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College of Pharmacists of Manitoba Annual General Meeting Agenda and Annual Report

Annual General Meeting

The College of Pharmacists of Manitoba Annual General Meeting (AGM) will be held during the Manitoba Pharmacy Conference on Saturday, April 18, 2015, at the RBC Convention Centre, 375 York Avenue in Winnipeg. The meeting is scheduled to begin at 10:45 am in the 2nd Floor Presentation Theatre. Please review the College of Pharmacists of Manitoba Annual General Meeting Agenda for more information.

Annual Report and Financial Statements

The Annual Report and Financial Statements are posted on the website, included as a link here and will also be available by hardcopy. (Contact the College office to request a printed copy). Click to register for the Manitoba Pharmacy Conference and Award presentations. Members are not required to register for the conference to attend the Annual General Meeting. Click to view the Manitoba Pharmacy Conference 2015 Program.

Click to view the document.
William, G. Eamer/CPhM Scholarship for Student Excellence in Pharmacy

In the Winter 2014 Newsletter, the College announced the students who were award recipients at the September 22, 2014, White Coat and Student Recognition Ceremony. In that issue, the College inadvertently missed congratulating Kristen Poncsak, third year student, who was awarded the William G. Eamer/CPhM Scholarship for Student Excellence in Pharmacy. Congratulations Kristen! We apologize for the oversight.

Do you have patients who have questions about resources available to Manitoba Seniors?

If you answered “yes,” you may want to consider keeping copies of the Manitoba Seniors’ Guide and other guides such as the Caregiver Guide and Legal Guide available at your pharmacy. If you are interested in any of these publications please go to: http://www.gov.mb.ca/shas/publications/order_form.html to place an order.

Save the date! College golf tournament September 10, 2015

Save the date for the College of Pharmacists of Manitoba Annual Golf Tournament on Thursday, September 10, 2015. This year’s tournament is taking us north of Winnipeg to the Teulon Golf & Country Club. The event will have lots of prizes, an opportunity for pharmacies and other businesses to sponsor a hole and have a great day on the course. The golf registration form will be distributed in an upcoming Friday Five.

The number of participants attending the College of Pharmacists of Manitoba Annual Golf Tournament have been decreasing. If this is a valued event for pharmacists, pharmacies and supporters, please attend to indicate this event needs to continue.

VISION
Leader in patient safety by creating the framework for collaborative and innovative patient-centred pharmacy practice.

MISSION
To protect the health and well-being of the public by ensuring and promoting safe, patient-centred and progressive pharmacy practice in collaboration with other health-care providers.

VALUES

Integrity
We act with professional, fair and honest conduct.

Respect
We are considerate of the values and needs of others.

Excellence
We strive to be innovative and attain high quality and exemplary performance.

Accountability
We are responsible for our actions in an open and transparent manner.

Collaboration
We strive to include teamwork and partnership.

Life-long Learning
We continue to enhance our knowledge and competency.
Dear Members,

As I reach the halfway point of my presidency, I want to focus on the accomplishments of the members this past year. Some of those accomplishments were outlined during the district meetings held over the past two weeks in Brandon and Winnipeg. At the district meetings, we discussed the future Pharm. D. program in Manitoba, pharmacy technicians, lab test ordering by pharmacists, and Extended Practice Pharmacists, among other things. If you were unable to attend, I suggest you tune into the March 4, 2015, district meeting recording, available on the College webpage Previously Recorded Programs. If you have any questions after viewing the meeting, please contact me. To contact me directly, please use the form on the Council webpage. Thank you to all who attended and asked questions.

Pharmacists have enhanced Manitoba’s healthcare system by offering prescribing for self-limiting conditions and smoking cessation, administration of injections like the flu shot and additional services such as issuing adaptation and continuing care prescriptions. Thank you for embracing the new expanded scope of practice and taking the time to learn these new skills in order to be certified. The extra learning is evident by the 4% increase from last year in members recognized for achieving lifelong learning in pharmacy. Those members are recognized in this newsletter and the annual report.

Between the Awards night and Awards Luncheon, there are six individuals who will be awarded for going above and beyond in supporting their patients and colleagues this past year. Congratulations to all of this year’s awards recipients (listed within this newsletter) and I look forward to presenting the awards at the upcoming Manitoba Pharmacy Conference in April. The Young Leader Awards, jointly sponsored by the College and the Manitoba Society of Pharmacists, will also be presented at the Manitoba Pharmacy Conference.

Last, the College Annual General Meeting will be held during the Manitoba Pharmacy Conference at 10:45 am in the 2nd Floor Presentation Theatre at the RBC Convention Centre in Winnipeg. During the Annual General Meeting, the College will present a series of annual reports recognizing the accomplishments of the past year.

Click to register for the Manitoba Pharmacy Conference, Awards Gala Dinner and Awards Luncheon. I hope to see you all there!

Sincerely,

Glenda Marsh, BSc.(Pharm.)
President
College of Pharmacists of Manitoba
“Specialist” and “specialty” are restricted terms in pharmacy

Pharmacists in Manitoba are not permitted to refer to themselves as “specialists,” and pharmacies must not use “specialty” as part of their pharmacy name or in promotions. Only pharmacists qualified as a specialist in an area listed in section 96 of the Pharmaceutical Regulation, who have been approved by Council and have their specialty listed on their pharmacist licence, may call themselves a “specialist.” For an example of an accepted specialty qualification, please see section 96 of the Regulations (listed below). Use of the terms specialist and specialty, and any terms that infer either, is restricted by the *Pharmaceutical Act*. Therefore, their use is not permitted with respect to practice or the licensing of pharmacies. The terms “clinical pharmacist”, “geriatric pharmacist”, “diabetic specialist” cannot be used in promotions descriptors of a pharmacist or like words for pharmacy. The College supports national discussions that are currently occurring through the “Blueprint for Pharmacy” to determine the feasibility and structure of specialties in pharmacy in Canada. Once a national framework becomes clearer, then Council will be asked to address requirements and criteria for the purpose of our regulations.

Please see excerpts from the *Pharmaceutical Act* and Regulations, for more information:

**Pharmaceutical Act**

**Specialty practice**

16(2) If a member meets the requirements set out in the regulations for a specialty area of practice

(a) the pharmacist licence must reflect that the member is a specialist in the area; and

(b) the member is entitled to hold himself or herself out as a specialist in the area.

