



Mission

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

Vision

Quality pharmacy care for a healthier Saskatchewan.

Values

In delivering on its mission, the SCPP values:

- **Professionalism** by maintaining the highest standards of ethical conduct and integrity, and being accountable for our actions and their results;
- Collaboration by engaging in a meaningful way to ensure public safety;
- Leadership by being proactive, transparent, and innovative;
- A Culture of Excellence by being consistent, responsive and demonstrating a commitment to continuous improvement.

Goals

- To have functioning competency assurance and quality improvement programs.
- To align pharmacy regulation with modern pharmacy practice.
- To empower pharmacy professionals to practice autonomously to deliver safe patient care.
- To have enhanced transparency to stakeholders, supported by contemporary governance and management practices.

110th Annual General Meeting Agenda

June 9, 2021 – 3:30 pm - 4:30 pm

Venue: Virtual

President: Stephanie Scott (Meeting will be chaired by Past President Marilyn Younghans)

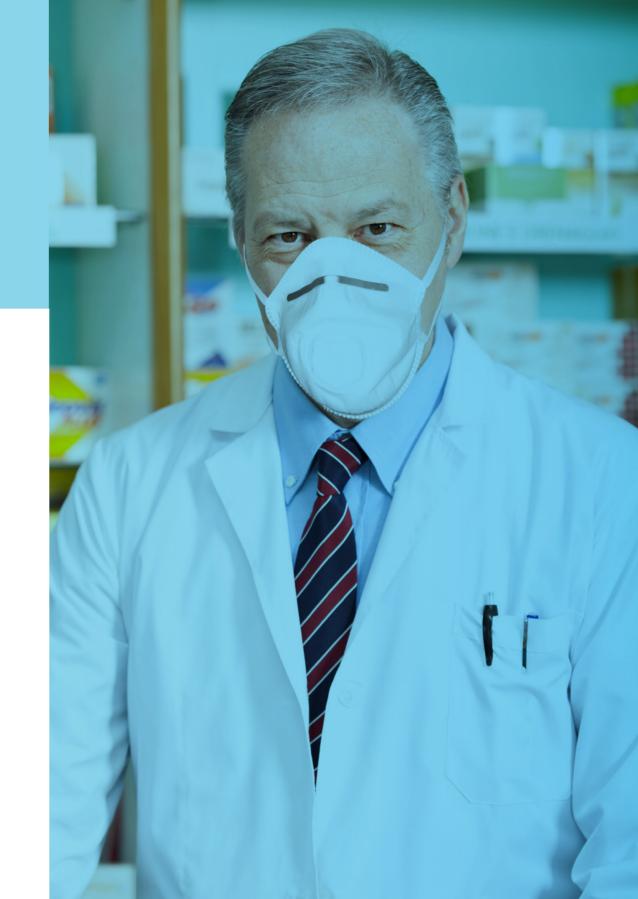
Registrar: Jeana Wendel

- 1.0 Past President's Welcome Marilyn Younghans
- 2.0 Introduction of Councillors Marilyn Younghans
- 3.0 SCPP Council Elections Marilyn Younghans
- 4.0 Other Officials Marilyn Younghans
- 5.0 Memorial to Deceased Members Marilyn Younghans
- 6.0 Reports
 - 6.1 President's Annual Report Marilyn Younghans presenting on behalf of Stephanie Scott
 - 6.2 Registrar's Report Jeana Wendel
 - 6.3 Auditor's Report/Report of the Finance and Audit Committee Jeana Wendel
 - 6.4 Consideration of Annual Report as Emailed to Members Marilyn Younghans
- 7.0 New Business Marilyn Younghans
- 8.0 Certificates of Recognition Marilyn Younghans
- 9.0 Installation of the next SCPP President Jeana Wendel
- 10.0 President's Address Rod Amaya

Adjournment – Rod Amaya

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President's Report Stephanie Scott

am pleased to report on my term as President and delighted to provide an update from Council for the Saskatchewan College of Pharmacy Professionals (SCPP).

Every year has its challenges, but I think I speak for everyone when I say that the COVID-19 pandemic changed the landscape. We were challenged to dig deep to fulfill our mandate and as a profession, I feel we did it with flying colours.

Our five-year strategic plan launched in 2020. In the midst of a trying year, we advanced many of our central goals and priorities, focusing on protecting the public interest and ensuring that barriers to delivering safe pharmacy care were minimized.

We enabled and expedited Emergency Licensure for retired, associate and Non-practicing pharmacy professionals to address potential shortages of workers during the COVID-19 pandemic and other future emergencies.

We also extended the internship category, allowing newly graduating members who have not completed their PEBC examinations to practise to their full scope under the supervision of licensed pharmacists.

Therapeutic substitution bylaws were approved by the Minister of Health, which enables pharmacists to make therapeutic substitutions for drugs during emergency situations without a Collaborative Practice Agreement, if enacted by the Registrar in consultation with health system partners.

This year also saw the launch of our Harm Reduction initiatives. Given the critical role of pharmacists as stewards of opioids and their daily interaction with patients, Council identified pharmacy practices which may contribute to the problems raised by the provincial auditor and identified opportunities to increase training and oversight of opioid dispensing practices (e.g., Patient Identification Policy).

Combatting the opioid crisis requires a multi-system approach with action taken on several fronts. The harms are, of course, exacerbated with the COVID-19 pandemic.

In addition to policy development, Council addressed the risk of opioid misuse through its harm reduction training initiatives together with medSask/CPDPP. SCPP's harm reduction platform is consistent with the federal health minister's call for support to better protect the health, safety and lives of Canadians suffering from problematic substance abuse.

Combatting the opioid crisis requires a multi-system approach with action taken on several fronts. The harms are, of course, exacerbated with the COVID-19 pandemic. Through 2020, Council also made significant advances in updating the Minor Ailment Guidelines in partnership with medSask, approving 19 of the 27 minor ailment updates. The remaining guidelines are on track to be reviewed and approved in 2021.

In another major and historical change for the College, we restructured our Council election process and the composition of Council. Best practices from regulatory reform in other parts of Canada led us to get ahead of the curve and modernize our Council, where nominees will be selected based on their competencies, attributes, skills and experience.

As of the 2021 Council election, members will vote using a new online election platform. These exciting changes will enable Council to fulfill its duties more effectively in the interest of the public.

Some other highlights include the following:

- SCPP launched the Criminal Record Check policy, which requires all Practising and Non-Practising members to obtain a criminal record check in 2021 and periodically throughout their membership with the College, in the interest of public safety.
- We held our first virtual annual general meeting, successfully launching the newly elected Council.
- We strengthened the role and duties of pharmacy managers through our on-going Professional Autonomy Framework, with the applicable bylaws approved by the Minister of Health. Council anticipates the accompanying policy framework and training to launch in 2021.
- New Opioid Agonist Therapy Standards were developed and released.
- Low-dose codeine training was created for those pharmacists and pharmacy interns under the supervision of a licensed pharmacist to sell as a Schedule II product.

 In continuing efforts to increase transparency, we created a robust and informative Complaints and Discipline section on the website to help both members and the public navigate our complaint processes and hearing schedules.

This report only summarizes the key issues addressed by Council and the College during 2020. More detailed information can always be found in our newsletters and web news feed at saskpharm.ca.

It's with sincerest appreciation that I acknowledge that none of what we achieved in 2020 could have been accomplished without the teamwork and collaboration from Council, staff, committees, appointees, members, the Ministry of Health, government and other health care organizations.

I am extremely honoured to serve the profession of pharmacy as President of the College. Thank you for the opportunity and the privilege.

Respectfully submitted,

Stephanie Scott, President





Registrar's Report

resident Scott and members of the College:

I am pleased to present the annual report for the fiscal year 2020 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 treasurer for SCPP, this office provides administrative support for Council and the committees. We also manage issues, communications and our statutory obligations. These statutory responsibilities include registration and licensing and monitoring and enforcing activities such as field operations, which consist of routine and special evaluation of pharmacies, investigating complaints, and programming, among others.

We also act as liaison between Council, committees and members, government, the public, other professional organizations, the pharmaceutical industry, and other stakeholders.

With the onset of the COVID-19 pandemic, weekly, and sometimes daily, collaboration became a necessary feature of 2020.

Alongside ensuring pharmacy professionals have the tools to be prepared in emergencies and protecting their staff and the public, the SCPP office sought to do the same. The quick and steadfast work of our staff made for a smooth transition to the majority of staff working from home, while the few who used the office as a base ensured that public health protocols were in place.

The office has remained physically closed to the public and members, but this did not mean that assistance was not a simple phone call, email, or web-click away. Despite the need to close the office to the public, jurisprudence examinations continued, albeit adjusted for social distancing, screening, and sanitation protocols. In the course of 2020, 71 pharmacy professionals completed their jurisprudence exams.

With the onset of the COVID-19 pandemic, weekly, and sometimes daily, collaboration became a necessary feature of 2020.

Our comprehensive performance management system was not delayed either. We worked with Edge HR to redevelop all job descriptions and create an effective performance management process within SCPP. This process will take effect in 2021 and will support the strategic direction of the College as staff and supervisors navigate their roles in achieving the goals of the College, as established by Council.

Highlights from the tables and charts that follow:

- Overall, our financial position remains healthy. Our assets grew by 6.8 per cent to \$4,641,988.
- SCPP's operating fund showed a positive balance of \$514,261 which was \$323,434 over the budgeted surplus of \$108,827. The large surplus was primarily attributed to higher-than-expected interest due to strong market conditions.
- Revenues increased by \$484,741 primarily due to higher-than-expected interest from our securities and the recovery of discipline fines and costs for which we do not budget.
- Current liabilities decreased by \$142,220 compared to 2019 primarily due to a reduction in our accounts payables.
- Sundry revenue was higher than budgeted and increased over 2019 as our policy is not to budget for fines and costs from discipline cases.
- Administrative costs came in \$140,385 under budget due to savings resulting from the COVID-19 pandemic. Legal costs continue to be high; however, a small reduction over 2019 is primarily due to the reduction of in-person meetings and travel due to COVID.
- The accumulation of surpluses has helped in sustaining our catastrophic discipline and operating reserve fund targets and enhances our financial stability. Reserves have been used to support projects and improvements to meet our strategic plan as approved by Council.
- Membership growth continues to be strong with a high proportion of Saskatchewan graduates along with Canadian candidates and internationally-trained candidates becoming registered.

