ensure resources were being aligned to priorities. The results below reflect 2018 and 2019, respectively.



NOTE: Some changes to the units in 2019 as the staff expanded – Field Operations and COMPASS were combined into one unit in 2019 called Field Operations and Quality Assurance. A new unit for Policy and Legislation was developed that split out some of the original governance work.

Analysis Between 2018 and 2019:

- In 2019, 38% of staff time was spent on Governance and Policy and Legislation as compared to 25% in 2018.
- Registration and Licensing decreased to 14% from 16% due to efficiencies gained within the database.
- Systems decreased from 6% to 5% due to efficiencies.
- Communication and Events dropped from 15% to 12% as we hosted more events in 2018 - NABP District V and the Tri-Provincial meeting.
- Office Operations were consistent over last year.
- Financial management decreased slightly as the transition was completed halfway through 2018, which included more resources dedicated to financial management.
- Quality Improvement and COMPASS/Field Operations increased to 14% versus 6% (combined field operations and COMPASS).
- Complaints decreased from 11% to 9%, as in 2018 the Deputy Registrar was assisting in Complaints to support new staff and finish some open files.

Other Activities of the Registrar's Office included:

- Published five regular editions of SCOPE, our e-newsletter, plus seven editions of microSCOPE and five editions of CompEX microSCOPE.
- Planned our 108th Annual General Meeting at the Elk Ridge Lodge in Waskesiu in conjunction with the Pharmacy Association of Saskatchewan (PAS) Conference.
- Continued collaboration with the College of Pharmacy and Nutrition to facilitate professional development activities for members, in particular, the updating of our privacy officer training and re-certification as well as the creation of training and education for vaccine preventable diseases and travel health in addition to their regular 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 (PRS) of Saskatchewan Ministry of Health.
- At the end of 2019, successfully completed 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 Pharmaceutical Information Program (PIP) Quality Improvement Project and continued quarterly meetings with eHealth and the Ministry of Health. As part of the Quality Improvement Review (QIR) process, the field officers will be actively working with pharmacy managers to ensure compliance with and proper management of the PIP data to ensure quality data for the safety of Saskatchewan patients.
- Continued to participate in collaborative initiatives like the Network of Interprofessional Regulatory Organizations (NIRO), joint Board/Council meetings with the Pharmacy Association of Saskatchewan (PAS), Canadian Society of Hospital Pharmacists (CSHP) Saskatchewan Branch and the Prescription Review Program (PRP). NIRO consists of representatives from the governing bodies for all health professions in Saskatchewan and meets twice per year to share information and discuss issues of mutual interest. A successful full day of governance training was offered to all health care board and council members in Saskatchewan from a governance expert from the Institute on Governance in Ottawa.

- As a founding and funding partner in the Saskatchewan Institute of Health Leadership (SIHL), continued liaison and sponsorship of two candidates.
- Staff members continue our 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.
- Policy development and issues management required considerable staff involvement in research, coordinating and drafting documents.
- Successful completion of the pharmacy technician bridging program at the end of 2019.
- Enhanced cyber security both internally and externally.
- Continued to liaise with the funding partners of the Prescription Review Program (PRP) and participated in updating of the PRP bylaw to include new drugs.
- Provided administrative support to Council and the Audit and Finance Committees.
- An active member for the provincial working group for Medical Assistance in Dying in Saskatchewan, meeting on a quarterly basis to review cases for quality assurance.
- Continue to sit on the Provider Advisory Committee for MySaskHealthRecord for Saskatchewan.
- Continue to regularly meet with the Opioid Health Stakeholders to collaborate on initiatives for the opioid crisis.
- Worked collaboratively with the College of Physicians and Surgeons of Saskatchewan (CPSS) and Health Canada to enable a Section 56 exemption between April 1 and September 30 for Saskatchewan pharmacists to prescribe for methadone and suboxone due to a crisis with four Saskatchewan physicians leaving 1300 plus patients without an Opioid Agonist Therapy (OAT) provider.
- Continue to meet monthly with CPSS to discuss and collaborate on initiatives.
- The President and Associate Registrar attended the NABP/AACP District V Annual Meeting located in Duluth, Minnesota in August.
- Officers of Council and the Executive Leadership team attended the Tri-Provincial meeting between British Columbia, Alberta and Saskatchewan in Vancouver, B.C. in November to continue to collaborate with our provincial counterparts.



