



President's Christmas Message

"T'is the season to be jolly, t'is the season to reflect on the year 2004 and t'is the season to peek around the year 2005 corner and turn 2004 problems into opportunities."

For those familiar with Regina, we live in the Lakeview area. Every year around this time being the true blue Leo that I am, I check out the neighbours' Christmas decorations and lights to see if I am still the block king of brightness on our street. Of course, not to be out-done, I have been known to add a few strings of lights to shine even brighter than my neighbour. Soon, in the true spirit of friendly competition, they would add more and the race was on. However, sadly over the years my competition either moved away or had become too old to put up with such shenanigans. This year I decided to resurface and decorate the back yard for my grandchildren. Much to my delight the new technology available has allowed me to enchant my grandchildren, and once again, I am the king of brightness and truly outstanding at least in my grand-

children's eyes. We sit and gaze out the window watching the lights twinkling and we are able to take this opportunity to talk about our favourite things as we wait in anticipation of Santa's arrival. It's amazing what we can learn from each other through that simple exchange of "communications".

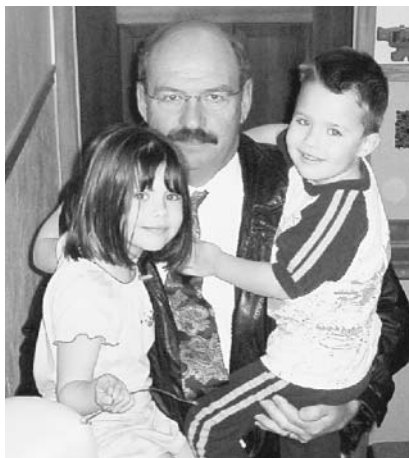
Speaking of communications and a topic that continues to remain a hot issue in Saskatchewan, I would like to bring you up to date on the current activities of the Council. To date, Council has had presentations from the RCMP and local police forces regarding the "crystal meth" situation in Saskatchewan. We as pharmacists and health care professionals believe that this should be a collaborative effort with police, all health care professionals, governments, educators, parents and young people, all working together in an effort to educate the public about this very lethal drug. I want to thank all pharmacists who have provided assistance and who continue to support us in our role as the leaders in pursuing this issue. We will be meeting with the Saskatchewan School Boards Association in early December to discuss ways we may be able to work together to combat this growing problem.

This fall, I was fortunate to be able to sit as an observer on the accreditation team for the College of Pharmacy and Nutrition. I applaud all the hard work of staff and students in preparing for this very important event. While perhaps a little biased, I am convinced we have the best pharmacy college in Canada and am very proud to be a Saskatchewan graduate.

Thank you to all who participated in the fall district meetings. Input from pharmacists across the province is integral to providing Council with direction in regard to the ongoing pharmacy-related concerns of the public. I again challenge you to take an active role in your profession.

Christmas is a wonderful time of year — peace on earth, etc. It also seems to be the time when many of our patients get more difficult, demanding and impatient. It really is great to be a pharmacist. Just remember, you can't be all things to all people. Yes, your patients are important; however, I encourage you all to remember to look after yourselves and your families. Take time to talk to each other and give someone you love a big hug. Don't forget your friends, they also need you. We will all have enough to do in what is shaping up to be a very challenging and interesting new year in health care. On behalf of Council, staff and my family, I wish you all a happy holiday season.

Bill Paterson



Inside This Issue

Council Highlights.....	2
From the Desk of the Dean....	4
Crystal Methamphetamine.....	5
"Privacy Laws and Health Information: Making It Work" Conference	6
Wholesale Activity Without Establishment Licence	8
Findings of Investigation into the Disclosure of Health Information	9

SCP Council 2004-05

Division 1

Jeannette Sandiford, Weyburn
(term expires June 30, 2005)
Vice President

Division 2

Terri Bromm, Tisdale
(term expires June 30, 2006)

Division 3

Randy Wiser, Prince Albert
(term expires June 30, 2005)
Past-President

Division 4

Coralie Sorochnik, Saskatoon
(term expires June 30, 2006)

Division 5

Bill Paterson, Regina
(term expires June 30, 2005)
President

Division 6

Corry MacWilliam, Swift Current
(term expires June 30, 2006)