- We continue to see significant growth in new pharmacy openings. Overall changes in pharmacies increased significantly with 267 changes which include pharmacy manager changes, ownership, relocations, renovations, and lock and leave amendments, among others. 2020 saw 16 new pharmacies open.
- The 2020 target for Quality Improvement Reviews (QIRs) was met despite months of delays due to the pandemic a testament to the ingenuity and dedication of SCPP staff.
- Practising pharmacy professionals saw a slight decrease from 2019 mainly because the 2020 University of Saskatchewan graduates were unable to complete their PEBC examinations in the spring of 2020, due to delays caused by the pandemic. Hence, those numbers do not reflect the many interns, enabled by the College's work on regulatory bylaws and policies, who are now able to practise to their full scope under the supervision of a licensed pharmacist.

Please refer to the Member and Pharmacy Relations Report and Appendix A for highlights and a more detailed breakdown of our membership and community pharmacy data.

For complaints and discipline:

- Formal complaints referred to the Complaints Committee continues to trend upward with a record 52 complaints processed.
- There were seven complaints referred to the Discipline Committee and seven discipline hearings held in 2020 with seven remaining to be heard in 2021. A record 10 complaints were referred to the Alternative Dispute Resolution process.
- The number of informal complaints not referred to the Complaints Committee, but handled administratively, is also growing in number and complexity.
- Legal costs continue to be higher than previous years however somewhat stable in comparison to 2019. The increasing number of complaints related to communication and unprofessional behaviour, bylaw, standards and ethics infractions, billing irregularities, breach of privacy and proprietary misconduct are of particular concern. Pro-active measures have been put in place throughout 2020 such as mandatory harm reduction training, increasing requirements for pharmacy managers, creating training programs for pharmacy managers (to be implemented in 2021), improved reference manual documents and information to support pharmacy managers and members and implemented the Quality Improvement Reviews to work with pharmacies to addresses issues before becoming complaints.



Practising Members – Pharmacists As of Dec. 31, 2020



Practising Members – Pharmacy Technicians As of Dec. 31, 2020



^{*} Regulation of pharmacy technicians did not begin until October 2015.



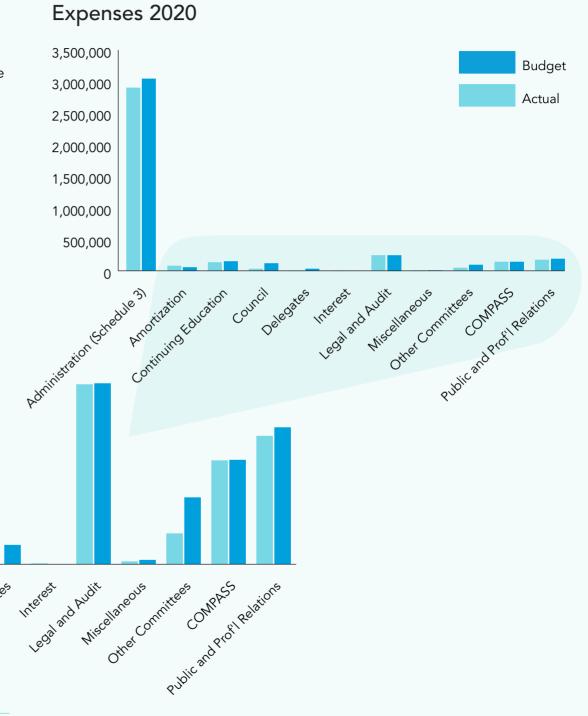
Pharmacies As of Dec. 31, 2020



Financial

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

Revenue 2020 4,000,000 3,500,000 2,500,000 1,500,000 1,000,000 500,000 Sunday Echedule 1



300,000

250,000

200,000

150,000

100,000

50,000

2020 By the Numbers

Pharmacy openings

Manager changes

Lock and Leave amendments

Active pharmacy permits

Complaints files processed

Public complaints processed

2,268 **Members**

1,709 375

Practising pharmacists registered

Practising pharmacy technicians registered

New or amended bylaws

New policy or guidance documents

Reference Manual documents confirmed or updated

263

Continuous Quality Improvement (CQI) meetings

Quality Improvement Reviews (QIRs)

Publications

Email correspondences

Social Media impressions

Deputy Registrar's Report

- Throughout 2020, continued to oversee the registration and licensing of members, the renewal
 of pharmacy permits, and granting of new permits.
- Was involved in the development of communication strategies as well as overseeing newsletters and other communications of the College.
- Oversaw the creation of three new jurisprudence examinations, with implementation for 2021.
- Served 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.
- Served on the Saskatchewan Polytechnic Pharmacy Technician Program Advisory Committee.
- Provided instruction to the College of Pharmacy and Nutrition students regarding legislation governing the practice of pharmacy.
- Continued to support several committees which report to Council including:
 - ► The **Registration and Licensing Policies Committee** which reviews matters pertaining to the registration and licensing of Pharmacy Professionals.
 - In 2020, the committee completed a policy framework to accompany the bylaws for Criminal Record Checks. The committee will review each "not clear" Enhanced Police Information Check (E-PIC) after it has been de-identified to provide a recommendation to the Registrar.
 - The committee continues to review and monitor improvements to the Appraisal Training and Assessment (ATA) Program for international pharmacy graduates and members returning to practice. A working group has been formed to review the report forms and information provided to members assisting with the ATA process. This working group will commence its work in 2021.
 - The committee reviewed changes to the pharmacy technician bylaws with the expiration of the bridging program.
 - The committee was updated by the Policy and Legislation Unit (PLU) on progress on the pharmacy manager bylaws and policies and the development of training by Continuing Professional Development for Pharmacy Professionals (CPDPP).

- ▶ The **Professional Practice Committee** (PPC), which reviews issues relating to pharmacy practice and standards, completed the Opioid Agonist Therapy Standards with support from CPDPP and medSask. The new Opioid Agonist Therapy Standards replaced the Methadone Guidelines. The PPC now has additional support from the PLU of SCPP and was able to develop policies and bylaws regarding the sale of low-dose (exempted) codeine products and Patient Identification Verification. Work continues on the development of policies and bylaws for Private Care Areas, Sexual Harassment/Abuse/Misconduct, Remote and Alternative Pharmacy Services and Point-of-Care Testing.
- The Fitness to Practise Committee, which received referrals from the Complaints Committee as per Alternative Dispute Resolution, reviewed two files. The Fitness to Practise Committee continues to develop strategies to assist members who may have issues that affect their ability to practise safely and competently.
- ▶ The **Awards and Honours Committee** met for a final time in 2020 to recommend the cessation of all awards presented by the College. Bylaw amendments for the Honorary Life Membership and Honorary Membership awards and the Member Emeritus Designation were presented to Council for review and approval.
 - Regulatory Reforms across Canada and "the Cayton Report" advise that regulatory colleges are best not providing awards as this is more the role of advocacy bodies.
 - 2020 was also to be the final year for SCPP participation in the annual Pharmacy Association of Saskatchewan (PAS) Conference. Due to the pandemic and subsequent move to a virtual PAS conference, all SCPP awards and certificates to be presented in 2020 were instead mailed to recipients.
 - At the request of the College, the University of Saskatchewan College of Pharmacy and Nutrition will now assume responsibility for the recognition of the 25 and 50-year graduates of their program.
 - The College has also eliminated the SCPP Convocation Luncheon event. The College will now present the Gold Medal and Campbell Prize at the student-run graduation banquet.
- The Competency Assurance Committee continues to develop a new Competency Assurance process as per the Strategic Plan. The committee is reviewing best practices and available programs and is pursuing the assistance of a consultant.

While the COVID-19 pandemic meant many of the planned priorities for 2020 had to be postponed, work continued where possible on SCPP's strategic goals

To have functioning competency assurance and quality improvement programs.

- January 2020 saw the beginning of the new Quality Improvement Review (QIR) process. The new process takes approximately two hours to complete. Prior to the QIR, the pharmacy manager completes a pharmacy self-assessment (PSA) and provides the Field Officer with five to 10 examples of medication incidents to be reviewed using the Institute for Safe Medication Practices (ISMP) Canada's Medication Safety Cultural Indicator Matrix (MedSCIM) tool. Ratings from MedSCIM assessments completed prior to Jan 2020 compared to post-Jan 2020 has seen a shift toward more reports being assessed in the "calculative" and "generative" grades than in the "pathological" and "reactive" grades.
- A working committee of members was established to determine best practices for developing a competency assurance program.
- A request for proposal to obtain the services of a consultant with expertise in competency assurance was drafted for response.

To align pharmacy regulation with modern pharmacy practice.

- The SCPP Reference Manual continues to serve members as a library of guidelines, standards and policies and the Policy and Legislation Unit planned and implemented a comprehensive system for document tracking, control, and prioritization.
- All units of SCPP continued to contribute towards updates to the legislation through the work of the Registration and Licensing Policies, Professional Practice, and Awards and Honours committees, as well as Council review.
- The College continued to amend bylaws, policies, and standards to prepare for the regulatory reform currently underway in other provinces.

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

- The first priority of the professional autonomy framework was completed with the Minister of Health's approval of the pharmacy manager bylaws. The bylaws increase the eligibility and education requirements for pharmacy managers, addresses interim pharmacy managers to mitigate risks associated with outgoing pharmacy managers being on the pharmacy permit after they have left the pharmacy, and speaks to pharmacy managers actively participating in the day-to-day operation of a pharmacy.
- While these bylaws have been approved, SCPP Council continues to work on the pharmacy manager framework that will support the bylaws. Several rounds of consultations have occurred regarding the draft pharmacy manager framework.

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

- The College website is the primary and immediate mechanism for updating members on regulatory and other updates. Ensuring members are able to access information easily and quickly is key to the success of daily professional practice. For both the public and members, it is important for SCPP's processes to remain transparent and defensible. With these principles in mind, updates completed in 2020 included the below.
- A searchable archive for breaking and historical news, which members and the public can access directly on the homepage.
- A comprehensive Complaints and Discipline section where members and the public can clearly navigate the complaints process, submit a complaint, track discipline decisions and orders, and register for discipline hearings.
- With the restructure of SCPP Council and elections, the web pages dedicated to information on governance and SCPP leadership were revamped to clearly describe the roles, structure and process of Council and the election process.
- Overall, the SCPP website is annually reviewed to ensure information remains relevant and useful to members and the public.
- · A new SCPP internal staff performance management system was researched, initiated, and reviewed and will be implemented in early 2021.