Conclusion

On behalf of all staff, I extend our sincere appreciation to President Younghans 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 (David Chou, Peleshia Dubidad, Pat Guillemain, Kathleen Handford, Ray Joubert, Fatima Khan, Darlene King, Chantal Lambert, Christina McPherson, Heather Neirinck, Lori Postnikoff, Natalie Rediger, 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,

A handwritten signature in black ink, appearing to read 'J. Wendel', written in a cursive style.

J. Wendel, Registrar-Treasurer 2019



Appendix A

Membership Statistics							
As of December 31	2013	2014	2015	2016	2017	2018	2019
PHARMACIST							
Practising							
Community:	1016	1049	1097	1128	1154	1174	1174
Hospital:	258	254	264	274	286	312	346
Other:	175	204	201	217	217	218	224
Conditional:	5	3	6	10	6	9	12
Total Practising	1454	1510	1568	1629	1663	1713	1756
Non-Practising	45	42	43	46	51	51	53
Retired	97	99	104	102	106	108	95
Associate	51	48	47	44	41	37	30
Suspended						1	2
PHARMACY TECHNICIAN*							
Practising							
Community:			3	24	55	85	144
Hospital:			3	45	117	167	194
Other:			0	13	23	22	35
Conditional:			0	0	0	0	0
Total Practising			6	82	195	274	373
Non-Practising				0	2	1	5
Retired				0	0	0	0
Associate				0	0	0	0
TOTAL MEMBERS:	1647	1699	1762	1903	2058	2185	2314
PHARMACIES							
Community:	337	343	346	351	365	370	390
Satellite:	8	8	8	9	10	8	8
Dispensing Physician:	7	7	7	7	6	6	6
Internet:	0	0	0	0	0	0	0
TOTAL PHARMACIES:	352	358	361	367	381	384	404

* Regulation of pharmacy technicians did not begin until October 2015

Pharmacy Changes During 2019

- 22 Openings
- 3 Closures
- 95 Manager Changes
- 13 Pharmacy Ownership Changes
- 12 Corporate Share Purchases
- 3 Trade Name Changes
- 3 Relocations
- 14 Renovations
- 3 Lock and Leave Permits Issued
- 30 Lock and Leave Amendments

Prescriptive Authority – % of Licensed Pharmacists

- 100% Prescriptive Authority Level I Trained
- 98% Prescriptive Authority Minor Ailments Trained

Registration and Membership Statistics 2019

International Pharmacy Graduates (IPGs)

- 30 approved for Appraisal Training
- 26 engaged in Appraisal Training
- 15 completed Appraisal Training/Assessment process

PHARMACIST

Total Registration: 118

Saskatchewan BSP Graduates: 79

- 63 Registered as Conditional Practising
- 16 Registered as Practising

Candidates from Other Jurisdictions: 39

- 26 Candidates from other Canadian Provinces
- 13 International Pharmacy Graduates

