

# SCOPE newsletter

April 2022



## SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

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## Before you Renew

**Malpractice Insurance:** It is the responsibility of practising members to meet the [bylaw requirements](#) for malpractice insurance each year. The insurance policy must be applicable to the membership year applied for. Members will fill in the details of their malpractice insurance within the on-line application for renewal. Non-practising, associate and retired members are not required to hold malpractice insurance.

**Criminal Record Checks (CRCs):** An audit will be conducted annually where 10 per cent of the eligible membership will be selected at random. For the full audit process, see more details later in SCOPE. Members who are audited are required to complete their CRC through [Sterling Backcheck](#) prior to completing the renewal process.

**Continuing Education Unit (CEU) Requirement:** To meet the continuing competency/education requirements of the SCPP bylaws, practising

pharmacists and pharmacy technicians must have acquired and documented 15 CEUs between April 1 of the previous membership year and June 1 of the current year.

The [Professional Development Log](#) for

Once members have confirmed they have completed all requirements, they are then ready to log into their member profiles to complete the Membership Renewal Application Form.

Saskatchewan pharmacy professionals' learning portfolio is available on the Continuing Professional Development for Pharmacy Professionals (CPDPP) [website](#). The paper log is not required to be submitted to SCPP; a declaration will be available in the on-line renewal application.

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## SCPP COUNCIL 2021-2022

### PRESIDENT

Rod Amaya, Saskatoon

### PRESIDENT-ELECT, DIVISION 8

Amy Wiebe, Saskatoon

### PAST PRESIDENT

Stephanie Scott, Weyburn

### HONORARY TREASURER, RURAL/REMOTE PHARMACIST

Tania Horkoff, Warman

### DIVISION 2

Kyla Jackson, Hudson Bay

### DIVISION 4

Shauna Nowakowski, Saskatoon

### DIVISION 6

Brandon Krahn, Swift Current

### HOSPITAL PHARMACY TECHNICIAN

Tracy Martens, Weyburn

### RURAL/REMOTE PHARMACIST

Roxanne Bagnall, Watson

### URBAN PHARMACIST

Sarah Kozusko, Regina

### EX OFFICIO

Dr. Jane Alcorn, Saskatoon

### DESIGNATE EX OFFICIO

Dr. Yvonne Shevchuk, Saskatoon

### PUBLIC REPRESENTATIVES

Bonnie Caven, Regina

Mark Hawkins, Regina

Michael Lummerding, St. Brieux

### SENIOR STICK OBSERVERS

Maya Rattanavong, University of Saskatchewan

Celynn Elder, University of Saskatchewan

The SCOPe newsletter is published by the Saskatchewan College of Pharmacy Professionals (SCPP) and is emailed to active members of the College. Decisions on matters such as regulations, drug schedule changes, etc., are published in SCOPe. All members are expected to be aware of these matters.

Please note that associate and retired members do not need to meet the continuing competency requirement, and that non-practising members may wish to maintain their CEUs if they plan to migrate to a practising membership.

It is important to keep your learning portfolio up to date for SCPP audit purposes.

**Migration from one membership category to another for temporary leaves, including maternity and parental leaves:** The SCPP Regulatory Bylaws were updated in regard to migration from one licensure category to another. Members will need to consider the implications of the bylaws when migrating from practising to non-practising and then requesting migration back to practising. More information can be found in the bylaws [Part E.5 section 2](#) for pharmacists and [Part F.5 section 2](#) for pharmacy technicians. Please note that a member can allow their license to lapse as per Part E.6 for pharmacists and F.6 for pharmacy technicians:

*Any person whose membership has been allowed to lapse for a period of one membership year or less and who is otherwise eligible for membership may, upon application and upon the payment of the prescribed membership fee(s) and prescribed reinstatement fee(s), have his name re-entered in the register of members, subject to meeting the requirements in these bylaws for the membership category applied for.*

### Advanced Method Certification (AMC) and Standard First Aid and CPR Level C with AED

**Requirements:** This requirement applies to those pharmacists who wish to administer medications by injection or other routes. In order to provide medications by injection and other routes, SCPP requires that you: maintain current Standard First Aid and CPR Level C with AED; complete all required stage II CCCEP accredited

training plus the Saskatchewan-specific and hands-on modules available through [CPDPP](#) and the Canadian Pediatric Society ([EPIC](#)); and properly declare AMC during licence renewal. Please see the [Training and Development guide](#) for more information.

A practising licence with the word "Conditions" and an "A" will be issued to those who have not fulfilled one or more of the three requirements as stated above. These members may not provide medications by injection or other routes until such time as they have completed all requirements.



## Ready to Renew – Available early April for the 2022-2023 Licence Year

**Log in, click Renew On-line and Complete the Form:** Once members have confirmed they have completed all requirements above, they are then ready to log into their member profiles to complete the Membership Renewal Application Form. Forgotten passwords can be retrieved by clicking the "Forgot Password" link on the log-in screen. Please be reminded that memberships not renewed by June 30 are terminated. Members planning to terminate their memberships are asked to email SCPP at [SCPPRegistration@saskpharm.ca](mailto:SCPPRegistration@saskpharm.ca).

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Members are encouraged to renew early to avoid delays in processing of their licence renewal. Note that applications will only be approved upon completion of all licence renewal requirements and upon receipt of [applicable fees](#). Late fees apply to renewal applications and fees received after the June 1 deadline.

**Renewal Fees:** Fees may be paid by MasterCard, Visa, or cheque. If paying by credit card in the on-line application form, select PAY NOW. If paying by cheque, select INVOICE ME and mail the cheque and invoice to the SCPP office.

#### **Sending your payment by mail:**

SCPP recommends anyone intending to submit their registration and/or renewal payments by mail allow up to four to six weeks for mail delivery. Any payments which are received past the deadlines will either result in a late payment fee after 11:59 pm on June 1 or termination of membership after 11:59 pm on June 30.

For further information, clarification, or assistance in completing your on-line renewal, contact the SSCP office at [SCPPRegistration@saskpharm.ca](mailto:SCPPRegistration@saskpharm.ca) or call 306-584-2292.

## **SCPP STAFF**

### **Executive**

**JEANA WENDEL**  
Registrar

**LORI POSTNIKOFF**  
Deputy Registrar

### **Executive Assistance**

**INGRID WAKEFIELD**  
Executive Assistant to the Registrar

**CHRISTINA MCPHERSON**  
Administrative Assistant to the Deputy Registrar

### **Administrative Support**

**DARLENE KING**  
Reception and Office Operations Coordinator

### **Registration, Licensing, Permits**

**CAROLINE ZAREBA**  
Manager, Pharmacy Permits and Pharmacy Relations

**MEAGHAN UNDERWOOD**  
Manager, Database and Systems – Member Relations Administrator

**ROBERTA BECKER**  
Registration Administrator – Pharmacy and Member Relations

### **PELESHIA DUBIDAD**

Administrator – Member Relations, Systems and Communications Support

### **SHAYNA MURRAY**

Registration Administrator – Member Relations

### **Field Operations, Professional Practice, COMPASS**

#### **JEANNETTE SANDIFORD**

Assistant Registrar – Field Operations and Quality Assurance

#### **JENNIFER KOSKIE**

Field Officer

#### **BRITTANY SHARKEY**

Certified Compounding Inspector – Field Officer

#### **EMILY THOMPSON-GOLDING**

Administrative Coordinator for Field Operations and Quality Assurance

#### **STEVE YAKIWCHUK**

Field Officer

### **Complaints and Discipline**

#### **CHANTAL LAMBERT**

Assistant Registrar – Complaints Director

### **TAMI SCHWEBIUS**

Complaints Manager

### **JOANNE DEIBERT**

Complaints Investigator - Contract

### **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**

#### **MARLON HECTOR**

Communications Coordinator



# CRC Audit Process for Practising and Non-Practising Members

In keeping with section 3(e) of Parts E.7 and F.7 of the Regulatory Bylaws, members and candidates for Practising and Non-Practising membership are required to provide SCPP with an initial Enhanced Police Information Check (E-PIC).

Starting in 2022, SCPP will commence the criminal record check auditing process. [The Criminal Record Check Policy Statement and FAQs](#) states:

## When and how often do members need to provide an E-PIC to SCPP?

- All new members (practising and non-practising) must submit an E-PIC with their application for membership.
- All current members (practising and non-practising) were required to submit an E-PIC for their 2021-2022 membership year.
- All members (practising and non-practising) will be required to sign a declaration that the contents of the E-PIC have not changed each year thereafter upon the renewal of their licence.

SCPP will require 10 per cent of the applicable membership to submit a new E-PIC on an annual basis, with each member presenting a new E-PIC once every 10 years. Additionally, a member may be required to submit a new E-PIC should the College become aware of any of the following:

- Criminal activity or convictions as reported to the SCPP office by a member of the public or a member of the College;
- Criminal activity or convictions as reported in the media;
- Criminal activity uncovered during the course of a complaint investigation by the SCPP office;

- Behaviour witnessed and reported to the SCPP office that provides the College with sufficient evidence to support the requirement of a new E-PIC; and/or,
- Other conduct or behavior which calls into question the moral character of the member.

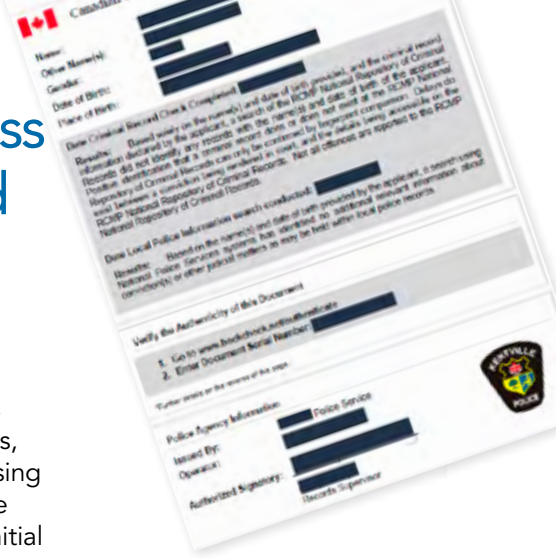
SCPP will not accept an E-PIC that is more than six (6) months old from the date requested.

This means that 10 percent of the membership who completed their initial E-PIC more than six months ago will be required to complete another E-PIC using the designated provider, Sterling Backcheck. The 10 percent will be chosen at random through an automated process and will be contacted individually. Compliance with the request to submit a new E-PIC is required as a condition for licensure.

Members not chosen to submit a new E-PIC for the 2022-2023 licensure year will be required to declare on their licence renewal application that the contents of their initial E-PIC have not changed and they have not received any new charges or convictions.

Members in receipt of new charges or convictions not previously reported should contact [SCPPRegistration@saskpharm.ca](mailto:SCPPRegistration@saskpharm.ca). Failure to report a new charge or criminal conviction, regardless of nature, could result in disciplinary action that could include the revocation of a member's license.

See the [Criminal Record Checks](#) section of the SCPP website for more information.



## MISSION

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

## VISION

Quality pharmacy care for a healthier Saskatchewan.