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS ANNUAL REPO

Member and Pharmacy Relations Report

Membership with SCPP saw a slight decrease in 2020 due to COVID-19 and the delay in 2020 pharmacy graduates being able to license with SCPP. As the 2020 graduates become eligible for licensure in 2021 the numbers are expected to normalize. Despite the delay, SCPP was still able to license 45 new pharmacists and 29 new pharmacy technicians.

SCPP Council fulfilled plans to change bylaws to remove the Conditional Practising membership category and introduce the Extended Internship category. This bylaw change enables new graduates who have not yet passed their Pharmacy Examining Board of Canada (PEBC) examinations to practise to their full scope under the direct supervision of a licensed pharmacist.

This change supports SCPP's mandate of public protection and ensuring competence at entry to practice by requiring all members successfully complete the national licensure exams prior to obtaining a practising licence.

It also supports new graduates by ensuring they receive proper on-boarding and supervision as they embark on their new professional careers between graduation and obtaining their practising licence.

The College also passed bylaws to introduce an Emergency Licensure category which enabled fast-tracked licensing of retired and Non-Practising members, among others, to help ensure an optimal number of pharmacy professionals were available to provide pharmacy care throughout the COVID-19 pandemic and any future potential emergencies.

With the COVID-19 pandemic, the Appraisal Training and Assessment Program (ATA) for internationally trained pharmacy graduates and former members returning to practice was closed to new applicants. However, 11 candidates completed the process in 2020 and a total of 14 were registered. Many pharmacies and assessor pharmacists were unable to take candidates due to issues arising from the pandemic. The College continued to register those candidates from provinces and territories that are signatories of the Mobility Agreement for Canadian Pharmacists (Canadian Candidates), registering 27 candidates.



2018 marked the end of the bridging program for pharmacy technicians. All candidates must now complete currently available education programs for pharmacy technicians which are accredited by the Canadian Council for Accreditation of Pharmacy Programs (CCAPP) and available in Canada.

Twelve graduates of the Saskatchewan Polytechnic program were registered, four CCAPP program graduates, and eight non-CCAPP accredited graduates who were completing the bridging program requirements were registered. We continue to work with pharmacy technicians who have graduated from a CCAPP-accredited program to ensure they meet all requirements to register as members of SCPP, including training and examinations.

A total of 71 jurisprudence examinations were conducted: 30 for Canadian pharmacist candidates, 29 for pharmacy technicians and 12 for international pharmacist graduates. SCPP was fortunate to be able to continue to provide the JP exams at our office while observing all required COVID precautions.

The Registration and Licensing team diligently provides comprehensive information packages to new graduates, other candidates for membership, and current members, outlining all requirements for membership at the College. These are key to ensuring members have the correct and current information and processes in place as they start or continue their careers.

New for 2020, all Practising and Non-Practicing members are required to complete a criminal record check (CRC), specifically an Enhanced Police Information Check (E-PIC) as per new bylaws. Due to COVID-19 and pressures on members and providers of CRCs, Council approved a delay to obtain CRCs until the 2021-2022 licence renewal period. By the end of 2020, 566 pharmacists and 87 pharmacy technicians completed an E-PIC. For the 2021-22 licensure year, all Practising and Non-Practising members will be required to complete an E-PIC if they had not done so in 2020.

As of Dec. 31, 2020, all pharmacists were trained in Prescriptive Authority Level I and 98 per cent completed Minor Ailments Training, while 1178 held Advanced Method Certification (AMC) to provide medications by injection and other routes. Sixty-five members completed harm reduction training and 137 members completed training to provide low-dose (exempted) codeine products. Pharmacists and pharmacy technicians must complete one of two harm reduction training programs (Primer or Advanced) in order to obtain a practising license and pharmacists who choose to sell low-dose codeine as a Schedule II product must complete the training program available.

The number of new pharmacy permits continues to increase with significant increases in both 2019 and 2020. Sixteen new pharmacies opened in 2020 while five closed. There were five pharmacy ownership/proprietor name changes and 15 corporate share purchases. SCPP also continued to observe relatively large numbers of pharmacy manager changes over 2019 and 2020, with 77 occurring in 2020.

The College processed 123 lock and leave permit amendments, which was a significant increase from 27 in 2019, due to the pandemic. Eight new lock and leave permits were also issued.

The rate of change of information and updates increased substantially in 2020 due to the pandemic. As such, SCPP increasingly uses the website and social media to distribute information to ensure members are able to practise safely and in the best interest of the pubic.

The College passed bylaws to introduce an Emergency Licensure category which enabled fast-tracked licensing of Retired and Non-Practising members, among others, to help ensure an optimal number of pharmacy professionals were available to provide pharmacy care throughout the COVID-19 pandemic and any future potential emergencies.

Policy and Legislation Unit

Since 2018, the College began forming the Policy and Legislation Unit to strengthen its health care policy-making capacity. The unit is made up of a Director of Policy and Legislation, two Policy Pharmacy and Professional Practice Consultants, and a part-time Policy Analyst. The end of 2020 marks the first complete year that the unit has been supporting a risk management approach to achieving the College's mandate and goals.

In addition to advancing the College's strategic and operational priorities, many of the unit's deliverables focused on aligning with modern pharmacy practice and emergency preparedness in response to the COVID-19 pandemic, through bylaws and reference manual documents.

Regulatory Bylaws

Ten new/amendments to the SCPP's Regulatory Bylaws:

- Criminal Record Check New amendments that require a criminal record check from all Practising and Non-Practising members by the beginning of the 2021 registration year, to optimally protect the safety of the public. (February)
- **Drug Schedules** Moving Levonorgestrel (Plan B) from Schedule II to Schedule III (Part K, Drug Schedules II and III) to align with the National Association of Pharmacy Regulatory Authorities Drug Schedules and to ensure that pharmacy professionals are available to answer patient questions about this drug when needed. (February)
- Low-Dose (Exempted) Codeine Products Corrects administrative oversights by adding nurse practitioners to the list of health professionals who may provide advice on the administration of low-dose codeine for children and ensures that package labelling requirements align with the Narcotic Control Regulations. (April)
- Emergency Licensure (Retired, Associate, Non-Practicing) Enables expedited temporary licensure/registration to members without completing full registration requirements, at no fee, to address potential shortages of pharmacy professionals during the COVID-19 pandemic and other future emergencies. (April)



- Emergency Licensure (Extended Internship)/Conditional Licensure Amendments/Advanced Method Certifications for Interns Removes the Conditional License membership category as of July 31, 2021; allows final-year pharmacy students to remain registered with the SCPP as interns; provides interns with the authority to complete Advanced Method Certification and administer by injection in emergency situations, such as the COVID-19 pandemic, at the discretion of the Registrar. (April)
- Pharmacy Managers As part of its Professional Autonomy Framework, addresses pharmacy manager requirements to support managers in this important role, including eligibility and education requirements, interim managers and ensuring proper oversight when pharmacy managers are absent, and active participation in the day-to-day operations of a pharmacy. (November)
- Therapeutic Substitutions, Pharmacist Assessment Records in Emergency Circumstances –
 Enables pharmacists to make therapeutic substitutions for drugs during emergency situations,
 including the COVID-19 pandemic, without a Collaborative Practice Agreement, if enacted by
 the Registrar. Also enables the Registrar to temporarily suspend the requirement for pharmacists to fax Pharmacist Assessment Records (PARs) to primary practitioners when prescribing
 (excluding drugs monitored through the Prescription Review Program and therapeutic substitutions). (November)
- Minor Ailments Prescribing Corrects errors regarding minor ailments prescribing that enables pharmacists to prescribe for minor ailments according to medSask Guidelines and remain in compliance with the SCPP Regulatory Bylaws respecting quantity limits and restrictions on consecutive pharmacists prescribing. (November)
- Membership Registration Pharmacists and Pharmacy Technicians Revises photo identification requirements and length of appraisal training hours for other Canadian and international pharmacy professional program graduates, who are applying for membership with the SCPP and are not subject to the Labour Mobility Agreement. This ensures that applicants provide SCPP with sufficient and current proof of identity and have sufficient appraisal training hours to prepare them for practice in Saskatchewan. (November)
- Migration from One Membership Category to Another Individuals who are migrating from Non-Practicing to Practicing membership will be required to provide evidence of completion of appraisal training and/or an assessment, depending on length of time out of practice. This brings the process in line with other provinces and the process used for international graduates, to ensure that pharmacy professional applicants have the appropriate and current skills to practise in Saskatchewan. (November)

Administrative Bylaws

Amendments to SCPP's Administrative Bylaws include:

- Drug Schedule II Pharmacy-Only Restricted Access Non-Prescription Drugs Removes Levonorgestrel (Plan B) from Schedule II and corrects administrative errors. (February)
- Fees and Allowances Amendments to fee schedule. (February)
- Virtual Annual General Meeting Authorizes a virtual annual general meeting (AGM) to fulfill
 the College's legislative requirements while also protecting the health and safety of meeting
 participants and complying with COVID-19 public health orders around meeting size restrictions and social distancing requirements. Amendments also modernize the bylaws to authorize
 meeting notifications by email, clarify quorum requirements for meetings of the SCPP to a majority (51per cent) of eligible voting members present, and corrects administrative oversights.
 (May)
- Council and Elections Restructuring Repealed and replaced with new Council structure and elections process. Modernizes Council structure and elections process in response to regulatory reform and best practices which indicate that members should be appointed to Council based on their competencies, attributes, skills and experience and that the selection process is not politicized. Enables Council to fulfill its duties more effectively in the interest of the public. (November)



Reference Manual Documents

Document control and Reference Manual tracking systems which began in 2019 continue to strengthen the College's commitment to transparency and communicating expectations and requirements for members, pharmacy managers and proprietors.

In line with recommendations from Harry Cayton's 2018 "An Inquiry into the performance of the College of Dental Surgeons of British Columbia and the *Health Professions Act*", all the standards and guidelines for members are being gathered into one place or publication. The standard template for these key documents is evolving and designed to help key stakeholders to understand the degree of enforceability around these expectations.

Number and Status of Reference Manual Documents

Along with the strategic and operational priorities, a risk matrix continues to assist with the prioritization of Reference Manual documents to be created or updated. As such, the focus for 2020 has been on modernizing the regulatory framework. In particular, addressing recommendations by the Provincial Auditor in June 2019 calling for increased training and monitoring of opioid dispensing practices to address the growing number of overdoses and opioid-related deaths in Saskatchewan, and supporting pharmacy professionals and community pharmacies to respond to barriers to safe patient care during the COVID-19 pandemic along with the rest of Saskatchewan's health care system.