Reinstatements: 11

Total Terminations: 104

- 68 Non-Payment of Dues
- 36 By Request

Members Deceased: 3

Converted to Retired Membership: 13

PHARMACY TECHNICIAN

Total Registration: 119

Saskatchewan Polytechnic Graduates: 5

Non-CCAPP Graduates: 85

CCAPP Graduates: 27

Candidates from Other Jurisdictions: 2

Reinstatements: 1

Total Terminations: 19

Appendix B

Financial: For the Fiscal Year Ended December 31, 2019				
	Actual	Budget	Variance	Comments
REVENUE				
<i>Fees and Licenses (Schedule 1)</i>				
Pharmacy permit amendments	19,720	17,500	2,220	
Non-Practising members	71,561	73,055	(1,494)	
Other fees	125,879	128,050	(2,171)	
Pharmacy permits	619,680	589,793	29,887	Increase in number of pharmacies
Practising members (licences)	2,213,553	2,198,425	15,128	Increase in number of members
COMPASS Surcharge	205,667	200,106	5,561	
Registration	93,632	88,770	4,862	
Sub-total	3,349,692	3,295,699	53,993	Due to higher numbers of members and pharmacies
<i>Sundry (Schedule 2)</i>				
Expense recoveries	(5,009)	3,879	(8,888)	Negative due to an adjusting accounting entry
Other	61,426	67,013	(5,587)	Budget was approved to use \$193,042 from reserves which is not added here
Recovery of discipline costs	82,420	-	82,420	Policy is not to budget for Discipline costs
Sub-total	138,837	70,892	67,945	
Investment Income	211,362	25,000	186,362	Reallocated investments and 2019 was a good market
Total	3,699,891	3,391,591	308,300	
EXPENSES				
<i>Administration (Schedule 3)</i>				
Accounting	22,223	18,604	3,619	
Automobile (lease, operating)	-	-	-	
Building operations	270,967	261,400	9,567	
Employee benefits	177,825	216,242	(38,417)	Does not include year end adjustment for pension accrual of \$24,724
Equipment rental/maint./software	108,722	111,394	(2,672)	
General office	170,407	160,559	9,848	Increase due to office training on systems for efficiencies
Postage	21,259	13,996	7,263	Pending reimbursement for costs to support U of S Pharmacy Masters Student
Printing and stationery	28,889	34,047	(5,158)	Able to use up current stationary with move
Travel Registrar and Inspectors/Field Officers	104,856	119,273	(14,417)	Less travel than expected and some NAPRA reimbursement that was not expected
Salaries	1,708,438	1,607,397	101,041	Higher than budgeted due to timing of onboarding of new staff throughout 2019
Telephone and fax	30,583	23,608	6,975	Increased cost with move and new offices
Sub-total	2,644,169	2,566,520	77,649	
Amortization	62,602		62,602	
Continuing education	150,595	154,450	(3,855)	
Council	147,134	136,852	10,282	Increased Council meeting for Council restructure and governance training
Delegates	12,640	17,110	(4,470)	Less travel than expected
Interest	4,736		4,736	
Legal and audit	278,042	252,464	25,578	Increased corporate legal costs specifically for bylaws
Miscellaneous	5,412	19,304	(13,892)	
Other committees	47,851	100,918	(53,067)	Less committee work due to shifting of priorities from 2019 to 2020 and beyond for strategic plan
Public and professional relations	184,189	178,430	5,759	Addition \$5,000 approved by Council for medSask Project
COMPASS	136,737	128,124	8,613	Increase in number of pharmacies
Total	3,674,107	3,554,172	119,935	
Deficit or Excess of revenues over expenses	25,784	(162,581)	188,365	Reserves of \$193,042 were budgeted for 2019, however they were not utilized.

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

2019-2020 Saskatchewan College of Pharmacy Professionals

Council, Committees, Appointees and Administration

Legend

*Chair

O = Officer

P = Public Member

A = Advisory (Non-Voting)

S = Staff Resource

Council/Executive

Marilyn Younghans, President*

Stephanie Scott, President-Elect

Rod Amaya, Vice-President & Division 4

Justin Kosar, Past-President

Bradley Cooper, Division 1

Kyla Jackson, Division 2

Jashvant Patel, Division 3

Scott Szabo, Division 5

Brandon Krahn, Division 6

Tania Horkoff, Division 7

Amy Wiebe, Division 8

Jane Alcorn, Ex Officio

Yvonne Shevchuk, Designate Ex Officio

Bonnie Caven (P)

Mark Hawkins (P)

Michael Lummerding (P)

George Thomas (P)

Lyndsay Brakstad, Pharmacy Technician Observer (A)

Michelle Miller, Pharmacy Technician Observer (A)

Palima Shrestha, Senior Stick (A)

Committees

Audit

Marilyn Younghans

Stephanie Scott

Rod Amaya

George Furneaux

Bill Gerla

Jeana Wendel (S)

Awards and Honours

Monica Lawrence*

Zack Dumont

Shauna Gerwing

Arlene Kuntz

Bridget Zacharias

Lori Postnikoff (S)

Competency Assurance Committee

Karen Jensen*

Louisa Chan

Robyn Federko

Sue Mack-Klinger (delegate)

Rizza Pardillo

Dawn Rietdijk

Blair Seifert

Maria Sherring

Erin Yakiwchuk

Danielle Larocque (A)

Lori Postnikoff (S)

Complaints

George Furneaux (until September 2019)

Stan Chow* (until September 2019)

Barbara deHaan (P) (until December 2019)

Lori Friesen

Bill Gerla (as of September 2019)

Michael Hewitt*

Janet Markowski (until June 2019)

Manan Patel

Ian Rea (P) (as of September 2019)

Jenna Soehn

Chantal Lambert (S)