## VALUES

Professionalism  
Collaboration  
Leadership  
A Culture of Excellence

## GOALS

To have functioning competency assurance and quality improvement programs.

To align pharmacy regulation with modern pharmacy practice.

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

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

# Student Profile

## Daniel Deals with Definitions

Daniel Elendu, final-year pharmacy student, recently completed his practical rotation at SCPP. He was born in the small city of Otjiwarongo, Namibia. He later moved to Nigeria, the birth-country of his parents and now lives in Regina, which he has called home since the age of nine.

We sat down with Daniel to get his thoughts on his time at SCPP.

### What first made you decide to become a pharmacist?

I come from a background of health care where I have immediate and extended family members who are health care workers. From a young age I was exposed to the health care world and developed an interest in it. I was interested in several career paths in this field, particularly pharmacy, and decided to work at a community pharmacy in grade 12. It was my experience working at that community pharmacy that confirmed to me that this was a career I wanted to pursue.

### What made you choose SCPP for your practicum?

Initially, I didn't know how diverse the pharmacy world is. I was aware of hospital and community pharmacy practice and also academia as potential career paths for pharmacists, but it was in the PharmD program that I gained some insight to the career opportunities outside of what I already knew. I wanted to gain experience working to care for the public from a broader perspective. As a result, I chose SCPP as one of my top options. I was also interested in learning more about policy development and regulation.

### Describe your path to SCPP and beyond.

My first fourth year clinical rotation was at a community pharmacy in Regina. I worked at Queen City Wellness pharmacy where I gained valuable experience working with patients who needed chronic disease management, harm reduction services and several other services. My rotation at SCPP is my second of four placements. My next two rotations will be my community and hospital pharmacy rotations at Safeway Pharmacy and Regina General Hospital.

### How would you describe your experience working at SCPP?

Working at SCPP has been quite an insightful and valuable experience for me. I didn't know what to expect heading into this rotation, but I was committed to making the most of the experience and learning as much as I could.



I have learned a lot about the processes and steps a pharmacy regulatory authority takes in the work they do for the profession of pharmacy and for the public. It's been a great experience working alongside many of the departments here at SCPP, being involved in various meetings and seeing how decisions are made, issues are resolved, and excellence is promoted. My time with SCPP has given me an understanding of the collaboration and consultation work SCPP does with its stakeholders and how important it is to the work they do.

I also have a deeper appreciation for the thorough research and work that goes into policy development. Working closely with the policy and legislation unit was a rewarding experience for me and helped me identify an interest of mine that I would like to pursue in the future if the opportunity presents itself.

### How does Daniel on week one of starting at the College compare to Daniel at the end?

On week one, Daniel had little-to-no knowledge of the level of work SCPP did. He had some knowledge from colleagues, but it was limited.

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It's like having the pieces of a jigsaw puzzle but not knowing where exactly each piece goes. Over time I learned where each piece goes in the grander scheme of things.

At week eight, I had a better understanding of how to read, access, write and revise policy and legislative documents. I have a more profound appreciation for these documents and how important it is to practice. I am also more knowledgeable on the current landscape of pharmacy practice and feel better equipped for when I enter practice. Lastly, I am more confident in my verbal and nonverbal communication skills through the valuable experience I've had at SCPP.

### What is your biggest takeaway?

One key takeaway for me is the important role definitions play in policy and legislation. A definition can either strengthen or weaken a policy. It plays a key role in the understanding of a policy. Definitions need to be consistent within policies for both provincial and federal legislative documents. Inconsistencies in definitions within policies leave such documents subject to misinterpretation and can hurt how much the public and its members trust such documents.

Understanding pertinent documents as it relates to what one wants to define within a policy document is so crucial so as to not create contradictory definitions. This takes time and is a process. I have come to learn and appreciate the attention to detail it takes to define a term in a policy.

### What do you wish would have been different?

The only thing I wish was different was me getting the chance to have a longer rotation with SCPP. I thoroughly enjoyed my time with SCPP, and I truly wish it was much longer.

### What do you wish other students knew about SCPP?

I wish other students knew the attention to detail and the level of collaborative work that SCPP takes when making decisions. In my time at SCPP I have come to learn that no decision is ever made without an attention to the fine details of policies and legislation as well as collaboration within SCPP and with key stakeholders. As a regulatory body, it's held to a very high standard so every decision that is made carries so much weight and needs to be carefully thought out.

I also wish students knew how useful and helpful the information within the SCOPe Newsletter is for their practice and career as pharmacists. It's something I have learned to appreciate during my time at SCPP.

### What does the next few years look like for you?

I see myself working in a community pharmacy setting in Regina shortly after graduating for the short-term but long-term I would like to work in a similar environment to that of SCPP where I can work to care for the public from a broader perspective. I am still open to pursuing various opportunities that are available to me as a pharmacist.

I thoroughly enjoyed my rotational experience with SCPP; it's such a welcoming environment with amazing staff members that feel like one big family. They made me feel like I was part of the family too.



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





When advertising services and displaying signs, pharmacy professionals should remember the SCPP Code of Ethics which states that “members shall be governed in advertising practices by the highest level of professional integrity.”

Webster’s dictionary defines advertising as “the action of calling something to the attention of the public especially by paid announcements.”

[Part J of the SCPP Regulatory Bylaws](#), provides direction on the size and content of advertising. For example, signs should be of an appropriate and reasonable size and number so that the public can make informed choices. Flamboyant, grandiose, sensational signs are not allowed.

Advertising includes any method, including social media posts and websites that provide information to the public on the services a person or business is providing. Members may not advertise themselves or their pharmacy practices to be more favorable, unique or superior to other pharmacies in terms of the core services every pharmacy is expected to provide, such as compounding, counselling, compliance packaging, etc.

Helpful questions to ask oneself when designing advertisements include:

- “Would it demean the integrity of the profession?”
- Are you comparing yourself in a more favourable manner to others?” and
- “Is it reasonably necessary to help the public make informed choices?”

Advertising in general cannot be false, misleading, ambiguous, unverifiable by facts or confusing.

Some helpful information can be found here: [Deceptive marketing practices – Competition Bureau Canada](#).

See applicable Bylaw excerpt below:

*17 (2) General Prohibition. No pharmacist, pharmacy technician, or any firm, corporation, partnership, organization, or clinic operating a pharmacy, shall publish, display, distribute, or use or cause*

*or permit, directly or indirectly, the publication, display, distribution or use of any advertisement, announcement or information related to professional services, which:*

*(a) as a result of its content or method or frequency of dissemination, may be reasonably regarded as likely to demean the integrity or dignity of the profession or bring the profession into disrepute;*

*(b) includes information that:*

*(i) is false, misleading, fraudulent, deceptive, ambiguous, or confusing or likely to mislead or deceive the public because, in context, it makes only partial disclosure of relevant facts;*

*(ii) is not relevant to the public’s ability to make an informed choice, or is not verifiable by facts or can only be verified by a person’s personal feelings, beliefs, opinions, or interpretations*

*(c) is likely to create expectations of favourable results or to appeal to the public’s fears; or*

*(d) makes any reference to the prices, fees or services of any other member or pharmacy or which would be reasonably regarded as making such reference.*

*(3) Signs. No licensed pharmacist, licensed pharmacy technician, or any proprietor, firm, corporation, partnership, organization, or clinic operating a pharmacy shall have or display or cause to be displayed a sign or signs internal or external to the place of business advertising professional services which:*

*(a) are in a size and/or number not reasonably necessary to inform the public or provide the public with the ability to make an informed choice; or*

*(b) are flamboyant, grandiose, sensational, or otherwise demeaning to the integrity of the profession and which are not reasonably necessary to inform the public or to provide the public with the ability to make an informed choice.*

## Truth in Advertising

**A treasure trove  
of guidelines,  
standards, policies,  
responsibilities,  
requirements,  
templates, forms  
and more...**

## **the SCPP Reference Manual**





# Council Highlights

## March 30-31, 2022

### Councillors' Environmental Scans

- A concern was expressed over the increased number of pharmacy robberies in Alberta and Manitoba. British Columbia uses time delayed safes and in Alberta they are mandatory as of July 1, 2022.
- With the end of emergency provisions for prescribing authority, pharmacists have expressed concern that it might be challenging as the health care system has not yet returned to pre-pandemic levels, especially in smaller communities.
- At the University of Saskatchewan, students have returned to in-person classes and all summer placements have been scheduled. The school would like to thank the Saskatchewan pharmacists who are supporting learning opportunities for students.
- Dr. Charity Evans will begin her term as Associate Dean (Academic) at the College of Pharmacy and Nutrition on July 1.

### Finance and Budget 2022 Report

- Council approved the 2022 budget as recommended by the Finance Committee and approved the consequential [Administrative Bylaws](#) to replace the Fee Schedule:
  - ▶ Fee increase by Consumer Price Index (CPI) as per Council policy.
  - ▶ Regulatory strategic priorities include, among others:
    - Supporting Quality Improvement Reviews and Field Officer Inspections (Goal 1)
    - Supporting Compounding Standards roll-out (Goal 1)
    - Hiring a full-time Competency Assurance Director (Goal 1)
    - Creating a self-funded member and proprietor Alternative Dispute Resolution Process, in turn supporting the professional autonomy framework (Goal 3)
    - Supporting strategic communications goals (Goal 4)
    - Funding contracted staff to support Policy and Legislation Unit and Complaints and Discipline Department (Goal 4)
    - Supporting increased legal costs for strategic plan priorities (Goals 1, 2, 3)



- ▶ New per diem, meal expense and kilometre rates in line with the Conference Board of Canada and the Canada Revenue Agency
- ▶ Continuing SCP Centennial Scholarship
- ▶ Updating hardware, improving cybersecurity, and moving to a cloud server
- ▶ New fees for:
  - Appeal to the Registrar
  - Proprietor Appeal to Council
  - Member or Proprietor Appeal to Council for Discipline
  - Alternative Dispute Resolution Process Administration Fee
  - Monthly Interest Surcharge

### Registrar's Report

- Disease Control Regulation amendments expire March 31, 2022, ending the emergency non-traditional immunizers for COVID-19 and Influenza.
- Pharmacy professional staff have provided 619,866 COVID immunizations and 115 Paxlovid prescriptions to date.
- National Association of Pharmacy Regulatory Authorities (NAPRA) Updates. Work continues on the:
  - ▶ Cross Jurisdictional Framework: Draft to be reviewed by Council with final approval in June. Work will be forthcoming on new regulatory instruments as well as modernizing the following policies: Central Fill, Depots, Satellites and the creation of a Virtual Care policy.