A COVID-19 page was set up on the website to help pharmacy professionals find information all in one place. Key documents that would support pharmacy professionals, community pharmacies and Saskatchewan's health care system as they respond to challenges of providing safe patient care during the COVID-19 pandemic were prioritized.

As of December 2020, there were 123 Reference Manual documents (compared with 114 in December 2019), of which 67 documents (54 per cent) are up to date (compared with 31 per cent in December 2019).

The breakdown of progress includes:

- 17 documents (14 per cent) are new (compared with five new or four per cent in 2019);
- 50 documents confirmed up to date within the past four years (compared with 33 in 2019);

- 16 documents were removed in 2020 (in addition to eight removed in 2019);
- 23 documents (19 per cent) in the process of being updated (including 13 privacy-related documents with legal counsel for updating).



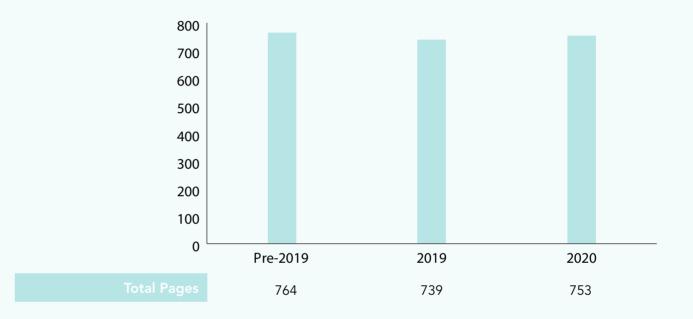
Key Areas Addressed:

- Emergency Preparedness (EP) for COVID-19 infection control, hand hygiene, respiratory hygiene/cough etiquette, modification of pharmacy operations, emergency preparedness tools and resources, therapeutic substitution, practice changes for community pharmacy during COVID-19 pandemic and federal exemptions.
- Administration by Injection (including seasonal influenza and Vaccine Preventable Diseases & Travel Health) – vaccine storage and handling, refrigerator requirements. All documents in this area are updated.
- Prescriptive Authority prescriptive authority for pharmacists (level 1 and 2), decision-making framework, frequently asked questions for hospital pharmacists, and new template for Pharmacist Assessment Records.
- Controlled Drugs and Substances/Prescription Review Program conditions of sale for low-dose (exempted) codeine products, Opioid Agonist Therapy Standards, and destruction of controlled substances.
- Dispensing patient identification verification.
- Pharmacy Operations/Pharmacy Manager pharmacy manager responsibilities, suggested list or reference manual documents for pharmacy managers, Quality Improvement Reviews, satellite pharmacies.
- Standards of Practice Long-Term Care Standards.
- Registration and Licensing emergency registration/licensure, supervision of pharmacy interns, criminal record checks, in part to support new bylaws.
- Documentation and Record Retention Prescription Regulations Summary Chart-Normal.

Total Number of Pages in Reference Documents

The number of reference manual documents has risen by eight per cent from 114 in 2019, to 123 in 2020, however, the number of pages has risen by two per cent (i.e., from 739 in December 2019 to 753 in December 2020).

The standards and guidelines are being pulled together into fewer documents (e.g., Exempted Codeine Products, Pharmacy Manager Responsibilities), as recommended by Cayton, and new documents are being created (e.g., Pharmacist Prescriptive Authority) to broaden the clarity for pharmacy professionals and proprietors.



Additional Resources

New Training and Development resource web page – a new training and development chart was developed to help members understand the mandatory and non-mandatory training related to their scope of practice and new initiatives.

Field Operations

New Quality Improvement Reviews (QIRs)

With the implementation of the Community Pharmacy Professionals Advancing Safety in Saskatchewan (COMPASS) Continuous Quality Improvement Program in 2017, a QIR process was developed for practice reviews.

The review process is safety-focused and allows the field officers to coach and assist pharmacy staff in their quality improvement efforts. The QIR process is intended to help achieve the desired culture of safety within Saskatchewan pharmacies.

The safety focus of the 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 QIR process is initiated by the pharmacy manager completing a self-assessment prior to the scheduling of a review and a report is provided at the end of the QIR, summarizing any recommendations and follow-up issues.

Virtual Pharmacy Visits

Currently all QIRs are performed virtually via an internet application (ConnectWise). However, there may be situations in the future that will require an on-site 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 Community Pharmacy Incident Reporting (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 Activities

as of Dec. 31, 2020



Field Operations Summary

QIRs commenced Jan. 2020, with approximately 52 QIRs completed before they were put on hold March 16 due to COVID-19. QIRs recommenced September 2020, with 97 total QIRs completed in 2020. Regular activities are summarized in the accompanying chart.

Summary

The process for completing pre-opening, renovation, and relocation inspections virtually via the Skype for Business application continued in 2020. The majority of inspections were completed via Skype; however, there were a few completed in person.

In-Person	Skype
4 pre-opening inspections	15 pre-opening inspections
1 renovation inspection	7 renovation inspections
1 relocation inspection	0 relocation inspection

Utilizing virtual (Skype) inspections had many advantages this year, including allowing inspections to be completed but still allowing field officers to socially distance. Virtual inspections for pre-opening, renovation and relocation will continue to be the primary way these types of inspections are completed. However, when required, some inspections may be completed in person.

Other Field Operation Activities

- Jeannette Sandiford, Assistant Registrar Field Operations and Quality Assurance, participated in the National Association of Pharmacy Regulatory Authorities (NAPRA) MIR (Medication Incident Reporting) Working Group and the Institute for Safe Medication Practices (ISMP) Canada Advisory Panel to develop a new MSSA for High-Risk Situations in Community Pharmacies. Jeannette also provides support to the COMPASS Committee and collaborates with counterparts in other provinces when appropriate.
- Brittany Sharkey, Certified Compounding Inspector Field Officer, participated in two NAPRA Working Groups Sterile Compounding and Non-Sterile Compounding. She participated in the NAPRA Review Committee for the development of Compounding Competencies. Brittany presented at the Canadian Society of Hospital Pharmacists (CSHP) virtual conference. She is a staff resource on compounding for the Professional Practice Committee and was involved in developing and hosting webinars for the Compounding Excellence (CompEX) implementation of the NAPRA Compounding Standards.
- Fatima Khan, Field Officer, played key roles in preparing documents for SCPP's newsletters and reference manual.
- All field officers have been involved with answering member inquiries and questions.

CompEX - Compounding Report

SCPP continued to work with all pharmacies to have compounding declarations submitted by the end of 2020. As of Dec. 3, 2020, all pharmacies had provided compounding declarations to SCPP. Please see the chart for a breakdown of what compounding practice looks like within pharmacies in Saskatchewan.

Note: These numbers also include new pharmacies that have opened since implementation has been announced. New pharmacies have not been required to submit a compounding declaration as they declare within correspondence to the field officer what level of compounding they are going to meet compliance with and schematics are assessed and approved for compliance with compounding standards.

In February 2020 SCPP announced Council's approval to extend the deadline for compliance with the NAPRA Model Standards for Pharmacy Compounding by one year to Dec. 31, 2021. This decision was made to allow opportunity for more education to be developed as an outcome of the completion of the development of compounding competencies.

Throughout 2020 the SCPP Certified Compounding Inspector – Field Officer has continued to sit on NAPRA working groups for sterile and non-sterile compounding, in conjunction with being a part of NAPRA's Compounding Competency Review Committee.

To continue to address common questions being raised by members and to further aid in understanding the NAPRA Model Standards for Pharmacy Compounding, SCPP held two live webinars on compounding, with support from Continuing Professional Development for Pharmacy Professionals (CPDPP). Both webinars were recorded and accredited by CPDPP and are available as a free continuing education opportunity for both pharmacy technicians and pharmacists.

In addition to the webinars, SCPP published three CompEX editions of MicroSCOPe to communicate messaging on the interpretation and implementation of the compounding standards. Fillable PDF templates were also created and posted on the CompEX section of the SCPP website for member use.

One-on-one consultations continue with pharmacy managers who reach out for further guidance on meeting facility compliance. The compounding inspector has been providing facility feedback through photo submissions, Skype calls, and in-person visits.





The Community Pharmacy Professionals Advancing Safety in Saskatchewan (COMPASS) Continuous Quality Improvement (CQI) program became mandatory in Saskatchewan community pharmacies Dec. 1, 2017. Since this implementation date, there have been over 30,000 medication incidents reported into the CPhIR system.

On average, 146 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 system (cphir.ca) for reporting medication errors and near misses (medication incidents)
- MSSA (Medication Safety Self-Assessment) tool (ismp-canada.org/mssaf) for identifying proactively any potential safety issues
- 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 CQI bylaw requirements. The surcharge also includes an administrative fee for the program.

Breakdown of surcharge:

CPhIR subscription \$ 340.00
Administration fee \$ 160.00
Total COMPASS surcharge \$ 500.00

Number of Participating Pharmacies

As of Dec. 31, 2020, there were a total of 414 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 213 individuals that took the online training in 2020.

This included 52 pharmacists/pharmacy technicians and 161 students. Both the fourth year BSP students and second year PharmD students received the training.

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 2020, by email and via newsletter articles in SCOPe, SMART Medication Safety agendas and the [directions] newsletters.

To facilitate communication between SCPP and the COMPASS pharmacies, the [directions] newsletter was developed in 2015. The newsletter is intended to provide pharmacies with information about using the COMPASS tools, relevant safety information, education opportunities around safety, other initiatives (e.g., Pharmaceutical Information Program's Quality Improvement Program (PIP QIP)), and any "good catches."

Four editions of the [directions] newsletter were published and distributed in 2020.

Pharmacy Safety Resources

To assist pharmacy staff with education for the COMPASS program, several online resources are available on the College website.

- Resources added to the COMPASS tab on the website include the Incident Reporting Cheat Sheet.
- Resources revised on the COMPASS tab on the website include the COMPASS Quality Improvement Coordinator Manual.

Statistics

Statistics for incident reporting in the CPhIR system from September 2013 (Phase I) until the end of December 2020:

Total number of incidents reported: 30,422. Total number of pharmacies that have entered at least one incident: 398

The top five types of incidents:	Incorrect dose/frequency: Incorrect quantity: Incorrect drug: Incorrect strength/concentration: Incorrect patient:	7,143 5,226 5,084 3,149 2,757
Outcomes of reported incidents:	No error: No harm: Harm:	18,243 11,329 849

The total number of pharmacies since Phase 1 that have started or completed their MSSA was 386. As well, the total number of CQI meetings held during that time was 742.