Tami Schwebius (S)

Discipline

Mike Davis*

Lyle Brandt

Brad Cooper (until June 2019)

Dean German (until September 2019)

Spiro Kolitsas

Cheryl Lalonde

Michael Lummerding (P)

Eric Pederson

Marshall Salloum

Tyler Sutter

Margaret Wheaton (as of September 2019)

Jeana Wendel (S)

Finance

Marilyn Younghans
Stephanie Miller
Rod Amaya
Jeana Wendel (S)

Fitness to Practise

Melanie McLeod*
Beverly Brooks
Shannan Neubauer
Robin Sander
Kelly Vinge
Lori Postnikoff (S)

Professional Practice

Peyman Nemati* (until June 2019)
Kelly Babcock (until October 2019)
Nicole Bootsman
Kristjana Gudmundson
Jeffrey Herbert (as of October 2019)
Kyla Jackson* (as of August 2019)
Deven Johnson
Kelly Kizlyk
Don Kuntz (until October 2019)
Tamara Lange
Sue Mack-Klinger
Lindsey McComas
Shauna Nowakowski
Colleen Thurber
Lori Postnikoff (S)
Brittany Sharkey (S)

Registration and Licensing Policies Committee

Maitrik Patel*
Glenn Murray* (until October 2019)
Kim Borschowa (until September 2019)
Danielle Larocque
Andrea Lockwood
Sharon Lyons
Carol Pannell
Lori Postnikoff (S)

Appointees

Canadian Council on Continuing Education in Pharmacy (CCCEP)

Danielle Larocque

Pharmacy Examining Board of Canada (PEBC)

Suzanne Gulka

Saskatchewan Registered Nurses Association/NEPAC Committee

Lana Dean

University of Saskatchewan Senate

Christine Hrudka

University of Regina Senate

Linda Sulz

Staff

Senior Leadership Team

Jeana Wendel, Registrar

Ray Joubert, Associate Registrar

Lori Postnikoff, Deputy Registrar

Kathleen Handford, Director of Policy and Legislation

Chantal Lambert, Assistant Registrar – Complaints Director

Jeannette Sandiford, Assistant Registrar – Field Operations and Quality Assurance

Professional Practice

David Chou, Pharmacy Policy and Practice Consultant

Fatima Khan, Field Officer

Natalie Rediger, Pharmacy Policy and Practice Consultant – Term

Kim Samoila, Policy Analyst

Brittany Sharkey, Certified Compounding Inspector – Field Officer

Administrative

Peleshia Dubidad, Administrator – Member Relations, Systems and Communication Support

Pat Guillemain, Pharmacy Permits and Systems Manager

Darlene King, Reception and Office Operations Coordinator

Christina McPherson, Administrative Assistant to the Deputy Registrar

Heather Neirinck, Registration and Systems Administrator

Tami Schwebius, Complaints Manager

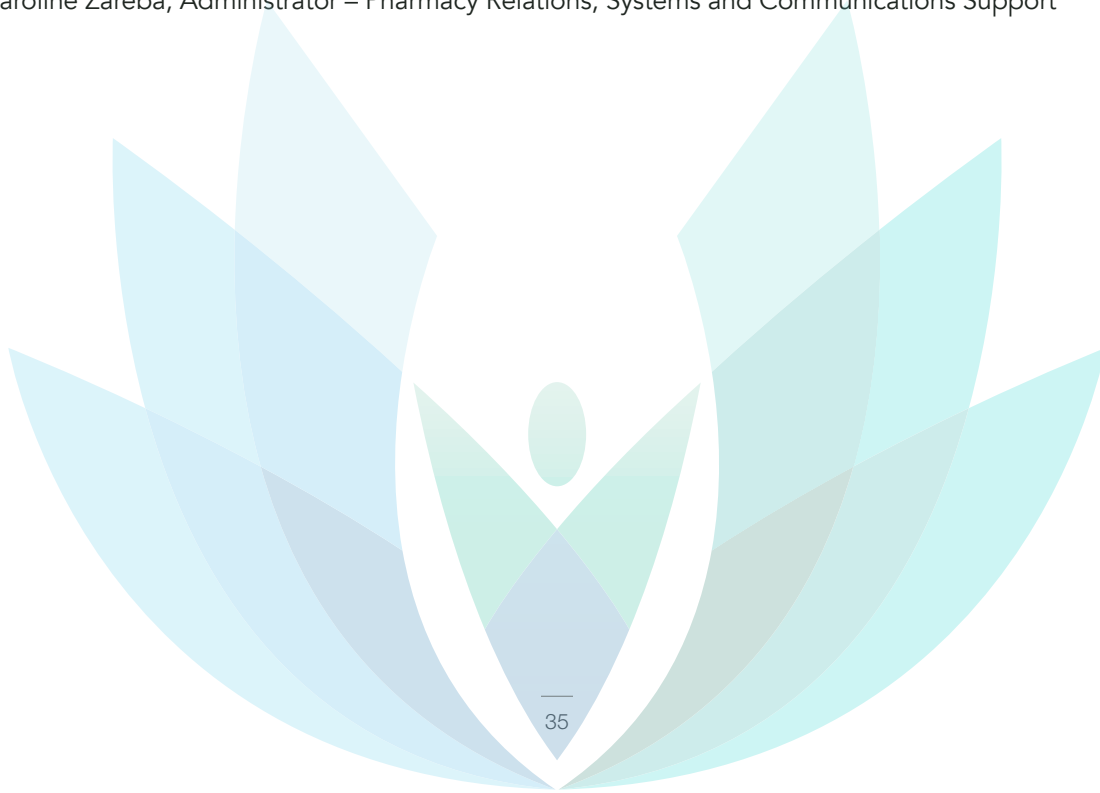
Audrey Solie, Registration Administrator Member Relations