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- ▶ The NAPRA Model Compounding Competencies: The NAPRA Board approved the compounding competencies on March 29, 2022.
- ▶ Language Proficiency Requirements: Review to be conducted in 2022.
- ▶ The NAPRA Principles of Professionalism: Approved by the NAPRA board and ready for Council approval. Next, NAPRA will reach out to pharmacy stakeholders to hold workshops for how these principles will be used within the profession.
- ▶ The NAPRA Model Standards of Practice for pharmacists and pharmacy technicians have been updated and approved by the NAPRA Board.
- National Association of Boards of Pharmacy (NABP) Updates:
  - ▶ SCPP has been engaging in meetings with the NABP and a full report is expected in Spring 2022 on managing the working conditions in pharmacies considering workload, burn-out and staff well-being and how it affects patient safety. This will tie into SCPP's strategic plan specifically to the Professional Autonomy Framework as further work begins in this area over 2022.
- Licence and Permit Statistics:
  - ▶ 425 (six pending) pharmacies
  - ▶ 1,785 practising pharmacists
  - ▶ 384 pharmacy technicians
- All pharmacists practising in a self-care environment must take the Prescribing for Minor Ailments and Self-Care Basics training. The following minor ailments being mandatory:
  - ▶ Urinary Tract Infection (UTI)
  - ▶ Cold Sores
- All pharmacists who do not work in a self-care environment but choose to prescribe for Minor Ailments must take the Prescribing for Minor Ailments and Self-Care Basics training. The following minor ailments being mandatory:
  - ▶ UTI
  - ▶ Cold Sores
- Implementation and guideline training be mandatory for vaccine preventable diseases and/or low-risk travel health if the pharmacist prescribes for:
  - ▶ Vaccine preventable diseases; and/or
  - ▶ Low-risk travel health. (note: training would not be mandatory if the pharmacist is only providing the immunization as that would fall under Advanced Method Certification (AMC))
- ▶ In addition to the PPC recommendations, Council also approved in principle to add SARS-CoV 2 and HIV to the list of diseases to which pharmacists may prescribe vaccines or drug products for prevention.
- ▶ The SCPP office will prepare draft bylaws for Council approval in principle followed by stakeholder consultation.

## Other Business

- Council approved a new Administrative Bylaw for Alternate Dispute Resolution Process fees to create a full member and/or proprietor funded Alternative Dispute Resolution Process, completing one of the eight strategies in the Professional Autonomy Framework.
- Training Requirements in Part K of the Bylaws:
  - ▶ The review and modernization of Part K of the bylaws has been a multi-year project which included a full update of all minor ailments. The Prescriptive Authority Level 1 Basics and Prescribing for Minor Ailments and Self-Care Basics courses were reviewed and modernized in 2021. The final step is addressing the three mandatory training modules included in the bylaws and whether they make sense from a risk-based approach and addressing how training and education will be assessed in the future.
  - ▶ Council approved the recommendations of the Professional Practice Committee, in principle, that:
    - All pharmacists must take the Prescriptive Authority Level 1 Basics training (no change).
- Equity, Diversity, and Inclusion (EDI) and Cultural Sensitivity Education Update:
  - ▶ Council directed the SCPP office to research options for training and resources for members after the Complaints Committee brought forward concerns regarding the number of complaints of unprofessional behaviour related to ethnicity, culture, bias, and sexual orientation.

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- ▶ CPDPP's Mary Fraser and Danielle Larocque provided a presentation on a vision to build out an umbrella of education options and choices that focus on patient-centered care.
- ▶ Council approved:
  - That all practising and non-practising members complete a mandatory on-line training and live webinar for the 2023/24 renewal year.
  - That members are strongly encouraged to take the facilitated workshops for peer ambassadors.
  - That members must annually self-select at least one education module that fits under the training umbrella of patient centered care.
- ▶ Please stay tuned for upcoming SCPP communication for more detailed information.
- Competency Assurance Task Force Update:
  - ▶ In December 2021, Council approved the approach to a new Competency Assurance program (CAP) in principle.
  - ▶ Following that meeting, SCPP and consultant Nancy Winslade determined reasonable timelines, costs, and feasibility, including a five-year plan. See the CAPtivate page for more details.
- Compounding Update:
  - ▶ Brittany Sharkey, SCPP Certified Compounding Inspector – Field Officer, presented a report detailing results of a member compounding standards readiness survey as well as a scan of other Provincial Regulatory Authorities (PRAs), and provided options to Council on timelines and compliance deadlines.
  - ▶ Council agreed to maintain the Aug. 31, 2022, deadline to comply with the NAPRA Model Standards for Pharmacy Compounding and that pharmacies will need to declare compliance for the 2022/23 permit renewal.
- The draft NAPRA Cross Jurisdictional Framework was reviewed and was approved in principle.
- Professional Autonomy Framework Update:
  - ▶ The draft Pharmacy Manager Policy was reviewed and discussed.
  - ▶ Council approved the policy in principle as presented, for legal and Ministry of Health review prior to final approval by Council.
  - ▶ Pharmacy Manager Education:
    - Continuing Professional Development for Pharmacy Professionals (CPDPP) received full Stage 2 Accreditation from The Canadian Council on Continuing Education in Pharmacy (CCCEP). This program is the first of its kind in Canada and received excellent reviews including the one below from an expert reviewer:
      - ▶ Robust amount of information to support the learning outcomes.
      - ▶ The CPDPP Community Pharmacy Manager Course is an outstanding professional development program that meets and most often exceeds the required information of each learning outcome. The depth of information provided in this course demonstrates excellence in continued professional development.
      - ▶ The information was thoughtfully organized and provides an excellent repository of information/ review of knowledge for pharmacy managers.
  - ▶ Stay tuned for separate communication from the College with respect to the pharmacy manager policy, training and implementation plan.
- Linda Sulz has stepped down from her appointed position on the University of Regina (U of R) Senate. Council appointed Zack Dumont as the new SCPP representative on the U of R Senate effective immediately for the balance of the term ending June 30, 2023, with the option to sit an additional three-year term at the approval of Council.
- Council discussed concerns brought forward about the ending of emergency provisions for prescriptive authority, with respect to members of the public accessing medications as a result of the return to status quo bylaws, ultimately deciding that while the period of transition is challenging, it follows the province's direction. SCPP continues to have regular discussions with stakeholders, and this continues to be on Council's risk matrix.
- Council approved discontinuing the emergency therapeutic substitution enactment for Health Canada's ARB recall effective April 1, 2022.

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- NAPRA's Annual Meeting of Members (AMM) will occur virtually on May 12, 2022, from 8 am to 10:30 am. A significant part of the AMM will be devoted to a facilitated session with L. Edgar on the topic of NAPRA's Value to its Members. The thoughts and ideas shared from the PRAs will be helpful for when NAPRA's Board of Directors dives into its deliberations on NAPRA's strategic direction later this year. Council agreed to send Past President Stephanie Scott to the meeting, in addition to President Rod Amaya.
- The NAPRA Principles of Professionalism for the Profession of Pharmacy was included in the SCPP strategic plan as one of the objectives to build a greater understanding of professionalism amongst pharmacy professionals. Council approved the Principles, and the next step will see NAPRA engaging stakeholders to discuss a path forward and a mutual understanding of the principles. Once the document has been officially branded and published by NAPRA, it will be communicated to members, posted to our website and the language will be woven into SCPP documents.
- Compass Report:
  - ▶ 356 incidents were reported in February 2022, with a total of 36,818 incidents reported from September 2013 – February 2022 (+1,819 since the last COMPASS report in October 2021).
  - ▶ Top 3 types of incidents
    - Incorrect dose/frequency – 8,574 (+388)
    - Incorrect drug – 6,213 (+326)
    - Incorrect quantity – 6,113 (+221)
  - ▶ Outcomes of reported incidents
    - NO ERROR – 21,122 (+802)
    - NO HARM – 14,571 (+938)
    - HARM – 1105 (+76)
  - ▶ MSSA
    - 414 (+3) pharmacies have completed an MSSA.
- Of the above 414 MSSAs completed, 16 pharmacies have started completing a second MSSA.
- 3 (0) MSSAs started but not completed.
- 8 (-1) MSSAs not yet started (6 are new pharmacies).
- 9 (-17) MSSAs are overdue to be completed again.
- ▶ Overall, since the beginning of the COMPASS program, there has been a general trend where the percentage of harm incidents has increased. The initial average was 3.0. The average then increased to 4.1 for the period of October 2019 – March 2020, and there was another slight increase for April 2020 to 4.6, where it has been ever since. Monitoring of this statistic will continue to identify if any trends are occurring.
- Quality Improvement Review (QIR) Report
  - ▶ The Field Operations team continues to complete Quality Improvement Reviews (QIR). There were 141 QIRs completed in 2021 and an additional 30 so far in 2022. There have been 268 QIRs completed in total since we started doing QIRs. A few common issues have been identified during the QIRs performed from November 2021 – February 2022, and the Field Operations team have been working with pharmacy managers to address these issues.
  - Continuous Quality Improvement (CQI) Plan Deficiencies: These plans are not always developed or documented, and most that are documented are not complete.
  - CDSA Related Issues: Regular destruction is the main concern being identified with this issue. Some pharmacies are not aware of the requirements and therefore do not have a process in place for regular destruction of these drugs.

Continued on next page ▶

MedSCIM Results Nov. 1, 2021 - Feb. 28, 2022

 4.8 %
 44.4 %
 50.8 %

		Grade D - Pathological	Grade C - Reactive	Grade B - Calculative	Grade A - Generative
Core Event Description	Level 1 - Report fully complete	0	47	98	115
	Level 2 - Report semi-complete	3	84	92	42
	Level 3 - Report not complete	0	12	9	0