**Representation as specialist**

16(3) No person shall hold out that he or she is a specialist in an area of pharmacy practice unless the specialty is noted on his or her pharmacist licence under clause (2)(a).

**Pharmaceutical Regulation**

**Specialty qualifications**

96 A member is qualified as a specialist in an area upon providing evidence satisfactory to the registrar that he or she has one or more of the following qualifications:

(a) board certification from the American Board of Pharmacy Specialties in one of the following specialties, is currently practising, and has practised for at least 1000 hours in the two years before applying for registration, in a healthcare setting in one of the following specialty areas:

(i) ambulatory care pharmacy,
(ii) nuclear pharmacy,
(iii) nutrition support pharmacy,

126(2) A member or an owner must ensure that any advertising that the member or owner places

(d) does not use the word “specialist” or a word with similar meaning, unless the member to whom the advertising relates has been qualified as a specialist under the Act;

A version of this article was originally published by the Alberta College of Pharmacists in November/December 2014 acpnews. (Republished with permission.)
Pharmacy technician regulation update

On January 1, 2014, the new *Pharmaceutical Act* along with its accompanying Pharmaceutical Regulation, came into effect in Manitoba. Since the proclamation, only those persons meeting the qualifications of “pharmacy technician” can perform the work of a pharmacy technician or use this term on identification badges or in the workplace. A pharmacy technician’s scope of practice focuses on the knowledge, skills, and abilities associated with the technical aspects of prescription and patient information, and of product and drug distribution. The Pharmacy technician section of the College website has been updated with information for interested applicants on the steps to pharmacy technician regulation including language proficiency requirements, and the details of the Jurisprudence Exam and the Structured Practical Training program.

While all pharmacy technician applicants must meet the same competencies, there are essentially two pathways to registration:

1. Individuals who are currently employed and qualify through prior work experience in pharmacy; and
2. Graduates of a CCAPP accredited pharmacy technician program

The process to becoming a pharmacy technician in Manitoba may differ based on the individual’s current qualifications and experience. Please see the section titled Steps to becoming a Pharmacy Technician in Manitoba for more information as well as the section on Language Proficiency.

Professional Development for Pharmacy Technicians

Pharmacy technicians in Manitoba are required to meet the professional development (PD) requirement annually, confirmed at a minimum of once every two years by the pharmacy manager or delegate at the pharmacy technician’s place of employment. Pharmacy technicians are required to participate in a minimum of 15 hours of professional development learning activities each year. Of the 15 hours, a minimum of 5 hours must be from accredited learning activities (i.e. programs that have been accredited for no less than a total of 5 CEUs) with a balance of 10 hours of participation in either accredited or non-accredited learning activities. For convenience in maintaining professional development records, the College has provided a Professional Development Log for Pharmacy Technicians template which is available for download (in Word form) on the Pharmacy Technician webpage.

Pharmacy technicians can complete learning activities accredited for pharmacy technicians, but they can also complete learning activities accredited for pharmacists and claim it as accredited learning. However, pharmacy technicians must always be mindful of their scope of practice. (Please note that pharmacists cannot claim learning activities accredited solely for pharmacy technicians as accredited learning).

The Canadian Council on Continuing Education in Pharmacy (CCCEP) is the national accrediting body for pharmacy continuing education programs intended to be delivered to pharmacy professionals from more than one province. To distinguish whether a learning activity is accredited for pharmacists or pharmacy technicians or both, an individual must look at the CCCEP accreditation number. The accreditation number for CCCEP accredited programs for pharmacists will end in a ‘P’ and the accreditation number for CCCEP accredited programs for pharmacy technicians will end in a ‘T’. Programs accredited for both pharmacists and pharmacy technicians will have two accreditation numbers, one ending in a ‘P’ and one ending in a ‘T’. Programs accredited by the College of Pharmacists of Manitoba will clearly indicate if they are accredited for pharmacy technicians only. Please visit the Pharmacy Technician Live PD Programs webpage for information on current program offerings.

For more information on the pharmacy technician listing process in Manitoba, please visit the Pharmacy technicians webpage on www.cphm.ca.
The College continues to receive reports and complaints regarding pharmacists unwilling to transfer prescriptions immediately upon the request of another pharmacy. In these cases, pharmacists insist on contacting the patient to confirm the request prior to transferring the prescription.

Pharmacists are reminded of the Practice Direction on Standard of Practice # 10: Transfer of Patient Care that states (in part):

“Transfer of Patient Care at the patient’s or authorized agent’s request

2.1 A licenced pharmacist must comply with a patient’s request to transfer care to another health professional.

2.2 After receipt of a request to transfer care to another licenced pharmacist, the licenced pharmacist must promptly provide the following information to the pharmacy of the patient’s choice:

2.2.1 transfer of active prescriptions with remaining refills that can be legally transferred; and

2.2.2 other information that, in the opinion of the transferring licenced pharmacist, may be required to ensure continuity of care.”

In the case of a pharmacist requesting a transfer of prescriptions on the patient’s behalf, the pharmacist is acting as the patient’s authorized agent. The action of a second pharmacist phoning the patient prior to transferring their prescriptions, to confirm that they in fact want to transfer the prescription away from the original pharmacy, may be viewed by the patient as intimidating. This action would also be seen as using the patient’s personal information for a purpose other than it is intended and represents a violation of the Personal Health Information Act.

Transfer of patient care at the patient’s or authorized agent’s request

Part of the Council’s commitment to enhance the quality of care and patient safety in Manitoba pharmacies is to instruct the Chair of the Complaints Committee to issue a report following meetings of the Committee. The intent of this report is to inform pharmacists of medication incidents thereby providing an opportunity to relate and reflect upon their own practice with the goal of improving patient safety.

Health Product InfoWatch
The Canadian Adverse Reaction Newsletter (CARN) is taking on a new format, look and name: Health Product InfoWatch. The Health Product InfoWatch will be published monthly in an easy to read format that includes a monthly recap of health product advisories and summary safety reviews, as well as a growing selection of new health product safety information.

If you are currently subscribed to CARN, you will automatically be subscribed to the Health Product InfoWatch. If you want to subscribe to Health Product InfoWatch, you can do so directly on the Stay Informed - MedEffect Canada page.