COMPASS Statistics

Number of incidents, users, and COMPASS activities for 2020

Month	Incidents Reported	Users	MSSAs (started or completed since inception)	CQI Meetings
January	743	164	365	42
February	563	166	369	20
March	362	128	369	29
April	393	126	368	15
May	391	134	368	12
June	425	154	368	15
July	438	148	369	7
August	403	143	369	16
September	458	148	370	17
October	339	125	378	25
November	396	157	382	31
December	426	156	386	34



COMPASS Activities - 2020

The above chart shows the number of pharmacies (users) submitting incidents have remained steady over the year. On average there were 146 pharmacies reporting each month to the CPhIR program. The highest number of users was seen in January and February, which corresponds with the highest number of incidents reported. Other than January and February there was a steady number of incidents reported over the year.

MSSA completed or started saw an increase over the last quarter of the year. This was likely due to the resumption of QIRs in September after being put on hold due to COVID-19.

Most of the initial MSSAs were completed in 2017 and 2018 when the COMPASS program was implemented. MSSAs must be completed every two years, therefore pharmacies should have completed a second MSSA or be in the process of completing their second MSSA.

QIRs reveal there are several pharmacies that have yet to complete their second MSSA. This is being resolved through the QIR process and requirements for permit renewal.

CQI meetings held month-to-month saw a substantial decrease over the year, particularly in the summer months. However, through the fall, the number of meetings increased again. The highest number of meetings were held in January and the lowest number in July.



Monitoring Effectiveness of COMPASS

To monitor the effectiveness of the COMPASS program and identify areas for improvement, the COMPASS Committee was created in 2018. The committee had one meeting in October 2020.

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 every two years. Plans to administer the next SAQ are in place for 2021. 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 SCPP website for review.

Monitoring quality improvement activities in pharmacies during the QIRs commenced in January 2020. However due to the COVID-19 pandemic, QIRs were put on hold in March 2020, but were resumed in September 2020. There were 97 QIRs completed in 2020. QIRs are completed by the field officers using the ConnectWise™ program. It is anticipated that every pharmacy will have had a QIR by the end of 2021.

The Medication Safety Cultural Indicator Matrix (MedSCIM) tool is one of the assessment tools that is 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. A comparison of the MedSCIM results prior to 2020 and during 2020 has shown an improvement in both completeness of the report and the maturity of the safety culture within community pharmacies.

Maturity of Culture	20	19	2020		
of Medication Safety	No. of Incidents	Frequency	No. of Incidents	Frequency	
Grade D: Pathological	51	20.0%	23	6.7%	
Grade C: Reactive	120	47.1%	52	15.0%	
Grade B: Calculative	39	15.3%	49	14.2%	
Grade A: Generative	45	17.6%	222	64.1%	

A significant improvement was also seen in the maturity of culture to medication safety, where the number of Level A incidents increased from 18 per cent in 2019 to 64 per cent in 2020.

Complaints Committee Report

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 2020, the Complaints Committee met in person on one occasion, and virtually on eight occasions 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 member's file.
- Refer the file to an Alternative Dispute Resolution (ADR) Process.
- Refer the file to the Fitness to Practise Committee.
- Refer the file to a Discipline Hearing.

Disposition of files during the year was as follows:

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

• One file remains open for investigation.

Reviewed nine files from 2019, closing seven files:

- Three files closed with no further action.
- Three files closed with an apology.
- One file closed with cautionary letters to the member(s).
- Zero files remain open for investigation.
- Two files were referred to the Discipline Committee.

Reviewed 52 files from 2020, closing 34 files:

- 13 files closed with no further action.
- 11 files closed with an apology.
- 10 files closed with cautionary letters to the member(s).
- Three files remain open for investigation.
- Eight files were referred to ADR.
- Two files were referred to the Fitness to Practise Committee.
- Five files were referred to the Discipline Committee.

Of the 52 files received in 2020, 15 files were initiated by SCPP while 37 files were submitted by members of the public.

Discipline Hearings

Four files referred to a Discipline Hearing in 2019 were heard in 2020. Three files referred to a Discipline Hearing in 2020 were heard in 2020. There are seven files remaining to have a Discipline Hearing in 2021.

In continuing efforts to increase transparency, the Complaints and Discipline section on the website was expanded to help both members and the public navigate complaint processes, hearing schedules, and discipline decisions. Visitors to the site are now able to easily see the life cycle of a complaint and apply to attend a hearing.

The Complaints Committee wishes to thank all members who received correspondence throughout 2020 for your cooperation in responding to the Committee.

Complaints

The disposition of the complaints files is summarized as follows:

Complaints Summary	2014	2015	2016	2017	2018	2019	2020
New files	32	37	38	33	51	40	52
Closed files	38	32	32	33	26	21	34
Files referred to the Discipline Committee	0	2	5	7	7	6	5
Files referred to the ADR process including to the Fitness to Practise Committee	1	4	3	6	4	4	10
Files open for investigation	5	7	12	14	14	9	3

^{*}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.



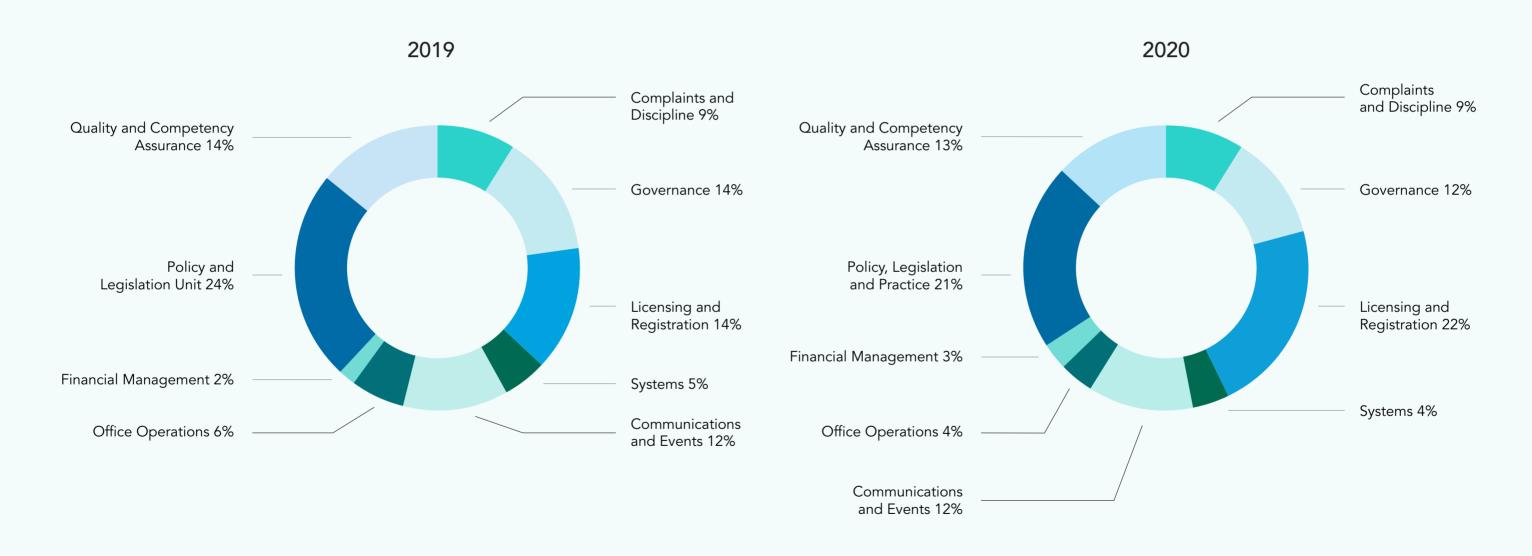
The trends in the types of complaints by allegation are summarized as follows:

Complaints Summary	2014	2015	2016	2017	2018	2019	2020
Advertising	0	0	2	1	1	0	0
Alcohol Drug Abuse	2	1	2	1	1	1	4
Communication/Unprofessional Behaviour	24	26	30	23	25	17	17
Medication Errors	11	12	17	14	22	10	15
Record Keeping	1	4	1	5	1	1	6
Bylaws/Standards/Guideline /Ethical Infractions	7	11	9	16	6	16	35
Prescription Transfers	2	0	0	0	2	2	4
Billing Irregularities/Overcharging	4	2	1	11	9	1	6
Inappropriate Product Selection	1	0	0	1	0	0	1
Unsupervised Assistant	4	2	0	1	0	0	2
Prescription Short Fills	4	0	2	1	1	1	0
Pharmacist Not on Duty	1	0	0	3	0	3	3
Dispensing Without Authority	2	2	2	3	1	4	2
Breach of Confidentiality/Privacy	6	7	7	3	6	5	7
Adverse Drug Reaction (otc)	0	2	0	3	0	2	1
Refusal to Fill	4	3	3	3	1	2	2
Patient's Right to Choose Pharmacy	6	2	0	1	2	1	3
Privacy/Pharmacy Assistant	4	8	0	0	1	1	0
Miscellaneous/Other	12	16	29	5	24	22	42
Proprietary				8	0	5	10
Injection				5	1	3	2
TOTAL	95	98	105	108	104	97	162



Other Activities of the Registrar's Office

As part of the strategic plan, staff responsibilities were defined within functional units to measure and ensure resources were being aligned to priorities. The results below reflect 2019 and 2020, respectively.



Comparison between 2019 and 2020

- Governance, and Policy and Legislation, stayed relatively consistent between 2019 and 2020 with 38 per cent and 33 per cent, respectively. Registration and Licensing increased from 14 per cent to 22 per cent due to increased demands and questions from members, candidates, and pharmacy permit changes throughout the pandemic.
- Systems stayed consistent and was five per cent in 2019 and four per cent in 2020.
- Communications and Events stayed the same in 2019 and 2020 at 12 per cent.
- Office operations was lower in 2020 by two per cent due to more staff working from home.
- Financial management stayed consistent between 2019 and 2020 at two per cent and three per cent, respectively.
- Quality Improvement and COMPASS/Field Operations stayed consistent between 2019 and 2020 at 14 per cent and 13 per cent, respectively.
- Complaints remained unchanged between 2019 and 2020 at nine per cent.