## MedSCIM Results Sept. 1 – Oct. 31, 2021



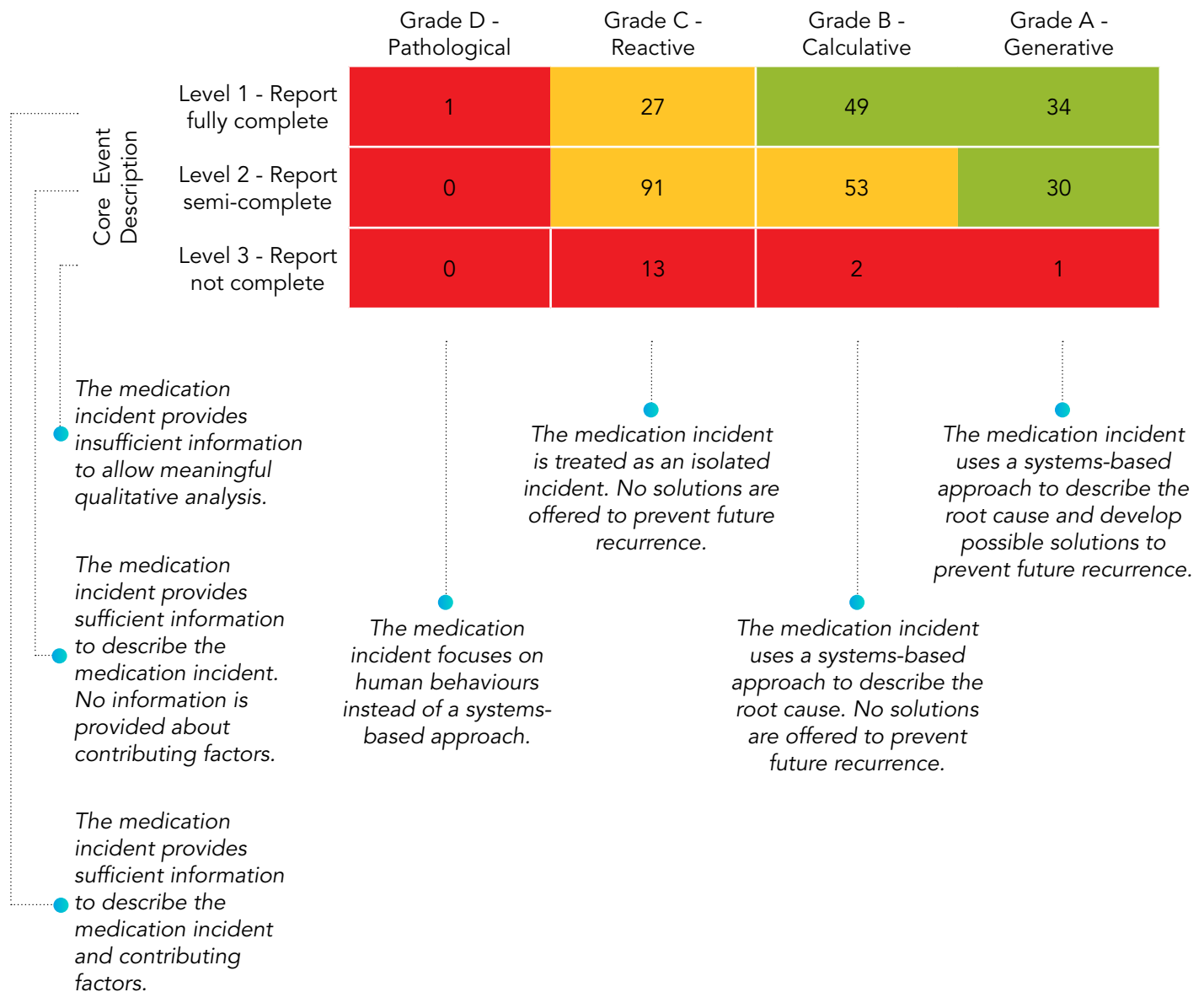
5.7 %



56.8 %



37.5 %



- Incident Reporting: Pharmacies report the details of the incident well, but deficiencies were noted regarding identifying the causal/contributing factors and developing system-based solutions to deal with the incident.
- PIP Data Quality: Failed transactions were by far the most common concern with this issue. Pharmacies are not reviewing and resolving their failed transactions report daily.
- Prescribing: Missing information on PARs (e.g., rationale, clinical information, monitoring parameters, etc.) and Minor Ailment follow-up not being documented.

the error was and why/how it happened. There has been some improvement with regard to the maturity, with pharmacies identifying contributing factors for the incidents, as well as indicating a system-based strategy to prevent the incident from recurring. However, there are still some pharmacies that are not reviewing the root cause or “why” the error occurred, what the contributing factors are, or determining a strategy to prevent it from occurring again.

- ▶ When this happens, it is explained to the pharmacy during the QIR that identifying and documenting the “why” or “how” an incident occurred will help to determine what strategies need to be implemented to prevent the error from occurring again. ■

- MedSCIM Results

- ▶ Most of the reports include a good description of what

# Fee Schedule 2022-2023

Note: These fees are based on the SCPP Administration Bylaws. In the case of conflict between the bylaws and this document, the bylaws will preside.

	NET	GST 5%	TOTAL
<b>Membership – April 1, 2022</b>			
Practising Membership - Pharmacists	\$1,388.00	\$69.40	\$1,457.40
Non-Practising Membership - Pharmacists	\$1,261.00	\$63.05	\$1,324.05
Associate Membership - Pharmacists	\$224.00	\$11.20	\$235.20
Retired Membership - Pharmacists	\$109.00	\$5.45	\$114.45
Practising Membership - Technicians	\$833.00	\$41.65	\$874.65
Non-Practising Membership Technicians	\$697.00	\$34.85	\$731.85
Associate Membership - Technicians	\$110.00	\$5.50	\$115.50
Retired Membership - Technicians	\$55.00	\$2.75	\$57.75
<b>Appraisal Training, Assessment &amp; JP Exam – April 1, 2022</b>			
Appraisal Registration Fee - Pharmacists	\$360.00	\$18.00	\$378.00
Assessment Registration Fee - Pharmacists	\$893.00	\$44.65	\$937.65
Jurisprudence Exam Fee - Pharmacists	\$321.00	\$16.05	\$337.05
Appraisal Registration Fee - Technicians	\$181.00	\$9.05	\$190.05
Assessment Registration Fee - Technicians	\$447.00	\$22.35	\$469.35
Jurisprudence Exam Fee - Technicians	\$321.00	\$16.05	\$337.05
<b>Fees: Pre-Registration and Other – April 1, 2022</b>			
Pre-Registration Application Fee for Non-Members	\$217.00	\$10.85	\$227.85
Letter of Standing Fee	\$113.00	\$5.65	\$118.65
Monthly Interest Surcharge	1.50%		
ADR Process Administration Fee	\$475.00	\$23.75	\$498.75
Registrar Appeal	\$649.00	\$32.45	\$681.45
Proprietor Appeal to Council	\$650.00	\$32.50	\$682.50
Discipline Order Appeal to Council	\$651.00	\$32.55	\$683.55
<b>Registration &amp; Reinstatement Fees – April 1, 2022</b>			
Reinstatement Fee - Pharmacists	\$357.00	\$17.85	\$374.85
Registration - Pharmacists	\$326.00	\$16.30	\$342.30
Registration - Canadian Out-of-Province and ATA Candidate	\$850.00	\$42.50	\$892.50
Registration - Locum Tenens	\$331.00	\$16.55	\$347.55
Registration - Dispensing Physician	\$980.00	\$49.00	\$1,029.00
Reinstatement Fee - Technicians	\$190.00	\$9.50	\$199.50
Registration - Technicians	\$326.00	\$16.30	\$342.30
Registration - Out-of-Province Technicians	\$431.00	\$21.55	\$452.55
<b>Intern Registration Fee – April 1, 2022</b>			
Intern Registration Fee - Pharmacists	\$175.00	\$8.75	\$183.75
Intern Registration Fee - Technicians	\$88.00	\$4.40	\$92.40
<b>Late Payment Penalty Fee – April 1, 2022</b>			
Late Payment Penalty - Pharmacy	\$415.00	\$20.75	\$435.75
Late Payment Penalty - Pharmacist	\$409.00	\$20.45	\$429.45
Late Payment Penalty - Technicians	\$250.00	\$12.50	\$262.50



	NET	GST 5%	TOTAL
<b>Pharmacy Permit Fees – April 1, 2022</b>			
Pharmacy Permit			
Basic	\$2,000.00	\$100.00	\$2,100.00
COMPASS Surcharge	\$500.00	\$25.00	\$525.00
TOTAL	\$2,500.00	\$125.00	\$2,625.00
Satellite Pharmacy Permit	\$1,215.00	\$60.75	\$1,275.75
Permit Amendment	\$384.00	\$19.20	\$403.20
Lock & Leave Permit	\$517.00	\$25.85	\$542.85
Subsequent Pre-Opening Inspection(s)	\$880.00	\$44.00	\$924.00
Quality Improvement Review (unable/unwilling to conduct virtually)	Cost Recovery		
<b>Permit Failure to File Fee After Seven (7) SSCP Business Days – April 1, 2022</b>			
Manager Change	\$100/day	\$5.00	\$105/day
Proprietor Change	\$100/day	\$5.00	\$105/day
Ownership Change	\$100/day	\$5.00	\$105/day
Trade Name Change	\$100/day	\$5.00	\$105/day
Director Changes	\$100/day	\$5.00	\$105/day
Location Changes	\$100/day	\$5.00	\$105/day
<b>Expense Reimbursement – June 9, 2022</b>			
Per Diem Full Day	\$400.00		\$400.00
Per Diem Half Day	\$200.00		\$200.00
Per Diem Per Hour (to a maximum of 8 hours)	\$50.00		\$50.00
Meal Allowance Breakfast (to a maximum of)	\$21.35		\$21.35
Meal Allowance Lunch (to a maximum of)	\$21.60		\$21.60
Meal Allowance Supper (to a maximum of)	\$53.00		\$53.00
Travel per Km (first 5,000 Kms)	\$0.61		\$0.61
Travel per Km (after 5,000 Kms)	\$0.55		\$0.55

## 2022 Council Elections

SCPP held its second online election under the new Council structure for the positions of Hospital Pharmacist, Community Pharmacy Technician, and Urban Pharmacist. Voting ended March 23 and the results were as follows:

- Urban Pharmacist: Scott Livingstone
- Hospital Pharmacist: Kelsey Dumont, won by acclamation
- Community Pharmacy Technician: Shauna Nowakowski, won by acclamation

Welcome to the new Councillors who will begin their terms on July 1, 2022. SCPP and Council would like to thank all the nominees and members who participated in the process.





# OPPORTUNITY

## Billing in Community Pharmacy

CPDPP is offering a free [Billing in Community Pharmacy](#) course, accredited for 2.0 CEUs. This course is valuable for pharmacists, pharmacy technicians, and students and assistants. Whether you're a seasoned professional, just entering practice, or are new to the province, there are tips and tricks to take away for everyone.

This course will provide a general overview of drug coverage and the health care system, Saskatchewan provincial extended benefit programs, federal plans and third-party insurance plans. Topics include coordination of benefits, discussion of common billing problems, as well as answers to frequently asked questions and billing scenarios applicable to everyday practice.

## HIV-PrEP

CPDPP, the SK HIV Collaborative, and the SK Prevention Institute have joined forces to create an exciting course to educate all health care professionals on [HIV PrEP](#). With insight into the unique HIV demographics in Saskatchewan, learn how stigma affects access to PrEP and how to provide education to clients. You will also learn about available medications, prescribing and monitoring requirements for HIV PrEP in Saskatchewan. You're sure to learn something no matter what your discipline. Please let your colleagues in other health related fields know about this free accredited 1.5 CEU course available to them.

[Register here](#) for these free courses!





# BE PART of our TEAM

## SCPP is hiring a Competency Assurance Director

▶ [Click here for job description](#)

Responsible for leading the application and administration of applicable policies, legislation and standards of practice to ensure competency in pharmacists and pharmacy technicians in Saskatchewan.

Requirements: Degree in Pharmacy • Min. 5 years' experience in practice • Min. 3 years in a supervisory role • Must be eligible for licensure with SCPP

Apply by May 20, 2022  
Send resume and cover letter to  
[jeana.wendel@saskpharm.ca](mailto:jeana.wendel@saskpharm.ca)



# Failed Transaction Reports

SCPP would like to remind pharmacy staff of the importance of regularly reviewing failed transaction reports.

Complete and accurate information in the Pharmaceutical Information Program (PIP) is crucial to patient safety. Pharmacies are reminded that the failed transaction report should be reviewed on a daily basis. All transactions that failed, but should be in PIP, need to be retransmitted on the same day when possible. Performing this procedure daily helps to ensure that accurate patient medication information is recorded in PIP.

A failed transaction is a transaction (dispense) that is not successfully transmitted to PIP. The failed transaction will therefore not be available for review by other health care practitioners who may access PIP to make clinical decisions.