• Announcement
• Monthly recap of health product safety information

MedEffect e-Notice
MedEffect e-Notice is a free service that sends health product alerts right to your e-mail inbox. Advisories and recalls are an important source of information regarding the post-market safety and effectiveness of health products. Pharmacists are reminded of their responsibility to subscribe to MedEffect e-Notice to receive important health and safety advisories including notices about drug recalls, as these notices are distributed by Health Canada. By being informed of these important advisories in a timely manner, pharmacists will be better able to respond quickly to address patient inquiries and safety issues. To subscribe to Health Canada MedEffect e-Notices, go to:
The Canadian Foundation for Pharmacy is pleased to announce the 2015 Wellspring Pharmacy Leadership Award Program. Inspired by the work and career of pharmacist Barb Wells, and supported by the generous donations of her friends, colleagues and the Wells family, this award is intended to encourage and support the development of pharmacy leadership in Canada. Up to $10,000 will be awarded to a successful recipient(s) to help fund initiatives fostering their development and leadership.

Pharmacists may be nominated by another individual or they may nominate themselves. Applications in any amount are welcomed up to a total of $10,000 (maximum) annually.

**Deadline for submissions is March 23, 2015.** Pharmacists are encouraged to submit entries or nominations via email to submissions@cfpnet.ca


The Award(s) reception will take place May 29, 2015, at the CPhA Conference (Ottawa).

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**NABP study grant**

The National Association of Boards of Pharmacy (NABP)/ American Association of Colleges of Pharmacy (AACP) (US) District V has announced that the study grant competition is now open. The College of Pharmacists of Manitoba is a longstanding member of the District V of NABP/AACP.

District V of NABP/ AACP will provide grant money, not to exceed $3,000.00 USD per grant, to award two grants within the District to study topics which benefit students, pharmacy education or pharmacy practice. Topics of interest to the Boards and Colleges in District Five are suggested, but researchers will not be limited to these topics. The Grant Recipients or designees will present their report or findings at the District V Annual Meeting in the year following the award. **The deadline for submissions is March 31, 2015.**

For more information, please see the study grant announcement which is posted on [www.cphm.ca](http://www.cphm.ca).

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**Patient Safety Champion Award**

The Manitoba Institute for Patient Safety (MIPS) created the “Patient Safety Champion Award” to acknowledge someone working in the healthcare system who shows a passion and commitment for improving patient safety. The award recipient:

- is an individual who works at or is a member of a MIPS’ member organization. MIPS’ member organizations are listed at [www.mips.ca](http://www.mips.ca)
- is involved in providing or supporting healthcare
- identifies areas for improvement and commits to change or enables change that has a positive impact on patient safety and quality improvement
- leads by example
- inspires others

Staff or members of a MIPS’ member organization can nominate one individual for the Patient Safety Champion Award. The College of Pharmacists is a founding member of MIPS. This award is not open to MIPS staff or Directors nor can MIPS staff or Directors submit a nomination. **The deadline to submit nominations is: 12:00 noon, Monday, March 23, 2015.**

Nomination forms can be downloaded from [www.mips.ca](http://www.mips.ca) or obtained from MIPS by calling 204-927-6477 or toll free 1-866-927-6477.

The award recipient will be advised of receiving the award confidentially, in advance of it being announced at the MIPS’ Annual General Meeting on Wednesday, June 3, 2015.
Pediatric prescriptions for compounded liquid medications following discharge from Children’s Hospital of Winnipeg

Several recent incidents have highlighted the importance of providing children, following their discharge from hospital, with the same concentration of their medication in the community as they received while in the hospital. In addition, these incidents have pointed out the need for providing consistent instructions to the child’s parents or caregivers so that counselling in the community reinforces the instructions and education that was provided in the hospital.

When a prescription is being filled in the community for a child who has recently been discharged from Children’s Hospital, and the prescription is not absolutely clear as to the concentration, the Winnipeg Regional Health Authority Pharmacy Program would like to assist and invites community pharmacists to call pharmacists at the Children’s Hospital of Winnipeg, Pharmacy (CHWP) for clarification at 204-787-1839.

In addition, if the community pharmacist is anticipating a change in the medication’s concentration to improve palatability or administration of the drug, it is advisable that the community pharmacist communicate this possible change to the patient and prescribing physician. This is of particular importance with medications that are available commercially in liquid form, as most physicians will not be aware of the various concentrations of compounded alternatives, and patients will often communicate their dose only in millilitres. **Pharmacists are reminded that should the decision be to proceed with a change in the medication’s concentration, a new prescription must be obtained from the prescriber, if the concentration has been specified on the original prescription or if the concentration is different from the commercially available form of the medication.**

For many medications, the CHWP has developed recipes for liquid preparations that have been carefully researched for appropriate concentration, stability and storage. The CHWP pharmacists will provide community pharmacists with these recipes so that the community pharmacy is able to prepare the medication in the same manner as the medication was prepared while the child was in hospital. This will help minimize the possibility of medication errors and ensure that the liquid preparation from the community pharmacy will maintain its stability for a consistent time period.

For those medications where there is no recipe for a compounded liquid formulation, CHWP pharmacists may be able to provide community pharmacists with helpful guidance and instructions that will enable the child’s caregivers to properly prepare and administer the medication. In some cases, this counselling has already taken place at the Children’s Hospital prior to discharge and reinforcement by the patient’s community pharmacist would be very helpful.

By working together, hospital and community pharmacists can greatly reduce patient safety risks for children that are associated with medication errors or lapses in medication availability. To contact pharmacists at the Children’s Hospital of Winnipeg, Pharmacy call 204-787-1839.
The Institute for Safe Medication Practices Canada is an independent national not-for-profit organization committed to the advancement of medication safety in all healthcare settings. ISMP Canada works collaboratively with the healthcare community, regulatory agencies and policy makers, provincial, national and international patient safety organizations, the pharmaceutical industry and the public to promote safe medication practices. ISMP Canada’s mandate includes analyzing medication incidents, making recommendations for the prevention of harmful medication incidents, and facilitating quality improvement initiatives.

ISMP Newsletter Subscriptions

ISMP Canada Safety Bulletins are designed to disseminate timely, targeted information to reduce the risk of medication incidents. The purpose of the bulletins is to confidentially share the information received about medication incidents which have occurred and to suggest medication system improvement strategies for enhancing patient safety. The bulletins will also share alerts and warnings specific to the Canadian market place.

The following ISMP Canada Safety Bulletins have been issued since the last issue of the Newsletter.