Meaghan Underwood, Administrative Coordinator for Field Operations and Quality Assurance

Ingrid Wakefield, Executive Assistant to the Registrar

Cheryl Wyatt, Communications Coordinator

Caroline Zareba, Administrator – Pharmacy Relations, Systems and Communications Support



Minutes of the 108th Annual General Meeting

Saturday, May 4, 2019
Elk Ridge Lodge, Waskesiu
Chairman - Justin Kosar

1. President's Welcome – 9:05 a.m.

Chairman Kosar called the meeting to order and welcomed those members present to the 108th Annual General Meeting of the Saskatchewan College of Pharmacy Professionals (SCPP).

2. Introduction of Councillors and Special Guests

Chairman Kosar of Saskatoon introduced the Council members:

Officers: President Elect, Marilyn Younghans, Lloydminster; Vice-President, Stephanie Miller, Weyburn; Past-President, Bill Gerla, Humboldt

Councillors: Stephanie Miller, Weyburn; Kyla Jackson, Hudson Bay; Margaret Wheaton, Biggar; Rod Amaya, Saskatoon; Peyman Nemati, Regina; Brandon Krahn, Swift Current; Doug MacNeill, Lanigan and Amy Wiebe, Saskatoon

Ex-Officio: Dean Kishor Wasan, Saskatoon

Dean's Designate: Dr. Yvonne Shevchuk, Saskatoon

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

Pharmacy Technician Observers: Lyndsay Brakstad, Tisdale and Michelle Miller, Saskatoon (regrets)

Senior Stick Observer: Meghanne Rieder, Saskatoon

Chairman Kosar extended a special thank you to Bill Gerla, Margaret Wheaton, Peyman Nemati, Doug MacNeill and Dean Kishor Wasan for years of commitment and dedication to the College, as Chairman Kosar retires from Council. Chairman Kosar also thanked Meghanne Rieder, Senior Stick, who represented the students over the past year.

This year, SCPP held elections in Divisions 1, 3, 5 and 7. Division 1 and 5 were won by election - Bradley Cooper, Division 1 and Scott Szabo in Division 5. Jashvant Patel won by acclamation for Division 3. In Division 7, there were no nominations for the position and Council has decided to leave the present vacancy and put out a general call of interest to the membership.

Numerous special guests were welcomed and introduced to the assembly.

3. Motion to Accept 2018 Minutes as Printed and Distributed

MOTION: A. Kuntz/M. McLeod

CARRIED

THAT the Minutes of the 107th Annual General Meeting of Saskatchewan College of Pharmacy Professionals, held on Saturday, May 12, 2018 in the DoubleTree Hilton Hotel and Conference Centre, Regina, be adopted as printed and distributed.

4. Business Arising from the Minutes

There was no business arising from the minutes.