Division 7

Debbie McCulloch
(term expires June 30, 2005)
President-Elect

Division 8

Melanie McLeod, Regina
(term expires June 30, 2006)

Ex Officio

Acting Dean Dr. Linda Suveges

Public

May Bridgewater
Lavonne Heck

Student Observer

Steven Yakiwchuk

SCP Staff

Andrea Brockmeyer,
Reception/Accounting Clerk
(on leave)

Jeanne Eriksen, Assistant Registrar

Paulette Francis,
Reception/Accounting Clerk

Pat Guillemain,
Administrative Assistant

Ray Joubert, Registrar

Cheryl Klein,
Senior Administrative Assistant

Heather Neirinck,
Administrative Assistant

Lori Postnikoff, Field Officer

Council Highlights – December 1, 2004

The SCP Council met in Regina on December 1, 2004. President Paterson opened the meeting extending regrets from Registrar Joubert, as he was unable to attend due to illness. President Paterson also spoke briefly on the untimely passing of Ken Ready of Saskatoon, an Honorary Life member of this College and a friend and colleague to all pharmacists in Saskatchewan.

As a self-regulating profession our "ownership" is the public. In the attempt to better address the public's issues, the Linkage Committee of Council reported on their progress to develop an action plan for tapping into that ownership. Representatives from Home Care Services from the Regina Qu'Appelle Health Region joined Council for an information session and the opportunity to ask and have their questions answered pertaining to the delivery of pharmacy services to Home Care clients. Maryanne Globa, supervisor, and Sharon Jordan, a home care nurse, provided their expectations of the pharmacist and also addressed some of the challenges that home care workers face that perhaps could be resolved through a closer working partnership with pharmacists.

Drug delivery and compliance packaging distribution systems are an on-going difficulty for Home Care. As there is no standard bubble-packing system in the region or province, Home Care personnel have to adjust to each system. Not all cards are created equal: some are soft and easily rupture, while

others do not have the required information on the card with the information being provided on a separate sheet of paper. This is not conducive to good patient care. There is also a need for large, clear print on the labels, as many of the Home Care clients are elderly and have difficulty with the small print.

When asked, it became evident that not only do RNs and LPNs administer medication to the clients, but in some instances home care aids administer medications as well. This emphasizes the need to follow the requirements for the labelling of compliance packaging that are outlined in the SCP document, *Customized Patient Medication Packages*, which can be found in the Pharmacy Reference Manual or on-line at www.napra.ca.

When asked what outcomes are expected by Home Care the answer was simply, "independence for the client". While it was acknowledged that this is not always practical, it is felt that pharmacists have a role to play, perhaps by issuing a reminder to the patient that they may need to reorder their medications. Prescription packaging may need to be marked with the day and date to assist the patient with compliance.

Cost of packaging was another issue. The Home Care nurse stated that they would like to see this service for no fee or a nominal fee, as some pharmacies have a charge and others do not. The discussion that followed explained the costs involved with compliance packaging and while the nurses did not believe

SEASONS GREETINGS

Best wishes for a festive holiday season filled with joy!

From the Staff at SCP

Jeanne Eriksen, Paulette Francis, Pat Guillemain, Ray Joubert,
Cheryl Klein, Heather Neirinck & Lori Postnikoff



Holiday Office Schedule:

Closed: December 27 to January 2
Open Regular Office Hours: January 3
8 a.m. – 12 noon
1 p.m. to 4:30 p.m.



it was the responsibility of the pharmacy to absorb those added costs, they also felt that passing this cost on to the patient was putting up a barrier to optimal care. It was agreed that the pharmacist is entitled to have this cost reimbursed, and that perhaps it is time to lobby government (Drug Plan or Regional Health Authorities) to review this issue.

Another area Home Care wished to address is the waste disposal of sharps. The nurses acknowledged that many pharmacies are involved in these programs and they encourage the promotion and public education regarding these programs.

Bill Semchuk, the SCP representative on the Health Quality Council's Quality Improvement Network Advisory Group (QINAG), addressed Council to update them on the current initiatives of the HQC. QINAG's role is to provide a forum to explore possibilities and opportunities for new quality improvement initiatives; enhance knowledge and skill level (capacity building) through continuous learning opportunities; coordinate QI improvement initiatives within the Sask. Health System; Support QI Leadership and review and select "innovative" projects to recommend to HQC Board for funding.