2015 - ISMP Canada Safety Bulletins
2015 - Volume 15
• Wrong-Route Incident Involving Insulin and Dextrose Prescribed for Hyperkalemia - Issue 2
• Change in Methadone Concentration Results in an Overdose in Post-Partum Patient - Issue 1

2015 - SafeMedicationUse.ca Safety Newsletters and Alerts for Consumers
2015 Volume 6
• Beware: Medicine Names May Sound Alike, but the Medicines May Be Very Different!
• Confusion with Baby’s Dose of Medicine

All issues of the ISMP Canada Safety Bulletins, including those issued in previous years, are freely downloadable from the ISMP Canada website www.ismp-canada.org.

ISMP Canada is pleased to distribute The Medication Safety Alert! (US) newsletters along with ISMP Canada Safety Bulletins to Canadian practitioners and corporations.

To subscribe and for more information on all ISMP Canada’s publications, events and services visit the ISMP Canada website at www.ismp-canada.org.

Pharmacist prescribing documents online

The College has developed two documents regarding prescribing by pharmacists. Most of this information has been communicated already in the Friday Five and Newsletter, but now there is a central place for pharmacists to locate the information on the College’s website. The following documents are found under Information regarding prescribers.

Prescribing Authority for Pharmacists
Available Drugs for Prescribing under Schedule 3 to the Manitoba Pharmaceutical Regulation
Professional development (PD) update

Pharmacists awarded Certificates of Life Long Learning

The following pharmacists have been awarded a Certificate of Achievement of Life Long Learning in Pharmacy in recognition of their outstanding participation in professional development activities during the 2013-2014 PD Year. Recognition is provided each year to pharmacists who have participated in a minimum of 50 hours of professional development activities, of which, a minimum of 30 hours involves participation in accredited learning activities. The College is pleased to report that 15% of pharmacists in the province achieved life long learning status for the 2013-2014 PD year.

The College congratulates the following pharmacists on their achievement:

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Manitoba Module: Ordering Laboratory Tests is now available!

Once lab test ordering for outpatients is permitted by Manitoba Health, pharmacists wanting to order lab tests for outpatients must complete the Manitoba Module: Ordering Laboratory Tests. This module is now available. The Manitoba Module is hosted independently on the Advancing Practice website at a cost of $52.50. As well, the Manitoba Module: Ordering Laboratory Tests will be hosted along with the new, optional, 7 module course, “Ordering Lab Tests for Manitoba Pharmacists” at a cost of $315.00 for all modules.

Separately, the online Ordering Lab Tests for Manitoba Pharmacists program was developed by the University of Manitoba, College of Pharmacy in partnership with the College of Pharmacists of Manitoba, and reviewed by the College of Physicians and Surgeons of Manitoba to provide the additional knowledge for Manitoba pharmacists who plan on incorporating the ordering of lab tests into their pharmacy practice. This program can also be accessed by visiting www.advancingpractice.com.

Learn to be Safe - Medication Safety: A Guide for Pharmacists

An innovative virtual resource guide to promote medication safety with patients and their families is available! Learn to be Safe - Medication Safety: A Guide for Pharmacists is an online guide made available for pharmacists and other healthcare providers to plan, create and deliver effective, customizable presentations, discussion groups or workshops aimed at talking with patients and their families on ways to improve medication safety.

Medication incidents remain a leading contributor to patient harm. This guide can help users:

- deliver key medication safety messages to the public
- promote patient and family engagement
- promote community connections with healthcare providers
- raise awareness of everyone’s role in improving patient safety

Everyone wins when patients, families and healthcare providers work in partnership to improve medication safety!

The guide includes supplemental content to deliver more focused discussions on medication safety:

- for children and teens
- when travelling
- when using high alert medications
- for seniors
- when using cancer medications in the home

The College of Pharmacists of Manitoba, the Canadian Patient Safety Institute, and the Institute for Safe Medication Practices partnered with the Manitoba Institute for Patient Safety on the production of this resource. CancerCare Manitoba contributed content and tools to help patients and families living with cancer use cancer medications safely at home.

For further information, contact the Manitoba Institute for Patient Safety at 204-927-6477 or 1-866-927-6477 or access the guide online at www.mips.ca/guide.
Patient counselling: Exempted codeine products and Schedule 2 drugs

As outlined in the January 30, 2015, Friday Five at the beginning of the year, the media reported incidents where patients attended pharmacies in Manitoba, and throughout the country, to purchase a Schedule 2 product, and on many occasions either did not receive counselling, or did not receive appropriate counselling to inform the patient of potential drug interactions. The focus in Manitoba was on exempted codeine preparations (ECPs). The College reminds pharmacists of the requirement to counsel patients about ECPs (and all Schedule 2 drugs). Entering into a dialogue with the patient is important to identify the ailment the drug is being used to treat, the potential for drug interactions and common adverse reactions. Specifically, the following excerpt from the Practice Direction on Patient Counselling states:

Circumstances in which a dialogue is required

2.2 A licenced pharmacist, an academic registrant or an intern must enter into a dialogue with a patient:
   2.2.1 when a Schedule I drug is dispensed to a patient, or the patient’s agent
   2.2.2 when a Schedule II drug is sold to a patient, or the patient’s agent
   2.2.3 When other non-prescription drugs, medical devices, and other items of clinical significance are sold to a patient, as appropriate
   2.2.4 if the patient requests health-related information
   2.2.5 if, in the licenced pharmacist’s professional opinion, a dialogue is required to:
      2.2.5.1 provide the patient with sufficient information to enable the patient to receive the intended benefit of the drug therapy; or
      2.2.5.2 avoid, resolve or monitor a drug therapy problem.

2.3 When a patient requests a Schedule II or III product, the licenced pharmacist, academic registrant, or intern must collect information to assess the patient’s knowledge and needs before providing advice.

2.4 A licensed pharmacist, academic registrant, or intern must be available and accessible to a person who needs to self-select a Schedule III drug.

2.5 When a licenced pharmacist, academic registrant, or intern counsels a patient, or the patient’s agent, the dialogue must be in person unless it is not practical for the patient.

2.6 When a patient has requested delivery of their medication, the licenced pharmacist, academic registrant, or intern must make all reasonable attempts to contact the patient directly.