5. Memorial to Deceased Members

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

Emile Belcourt	Orest Buchko
Tanya (Howe) Damsgaard	Lois Devick
Francis (Allan) Dosdall	Donovan Einarson
Wayne Foster	Theodore (Ed) Kitchen
Garnet Leckie	Darryl Leshko
William (Bill) Mackenzie	Finlay Morrison
David Negrych	William (Bill) Paterson
William (Bill) Pipes	Kyle Plamondon
James Prenevost	Lawrence Schulte
Corinne (Cram) Thompson	Doreen Wylie

6. Reports

6.1 President's Annual Report

President-Elect Younghans 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.

President-Elect Younghans invited questions from the floor arising from the President's report. There were no questions.

MOTION: Y.Shevchuk/P.Melnyk

CARRIED

THAT the President's report be accepted as presented.

Chairman Kosar resumed the Chair.

6.2 Registrar's Report

Chairman Kosar invited the Registrar, Jeana Wendel, to present her report. Ms. Wendel referred to her printed report beginning on page 8 of the Annual Report, which includes statistical information and projections.

Ms. Wendel invited questions from the floor arising from her published report. There were no questions.

MOTION: B. Gerla/D. MacNeill

CARRIED

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

6.3 Auditor's Report/Report of the Finance and Audit Committee

Chairman Kosar invited the Registrar, Jeana Wendel, to present the Auditor's report and answer questions respecting the published Audited Financial Statements for the fiscal year ended December 31, 2018. She directed those assembled to the Auditor's report and audited financial statements for 2018 published in the Annual Report beginning on page 45.

MOTION: A. Kuntz/C. Evans

CARRIED

THAT the audited Financial Statement of the College for fiscal period ended December 31, 2018, be approved as printed and distributed.

6.4 Consideration of Annual Report as Printed and Distributed

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

MOTION: D. Laroque/Y. Shevchuk

CARRIED

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

6.5 College of Pharmacy and Nutrition Report

Dean Kishor Wasan highlighted his report as printed in the Annual Report on page 40.

7. New Business

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

8. ADJOURNMENT – 9:35 a.m.

Chairman Kosar thanked those present for attending and thanked members of all committees for their work. Chairman Kosar declared the Annual General Meeting adjourned.



Justin Kosar, President



Jeana Wendel, Registrar

Saskatchewan College of Pharmacy Professionals
Financial Statements
December 31, 2019





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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, 2019, 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, 2019, 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.

Chartered Professional Accountants

Regina, Saskatchewan
May 1, 2020

**Saskatchewan College of Pharmacy Professionals
Statement of financial position**

As at December 31, 2019

	Notes	Operating Fund \$	Capital and Intangible Asset Fund \$	2019 Total \$	2018 Total \$
Current assets					
Cash		624,992	—	624,992	—
Marketable securities	3	2,250,379	12,351	2,262,730	2,814,958
Accounts receivable		167,165	—	167,165	174,024
Due from the SCP Centennial Scholarship Fund Inc	10	10,609	—	10,609	6,609
Government remittances receivable		32,925	—	32,925	15,852
Prepaid expenses		165,819	—	165,819	153,246
		3,251,889	12,351	3,264,240	3,164,689
Capital and intangible assets	4	—	1,082,228	1,082,228	489,210
		3,251,889	1,094,579	4,346,468	3,653,899
Current liabilities					
Bank overdraft		—	—	—	278,405
Accounts payable	5	415,518	—	415,518	99,748
Fees and licences collected in advance		2,177,700	—	2,177,700	1,662,024
Deferred lease incentive		154,184	—	154,184	—
Current portion of obligations under capital leases	6	—	24,923	24,923	40,440
		2,747,402	24,923	2,772,325	2,080,617
Obligations under capital leases	6	—	—	—	24,923
		2,747,402	24,923	2,772,325	2,105,540
Fund balances					
Invested in capital and intangible assets		—	1,057,305	1,057,305	423,847
Externally restricted for building development		—	12,351	12,351	11,266
Unrestricted		504,487	—	504,487	1,113,246
		504,487	1,069,656	1,574,143	1,548,359
		3,251,889	1,094,579	4,346,468	3,653,899