Transactions that are required to be recorded in PIP may fail for several reasons, including system failure, bypassing PIP due to unresolved warning/error messages, prescriptions for patients with masked profiles, drugs not in the PIP database, data mismatch (for example, date of birth mismatch), and incorrect set up of Drug Identification Numbers (DINs) or Natural Product Numbers (NPNs) on your pharmacy computer system.

Some transactions are expected to fail, as they are not required to be recorded in PIP. These include dispenses for patients without a valid Saskatchewan health card (out of province patients), dispenses for animals, and dispenses of devices.

If a DIN/NPN is available in the PIP drug database, then it should be transmitted to the PIP. This can be checked via the "Drug Monograph Search" under the "References" tab in the PIP GUI (website). Enter the DIN/NPN or product name in the "Drug Product/DIN/NPN" field, if search results are found then the product can be successfully transmitted from your pharmacy computer system to the PIP.

If a DIN/NPN cannot be found in the drug database, but it appears to be a drug that needs to be transmitted to PIP, please contact the eHealth Service Desk.

Please see this [information sheet](#) provided by PIP for helpful guidance.



If you have any questions regarding PIP QIP please contact the eHealth Service Desk at 1-888-316-7446 or [pipqip@eHealthSask.ca](mailto:pipqip@eHealthSask.ca).





# CAPtivate

[Competency Assurance  
Program Updates]



Work on the Competency Assurance Program (CAP) continues. Council has approved the approach of the CAP Task Force in principle.

SCPP and consultant Nancy Winslade has formulated a five-year plan to ensure success of the program, which has been built into the 2022 budget. The plan enables robust stakeholder consultation throughout 2022 using a series of virtual presentations and Q-and-A sessions.

SCPP has created a job description and will begin the recruiting process for a Competency Assurance Director to on-board in August-September 2022.

## Timeline to Date

- ▶ May 2019 – Members participate in a Competency Assurance Survey to assess pharmacy professionals' needs and preferences in continuing professional development.
- ▶ June 2019 – First meeting of the newly formed CAP Task Force (formerly Competency Assurance Committee/ Working group) tasked with revamping the College's Competency Assurance Program (CAP).
- ▶ 2020 – Delays due to the COVID-19 pandemic.
- ▶ March 2021 – Consultant Nancy Winslade is contracted to lead the working group in developing a comprehensive, supportive CAP.
- ▶ May 2021 – Research and development by the Task Force gets underway.
- ▶ September 2021 – Draft program is formulated and reviewed.
- ▶ Updates presented to Council at the December 2021 meeting.
- ▶ April 2022 – A five-year plan is presented to Council and recruitment for a Competency Assurance Director begins.

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





# Notes from the Field

## Transferring Prescriptions

SCPP has had some requests for information lately regarding prescription transfers that come as a fax. Members are reminded that prescription transfers may occur via the faxing of information however a verbal conversation needs to occur as well. This is to ensure that other pertinent information is exchanged. The transfer of a prescription medication must be per SCPP Regulatory bylaw, Part N, sections (5-8).

### *Transferring of Prescriptions*

*5 A licensed member may transfer to another licensed member a prescription for a Schedule I drug.*

*6 A licensed member to whom a prescription has been transferred under section 4 of Part N shall not sell a drug pursuant thereto until:*

*(a) he has obtained from the licensed member transferring the prescription his name and address, the number of authorized refills remaining and the date of the last refill;*

*and*

*(b) he has:*

*(i) received a copy of the prescription as written by the practitioner or as reduced to writing as required by sections 2 and 3 of Part N as the case may be; or*

*(ii) where the prescription has been transferred to him verbally, reduced the prescription to writing indicating therein the information specified in section 3 of Part N.*

### *File Retention*

*7 The licensed member to whom a prescription for a Schedule I drug is transferred under section 4 of Part N shall retain in his files for a period of two years the information and documents referred to in section 5 Part N.*

### *Transfer Record Keeping*

*8 A licensed member who transfers a prescription under section 4 of Part N:*

*(a) shall enter on the original of the prescription and in the patient profile, the date of*

*transfer;*

*and*

*(b) shall not make any further sales under the prescription nor transfer it to another*

*licensed pharmacist or licensed pharmacy technician.*

If a request to transfer a prescription is received by fax and no phone or verbal communication has occurred, then the member should ensure that this conversation occurs prior to transferring the prescription.

More information on transferring prescriptions can be found in the Reference Manual: [Electronic Transmission of Prescriptions](#).

For information regarding transferring prescriptions in PIP and what to do when transferring a prescription out of province, please see [Pharmaceutical Information Program \(PIP\) FAQs](#).





## Refill Fax Requests (Appropriate Patient Care)

Pharmacists are reminded that refill requests must always be made with the best interest of patients and their drug therapy management in mind.

Pharmacists need to ensure patients are following up with their physician on a regular basis for proper monitoring of conditions requiring drug therapy. Although it might be considered "helpful" to fax a refill request to the prescriber when a patient is out of refills, fax refill requests should not circumvent proper monitoring by the patient's practitioner.



## Reminder ► Compounding Compliance Deadline

SCPP bylaws and policies require all pharmacies to provide a minimum of Level A compounding to the public and pharmacy managers must therefore prepare their pharmacies accordingly.

SCPP Council extended the deadline for compliance with the NAPRA Model Standards for Pharmacy Compounding until Aug. 31, 2022. Council encourages members not to delay any needed renovations. As per Council policy, pharmacy managers will be required to declare that they are compliant with the NAPRA Model Standards for Pharmacy Compounding during the 2022/23 pharmacy permit renewals.

SCPP has confirmed with the Drug Plan Extended Benefits Branch (DPEBB) that commercially available methadone compounds will be covered by the deadline. Further announcements will be forthcoming from DPEBB.

If you are unsure of whether or not your pharmacy will require renovations to be compliant, please contact SCPP Certified Compounding Inspector – Field Officer, Brittany Sharkey via email at [Brittany.Sharkey@saskpharm.ca](mailto:Brittany.Sharkey@saskpharm.ca).



# ISMP Launches Updated Community Pharmacy MSSA

ISMP Canada is very excited to be launching an updated version of the Medication Safety Self-Assessment for Community Pharmacy – MSSA-Community Pharmacy.<sup>i</sup>

The goal of this assessment is to help community pharmacy teams identify and address vulnerabilities that could lead to medication incidents and patient harm. The MSSA-Community Pharmacy includes focused content related to high-risk processes, use of high-alert medications and treatment of vulnerable populations, previously published separately in the Medication Safety Self-Assessment: Focus on Never Events in Community Pharmacy<sup>[1]</sup>.

Development and validation of the assessment content was supported by an expert Advisory Panel which included or represented patient and family advisors, practicing pharmacists and pharmacy technicians, pharmacy regulatory authorities, academic institutions, a national pharmacy

association and a prescriber. A modified Delphi survey was conducted to add rigor to the content selected for inclusion; participants in this process included community pharmacy experts in addition to the Advisory Panel.

COMPASS Pharmacies have been using ISMP Canada's MSSA-CAP (2006 Version) to assess practices and monitor improvements in their pharmacy. The previous version of the MSSA-CAP will be closed to new assessments, but the MSSA data will remain available to pharmacies for review, accessible via the menu. ISMP Canada will also provide a cross reference table between the versions to facilitate comparison.

The new MSSA-Community Pharmacy will be available the week of March 28, 2022. For CPhIR subscribers, access to the MSSA is included in the annual fee. For other pharmacies, [click here for more information](https://mssa.ismp-canada.org/never-events-comm-pharm) or email [mssa@ismpcanada.ca](mailto:mssa@ismpcanada.ca).

*Julie Greenall, ISMP Canada*

<sup>i</sup> ISMP Canada and Canadian Patient Safety Institute. Medication Safety Self-Assessment: Focus on Never Events in Community Pharmacy, 2021. Available from: <https://mssa.ismp-canada.org/never-events-comm-pharm>.

The screenshot shows the ISMP Canada website. The header includes the ISMP Canada logo and the text 'Institute for Safe Medication Practices Canada' and 'A Key Partner in the Canadian Medication Incident Reporting and Prevention System (CMIRPS)'. The left navigation menu lists: Home, Safety Bulletins, Report a Medication Incident, News, Education, Products & Services, Publications, Projects, CHIRPS, Related Links, Definitions, About Us, and Contact Us. The main content area is titled 'Community Pharmacy Programs'. It contains several tiles: 'National Incident Data Repository for Community Pharmacies', 'National Incident Data Repository for Community Pharmacies' (with a description), 'CPhIR - Community Pharmacy Incident Reporting Program' (with a description), 'Medication Safety Self-Assessment\* for Community Pharmacy' (highlighted in a circular callout), 'Medication Safety Self-Assessment - Community Pharmacy - Comprehensive Update coming March 2022' (with a description), and 'Focus on Never Events in Community Pharmacy'.



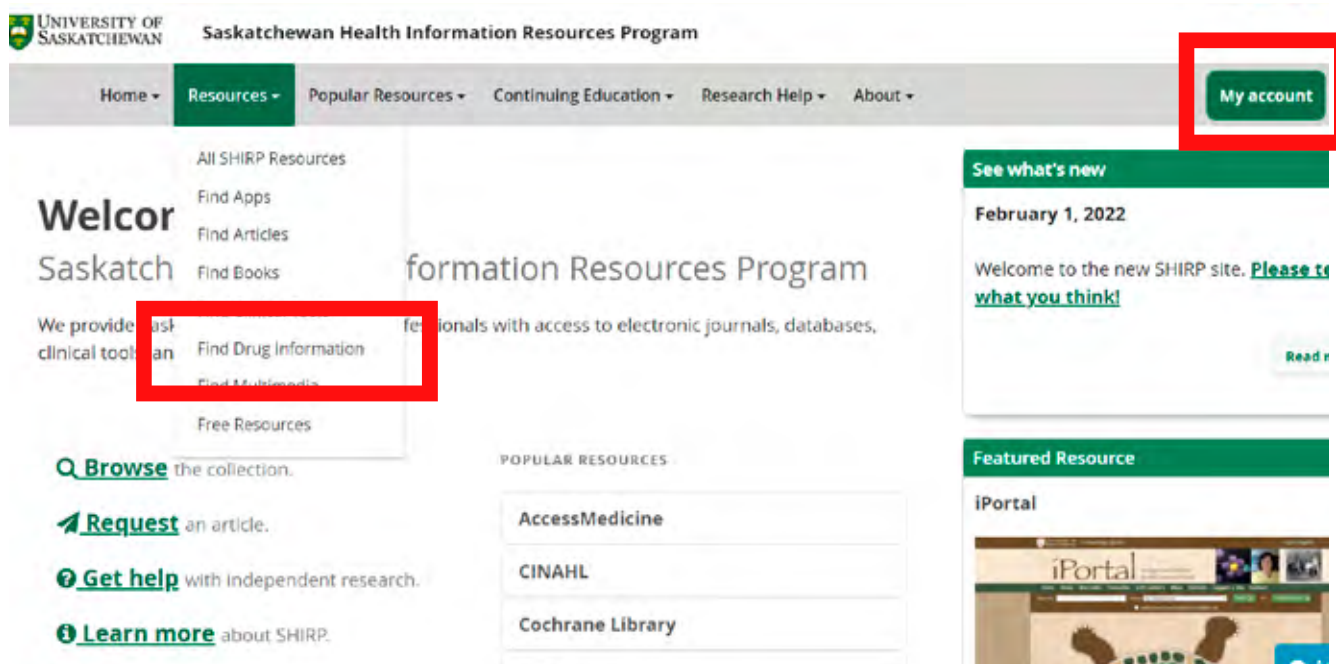
## The list of Saskatchewan physicians approved to provide Opioid Agonist Therapy (OAT) is now housed on SHIRP's website.