Bill reports that there is a strong desire for greater involvement from pharmacists as we are viewed as a significant opportunity in enhancing care of clients/patients. From the HQC website (www.hqc.sk.ca):

Health Quality Council is seeking new ideas and approaches to quality improvement in health care. We have set aside funding for the 2005 fiscal year, to support people to try new ideas and to think beyond tradition.

Council reviewed a summary of the outcomes and comments collected during the fall session of district meetings. While the number of members attending the sessions was less than anticipated, this in no way diminished the value of the discussions. To all who attended the

meetings thank you for your time and input – it is your opportunity to contribute to your profession.

Items discussed at the district meetings were:

- New Standards of Practice: Documentation tools, and tools and guidance for using technicians more effectively. This afforded an opportunity to highlight the draft document, *SaskTech – A Technician Evaluation and Monitoring Tool* compiled by our SPEP student Dimitra Paraskevoudou and to seek feedback from the membership. This work was adapted from an earlier document of the College of Pharmacists of British Columbia and

will be made available once the document has received final approval from Council.

This document is competency based, outlines technician functions and delivers assessment questions for knowledge appraisal to be used when hiring technicians or when assessing current employees.

- Drug Plan Enhanced Information Collection (ADAPT program). Andrea Laturnas, a member who is with the Drug Plan, provided an update on this program, dates for implementation and an overview of the program's capabilities.
- Updates: Methamphetamine and Privacy Legislation

Joint SCP/RBSP Meeting – December 2, 2004 – Regina

A joint meeting of the Board and Council was held Thursday morning, December 2, 2004. While it is acknowledged that all members of the Board are also SCP members, because of their role as the advocacy body for the profession, their focus is often substantially different than the focus of the regulatory body. That being said, there are many issues where the profession can stand as one as we strive to move the profession forward.

Marg Ustupski brought everyone up to date on plans for the 2005 Conference, to be held this year in Regina, April 8-10, 2005. The conference host committee is busy booking speakers and entertainment. Please mark your calendars now.

Arlene Kuntz, Chair of the joint Awards and Honours Committee addressed the meeting to review the Committee's recommendations to update the terms of reference for the Committee and to review criteria for the awards. Deadline for nominations for all the 2005 awards is January 31, 2005. Please review the particulars for the SCP awards in the article on the back page of this issue.

The Health Quality Council has developed (still in draft form) a new Long-Term Care Drug Management Proposal which clearly highlights the increasing role of the pharmacist in these facilities. Once finalized, the proposed package will be piloted across the province in both rural and urban locations (sites yet to be determined). On December 8, 2004, they released their latest document, ***Improving the Quality of Drug Management of Saskatchewan Seniors in Long-Term Care***. This document may be accessed on the HQC website www.hqc.sk.ca

Council shared with the Board the information received from the RQHR Home Care personnel, especially the concerns around compliance packaging and the need for collaboration between nurses and pharmacists regarding patient care.

“From the Desk of the Dean”



Dr. Linda Suveges
College of Pharmacy and Nutrition

Curriculum development is a dynamic, ongoing process, and with the implementation of the revised B.S.P. program in 2000, the College identified the importance of having a Coordinator of Professional Skills to:

- Develop skill-based laboratory activities and tutorial cases that connect the courses (pharmacotherapeutics, patient care and evidence-based medicine).
- Offer students opportunities to apply theory to practical situations and to practice skills in a mock environment, using common models such as the Indian Health Services counseling model, a patient interview process adapted from the U of T Pharm.D. program, the pharmaceutical care model, and CSHP's Direct Patient Care Modules.
- Ensure that professional skills practice opportunities are initiated early in the curriculum and are refined as students progress.
- Develop assessment processes to evaluate professional skills (written exams and objective structured clinical examinations) and give students ongoing feedback.

The College was fortunate to have Nicole Bidwell as Coordinator of Professional Skills in 2001 and 2002, and since that time, Jane Cassidy has brought her expertise to this position. Dr. Shannan Neubauer takes overall responsibility for this aspect of the curriculum.