Commitments

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, 2019

		Operating Fund 2019 \$	Operating Fund 2018 \$	Capital and Intangible Asset Fund 2019 \$	Capital and Intangible Asset Fund 2018 \$	Total 2019 \$	Total 2018 \$
	Notes and schedules						
Revenues							
Fees and licences	Schedule 1	3,349,692	2,839,995	—	—	3,349,692	2,839,995
Sundry	Schedule 2	138,837	193,767	—	—	138,837	193,767
Investment income (loss)		210,159	(10,318)	1,203	(71)	211,362	(10,389)
		3,698,688	3,023,444	1,203	(71)	3,699,891	3,023,373
Expenses							
Administration	Schedule 3	2,642,004	2,262,530	—	—	2,642,004	2,262,530
Amortization		—	—	62,602	74,280	62,602	74,280
COMPASS subscription		136,737	131,184	—	—	136,737	131,184
Continuing education		152,760	126,986	—	—	152,760	126,986
Council		147,134	87,398	—	—	147,134	87,398
Delegates		12,640	10,250	—	—	12,640	10,250
Interest		—	—	4,736	8,533	4,736	8,533
Legal and audit		278,042	215,477	—	—	278,042	215,477
Miscellaneous		5,412	16,284	—	—	5,412	16,284
Other committees		47,851	45,937	—	—	47,851	45,937
Public and professional relations		184,189	178,409	—	—	184,189	178,409
		3,606,769	3,074,455	67,338	82,813	3,674,107	3,157,268
Excess (deficiency) of revenues over expenses		91,919	(51,011)	(66,135)	(82,884)	25,784	(133,895)
Fund balance, beginning of year		1,113,246	1,216,921	435,113	465,333	1,548,359	1,682,254
Interfund transfers	7	(700,678)	(52,664)	700,678	52,664	—	—
Fund balance, end of year		504,487	1,113,246	1,069,656	435,113	1,574,143	1,548,359

See accompanying notes

Saskatchewan College of Pharmacy Professionals
Statement of cash flows

Year ended December 31, 2019

	Note	2019 \$	2018 \$
Cash flows from (used in) operating activities			
Excess (deficiency) of revenues over expenses		25,784	(133,895)
Items not affecting cash			
Amortization		62,602	74,280
Unrealized gain on marketable securities		(15,940)	(66,048)
Net change in non-cash working capital balances	8	890,092	(32,751)
		962,538	(158,414)
Cash flows used in investing activities			
Capital asset purchases		(586,869)	(7,489)
Purchase of marketable securities		(1,947,832)	(2,437,614)
Redemption of marketable securities		2,516,000	2,170,000
		(18,701)	(275,103)
Cash flows used in financing activities			
Capital lease principal payments		(40,440)	(36,642)
		(40,440)	(36,642)
Increase (decrease) in cash during the year		903,397	(470,159)
(Bank overdraft) cash, beginning of year		(278,405)	191,754
Cash (bank overdraft), end of year		624,992	(278,405)

See accompanying notes

Saskatchewan College of Pharmacy Professionals**Notes to the financial statements**December 31, 2019

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:

Adoption of new accounting standards

The Association has adopted ASNPO Section 4433, Tangible Capital Assets Held by Not-for-Profit Organizations; Section 4434, Intangible Assets Held by Not-for-Profit Organizations; and Section 4441, Collections Held by Not-for-Profit Organizations. These accounting standards are effective for fiscal years beginning on or after January 1, 2019. The adoption of these standards did not affect the financial statements.

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.

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.

Presentation of the controlled fund

SCP Centennial Scholarship Fund Inc., which is controlled by the College is not consolidated into College's financial statements.

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, 2019

2. Significant accounting policies (continued)***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, 2019 relate to the membership year July 1, 2019 through June 30, 2020 and to the license year December 1, 2019 through November 30, 2020.

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.

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:

Buildings	Straight-line	Over 30 years
Equipment	Declining balance	33%
Equipment under capital lease	Straight-line	Over 3 to 4 years
Furniture and fixtures	Declining balance	20%
Leasehold improvements	Straight-line	Over the term of lease, including planned extensions

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.