2.7 If a patient identifies an agent to receive their medication the licenced pharmacist, academic registrant, or intern must use their professional judgment regarding whether it may be appropriate to provide counselling through the patient’s agent or whether it would be more appropriate for the licenced pharmacist, academic registrant, or intern to contact the patient by telephone to provide counselling or as described under section 2.8.

2.8 When direct verbal communication is not possible in advance of dispensing, written information must be provided with the dispensed medication.

2.9 Patient counselling must be done in a manner which respects the patient’s right to privacy.

2.10 Despite 2.2, a communication or dialogue with a patient may not be required if the drug being dispensed or sold will only be administered by or under the supervision of a regulated health professional acting within the scope of their practice, orbe dispensed to an inpatient of a hospital.

And lastly, the Practice Direction on Sale of Schedule 2 Drugs states, in part:

2.2 A licensed pharmacist must enter into dialogue with the patient or designate seeking to purchase or treat a condition using a Schedule 2 drug.

2.3 When engaging in a dialogue, the licensed pharmacist should gather specific information such as:
   2.3.1 the condition or symptom(s) to be treated;

continues on page 13...
2.3.2 any previous history of complaint given as well as length of present symptoms;
2.3.3 current and relevant information regarding disease state(s), allergies and/or sensitivities;
2.3.4 current medications; and/or
2.3.5 other medications or therapies previously tried.

2.4 Dialogue must occur in a confidential manner.

2.5 A pharmacist may need to access and review the patient’s health record in the Drug Program Information Network (DPIN) for further information or clarification before recommending a therapy.

2.6 The licensed pharmacist will enable the patient to make a choice and will discuss:
   2.6.1 if recommending a drug therapy, directions for proper use and length of therapy, common adverse effects, and expected response or outcome or benefit(s);
   2.6.2 non-drug treatments, if any;
   2.6.3 follow-up with the licensed pharmacist or another health care professional if there is no improvement or if symptoms change or worsen;
   2.6.4 the need for referral to another health care professional if the condition or symptom(s) are deemed to be serious in nature; if unsure of the diagnosis or if the situation cannot be appropriately treated with non-prescription drugs; and
   2.6.5 the need for further dialogue with the patient directly (if a designate is involved or if a drug product is being delivered).

2.7 A licensed pharmacist will document the patient interaction and any recommendation(s) in the patient’s health record if deemed appropriate.

2.8 In addition to the above, pharmacist providing a schedule 2 codeine containing product, as authorized under section 36 of the Narcotic Regulations under the Controlled Drugs and Substances Act, the pharmacist must have reasonable grounds for believing the product will be used by the person for a recognized medical or dental purpose.

It is important that all pharmacists, pharmacy technician and pharmacy dispensary staff review and comply with the Practice Direction on Patient Counselling and the Practice Direction on Sale of Schedule 2 Drugs.

Ethical drugs and patient safety

Health Canada defines an ethical drug as a drug that in accordance with federal legislation does not require a prescription, but is generally prescribed by a medical practitioner. Ethical drug products are non-prescription professional use products (e.g., MRI contrast agents and hemodialysis solutions) and a few emergency use products (e.g., nitroglycerin, epinephrine).

Following designation as an ethical drug by Health Canada, most ethical drugs are further classified within the NAPRA National Drug Schedules. For example in the case of nitroglycerin, the sublingual preparations meant for acute relief of angina are designated as Schedule II while other dosage forms of nitroglycerin intended primarily for the prophylactic treatment of angina are designated as Schedule I. In the case of nitroglycerin sublingual, the primary reason for its Schedule II designation in the NDS is because it is necessary that this drug be readily available to patients under exceptional/emergency circumstances when a prescription may not be practical. In keeping with the Standards of Practice for Schedule II and III Drugs the pharmacist must intervene in the sale of this drug to counsel the patient to ensure they are using the drug appropriately and under the direct supervision of a qualified medical practitioner.

Although ethical products do not require a prescription, patients requesting ethical products require a high level of ongoing medical care to ensure patient safety. Pharmacists are responsible to make sure the patient is requesting the drug under the direction of a physician or other qualified prescriber who has evaluated the patient, determined the appropriate treatment and is providing ongoing monitoring of the patient’s condition for treatment outcomes. Use of many of these products without proper medical care can lead to serious patient injury. In our example of nitroglycerin, it is clearly evident why there is a need for direct oversight by a qualified practitioner however in the case of other ethical drugs, the need may not be as apparent. Pharmacists must therefore be even more diligent in familiarizing themselves with safety risks associated with various ethical drugs so they are better able to make informed decisions on whether providing the drug is safe for the patient.

Examples of other drugs classified as ethical drugs include:
Alcaine ophthalmic drops, epinephrine auto injectors, Bentylol, Buscopan, Colyte, Vitamin B12 injection, Xylocaine jelly, homatropine ophthalmic drops, isosorbide dinitrate, and sodium chloride for irrigation.

It is the pharmacist’s responsibility to intervene with all patients requesting ethical drugs to determine if the request for the ethical drug is appropriate and safe for the patient. Health Canada’s Drug Product Database can be accessed online to determine if a drug or health product is designated as an ethical drug.

Pharmacy software in Canadian community pharmacies has generally been “product-centric”; for example, prescription-filling software that allows pharmacies to fill prescriptions and send claims to third-party insurers and provincial “Pharmacare” systems. PPMS software is a “patient-centric” type of pharmacy software created to include expanded scope of practice and communication with provincial electronic health records (in Manitoba that would be e-Chart).

After much consultation with stakeholders, the National Association of Pharmacy Regulatory Authorities (NAPRA) released the document entitled Pharmacy Practice Management Systems (PPMS): Requirements to Support NAPRA’s “Model Standards of Practice for Canadian Pharmacists”. The document outlines the requirements that pharmacy software programs must meet in order to support NAPRA’s national standards of practice. “The purpose of these requirements is to instruct pharmacists, pharmacy managers, pharmacy owners, pharmacy practice management system vendors, and developers of federal/provincial/territorial electronic health records about the minimum functionality required by systems used in pharmacy practice in order for pharmacists and pharmacy technicians to comply with their respective standards of practice.”

This NAPRA PPMS requirement is not an additional requirement for prescription filling software.

On April 25, 2014, Council passed a motion to accept the document’s proposed requirements for the PPMS used by pharmacy professionals for compliance in Manitoba pharmacies by January 1, 2016, in conjunction with NAPRA’s effective date.