You will need a SHIRP account to access this list.

If you need a SHIRP account, choose **My account** on the homepage.

The process to apply is quick and easy.

This resource is found under Resources > Find Drug Information.



[shirp.usask.ca](http://shirp.usask.ca)





# Discipline Matters

The Saskatchewan College of Pharmacy Professionals (the College) and Discipline Committee considers the primary purpose of discipline proceedings and alternative dispute resolution processes to be the protection of the public and the pharmacy profession as a whole. The College is conscious of the fact that the public must have confidence in the profession's ability to regulate itself in a manner that protects the public and has determined that a digest of Alternative Dispute Resolution processes and Decisions and Orders will be published. All Decisions and Orders of the Discipline Committee are also posted on the [CanLII website](#) in their entirety.

## Harvey Smith

On July 29, 2021, the Discipline Committee convened a hearing concerning the request by Harvey Smith to extend the deadline imposed in its Dec. 10, 2020, Order. Specifically, Mr. Smith applied to vary the condition imposed by that Order that:

- On or before Aug. 1, 2021, Mr. Smith shall successfully complete (as demonstrated by an unconditional pass) the CPEP course entitled "PROBE Ethics and Boundaries" and provide confirmation of successful completion to the Registrar.
- Mr. Smith sought to extend the time before which he was required to successfully complete the course.

After consideration of the evidence reviewed and associated exhibits, the Discipline Committee considered the facts.

1. Leading up to the Dec. 10, 2020, hearing, the Complaints Committee considered the issue of sanction, a key part of its recommendation being that Mr. Smith complete the PROBE Course.
2. Counsel for the Complaints Committee corresponded with counsel for Mr. Smith on Oct. 14, 2020, regarding the Complaints Committee's recommended penalties. The penalties included the required completion of the PROBE Course. The correspondence indicated that additional information respecting the course could be

found online and provided a link to the website. As well, the email attaching the letter also included the link to the website.

3. On Dec. 4, 2020, counsel for the Complaints Committee advised the Assistant Registrar that Mr. Smith would sign an Agreed Statement of Facts and agree to a joint submission. The joint submission included a requirement that Mr. Smith successfully complete the PROBE Course and provide proof of successful completion to the Registrar on or before Aug. 1, 2021. The Aug. 1 deadline was specifically selected by the Complaints Committee on the basis that Mr. Smith would have multiple opportunities to take that Course.
4. Prior to agreeing to the PROBE Course requirement in the joint submission, Mr. Smith had the opportunity to consider the nature of the Course – particularly given that he was provided the link to same – and could have discovered that it was a live program with fixed dates.
5. On Dec. 10, 2020, the hearing proceeded. The Discipline Committee accepted the joint submission containing the PROBE Course requirement and issued the Order on that date. Mr. Smith was aware of the Order and that it required him to complete the PROBE Course by Aug. 1, 2021, on this date.
6. On Dec. 14, 2020, the Registrar sent Mr. Smith a letter enclosing the Order. The letter included a reprimand for Mr. Smith's misconduct and identified the conditions he must comply with. One of these conditions was successful completion of the PROBE Course by the ordered date. The letter included a link to the course.
7. Between the Discipline Committee Order on December 2020 and June 2021, the PROBE Course was offered multiple times.

Continued on next page ►

8. Mr. Smith made no efforts to register for or to complete the PROBE Course before June 20, 2021. He took no steps to ascertain the nature of the course. He offered no explanation for this delay and the Discipline Committee found that simply Mr. Smith did not turn his mind to it.
9. Mr. Smith first attempted to register for and complete the PROBE Course on June 20, 2021. It was on this date that Mr. Smith learned it was a live course with fixed dates. The July 2021 Course offering was booked, and the next available dates were Sept. 9-11, 2021.
10. Following Mr. Smith's discovery that the PROBE Course was a live program on June 20, 2021, Mr. Smith brought the issue to the attention of the College on the morning of June 21, 2021. Mr. Smith registered for the September session and requested to be put on the wait list for the July session, however no participant dropped out. Mr. Smith asked the Registrar to extend the deadline and was advised the Registrar could not. Mr. Smith asked counsel to communicate with the Complaints Committee on the issue and was ultimately advised to request an extension from the Discipline Committee.

Upon reviewing and considering facts, the Discipline Committee considered whether to vary the Order as requested. The Discipline Committee was not prepared to do so. Put simply, Mr. Smith had provided no basis upon which the Discipline Committee could vary the Order.

Mr. Smith's misconduct was serious and involved misrepresentations and dishonest behaviour. It related to the very matters that the PROBE Course was meant to address – namely, ethics and boundaries. The deadline to complete the course in the Order was agreed upon by Mr. Smith. Mr. Smith had access to information about the nature of that Course as early as Oct. 2020. Mr. Smith then had approximately seven (7) months to complete the course. Yet Mr. Smith did not turn his mind to completion of the Course from Dec. 10, 2020, to June 20, 2021. And, when he did so, he was unable to register for a session within the imposed time-frame.

At the end of the day, Mr. Smith provided no reason for his delay in considering the nature of the Course or seeking to register for and complete that Course. The Committee was not willing to vary its Order because Mr. Smith failed to make inquiries earlier.

The Discipline Committee observed that at the hearing on Dec. 10, 2020, Mr. Smith's counsel indicated Mr. Smith was "very remorseful" and "will conduct himself more professionally in the future." Yet, for a period of approximately six months after the Order was rendered, Mr. Smith made no effort to comply with the PROBE Course requirement. The Committee considered Mr. Smith's failure to take any steps with respect to the course prior to June 20, 2021, a failure to live up to the

commitment expressed to it on Dec. 10, 2020.

The Committee acknowledged the good faith efforts of Mr. Smith upon realization that the Course was a live program. The Committee commended Mr. Smith for his efforts upon his discovery and the professionalism he demonstrated that point forward. Unfortunately, the efforts came too late.

Further, the Committee observed the potential impact of granting Mr. Smith's request. The Discipline Committee imposes penalties for a reason – it must consider the need to protect the public as well as maintain the public's confidence in the profession. Varying an order to extend a deadline where a member has provided no reason justifying that variation would both undermine these concerns and establish a precedent that members do not need to comply with disciplinary orders and can have them easily varied.

Upon consideration of the evidence submitted by both counsels, the Discipline Committee rendered the following decision:

- The Committee dismissed Mr. Smith's application to vary the Discipline Committee order to extend the period of time for completion of the CPEP course entitled "PROBE Ethics and Boundaries."
- The entire Decision and Order is available for [review on the CanLII](#).

## Kingsley Chukwu and Haniyke Divine Holdings Inc.

On Nov. 30, 2021, the Discipline Committee convened a hearing to hear and determine charges of professional incompetence and/or professional misconduct and proprietary misconduct against pharmacist Kingsley Chukwu and the proprietor Haniyke Divine Holdings Inc. The hearing proceeded via an agreed statement of facts and a joint submission on penalty excluding the issue of costs.

The agreed statement of facts described the charges summarized below:

1. Between the period December 12, 2017, and Sept. 30, 2019:
  - a. On numerous and multiple occasions, Mr. Chukwu submitted sales transactions of Exempted Codeine Products (ECP) for benefit coverage to the Drug Plan and Extended Benefits Branch (DPEBB) without a valid prescription from an authorized prescriber;
  - b. Further to charge 1(a), Mr. Chukwu billed and received a dispensing fee from DPEBB that he was not entitled to;

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- c. Mr. Chukwu made 11 individual sales of Mersyndol® with codeine in quantities that were contrary to Part J, Section 8 of the Regulatory Bylaws of the Saskatchewan College of Pharmacy Professionals.
2. Between the period Dec. 12, 2018, and March 2020, Mr. Chukwu sold ECP to three patients knowing that these patients were on Opioid Agonist Therapy (OAT):
  - a. Without consulting the OAT prescriber;
  - b. Without appropriate consideration of alternative pain management controls.
3. Between the period Dec. 12, 2017, to March 25, 2020, and on numerous and multiple occasions, Mr. Chukwu prescribed and dispensed drugs for conditions that are not eligible minor ailments listed in the medSask Guidelines as demonstrated in the following:
  - a. Attapulgit (Activated) – Minor Diarrhea
  - b. Bismuth Subsalicylate – Stomach Upset/Diarrhea
  - c. Multivitamins – Pharmacist Initiated Treatment
  - d. Pyrethrins/Piperonyl Butoxide – Head Lice
  - e. Acetaminophen – Pharmacist initiated treatment cough/mild fever
4. Between the period December 12, 2017, to March 25, 2020:
  - a. Mr. Chukwu prescribed sales transactions of over-the-counter products for benefit coverage to DPEBB without valid prescription from an authorized prescriber as demonstrated in the following:
    - i. Permethrin
    - ii. Sodium Chloride/Dextrose/Potassium Citrate
    - iii. Bismuth Subsalicylate
  - b. Mr. Chukwu submitted sales transactions of over-the-counter products for benefit coverage and a prescriptive authority fee to the DPEBB without a valid prescription from an authorized prescriber as demonstrated in the following:
    - i. Epinephrine – Emergency Supply
  - c. Mr. Chukwu prescribed an interim supply of medication for patients when the previous prescription was not prescribed by a physician or a nurse practitioner, contrary to Part K of the Regulatory Bylaws:
    - i. Vitamin E
    - ii. Clotrimazole (Jock Itch)

Upon reviewing and considering the evidence submitted by way of the Agreed Statement of Facts, the Discipline Committee accepted Mr. Chukwu and Haniyke Divine Holdings' guilty plea and found them guilty of professional misconduct, professional incompetence, and proprietary misconduct as defined in *The Pharmacy and Pharmacy Disciplines Act* (the "Act"). The Discipline Committee found that Mr. Chukwu's conduct fell below the standard expected for the profession.