The development of dispensing and compounding skills begins in the Year 1 pharmaceuticals class and continues in Years 2 and 3. We believe that our program is unique in Canada in the amount of experience that students receive in these areas! Patient history-taking is also introduced in Year 1 pharmaceuticals. Year 2 includes the elements of patient counseling, and progression of skills development moves to the OTC side. In Year 3, term 1, skills involve relationship establishment, interviewing and counseling patients presenting with a single disease or problem (e.g., respiratory, infectious disease). The complexity of tutorial and lab cases increases in term 2, when students are presented with cases involving more disease processes. They are expected to refine their pharmaceutical care planning skills, seamless care documentation and written professional communication. Verbal skills are continuously practised in laboratory sessions. In Year 4, term 1, tutorial and laboratory activities are planned to ensure that interrelated materials from the

senior pharmacotherapeutics and patient care courses are linked, and that students perform skills at an advanced level.

A commitment to increased interdisciplinary education is part of the College's plan for professional skills development. Pharmacy students participate in interdisciplinary patient care labs with Nutrition students: in Year 3 on cardiovascular risk reduction and in Year 4 on management of osteoporosis fracture. There are plans to pursue a Year 3 lab with Physical Therapy students on respiratory disease.

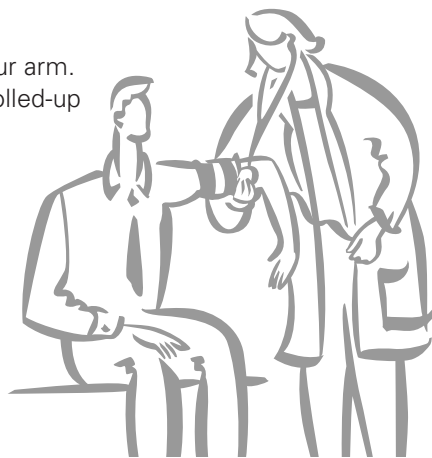
Professional skills development is essential to support student performance in the Structured Practice Experiences Program. All indications from preceptors are that development of these essential skills is on track. As the publication of clinical literature proceeds at a rapid pace, as new models to teach skills are identified, and as the demand for interdisciplinary education increases, we will continue to enhance and refine the professional skills of our students. We welcome comments and suggestions from our Pharmacy colleagues about students' professional skills development, or any other aspects of the undergraduate curriculum. If you have any thoughts, please contact me (linda.suveges@usask.ca or 966-6328).

Blood Pressure Meter Accuracy

Taking accurate blood pressure is critical to managing hypertension. Since home monitoring is becoming very popular, correct use of the machines is also an important issue. A report by RUH hypertension experts found that local residents do make easily correctable mistakes when using home testing machines.

The pharmacist is an important source of information for helping patients make their purchase. Try a shelf talker – “Looking for a blood pressure machine? Are you getting the correct cuff size?” Here are some guidelines to help ensure accuracy:

1. Ensure the proper cuff size for your arm.
2. No tight clothing on the arm (no rolled-up sleeves that are constrictive).
3. Rest quietly a few minutes before hand. No talking and no one should talk to you.
4. No smoking or coffee prior to measuring.
5. Empty bladder before proceeding as a full bladder may cause your blood pressure to be high.
6. Keep the arm at heart level, resting it on a table.
7. Sit with your back supported, feet flat on the floor, legs *uncrossed*.
8. Take three readings and write them all down.
9. After purchasing a machine, have it initially checked at your doctor's office, then every six months to ensure its accuracy.



Crystal Methamphetamine

As a result of the initiatives in Alberta, the subsequent publicity and at the request of some members, Council has been considering the College's role in the abuse of methamphetamine. Before the September 14 Council meeting, we asked members to implement interim measures to monitor sales. If this monitoring or other reasons indicate a problem, we ask members to limit or restrict the sale of precursors to the manufacture of methamphetamine, ephedrine and pseudoephedrine.

Council believes that the College has a role to play in preventing drug abuse. We are concerned that methamphetamine abuse can escalate and prefer to implement proactive and preventive measures over reactive measures. Therefore, we are prepared to cooperate and lead whatever strategies are within our jurisdiction to address this issue.