Other Activities of the Registrar's Office included:

- Published four regular editions of SCOPe, our e-newsletter, plus six editions of MicroSCOPe and three editions of CompEX microSCOPe.
- Planned our 109th Annual General Meeting which was conducted virtually for the first time in College history due to the pandemic.
- Continued collaboration with the College of Pharmacy and Nutrition to partner in professional development activities for members, in particular, updating of the majority of the 27 minor ailments documents, facilitating a training program on low dose/exempted codeine, facilitating mandatory harm reduction training programs (primer and advanced) and completing the first round of pharmacy manager training competencies in addition to the Saskatchewan specific module.
- 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.
- 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 are 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) 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.
- 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 (CPDPP) Unit.
- Policy development and issues management required considerable staff involvement in research, coordinating and drafting documents.
- Enhanced cybersecurity both internally and externally including a full systems analysis.
- 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.

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS ANNU

- Worked collaboratively with Health Canada to enable a Section 56 exemption at the start of the pandemic to remove barriers regarding CDSA drugs, enabling verbal prescriptions, transferring prescriptions when appropriate, delivering CDSA drugs and authorizing extensions of prescriptions when appropriate.
- Continue to meet monthly with the College of Physicians and Surgeons of Saskatchewan (CPSS) to discuss and collaborate on initiatives.
- The Registrar virtually attended the National Association of Boards of Pharmacy/American Association of Colleges of Pharmacy (NABP/AACP) District V Annual Meeting that was to have taken place in Winnipeg in August.
- Officers of Council and the Executive Leadership team attended a full day virtual Tri-Provincial meeting between British Columbia, Alberta and Saskatchewan that was hosted by the Alberta College of Pharmacy in November.

Conclusion

On behalf of all staff, I extend our sincere appreciation to President Scott and members of Council and all committees and appointees for your vision, leadership, loyalty and dedication.

We salute and sincerely appreciate the sacrifices you have made to serve the College in a very challenging year. Your contributions have been substantial, and we are honoured to work with such dedicated volunteers.

Sincere thanks are also extended to Dawn Martin and staff of the Pharmacy Association of Saskatchewan (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 Guillemin, Kathleen Handford, Marlon Hector, 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 commitment and first-rate dedication. The College is fortunate to have such gifted staff.

Respectfully submitted,

Jeana Wendel,

Registrar – Treasurer 2020

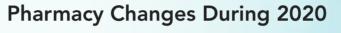


PHARMACISTS								
As of Dec. 31		2014	2015	2016	2017	2018	2019	2020
Practising								
	Community	1049	1097	1128	1154	1174	1174	1151
	Hospital	254	264	274	286	312	346	344
	Other	204	201	217	217	218	224	203
	Conditional	3	6	10	6	9	12	7
Total Practising Phar	macists	1510	1568	1629	1663	1713	1756	1705
Non-Practising		42	43	46	51	51	53	54
Retired		99	104	102	106	108	95	97
Associate		48	47	44	41	37	30	27
Suspended						1	2	3
Total Non-Practising	Pharmacists	189	194	192	198	197	180	181
PHARMACY TECHI	VICIANS							
Practising								
	Community		3	24	55	85	144	147
	Hospital		3	45	117	167	194	205
	Other		0	13	23	22	35	23
Total Practising Phare Technicians	macy		6	82	195	274	373	375
Non-Practising				0	2	1	5	7
Retired				0	0	0	0	0
Associate				0	0	0	0	0
Total Non-Practising	Pharmacy Technic	ians		0	2	1	5	7
TOTAL MEMBERS		1699	1768	1903	2058	2185	2314	2268

^{*} Regulation of pharmacy technicians did not begin until October 2015.

PHARMACI	ES							
As of Dec. 31		2014	2015	2016	2017	2018	2019	2020
	Community	343	346	351	366	370	390	400
	Satellite	8	8	9	9	8	8	9
	Dispensing Physician	7	7	7	6	6	6	5
TOTAL PHAR	MACIES	358	361	367	381	384	404	414

^{*} Moving forward, pharmacy statistics will reflect permit effective dates. Previous statistics reflect application approval dates.



- 16 Openings
- 5 Closures
- 77 Manager Changes
- 5 Pharmacy Ownership Changes
- 12 Corporate Share Purchases
- 7 Trade Name Changes
- 3 Relocations
- 11 Renovations
- 8 Lock and Leave Permits Issued
- 123 Lock and Leave Amendments

Continued



Registration and Membership Statistics 2020

International Pharmacy Graduates (IPGs)

- 5 approved for appraisal training
- 19 engaged in appraisal training
- 11 completed appraisal training/assessment process

Pharmacists

- Total registration: 45
- Saskatchewan BSP graduates: 4 (Conditional Practising Memberships were no longer offered after March 25, 2020. As 2020 graduates were unable to complete their PEBCs in spring of 2020 due to the pandemic, this number indicates 2019 graduates.)
- Candidates from other jurisdictions: 41
 - Candidates from other Canadian provinces: 27
 - ▶ IPGs: 14
- Reinstatements: 4
- Total terminations: 100
- Non-payment of dues: 49
- ▶ By request: 51
- Members deceased: 4
- Converted to retired membership: 18

Pharmacy Technicians

- Total registration: 29
 - Saskatchewan Polytechnic graduates: 12
 - Non-CCAPP graduates: 8
- ▶ CCAPP graduates: 4
- ▶ Candidates from other jurisdictions: 3
- Reinstatements: 2
- Total terminations: 24

Jurisprudence Examinations

- Total exams administered: 71
 - Jurisprudence examinations administered for pharmacists: 42
 - · Canadian candidates: 30
 - IPGs: 12
- ▶ Jurisprudence examinations administered for pharmacy technicians: 29 Canadian candidates

Interns

- Pharmacist interns registered: 91
 - From University of Saskatchewan: 89
 - From out of province: 2
- Pharmacy Technician interns registered: 17
- From Saskatchewan Polytechnic: 15
- From out of province: 2

Criminal Record Checks

- Required to submit a Criminal Record Check (CRC):
 - Pharmacists: 566 out of a total of 1705
 - Pharmacy technicians: 87 out of a total of 383

Training

- Prescriptive Authority Level I trained: 100%
- Prescriptive Authority Minor Ailments trained: 98%
- Pharmacists with Advanced Method Certification (AMC): 1178
- Members who completed Harm Reduction training: 65
- Members who completed Low-Dose (Exempted) Codeine training: 137

Financials for the Fiscal Year Ended Dec. 31, 2020

REVENUE						
	Actual	Budget	Variance	Comments		
Fees and Licences (Schedule 1)						
Pharmacy permit amendments	22,736	18,921	3,815			
Non-Practising members	82,695	80,579	2,116			
Other fees	75,152	90,676	(15,524)	Waived late fees due to COVID and less Canadian Candidates and IPGs resulting in less jurisprudence exams		
Pharmacy permits	769,313	618,412	150,901	Increase in pharmacies and recognize 2019 11/12 deferred fee increase in 2020		
Practising members (licences)	2,541,500	2,584,793	(43,293)	COVID - unable to license new 2020 grads		
COMPASS Surcharge	212,292	208,000	4,292			
Registration	44,173	63,105	(18,932)	COVID - reduced registrations - new grads and Canadian Candidates		
Sub-total	3,747,861	3,664,486	83,375			
Sundry (Schedule 2)						
Expense recoveries	10,969	2,000	8,969	Failure to file fee - policy not to budget		
Rental Income	40,788	44,430	(3,642)			
Other	13,065	57,629	(44,564)	Funding for Competency Assurance work not used in 2020 due to COVID		
Recovery of discipline costs	158,191	-	158,191	Policy is not to budget for Discipline Costs		
Sub-total	223,013	104,059	118,954			
Investment Income	213,749	75,000	138,749	Market outperformed		
TOTAL	4,184,623	3,843,545	341,078	Excess due to investments and Discipline Costs		

DEFICIT OR EXCESS OF REVENUES OVER EXPENSES									
	Actual Budget Variance Comments								
	437,740	(213,440)	651,180	2020 budget was approved to use \$244,964 from reserves					

EXPENSES				
	Actual	Budget	Variance	Comments
Administration (Schedule 3)				
Accounting	23,137	21,597	1,540	
Bad Debt	18,692	-	18,692	Policy is not to budget for bad debt - Jennifer Yaholnitsky unpaid Discipline Costs
Building operations	299,886	330,732	(30,846)	Tenant improvement rebate added in
Employee benefits	213,134	232,765	(19,631)	Lower health spending account top up and group insurance savings
Equipment rental/maint.	98,973	97,577	1,396	
General office	188,566	250,159	(61,593)	Due to COVID priorities competency assurance project was not started and funds not used
Postage	18,539	15,349	3,190	
Printing and stationery	14,160	30,493	(16,333)	Internal efficiencies
Travel (staff expenses)	50,908	104,000	(53,092)	Only essential travel due to COVID and virtual meetings throughout 2020
Salaries	1,921,412	1,907,481	13,931	On-boarding of new staff
External consultants	15,250	18,000	(2,750)	Refresh and redo jurisprudence exam
Telephone and fax	39,326	34,215	5,111	
Sub-total	2,901,983	3,042,368	(140,385)	
Amortization	76,861	50,000	26,861	Estimate
Continuing education	134,360	150,060	(15,700)	Minor ailment work not paid in 2020 will be paid in 2021 and less members due to 2020 grads
Council	26,349	117,284	(90,935)	COVID - no travel or accommodation costs
Delegates	587	26,380	(25,793)	COVID - no travel or accommodation costs
Interest	854	-	854	
Legal and audit	244,374	246,281	(1,907)	
Miscellaneous	4,395	6,000	(1,605)	
Other committees	42,226	91,084	(48,858)	COVID - no travel or accommodation costs
Public and professional relations	174,389	186,088	(11,699)	
COMPASS	140,505	141,440	(935)	
TOTAL	3,746,883	4,056,985	(310,102)	

Council/Executive

Stephanie Scott, President

Marilyn Younghans, Past President

Rod Amaya, President-Elect

Amy Wiebe, Vice-President and Division 8

Bradley Cooper, Division 1

Kyla Jackson, Division 2

Jashvant Patel, Division 3

Shauna Nowakowski, Division 4

Scott Szabo, Division 5

Brandon Krahn, Division 6

Tania Horkoff, Division 7

Jane Alcorn, Ex Officio

Yvonne Shevchuk, Designate Ex Officio

Mark Hawkins, Public Rep.

Michael Lummerding, Public Rep.

Bonnie Caven, Public Rep.

 ${\sf Kelly \, Hu, \, Observer - Senior \, Stick}$

Lyndsay Brakstad, Observer – Pharmacy Technician

Michelle Miller, Observer – Pharmacy Technician

Jeana Wendel, Registrar

Ingrid Wakefield, Staff Admin. Support

Committees

Audit

Rod Amaya, President-Elect

Bonnie Caven, Public Rep.