Current prescription filling software used in MB (probably) complies with the PPMS prescription filling requirements, but PPMS includes requirements for:

- the ability to record, display, store, and exchange patient specific information in a manner that optimizes workflow within pharmacy teams is critical.
- facilitating both information exchange with external systems such as electronic health record systems (MIMS, DSM) and also processes such as electronic prescribing, while simultaneously preserving the confidentiality and security of all personal health information processed or transmitted.

There is no obligation to have patient-centered software at this time, but if you do, it needs to comply with PPMS. The Pharmacy Practice Management Systems (PPMS): Requirements to Support NAPRA’s “Model Standards of Practice for Canadian Pharmacists” document should be brought to the attention of the pharmacy owner, I/T department or support person and/or software vendor so any necessary changes to current practice can be made.

Welcome, Jill Hardy, Quality Assurance and Field Officer

On December 8, 2014, Council approved a new permanent, full time position to conduct routine pharmacy compliance audits, on site practice assessments of pharmacists and investigations as part of the College’s quality assurance program and to perform additional duties associated with the implementation of the Pharmaceutical Act. Please join the College in welcoming Jill Hardy to the position of Quality Assurance and Field Officer. Jill is a Manitoba graduate with a Master’s degree in Health Economics and Policy from the London School of Economics. She brings a wealth of experience to this new position at the College in the areas of hospital practice, sterile compounding, patient safety and quality assurance performance assessments. Jill joined the College on February 9, 2015.

Pharmacy student/ alumni hockey game

The pharmacy alumni and students would like to thank McKesson Canada and Shoppers Drug Mart #542(Tuxedo) for their support of the annual hockey game. The game took place Sunday, March 1, 2015, at the Iceplex in Winnipeg. The Alumni team won the game, but then again, they have all the experience (and twice as many skaters). Congratulations to both teams for participating and thank you to our sponsors. If you want to get on the contact list for next year’s Alumni squad, contact Ronald Guse, at: rguse@cphm.ca.
Hydrogen peroxide-based contact lens cleaning solutions (Clear Care)

The Institute for Safe Medication Practices Canada (ISMP Canada) is informing Canadian pharmacists of important information available on their consumer reporting and learning website, SafeMedicationUse.ca. Through SafeMedicationUse.ca, consumers can report medication incidents and get information about using medications safely. Many reports received by SafeMedicationUse.ca describe incidents that occur in pharmacies, in hospitals and at home. SafeMedicationUse.ca publications contain important safety information for pharmacists, including “Tips for Practitioners” designed to help prevent the types of incidents reported by consumers.

ISMP Canada would also like to draw your attention to important information about the contact lens cleaning solution Clear Care. Clear Care solution contains 3% hydrogen peroxide, and should not be used directly in the eye or as a rinsing solution for lenses. SafeMedicationUse.ca continues to receive reports from consumers who have experienced pain and burning in the eyes after confusing Clear Care with a multi-purpose contact lens solution. Due to the number of incident reports received, and the fact that many of the incidents resulted in corneal burns requiring emergency care, additional steps are needed to make consumers aware of the need to check labels of contact lens solutions carefully.

ISMP Canada has made the following recommendations that are of importance for pharmacists:

- Do not display hydrogen peroxide–based contact lens cleaning solutions beside multi-purpose solutions.
- In community pharmacies, consider storing hydrogen peroxide–based solutions behind the counter.
- Before selling or recommending hydrogen peroxide–based contact lens cleaning solutions, confirm the intended use of the product and educate consumers about proper use.
- Share the latest SafeMedicationUse.ca Clear Care alert with consumers and patients. Consider posting a copy of the alert near displays of hydrogen peroxide–based lens cleaning solutions.

Please review the Clear Care alerts and other alerts and newsletter on the SafeMedicationUse.ca website. To receive the latest publications from SafeMedicationUse.ca, please: sign up to receive email communications on the www.SafeMedicationUse.ca home page, like SafeMedicationUse.ca on Facebook and follow @SafeMedUse on Twitter. For more information, you may contact info@ismp-canada.org.

Letter to health-care providers about measles

Manitoba Health released a notice on February 10, 2015, that outlines a case of measles reported in Manitoba last month. This notice outlines provincial recommendations on immunization against measles and eligibility criteria for the publicly-funded vaccine to help ensure your patients are up to date with their immunization and the protocol to follow should you suspect a case of measles. For more information, please review this important Manitoba Health notice.

Criminal Record Checks are due June 1, 2015

All licensed pharmacists in Manitoba are required to submit a Criminal Record Check by June 1, 2015. To satisfy this requirement, the College requires the original document from the Royal Canadian Mounted Police or any other Canadian police service, which confirms the check was done using Canadian Police Information Centre (CPIC) and/or based on the National Repository of Criminal Records (of Canada). Criminal record checks dated within the last five years are accepted. For those who have not had a criminal record check in the past, the College advises members to apply well in advance of the June 1, 2015, deadline, as no extensions will be granted. Those pharmacists who do not meet the June 1, 2015, deadline will incur a Council approved fine equal to 50% of the licensing fee ($439.95) for not attaining this requirement and the pharmacist will be given an additional 60 days to attain this requirement.

Failing the document being provided to the College within 60 days, the pharmacist licence will be suspended for “serious risk to the public.” Members can log into their Member Profile on www.cphm.ca to verify which record checks they have submitted and when their record checks expire.
Each year, members and the public are provided the opportunity to recognize pharmacists that go above and beyond for their patients and colleagues. This year, the College is pleased to present four Manitoba pharmacists with College awards.

Congratulations to the following pharmacists:

**Pfizer Consumer Healthcare Bowl of Hygeia**
Mr. Barret Procyshyn, Dauphin
The Pfizer Consumer Healthcare Bowl of Hygeia is in recognition of the time and personal sacrifice devoted by pharmacists to the welfare of their respective community. This award was established in 1958 and awarded to a pharmacist for outstanding community service.

**2014 Pharmacist of the Year**
Dr. Shawn Bugden, Morden
This award is given annually to a Manitoba Pharmacist who, in the opinion of his/her peers, has made a significant contribution to the profession during his/her career, has been elected to office in provincial and/or national pharmacy organizations and possesses high practice standards and innovation.