The Discipline Committee accepted the joint submission on penalty from Ms. Darcia Schirr, Q.C. Counsel for the College and Mr. Benjamin Omoruyi, counsel for Mr. Chukwu and Haniyke Divine Holdings Inc. which included:

1. Mr. Kingsley Chukwu and Haniyke Divine Holdings Inc. shall be reprimanded.
2. Mr. Chukwu may continue to practice under the following conditions:
  - a. Within 30 days of the date of the Discipline Committee Order, Mr. Chukwu shall complete the Billing in Community Pharmacy course offered by the University of Saskatchewan Continuing Professional Development for Pharmacy Professionals (CPDPP). Proof of completion shall be provided to the Registrar.
  - b. Within 90 days of the date of the Discipline Committee Order, Mr. Chukwu shall complete the CPDPP Prescriptive Authority Level 1 Basics course and provide proof of completion to the Registrar. Mr. Chukwu shall bear all the costs of the course.
  - c. Within 90 days of the date of the Discipline Committee Order, Mr. Chukwu shall complete the CPDPP Prescribing for Minor Ailments and Self Care: Basic Course and provide proof of completion to the Registrar. Mr. Chukwu shall bear all the costs of this course.
  - d. Within 60 days of completing the course described in paragraph 3 (c), Mr. Chukwu shall complete the CPDPP Prescribing for Minor Ailments: Level 2 and Level 3 courses and provide proof of completion to the Registrar. Mr. Chukwu shall bear all the costs of these courses.

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3. Pursuant to section 35(1)(g) of the Act, the proprietor's permit for Haniyke Divine Holdings Inc. shall be subject to the following condition:
  - a. For a period of two years from the date of the Order, Haniyke Divine Holdings Inc. shall be subject to annual pharmacy inspections and records reviews by the College field officer, the costs of each inspection shall be fixed in the amount of \$2,000. Haniyke Divine Holdings Inc. and Kingsley Chukwu shall follow any and all recommendations made by the College. The inspections shall be in addition to any of the routine practice assessments conducted by the College.
  - b. Kingsley Chukwu and Haniyke Divine Holdings Inc. shall be jointly and severely liable to pay a fine in the amount of \$1,000.
  - c. Kingsley Chukwu and Haniyke Divine Holdings Inc. shall be jointly and severely liable to pay the costs of the investigation and hearing which costs shall be fixed in the amount of \$10,000.

The entire Decision and Order is available for [review on the following CanLII link](#).

## Brenda Einarson and Luseland Pharmacy Ltd.

On Oct. 28, 2021, the Discipline Committee convened a hearing to hear and determine charges of professional incompetence and professional misconduct against pharmacist Brenda Einarson, and charges of proprietary misconduct against the proprietor Luseland Pharmacy Ltd. The hearing proceeded via an agreed statement of facts and a joint submission on penalty.

The agreed statement of facts described the charges summarized below:

1. In September 2017, Health Canada conducted an inspection (the "First Inspection") pursuant to the provisions of the *Controlled Drugs and Substances Act*. The purpose of the inspection was to assess compliance with the *Controlled Drugs and Substances Act*, the Narcotic Control Regulations, Part G of the Food and Drug Regulations and the Benzodiazepines and Other Targeted Substances Regulations. The inspection report showed numerous and multiple concerns:
  - a. Between September 2016 and 2017, several invoices were undated by the pharmacist, thereby lacking evidence as to the date the controlled substances were received.
  - b. An inability to generate a reliable inventory listing of controlled substances to verify the presence and quantities of those substances. There was no perpetual inventory of the controlled substances for Luseland Pharmacy.
  - c. The accountability checks resulted in a negative variance of -176 tablets of APO Hydromorphone 1 mg. The reasons for this variation could not be explained during the First Inspection.
  - d. Expired stock and patient-returned controlled substances were stored in cardboard boxes on the counters in an unsecured storage area at the back of the dispensary. There was no accurate tally of these unserviceable controlled substances.
  - e. Exempted codeine products were displayed in public view on shelves situated behind the service counter.
2. In September 2018, Health Canada conducted a follow up inspection (the "Second Inspection") pursuant to the provisions of *Controlled Drugs and Substances Act*. The purpose of the inspection was to assess compliance with the *Controlled Drugs and Substances Act*, the Narcotic Control Regulations, Part G of the Food and Drug Regulations and the Benzodiazepines and Other Targeted Substances Regulations. The inspection report showed numerous and multiple concerns:
  - a. An inability to generate a reliable inventory listing of controlled substances to verify the presence and quantities of those substances. There was no perpetual inventory of the controlled substances for Luseland Pharmacy.
  - b. Records for narcotics, controlled or targeted substances must be retained for a minimum of two years. Destruction records along with loss and theft reports submitted to Health Canada were not available for review.
  - c. The accountability reconciliation from the inspection revealed unexplained variances (<500 units or <5 units of Fentanyl).
  - d. The accountability reconciliation could not be verified and a variance/discrepancy of Concerta 18 mg (>1 tablet) was identified.

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3. In February 2020, Health Canada conducted a second follow up inspection (the "Third Inspection") pursuant to the provisions of *Controlled Drugs and Substances Act*. The purpose of the inspection was to assess compliance with the *Controlled Drugs and Substances Act*, the Narcotic Control Regulations, Part G of the Food and Drug Regulations and the Benzodiazepines and Other Targeted Substances Regulations. The inspection report showed numerous and multiple concerns:
  - a. There was no perpetual inventory of the controlled substances for Luseland Pharmacy.
  - b. Loss and theft reports submitted to Health Canada relating to a 2019 robbery were not available for review.
  - c. There was an inability to provide fully tracked documentation required to complete reconciliation during the inspection. As a result, it could not be determined if the pharmacy had experienced controlled substances shortages.
  - d. The pharmacist did not maintain complete and accurate records for a controlled substance for a period of at least two years.
  - e. The pharmacist was unable to demonstrate a complete and accurate inventory listing of controlled substances to verify the quantities of the substances. Expired controlled substances situated within a paper bag in the dispensary safe were not captured within pharmacy inventory records.
  - f. The pharmacist indicated that during a break in 2019, an estimated 500 tablets were taken from the pharmacy, but a loss or theft report was not received by the Office of Controlled Substances.
  - g. Negative adjustments were made to controlled substances Inventory on Kroll without a valid explanation and were not reported to Health Canada as a loss or theft.
  - h. Pharmacy Sales Reports could not be produced during the inspection.
  - i. Physical counts of controlled substances did not match the theoretical inventory.
4. During the Third Inspection Ms. Einarson was uncooperative and unprofessional with the Health Canada inspector.
5. Ms. Einarson failed to provide timely, appropriate, and complete responses to Health Canada.
6. Ms. Einarson failed to implement appropriate policies and procedures regarding controlled drugs and substances record keeping following the First Inspection and Second Inspection.

Upon reviewing and considering the evidence submitted by way of the Agreed Statement of Facts, the Discipline Committee accepted Ms. Einarson's and Luseland Pharmacy Ltd.'s guilty pleas and found them guilty of professional incompetence, professional misconduct, and proprietary misconduct as defined in *The Pharmacy and Pharmacy Disciplines Act* (the "Act").

In accepting the Joint Submission to penalty, the Discipline Committee reiterated:

1. Ms. Einarson through her inaction and testimony or lack thereof, did not present the Discipline Committee with reasonable grounds or evidence to suggest that any reasonable effort was made to correct the deficiencies in a timely fashion following each inspection. Of import is that the inspector reports noted the same practice issues continuing to occur indicating a clear lack of any remedial action taken.
2. The actions of Ms. Einarson represent a lack of professional judgement and obligation of practice alignment with relevant standards and laws and by contravening them, threatens the public trust relationship established for those in a self-regulated profession. While the committee could not determine evidence for deliberate behavior, her actions or rather lack thereof in quickly remediating the necessarily elements of controlled substance tracking demonstrated lack of regard for her expected duties as a Pharmacy Manager and the perception of her role as a regulated health care provider.
3. While not directly applying to the accepted penalty discrepancies and mishandling inventory of controlled substances requires commentary considering current medical and societal context. In 2018, Saskatchewan signed a bilateral agreement with the Government of Canada explicitly stating:

"... WHEREAS, Canada and Saskatchewan agree that Canada is in the midst of an opioid crisis that has had a significant effect on many communities, that has claimed the lives of thousands of Canadians from all walks of life, that has had a devastating impact on many Canadian families,..." (<https://www.canada.ca/en/health-canada/services/opioids/responding-canada-opioid-crisis/emergency-treatment-fund/saskatchewan-2018.html>)

Taking this into consideration, Ms. Einarson's failure to control and appreciate the severity of her actions within the context of such concurrent societal issues, is in the opinion of the Committee a further oversight and demonstrable lack of appreciation for the seriousness of offence.

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The Discipline Committee issued the following Order for professional incompetence, professional misconduct and proprietary misconduct by Ms. Einarson and Luseland Pharmacy Ltd.

- Ms. Einarson & Luseland Pharmacy Ltd. shall be reprimanded.
- Ms. Einarson's license to practice is subject to the following conditions:
  - ▶ Within one year of the date of the Discipline Committee Order, Ms. Einarson shall successfully complete the "Managing Your Pharmacy: The Business Essentials" offered by the Canadian Pharmacists Association. Mr. Einarson shall bear all of the direct and indirect costs of this course.
- The proprietor's permit for Luseland Pharmacy Ltd. will be subject to the following conditions:
  - ▶ For a period of two years from the date of the Discipline Committee order, Luseland Pharmacy Ltd., and Brenda Einarson shall be subject to an annual pharmacy inspection and records review by the College field officer. The costs of each inspection shall be fixed in the amount of \$2,000.00 to be payable within 14 days of the inspection.
  - ▶ For a period of two years from the date of the Discipline Committee order, Luseland Pharmacy Ltd. shall provide to the College field officer quarterly (once every three months) counts of all controlled drugs or substances including drug inventory history that shows all transactions and manual adjustments listed in the *Controlled Drugs and Substances Act* and those drugs listed in the Prescription Review Program of the College of Physicians and Surgeons of Saskatchewan.
  - ▶ Brenda Einarson and Luseland Pharmacy Ltd. shall be liable jointly and severally to pay the costs of the investigation and hearing which costs shall be fixed in the amount of \$10,000.

The entire Decision and Order is available for [review on the following CanLII link](#).

## Voluntary Undertaking and Agreement

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

An ADR process, while not a discipline hearing, will result

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

## Voluntary Undertaking and Agreement – Summary – Lindsay Richels

### The Complaint

In September 2019, the Complaints Committee received a formal complaint alleging that in 2017 – 2018, Ms. Richels injected neuromodulators, dermal fillers, deoxycholic acid, and plasma rich fillers through a Collaborative Practice Agreement with two physicians.

### The Agreement

Lindsay Richels agreed to a Voluntary Undertaking and Agreement in October 2021, which, while an alternative to the discipline process, meets the mandate of the College and provides general deterrence for the profession.

In summary, Dr. Richels, MD, has agreed to the following provisions:

1. Dr. Richels resigned as a member of the College in July 2020 and does not intend to renew her license as a pharmacist. Dr. Richels is no longer entitled to any of the rights or privileges as member of the College.
2. Dr. Richels acknowledged Section 7 of the Act which provides the establishment of a Council and empowers the Council to manage, govern and regulate the affairs and business of Saskatchewan College of Pharmacy Professionals. Dr. Richels is aware of the Council's authority to declare that administration of injection for cosmetic purposes is not within the pharmacist's scope of practice. Dr. Richels is aware that acting beyond the pharmacist's scope of practice constitutes professional incompetence and professional misconduct pursuant to Sections 24 & 25 of the Act. Dr. Richels is aware that, pursuant to Section 65 of the Act, every member must comply with the Act and bylaws.
3. Dr. Richels provided a written admission of her actions that led to a referral to Discipline and apology to the College.
4. Dr. Richels will pay the sum of \$5,000 to the College for partial recovery of costs and expenses.