Stephanie Scott, President

Amy Wiebe, Vice-President

Marilyn Younghans, Past President

Ingrid Wakefield, Staff Admin. Support

Jeana Wendel, Registrar

Nominating

Bonnie Caven, Public Rep.

Bill Gerla, Former Past President and Practising Member

Justin Kosar, Former Past President and Practising Member

Stephanie Scott, President

Marilyn Younghans, Past President

 $Ingrid\ Wakefield,\ Staff\ Admin.\ Support$

Jeana Wendel, Registrar

Finance

Rod Amaya, President-Elect

Stephanie Scott, President

Amy Wiebe, Vice-President

Ingrid Wakefield, Staff Admin. Support

Jeana Wendel, Registrar

Registration and Licensing Policies

Ginger Beal, Voting Member

Amanda Deis, PhT Voting Member

Danielle Larocque, Voting Member

Andrea Lockwood, Voting Member

Sharon Lyons, Voting Member

Carol Pannell, Voting Member

Maitrik Patel, Chair

Dhvani Thakkar, Voting Member

Christina McPherson, Staff Admin. Support

Lori Postnikoff, Staff Advisory Member

Competency Assurance

Louisa Chan, Voting Member

Robyn Federko, Voting Member

Karen Jensen, Chair

Danielle Larocque, Contract Advisor

Sue Mack-Klinger, Designate

Rizza Pardillo, Voting Member

Dawn Rietdijk, Voting Member

Blair Seifert, Voting Member

Maria Sherring, Voting Member

Erin Yakiwchuk, Voting Member

Christina McPherson, Staff Admin. Support

Lori Postnikoff, Staff Advisory Member

Awards and Honours

Zack Dumont, Voting Member

Monica Lawrence, Chair

Shauna Gerwing, Voting Member

Arlene Kuntz, Voting Member

Bridget Zacharias, Voting Member

Christina McPherson, Staff Admin. Support

Lori Postnikoff, Staff Advisory Member

Complaints

Erin Cardwell, Voting Member
Lori Friesen, Voting Member
Bill Gerla, Voting Member
Michael Hewitt, Chair
Manan Patel, Voting Member
Leah Perrault, Voting Member
lan Rea, Public Member
Jenna Soehn, Voting Member
Chantal Lambert, Staff Advisory Member
Tami Schwebius, Staff Admin. Support

Discipline

Lyle Brandt, Voting Member
Bonnie Caven, Public Rep.
Mike Davis, Chair
Mark Hawkins Public Rep.
Spiro Kolitsas, Voting Member
Justin Kosar, Voting Member
Cheryl Lalonde, Voting Member
Michael Lummerding, Public Rep.
Eric Pederson, Voting Member
Marshall Salloum, Voting Member
Tyler Sutter, Voting Member
Margaret Wheaton, Voting Member
Ingrid Wakefield, Staff Admin. Support
Jeana Wendel, Staff Advisory Member

COMPASS

Bevin Akister, Voting Member

Darsh Brahmbhatt, Voting Member

Ian Fleck, Voting Member

Matt Lyons, Voting Member

Sue Mack-Klinger, Voting Member

Stephanie Scott, Voting Member

Jeannette Sandiford, Staff COMPASS Lead

Meaghan Underwood, Staff Admin. Support

Fitness to Practise

Beverly Brooks, Voting Member
Melanie McLeod, Chair
Shannan Neubauer, Voting Member
Caitlin Peterman, Voting Member
Robin Sander, Voting Member
Cara Sogz, Voting Member
Kelly Vinge, Voting Member
Christina McPherson, Staff Admin. Support
Lori Postnikoff, Staff Advisory Member

Professional Practice

Nicole Bootsman, Voting Member Myla Bulych, PAS Rep. Noting Member Kristjana Gudmundson, PAS Rep. Voting Member Jeffrey Herbert, CSHP SK Rep./Voting Member Kyla Jackson, Council Rep./Chair Deven Johnson, Voting Member Kelly Kizlyk, medSask Rep./Voting Member Tamara Lange, Voting Member Sue Mack-Klinger, Sask Polytech. Rep./Voting Member Lindsey McComas, Voting Member Shauna Nowakowski, PhT Voting Member Colleen Thurber, PhT Voting Member Darshan Brahmbhatt, Advisory Member Lyndsay Brakstad, Advisory Member Nancy Dyck, Advisory Member Bindu Shebi George, Advisory Member Kathleen Handford, Staff Advisory Member Christina McPherson, Staff Admin. Support Lori Postnikoff, Staff Advisory Member Brittany Sharkey, Staff Advisory Member

Staff

Executive

Jeana Wendel, Registrar Lori Postnikoff, Deputy Registrar

Executive Assistance

Christina McPherson, Administrative Assistant to the Deputy Registrar

Ingrid Wakefield, Executive Assistant to the Registrar

Administrative Support

Darlene King, Reception and Office Operations Coordinator

Registration, Licensing, Permits

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

Pat Guillemin, Pharmacy Permits and Systems Manager, Pharmacy Relations

Heather Neirinck, Registration and Systems Administrator, Member Relations - Pharmacists

Audrey Solie, Registration Administrator, Member Relations – Pharmacists

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

Field Operations, Professional Practice, COMPASS

Jeannette Sandiford, Assistant Registrar – Field Operations and Quality Assurance

Fatima Khan, Field Officer

Brittany Sharkey, Certified Compounding Inspector – Field Officer

Meaghan Underwood, Administrative Coordinator for Field Operations and Quality Assurance

Complaints and Discipline

Chantal Lambert, Assistant Registrar – Complaints Director

Tami Schwebius, Complaints Manager

Policy and Legislation

Kathleen Handford, Director of Policy and Legislation

David Chou, Pharmacy Policy and Practice Consultant

Natalie Rediger, Pharmacy Policy and Practice Consultant

Kim Samoila, Policy Analyst

Communications

Cheryl Wyatt, Communications Coordinator (Jan. to April 2020)

Marlon Hector, Communications Coordinator (April 2020 onward)

Appointees

Suzanne Gulka
The Pharmacy Examining Board of Canada
(PEBC)

Christine Hrudka

University of Saskatchewan Senate

Danielle Larocque

Canadian Council on Continuing Education in Pharmacy (CCCEP)

Linda Sulz

University of Regina Senate

Jeana Wendel

National Association of Pharmacy Regulatory Authorities (NAPRA)



Minutes of the 109th Annual General Meeting

Sept. 23, 2020 Virtual Chairperson – Marilyn Younghans

1. Past President's Welcome - Marilyn Younghans at 10:10am.

Chairman Younghans called the meeting to order and welcomed those members present to the 109th Annual General Meeting of the Saskatchewan College of Pharmacy Professionals (SCPP).

2. SCPP 2020/2021 Council Introduction – Marilyn Younghans, Past President

Chairman Younghans of Lloydminster introduced the Council members:

Officers: President, Stephanie Scott, Weyburn; President-Elect, Rod Amaya, Saskatoon; Vice-President, Amy Wiebe, Saskatoon; Past President, Marilyn Younghans, Lloydminster

Councillors: Bradley Cooper, Estevan; Kyla Jackson, Hudson Bay; Jashvant Patel, Prince Albert; Shauna Nowakowski, Saskatoon; Scott Szabo, Regina; Brandon Krahn, Swift Current; Tania Horkoff, Saskatoon; and Amy Wiebe, Saskatoon

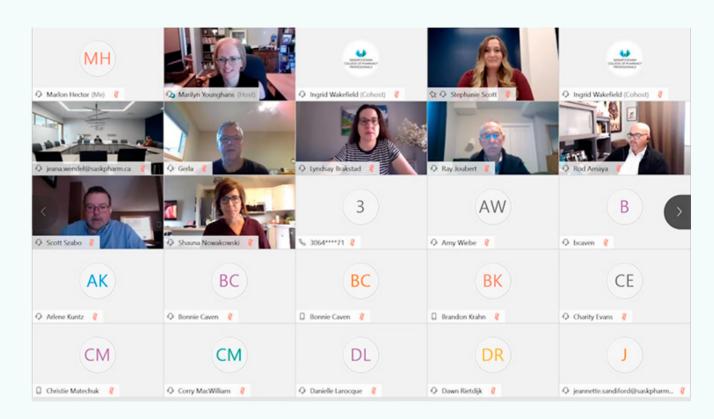
Ex-Officio: Dean Dr. Jane Alcorn, Saskatoon (regrets)

Dean's Designate: Dr. Yvonne Shevchuk, Saskatoon

Public Reps: Mark Hawkins, Regina, Michael Lummerding, St. Brieux (regrets) and Bonnie Caven, Regina

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

Senior Stick Observer: Kelly Hu, Saskatoon



3. SCPP Council Elections - Marilyn Younghans

Chairman Younghans extended a special thank you to Justin Kosar for years of commitment and dedication to the College, as Justin Kosar retires from Council. Chairman Younghans also thanked Palima Shrestha, Senior Stick, who represented the students over the past year. This year Divisions 2, 4, 6 and 8 were open for election. In Division 2 and 4 elections were held, and Kyla Jackson was elected for Division 2 and Shauna Nowakowski was elected for Division 4. Division 6 and 8 were won by acclamation, Brandon Krahn was elected for Division 6 and Amy Wiebe was elected for Division 8.

"We are immensely proud to report that for the first time in the College's history, we have a voting pharmacy technician. Congratulations Shauna."

4. Other Officials – Marilyn Younghans

Appointee to the Canadian Council on Continuing Education in Pharmacy: Danielle Larocque; Appointee to the National Association of Pharmacy Regulatory Authorities: Jeana Wendel; Appointee to the Pharmacy Examining Board of Canada: Suzanne Gulka; Appointee to the University of Saskatchewan Senate: Christine Hrudka; and Appointee to the University of Regina Senate: Linda Sulz.

5. Memorial to Deceased Members - Marilyn Younghans

Albert Broudy	Kirsty Carlson	Chuck Chow	Lee Collingridge
Neil Donaldson	Warner Fyfe	Dave Gallon	Bryce Green
D.J. MacCrimmon	Jeannette Maxted	Arthur Mickelson	Clair Paul
Roxane Skelton	Larry Voqt	George Watteyne	

6. Reports

6.1 President's Annual Report – Marilyn Younghans

Past President, Marilyn Younghans referred members to her published report beginning on page five of the printed Annual Report which summarizes the activities of the College and demonstrates how we monitor and evaluate performance according to the strategic goals.