**Patient Safety Award**
Ms. Janice Coates, Winnipeg
This award recognizes the achievement of an individual pharmacist, a group of pharmacists, an interdisciplinary group (that includes a pharmacist or pharmacists as key participants) or a pharmacy organization that has made a significant and lasting contribution to improving patient safety and health care quality through a specific initiative or project.

**Bonnie Schultz Memorial Award for Pharmacy Practice Excellence**
Mr. Rick Thurmeier, Winnipeg
The Bonnie Schultz Memorial Award for Practice Excellence is given on occasion to a pharmacist or a group of pharmacists who demonstrate outstanding excellence in optimizing patient care, serve as a role model, demonstrate superior communication skills, display compassion, empathy and concern.

The awards for the Pfizer Bowl of Hygeia, the Pharmacist of the Year, the Bonnie Schultz Memorial Award for Pharmacy Practice Excellence, and the Patient Safety Award will be presented at the Awards Gala Dinner on Saturday, April 18, 2015, at the Delta Hotel, 350 St. Mary Avenue, in Winnipeg, Manitoba.

**Honorary Member**
Dr. William Pope, Winnipeg, former Registrar of the College of Physicians and Surgeons of Manitoba
An Honorary Membership is given to worthy individuals, who are not registered pharmacists in Manitoba, but have provided valuable and notable service to the profession of pharmacy.

**Honorary Life Member**
Dr. Keith Simons, Winnipeg, of the College of Pharmacy, University of Manitoba
This award is open to pharmacists who have made a significant contribution to pharmacy in Manitoba and at the national level.

Honorary Member and Honorary Life Member Awards, 25 and 50 Year Member Pins, will be presented at the College’s Annual Awards Luncheon on Sunday, April 19, 2015, at the RBC Winnipeg Convention Centre.

Click to register for the Manitoba Pharmacy Conference, Award presentations (Awards Gala Dinner and Awards Luncheon).

**In Memoriam**
Marty Sexton
February 16, 2015
John (Jack) Morrow
February 17, 2015
Spring 2015

For a complete listing of the most recent changes to the National Drug Schedules, visit the Drug Schedules Notice Board at www.napra.ca

NAPRA National Drug Schedules Notice Board

NDSAC Meeting of March 15-16, 2015

January 15, 2015

The proposed meeting of the National Drug Scheduling Advisory Committee (NDSAC) for March 15-16, 2015 is cancelled.

The next meeting of the Committee is scheduled for June 14-15, 2015. The deadline to receive submissions for a drug scheduling application for this meeting is by end of day Wednesday, April 15, 2015.
2014 Wrap-Up

2014 was a very busy and eventful year for the Board of Directors and the national office staff. A number of projects and initiatives were successfully completed, including:

- With the Board’s approval of NAPRA’s revised By-law No. 1 and the addition of two (2) new Committees to the Board’s governance structure, NAPRA completed its transition to be compliant under the new Canada Not-for-profit Corporations Act.

- Initially translated in 2013, the French version of the National Pharmacy Technician Bridging Education Program underwent a review and update to reflect recent changes to the English version. The online version of the French program was completed by mid-summer 2014 which enabled Selkirk College (the online delivery agent of the Bridging Program across Canada) to begin delivery of the French curriculum in September 2014.

- NAPRA released the entry-to-practice competencies for pharmacists and pharmacy technicians. The documents’ release was the culmination of a unique situation for the association wherein the National Advisory Committee on Pharmacy Practice (NACPP) undertook a simultaneous document review to ensure greater alignment in the content.

Furthermore, the National Drug Scheduling Advisory Committee had a full slate of meetings in 2014. In total, the Committee received and reviewed six (6) submissions. The increase in scheduling submissions coincided with activities occurring at the federal level, particularly the release of applications for products switching from prescription to over-the-counter status once legislative changes to repeal Schedule F (replaced by the Prescription Drug List (PDL)) came into effect. (The legislative changes allow Health Canada to add or remove drugs from the PDL more efficiently.)

Board Priorities for 2015

During the most recent Board of Directors meeting, time was set aside in the agenda to examine the priorities for 2015. Priorities include:

- Finalize the development of the model standards for pharmacy compounding of sterile hazardous and non-hazardous preparations.

- Initiate the work on the model standards for pharmacy compounding on non-sterile preparations.

- Initiate consultation on draft pharmacy practice management systems (PPMS) supplemental requirements for traceability and bulk preparation labelling.

- Promote the availability of the Pharmacists’ Gateway Canada program and its tools. Administratively, emphasis will be focused on program stability (IM/IT) balanced with program improvements.

- Promote the National Pharmacy Technician Bridging Education Program™ to both potential students and educational institutions. Now in its second year of operation, the goal for 2015 is to begin a comprehensive review of one (1) or two (2) courses. The National Committee on Regulated Pharmacy Technicians (NCRPT) will help prioritize the review. Factors for consideration in the review: new entry-to-practice competencies and new model standards for sterile pharmacy compounding (once released).

- Undertake a strategic planning discussion to update NAPRA’s Strategic Plan.
In the last edition of NAPRA Notes, it was noted that Pharmacists’ Gateway Canada for international pharmacists program was in place. Since that time, the program became fully operational and accepted over 1200 enrolments to date.

Overall, the program is off to a promising start. Feedback from Gateway partners as well as international pharmacists is, thus far, very positive.

During NAPRA’s recent Board of Directors meeting, President Tracy Wiersema extended her thanks to the many people involved in the development of the program. Included in these thanks was the federal department of Employment and Social Development Canada who provided funding to support the project in the sum of over $4 million over four years. With the funding agreement concluded, NAPRA’s “project” is now a full-fledged “program” that is 100% owned and operated by the association.

For more information on the program, visit www.pharmacistsgatewaycanada.ca or contact Theresa Schopf, Manager of Gateway Operations at 613-569-9658, ext. 232.

National Pharmacy Technician Bridging Education Program™

With the close of the fall semester, the association can look back on a year of many positives for the program. The year finished on a high note with a surge of registrations for fall courses primarily from Ontario students. These students sought to complete their Bridging Program courses in order to meet the Ontario College of Pharmacists deadline of January 1, 2015. This College’s deadline was set, many years ago, for individuals following a transition pathway toward registration/licensure to complete their Bridging Program component. Seven (7) jurisdictions will continue to accept Bridging Program courses as part of their transition pathway to obtain registration/licensure as a pharmacy technician until the conclusion of the transition period (this timeline will vary from jurisdiction to jurisdiction).