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5. Dr. Richels understands that the Complaints Committee will recommend to the Registrar that a summary of the Agreement and circumstances under which it was entered will be published in the College newsletter and on the College website.

## Consensual Complaint Resolution Agreements

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

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

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

## Consensual Complaint Resolution Agreement – Summary – Margo Derksen

### The Complaint

In August 2021 the Complaints Committee received a formal complaint alleging that Margo Derksen accessed a patient chart while on a personal visit and wrote a notation in the patient's chart in the Practitioner's Orders section. The patient was a family member of Margo Derksen, and she was not on duty at the time of the conduct.

### The Agreement

The Committee recommended an Agreement to:

- Provide the member a reminder on ethical practice through completion of an Ethics course.
- Provide the member a reminder on privacy and confidentiality through completion of the College's Privacy Officer Training.

- Provide confirmation to the Complaints Committee, through written explanation by the member, how her actions were a breach of privacy and outside her role and scope of practice as a visiting family member.
- Provide a general deterrence to all members through publication.

Margo Derksen, pharmacist, agreed to a CCRA in February 2022, which, while an alternative to the discipline process, meets the mandate of the College and provides general deterrence for the profession.

In summary, Margo Derksen has agreed to the following provisions:

- Mrs. Derksen will complete the PROBE Ethics and Boundaries Program – Canada within eight (8) months of signing the Agreement. Mrs. Derksen shall bear the costs associated and demonstrate successful completion with an unconditional pass.
- Mrs. Derksen will complete the Privacy Officer Training provided by Continuing Professional Development for Pharmacy Professionals (CPDPP) within three (3) months of signing this agreement and provide the Registrar a copy of her certificate of completion.
- Mrs. Derksen will draft a written explanation of how the issues regarding privacy, practicing outside her scope, and treating her family member as identified in the complaint have been addressed to ensure a similar occurrence does not happen again. The letter of explanation will be provided to the Complaints Committee for their review within one (1) month of signing the Agreement.

## Consensual Complaint Resolution Agreement – Summary – Michael Rassin

### The Complaint

- In October 2021, the Complaints Committee received a complaint concerning allegations that a patient had been experiencing adverse effects due to their COVID vaccination being improperly landmarked and administered during a clinic held by Alliance Health Pharmacy.
- During the course of the investigation, it was determined that a nurse practitioner was hired by the pharmacy to provide injections at the clinic held by Alliance Health Pharmacy. The pharmacy did not have a clinical protocol in place, and Public Health did not have a record of the pharmacy providing vaccinations at an alternate location.

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- The Complaints Committee determined that the pharmacy manager had failed to complete the requirements to hold a pharmacy immunization clinic at an alternate location and failed to discuss requirements for another healthcare professional to provide vaccinations with that professional's regulatory body.

### The Agreement

The Committee recommended an Agreement to:

- Provide the member training on specific pharmacy management principles through completion of training modules

Michael Rassin agreed to a CCRA in March 2022, which, while an alternative to the discipline process, meets the mandate of the College and provides general deterrence for the profession.

In summary, Michael Rassin has agreed to the following provisions:

- Mr. Rassin will complete three specific modules of the Canadian Pharmacist's Association (CPhA) course Managing Your Pharmacy: The Business Essentials within six (6) months of signing the Agreement. Mr. Rassin shall bear the costs associated and provide certificates of completion to the Registrar.



## Spotlight on PREVENTION

The Complaints Committee recently heard a complaint against a member who refused to provide a service based on a conscientious objection for moral or religious reasons. The complainant who was refused service felt discriminated against because of their identity in the LGBTQ2IA+ community.

The onus is on the pharmacy and pharmacy professionals to ensure they have adequate knowledge and training to provide services to our diverse population. There are some excellent resources readily available online:

- [SHIRP/LGBTQ2](#)
- [Pharmacists.ca Advocacy Resources](#)

In addition, the Complaints Committee recommended that if pharmacies have a staff member who has declared a refusal to provide services due to moral or religious reasons, they create a plan to proactively identify situations that a member may declare a conscientious objection and consider staffing complements (will this member be working alone, and the pharmacy will not be able to provide a service?) or pre-arrange access to the service or product needed.

While not all scenarios can be anticipated or avoided, by having a plan in place pharmacies can hope to reduce the potential refusal of services, and potential perceived discrimination by patients.

- [Refusal to Provide Products or Services for Moral or Religious Reasons Statement Regarding Pharmacists and Pharmacy Technicians](#)





# Bylaw and Policy Updates



## Code of Ethics

The Minister of Health has approved regulatory bylaw amendments to update gender references in the Code of Ethics and correct administrative oversights. The updated Code of Ethics will help to ensure the most current, respectful, and equitable treatment for SCPP members and other individuals who read the Code of Ethics.

## Awards and Honours

The Minister of Health approved regulatory bylaws for the removal of all current and ending new Member Emeritus designations, Honourary Life memberships, and Honourary memberships. Ending these designations and memberships will ensure the SCPP is no longer involved in advocacy work, will align practices for pharmacists and pharmacy technicians, will align with the removal of these designations by other self-regulating health professional associations and colleges in Saskatchewan, and will align with regulatory reform that is occurring within Canada.

## Emergency Non-Traditional Immunizers

On Nov. 16, 2021, SCPP sent a memo/fax that explained the emergency measures which enabled the COVID-19 non-traditional immunizers to provide immunizations for seasonal influenza.

These emergency measures expired as of midnight, March 31, 2022, with [The Disease Control \(Vaccination Programs\) Amendment Regulations, 2021](#).

Students, formerly licensed members, extended interns, and Pharmacy Technicians are no longer able to provide influenza or COVID-19 immunizations as of 12:01 am, April 1, 2022.

**SCPP anticipates Ministry of Health legislative updates will enable pharmacy technicians, pharmacy students and extended pharmacist interns to once again provide immunizations. At the time of publication, SCPP has no further details but will provide updates as soon as legislation is in force enabling the continuation of this provision.**

SCPP would like to thank all the immunizers for the immensely valuable contribution they have provided throughout the influenza season and the COVID-19 immunization program.

## Fee Schedule

Fee Schedule: SCPP Council has approved the 2022-2023 Fee Schedule. Please see the [new fee schedule here](#).

## New Council Approved Fees

- Alternative Dispute Resolution Process: New fees have been approved by Council for the Alternative Dispute Resolution (ADR) process, effective April 1, 2022. This includes an annual ADR process fee which can be found in the fee schedule and a new administrative bylaw which establishes a fully member and/or proprietor funded ADR process. Establishing a fully member and or proprietor funded ADR process was one of the eight strategies in the Professional Autonomy Framework. For more information please see the [updated Administrative Bylaws here](#).
- Proprietor appeal to Council
- Appeal to the Registrar
- Discipline appeal to Council (proprietor and or member)
- Monthly interest surcharge on unpaid invoices. This does not apply to member or permit renewals as there are already late fees established in the fee schedule.



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## From the Desk of the Dean

For the latest news from the college, [visit our website](#).

The College of Pharmacy and Nutrition has returned to an in-person learning and working environment. While things have not quite returned to normal, all the activity in the college has been positive for our students, faculty and staff. The university's Safe Return Transition Plan can be found on the COVID-19 response website. [Read more](#).

Congratulations to pharmacy students Alex Halpin and Emma Werezak who were recognized at the Indigenous Achievement Awards on Thursday, March 11. [Watch the video](#).

The Medication Assessment Centre Interprofessional Opioid Pain Service received the Excellence in Pharmacy Practice – Patient Care Award from the Canadian Society of Hospital Pharmacists (CSHP). The award was accepted virtually at CSHP's Together Conference 2022 on Sunday, February 6. [Read more](#).

Congratulations to Sarah Kozusko (BSP '04) who has been named CTV Regina's Citizen of the Year recipient for 2021. [Read more](#).

March is Pharmacy Appreciation Month and CAPSI USask is hosting a series of professional development events and information sessions throughout the month. [Watch the video](#).

Eat Well Saskatchewan is challenging the public to #ReduceMyFoodWaste during Nutrition Month in March. Carrie Verishagen was on Global Saskatoon Morning News

to talk about sustainable food choices and reducing food waste. [Watch the video](#). [Read the Q-and-A](#).

For the first National Day for Truth and Reconciliation in Canada, the College of Pharmacy and Nutrition's Indigenous Initiatives Committee identified a variety of on-line resources, videos, books, and courses for the college's members to use to engage in learning and growth. [Read more](#).

The new Bachelor of Science in Food and Nutrition degree meets the needs of a distinct group of students who are keen to build knowledge in food chemistry, food processing, and other related areas along with foundational knowledge of food nutrition and the role that nutrients play in human health. The new program will be housed in the College of Agriculture and Bioresources, with students taking both AgBio classes and classes offered by the College of Pharmacy and Nutrition. [Read more](#).

The College is planning to host Sask Night at the Canadian Pharmacists Association Conference on Friday, June 10 in Ottawa, and an alumni reception near the Canadian Pharmacy Education and Research Conference on Tuesday, June 14 in St. John's, NL. The planning process for these events has begun and details will be shared in upcoming communications.

*Dr. Jane Alcorn,  
Professor and Dean*

## 2022 CFP Innovation Fund Grants

The Canadian Foundation for Pharmacy announced their Innovation Fund Grants funding for 2022.

These grants:

- Help advance the scope of pharmacy practice
- Demonstrate the value of current practices and services
- Expands community pharmacy
- Are community focused

The Canadian Foundation for Pharmacy recognizes all of the hard work and dedication that pharmacists have displayed in another challenging year. With this in mind, the Foundation Board of Directors recently approved increased funding to \$150,000 in support of the profession.

These grants are made possible by the donations of individual pharmacists, and Corporate Sponsors.

For more information, please visit [cfpnet.ca](http://cfpnet.ca) or contact [dacorn@cfnet.ca](mailto:dacorn@cfnet.ca).



# Pharmacy Examining Board of Canada (PEBC) Examination Dates

Below are the exam dates at time of publishing. For the most up-to-date exam schedules, please visit [www.pebc.ca](http://www.pebc.ca).

## Pharmacist Schedule of Exams

Examination Name	Examination Date	Application Deadline Date*
May Pharmacist <b>Qualifying Examination</b>	MCQ: May 24-28, 2022	Deadline passed.
	OSCE: May 29, 2022	
June Pharmacist <b>Evaluating Examination</b>	June 22, 2022	Deadline passed.

## Pharmacy Technician Schedule of Exams

Examination Name	Examination Date	Application Deadline Date*
September Pharmacy Technician <b>Qualifying Examination</b>	MCQ: Sept. 7, 2022	July 13, 2022
	OSPE: Sept. 11, 2022	

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

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