Saskatchewan College of Pharmacy Professionals**Notes to the financial statements**

December 31, 2019

2. Significant accounting policies (continued)***Impairment of long-lived assets***

When conditions indicate that a tangible capital asset is impaired, the net carrying amount of the tangible capital asset is written down to the asset's fair value or replacement cost. The write-down of tangible capital assets is recognized as an expense in the statement of operations and changes in fund balances. A write-down should not be 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:

	2019	2018
	Fair value	Fair value
	\$	\$
Operating fund		
Fixed income	1,788,207	2,291,725
Equities	462,172	511,967
	2,250,379	2,803,692
Capital and intangible asset fund		
Fixed income	7,952	7,537
Equities	4,399	3,729
	12,351	11,266
Total		
Fixed income	1,796,159	2,299,262
Equities	466,571	515,696
	2,262,730	2,814,958

4. Capital and intangible assets

	Cost	Accumulated amortization	2019 Net book value	2018 Net Book Value
	\$	\$	\$	\$
Land	15,000	—	15,000	15,000
Building	336,039	307,415	28,624	39,826
Equipment	255,764	253,277	2,487	3,712
Equipment under capital lease	14,704	14,704	—	—
Furniture and fixtures	212,106	139,705	72,401	90,503
Leasehold improvements	1,004,600	40,884	963,716	340,169
Software	99,150	99,150	—	—
	1,937,363	855,135	1,082,228	489,210

Saskatchewan College of Pharmacy Professionals**Notes to the financial statements**

December 31, 2019

5. Accounts payable

	2019	2018
	\$	\$
Trade	390,854	75,084
Funds held in trust	24,664	24,664
	415,518	99,748

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:

	\$
2020	26,353
	26,353
Less amount representing interest	(1,430)
	24,923
Less current portion	(24,923)
	—

7. Interfund transfers

Amounts transferred from the Operating Fund of \$700,678 (2018 - \$52,664) 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

	2019	2018
	\$	\$
Decrease (increase) in assets		
Accounts receivable	6,859	(86,135)
Due from the SCP Centennial Scholarship Fund Inc.	(4,000)	—
Government remittances receivable	(17,073)	(13,477)
Prepaid expenses	(12,573)	(9,413)
Increase (decrease) in liabilities		
Accounts payable	247,019	9,024
Fees and licences collected in advance	515,676	67,250
Deferred lease incentive	154,184	—
	890,092	(32,751)

Non-cash transactions

During the year, the College acquired \$655,620 in capital assets (2018 - \$7,489) of which \$68,751 is included in accounts payable at December 31, 2019 (December 31, 2018 - \$nil).

Saskatchewan College of Pharmacy Professionals**Notes to the financial statements**December 31, 2019

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 September 2019, the College entered into a ten-year office lease agreement. The contractual annual rent payments for the next five years are:

	\$
2020	101,920
2021	101,920
2022	101,920
2023	101,920
2024	101,920

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

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 rate financial instruments. Fixed-rate instruments subject the College to a fair value risk. The College is exposed to this type of risk as a result of investments in money market pool funds and bonds.

Saskatchewan College of Pharmacy Professionals**Notes to the financial statements**December 31, 2019

11. Financial instruments (continued)***Other price risk***

Other price risk associated with investments on 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.

11. Comparative figures

Certain figures for 2018 have been reclassified to conform to the presentation adopted in 2019.

DRAFT

Saskatchewan College of Pharmacy Professionals**Schedule 1 – Schedule of fees and licences**

Year ended December 31, 2019

	2019	2018
	\$	\$
Amendments	19,720	13,870
COMPASS Surcharge	205,667	169,125
Non-practising members	71,561	62,156
Other fees	125,879	83,878
Pharmacy (permits)	619,680	589,441
Practising members (licences)	2,213,553	1,831,315
Registration	93,632	90,210
	3,349,692	2,839,995

Saskatchewan College of Pharmacy Professionals**Schedule 2 – Schedule of sundry revenue**

Year ended December 31, 2019

	2019	2018
	\$	\$
(Reversal of recoveries) expense recoveries	(5,009)	12,011
Rental income	37,293	36,028
Other	24,133	26,853
Recovery of discipline costs	82,420	118,875
	138,837	193,767

Saskatchewan College of Pharmacy Professionals
Schedule 3 – Schedule of administrative expenditures
Year ended December 31, 2019

	2019	2018
	\$	\$
Accounting	22,223	19,091
Automobile	—	8,244
Building operations	268,802	188,311
Employee benefits	177,825	145,733
Equipment rental and maintenance	108,722	101,774
General office	170,407	229,723
Postage	21,259	14,052
Printing and stationary	28,889	33,668
Registrar and inspector	104,856	112,869
Salaries	1,708,438	1,387,556
Telephone and fax	30,583	21,509
	2,642,004	2,262,530



SASKATCHEWAN
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