The end of the Fall 2014 semester marked the conclusion of the first offering of a Bridging Program course in French through Selkirk College. Although the initial number of students registered was lower than anticipated, the delivery of the course went very well. It is hoped that the number of students registering for the 2015 winter, spring and fall semesters will rise and result in an increase in the number of French courses offered. Both Selkirk College and the Collège communautaire du Nouveau-Brunswick will offer courses in the winter semester in French and English.

Please see the course and schedule information posted to the NAPRA website for more details on program offerings at all educational institutions across Canada.

Model Standards for Pharmacy Sterile Compounding

NAPRA wishes to thank all of the individuals and organizations who submitted comments on the draft documents during the consultation phase in the summer. While the association strived to finalize the model standards for pharmacy compounding of hazardous and non-hazardous sterile preparations by the end of 2014, the timeline for completion was carried over into 2015. The ad hoc committee working on the compounding documents will now aim to present the final documents to the Board in April 2015.
**NAPRA Connections**

NAPRA was invited to meet with representatives of Health Canada regarding the department’s legislative proposal for changes to the *Controlled Drugs and Substances Act* (CDSA). NAPRA’s Executive Director Carole Bouchard, Council of Pharmacy Registrars of Canada (CPRC) Chair, Susan Wedlake and NAPRA’s Manager of Professional and Regulatory Affairs, Sarah Marshall attended the meeting and discussed the merits and limitations of the proposed changes. While it is positive that Health Canada is recognizing the need for changes to the legislative framework, the proposal puts forward minimal changes and does not respond adequately to issues brought forward by our organization. NAPRA will continue to press upon the department the urgency with which more comprehensive legislative reform is needed.

For a second time in 2014, NAPRA’s President, Tracy Wiersema, and Executive Director Carole Bouchard met with representatives of the Federation of Medical Regulatory Authorities of Canada (FMRAC) and the Canadian Council of Registered Nurse Regulators (CCRN) in Toronto. Some topics of discussion included, for instance: review of the *Controlled Drugs and Substances Act*, drug shortages and codes of ethics.

**Welcome**

December was a transition month from members of the Gateway program team. **Lance Miller** concluded his secondment to NAPRA prior to Christmas and was slated to return to his permanent position with the Ontario College of Pharmacists at the start of the new year. Many thanks to Lance for his role in development and launch of the program.

**Geneviève Jacques** joined NAPRA early in the month as the new Client Service Specialist to replace the vacancy left by Lance’s departure. In this position, Geneviève acts as the point of contact for international pharmacy graduates (IPGs), pharmacy regulatory authorities (PRAs) and The Pharmacy Examining Board of Canada (PEBC) responding to their requests for information or assistance. Welcome Geneviève!

Comments and suggestions are always welcome. Please send to lgall@napra.ca
The Annual General Meeting of the College of Pharmacists of Manitoba is scheduled to commence at 10:45 a.m. in the 2nd Floor Presentation Theatre at The Winnipeg Convention Centre, in Winnipeg, at which time a series of annual reports will be presented.

The reports will be presented for information and any issues arising from the reports will be referred to the Issues Forum, which will occur in the afternoon.

AGENDA - ORDER OF BUSINESS
CHAIR – Glenda Marsh

1. Reading of the minutes of the 2014 Annual General Meeting
2. Business arising from the minutes
3. Executive Treasurer’s Report
4. Registrar’s Report
5. Deputy Registrar’s Report
6. President’s Address
7. Committee and Liaison Reports (passed for information as a group)
8. New Business
9. Unfinished Business
10. Faculty of Health Sciences, College of Pharmacy Report and Notice of Motion
   Notice of Motion: Drena Dunford will move or cause to be moved, seconded by Grace Frankel “that for the 2016 licensing year, the College supports a charge to each member of the College of a $100.00 levy to form part of his or her annual license fee, which levy is to be forwarded to the College of Pharmacy, Faculty of Health Sciences, University of Manitoba, to be used exclusively by the College of Pharmacy for programs that enhance the education of the students enrolled in the undergraduate program of the College of Pharmacy and/or pharmacists.”

11. Omnibus Motion

12. Adjourn

The Order of Business is designed to allow the formal Annual General Meeting to complete its mandate of closing the dealings that have been completed for the previous fiscal year. Reports are to encompass that fiscal year only. Those issues requiring detailed discussion or where resolution cannot be established will be forwarded to the Issues Forum to be held at the Manitoba Pharmacy Conference.
The College of Pharmacists of Manitoba
Annual General Meeting – Rules of Procedure

1. A Notice of Meeting will be forwarded to the entire membership no less than twenty-one (21) days prior to the scheduled meeting.

2. A quorum is required to convene a meeting and to transact any business. A quorum must be at least 5% of the voting members in attendance.

3. A Parliamentarian will assist with parliamentary procedure as the need arises.


5. The Chair of the general meeting may permit discussion of motions that are for information and do not require action by the College. Motions, either simple or by resolution, accepted at an annual general meeting, or a special general meeting, requiring action on behalf of the College shall be forwarded to Council for consideration and decision.

6. All voting members must sign the attendance sign-in sheet.

7. Voting cards will be issued to all voting members.

8. All members and Council members may speak only once to any given resolution and debate may be limited, unless permission to the contrary is given by the assembly.

9. All persons wishing to address the meeting are requested to speak at the microphone and are further requested to identify themselves by name before speaking.

10. The Mover and Seconder can speak first, followed by other speakers. The Mover has the option of being the last speaker to the motion.

11. Speakers must address the chair.

12. All members present are encouraged to engage in discussion, but only voting members and Council members may make motions and vote.

13. The members of the College consist of the persons whose names are on the register and who have paid the fees prescribed in the bylaws.

14. Every member who is a licensed pharmacist and members of Council are entitled to vote at a meeting of the College.

15. Non-members and observers are welcome to attend, but are unable to engage in discussion or vote.

16. Motion forms will be provided. Motions should be in writing on these forms and the appropriate copy given to the Chair at the time of making the motion.

Clarification:
- Only licensed pharmacists and Council members have the right to vote; however, all members who are on the College register and have paid a fee for the current year can speak, but not vote.
- Regarding the right to speak at meetings of the College, Robert’s Rules would apply and the voting members (licensed pharmacists with a vote) and Council members attending the meeting would decide in each incident whether or not an attendee at the meeting would have the right to speak.