Past President Younghans invited questions from the floor arising from the President's report.

There were no questions.

6.2 Registrar's Report and Auditor's Report/Report of the Finance and Audit Committee – Jeana Wendel

Chairman Younghans invited the Registrar, Jeana Wendel, to present her report. Ms. Wendel referred to her printed report beginning on page 9 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.

6.3 Consideration of Annual Report as Emailed to Members on May 21, 2020 – Marilyn Younghans

Chairman Younghans called for questions or comments on the Annual Report.

There were no questions.

7. New Business - Marilyn Younghans

Chairman Younghans called for any other new business.

There was no new business.

8. Adjournment - Marilyn Younghans at 10:34 am

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

Marilyn Younghans, Past President

Jeana Wendel, Registrar



Deloitte.

Deloitte LLP 2103 11th Avenue 9th Floor Bank of Montreal Building Regina, SK S4P 3Z8 Canada

Tel: 306-565-5200 Fax: 306-757-4753 www.deloitte.ca

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, 2020, 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, 2020, 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 June 9, 2021

Saskatchewan College of Pharmacy Professionals Statement of financial position

As at December 31, 2020

			Capital and		
			Intangible	2020	2010
	Maria	Operating	Asset	2020	2019
	Notes	Fund	Fund	Total	Total
		<u> </u>	\$	\$	\$\$
Current assets					
Cash		841,252	_	841,252	624,992
Marketable securities	3	2,525,551	13,409	2,538,960	2,262,730
Accounts receivable	5	76,332	13,403	76,332	167,165
Due from the SCP Centennial Scholarship Fund Inc.	9	6,609		6,609	10,609
Government remittances receivable		9,506		9,506	32,925
Prepaid expenses		158,805		158,805	165,819
Tropala expenses		3,618,055	13,409	3,631,464	3,264,240
Capital and intangible assets	4	_	1,010,524	1,010,524	1,082,228
		3,618,055	1,023,933	4,641,988	4,346,468
Current liabilities					, , , , , , ,
Accounts payable	5	272,558	_	272,558	380,149
Fees and licences collected in advance		2,192,210	_	2,192,210	2,177,700
Current portion of deferred lease incentive		19,077		19,077	19,077
Current portion of obligations under capital leases				· _	24,923
		2,483,845		2,483,845	2,601,849
Deferred lease incentive		146,260	_	146,260	170,476
		2,630,105		2,630,105	2,772,325
Fund balances					
Invested in capital and intangible assets		-	1,010,524	1,010,524	1,057,305
Externally restricted for building development		-	13,409	13,409	12,351
Unrestricted		987,950		987,950	504,487
		987,950	1,023,933	2,011,883	1,574,143
		3,618,055	1,023,933	4,641,988	4,346,468
Commitments	8				
See accompanying notes					
Annual de Council	,				
Approved by Council					
, Councillor					
, Councillor					
, Councillor					
, Councillor					

Statement of operations and changes in fund balances Year ended December 31, 2020

				Capital and	Capital and		
				Intangible	Intangible		
		Operating	Operating	Asset	Asset		
		Fund	Fund	Fund	Fund	Total	Total
	Notes and	2020	2019	2020	2019	2020	2019
	schedules	\$	\$	\$	\$	\$	\$
Revenues							
Fees and licences	Schedule 1	3,747,861	3,349,692		_	3,747,861	3,349,692
Sundry	Schedule 2	223,013	138,837	_	_	223,013	138,837
Investment income (loss)		212,555	210,159	1,194	1,203	213,749	211,362
		4,183,429	3,698,688	1,194	1,203	4,184,623	3,699,891
Expenses							
Administration	Schedule 3	2,901,983	2,642,004	_	_	2,901,983	2,642,004
Amortization		-	-	76,861	62,602	76,861	62,602
COMPASS subscription		140,505	136,737	_	_	140,505	136,737
Continuing education		134,360	152,760	_	_	134,360	152,760
Council		26,349	147,134	_	_	26,349	147,134
Delegates		587	12,640	_	_	587	12,640
Interest		_	_	854	4,736	854	4,736
Legal and audit		244,374	278,042	_	_	244,374	278,042
Miscellaneous		4,395	5,412	_	_	4,395	5,412
Other committees		42,226	47,851	_	_	42,226	47,851
Public and professional relations		174,389	184,189	_	-	174,389	184,189
		3,669,168	3,606,769	77,715	67,338	3,746,883	3,674,107
Excess (deficiency) of revenues over ex	penses	514,261	91,919	(76,521)	(66,135)	437,740	25,784
				, , ,	,	•	·
Fund balance, beginning of year		504,487	1,113,246	1,069,656	435,113	1,574,143	1,548,359
Interfund transfers	6	(30,798)	(700,678)	30,798	700,678	· · · -	
Fund balance, end of year		987,950	504,487	1,023,933	1,069,656	2,011,883	1,574,143
		,		•			

See accompanying notes

Statement of cash flows

Year ended December 31, 2020

	2020	2019
Note	\$	\$
Cash flows from (used in)		
operating activites		
Excess (deficiency) of revenues over expenses	437,740	25,784
Items not affecting cash		·
Amortization	76,861	62,602
Unrealized gain on marketable securities	(176,230)	(15,940)
Net change in non-cash working capital balances 7	7,969	890,092
	346,340	962,538
Cash flows used in		
investing activities		
Capital asset purchases	(5,157)	(586,869)
Purchase of marketable securities	(1,800,000)	(1,947,832)
Redemption of marketable securities	1,700,000	2,516,000
readinption of marketable securities	(105,157)	(18,701)
	(103,137)	(10,701)
Cash flows used in		
financing activities		
Capital lease principal payments	(24.022)	(40.440)
Capital lease principal payments	(24,923)	(40,440)
Increase in cash during the year	(24,923)	(40,440)
	216,260	903,397
Cash (bank overdraft), beginning of year	624,992	(278,405)
Cash, end of year	841,252	624,992

See accompanying notes

Notes to the financial statements December 31, 2020

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:

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.

The global pandemic declared by the World Health Organization on March 11, 2020 due to the outbreak of COVID-19 has cast uncertainty on the estimates, assumptions, and critical judgements exercised by management. Although the development of successful vaccine candidates towards the end of 2020 signals a turning point in pandemic, ongoing delays in the deployment of these vaccine and continuing public health restrictions indicate that the pandemic will continue to negatively impact the Canadian economy for the foreseeable future.

COVID-19 did not have a significant impact on the College's financial statements for the year ended December 31, 2020.

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.

Notes to the financial statements December 31, 2020

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, 2020 relate to the membership year July 1, 2020 through June 30, 2021 and to the license year December 1, 2020 through November 30, 2021.

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.

Notes to the financial statements December 31, 2020

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:

	2020	2019
	Fair value	Fair value
	\$	\$
Operating fund		
Fixed income	1,909,933	1,788,207
Equities	615,618	462,172
	2,525,551	2,250,379
Capital and intangible asset fund		
Fixed income	8,005	7,952
Equities	5,404	4,399
	13,409	12,351
Total		_
Fixed income	1,917,938	1,796,159
Equities	621,022	466,571
	2,538,960	2,262,730

4. Capital and intangible assets

		Accumulated	2020 Net book	2019 Net Book
	Cost	amortization	value	Value
	\$	\$	<u> </u>	\$
Land	15,000	_	15,000	15,000
Building	336,039	318,616	17,423	28,624
Equipment	255,764	254,098	1,666	2,487
Equipment under capital lease	14,704	14,704	´ –	· —
Furniture and fixtures	212,106	154,185	57,921	72,401
Leasehold improvements	1,009,757	91,243	918,514	963,716
Software	99,150	99,150	· –	· –
	1,942,520	931,996	1,010,524	1,082,228

Notes to the financial statements

December 31, 2020

5. Accounts payable

	2020	2019
	\$	\$
Trade	247,894	355,485
Funds held in trust	24,664	24,664
	272,558	380,149

2020 2010

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. Interfund transfers

Amounts transferred from the Operating Fund of \$30,798 (2019 – \$700,678) 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.

7. Net change in non-cash working capital balances

	2020	2019
	\$	\$_
Decrease (increase) in assets Accounts receivable Due from the SCP Centennial Scholarship Fund Inc. Government remittances receivable Prepaid expenses	90,833 4,000 23,419 7,014	6,859 (4,000) (17,073) (12,573)
Increase (decrease) in liabilities		
Accounts payable	(107,591)	211,650
Fees and licences collected in advance	14,510	515,676
Deferred lease incentive	(24,216)	189,553
	7,969	890,092

Non-cash transactions

During the year, the College acquired \$5,157 in capital assets (2019 – \$655,620) of which \$nil is included in accounts payable at December 31, 2020 (December 31, 2019 - \$68,751).

8. 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.

Notes to the financial statements December 31, 2020

8. Commitments (continued)

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

	\$
2021	101,920
2022	101,920
2023	101,920
2024	101,920
2025	109,760

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.

9. 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.

10. 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.

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.

Notes to the financial statements December 31, 2020

11. Comparative figures

Certain comparative figures have been reclassified to conform to the current presentation.



Schedule 1 – Schedule of fees and licences

Year ended December 31, 2020

	2020	2019
	\$	\$
		_
Amendments	22,736	19,720
COMPASS Surcharge	212,292	205,667
Non-practising members	82,695	71,561
Other fees	75,152	125,879
Pharmacy (permits)	769,313	619,680
Practising members (licences)	2,541,500	2,213,553
Registration	44,173	93,632
	3,747,861	3,349,692

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

Year ended December 31, 2020

Expense recoveries (reversal)
Rental income
Other
Recovery of discipline costs

2020 \$	2019 \$	
10,969	(5,009)	
40,788	37,293	
13,065	24,133	
158,191	82,420	
223,013	138,837	

Schedule 3 – Schedule of administrative expenditures Year ended December 31, 2020

	2020 \$	2019 \$
	т	<u>T</u>
Accounting	23,137	22,223
Bad debt	18,692	
Building operations	299,886	268,802
Employee benefits	213,134	177,825
Equipment rental and maintenance	98,973	108,722
External consultants	15,250	100,722
General office	188,566	170,407
Postage	18,539	21,259
Printing and stationary	14,160	28,889
Salaries	,	1,708,438
	1,921,412	, ,
Telephone and fax	39,326	30,583
Travel	50,908	104,856
	2,901,983	2,642,004





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