On the supply side of the problem, should it be justified, we have the authority to limit or restrict the sale of the precursors by making these drugs available only in the pharmacy or directly from the pharmacist in the no-public access area

of the pharmacy. Our objective will be to balance restricting sales to minimize manufacture, while allowing reasonable access for those who need these medications. Thus, we formally support the initiatives of the Alberta College of Pharmacists promoting national consensus on scheduling these drugs based upon abuse criteria and potential as precursors.

We are also considering measures to address the demand side. We support education as the most effective strategy to prevent abuse. We are developing educational programs to heighten the awareness of members about the problem and how members can contribute to its solution. We hope to position pharmacists to recognize problems in your communities and in turn educate others on how to deal with it. For example, this could include teaching staff on how to deal with sales of unusual quantities of these drugs and other substances used in the manufacture of methamphetamine.

We are also considering establishing a network of knowledgeable members who could reach out

into your communities to educate others, especially school children. We are beginning to link with teachers and school authorities through their respective organizations to determine their needs and how we can meet them.

However, before formalizing any strategy, we discussed this issue with members at the recent district meetings. Members supported the national consensus on scheduling the precursors and the objective of balancing limiting sales with reasonable access. However, members cautioned Council to classify the precursors as no-public access drugs only when it can be demonstrated that purchases from pharmacies is related to clandestine manufacture. Members also supported playing an educational role, but asked the College to provide members with the proper resources and guidance.

In the meantime, we are monitoring the development of a national Crystal Meth Watch Coalition that will provide information from the national and international perspectives and access to resources.

Saskatchewan Institute of Health Leadership

Following on the success of the 2004 inaugural Saskatchewan Institute of Health Leadership (SIHL) program, The University of Regina, Centre for Continuing Education will be facilitating the 2005 **SIHL Certificate Program** from May to November 2005.

The aim of the Saskatchewan Institute of Health Leadership (SIHL) is to bring together professionals from all levels within the healthcare system to foster leadership potential, skills and the creation of a leadership community. Arrangements for the 2005 program are now in place, with the opening retreat to be held May 16-20 in Regina at the Hotel Saskatchewan Radisson Plaza.

Based on contemporary leadership theory within a health context, the seven-month distance education program is designed to develop skills and competencies of leadership in six core competency areas:

- 1) Life Balance and Personal Development
- 2) Visioning and Planning
- 3) Systems Thinking
- 4) Conflict and Collaboration
- 5) Policy and Politics
- 6) Community and Culture

Included in the initial class were two of our members: Charity Evans of Leader, Saskatchewan, and Jeanne Eriksen of the SCP office staff. Joining us from the New Brunswick Pharmaceutical Society, Bill Veniot, Registrar, who con-

quered the barrier to distance learning and received his Certificate from SIHL.

Congratulations to all those who successfully completed the competency requirements of this program.

As class size is limited, we suggest that applicants register early. The deadline for registration is April 1, 2005. The SCP office has some registration brochures, so please contact the office if you are interested 306-584-2292. You may also contact the SIHL office directly at 306-585-5801 for more information.

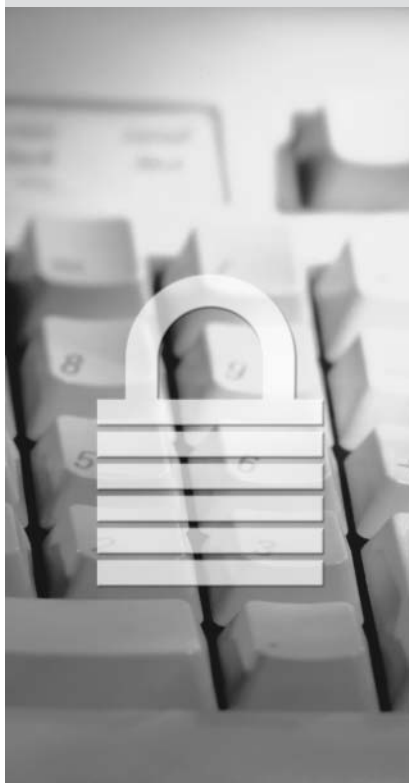


“Privacy Laws and Health Information:

Regina
October 27-28, 2004

We were lucky enough to have two members in attendance at this conference who “volunteered” to give their insight at the end of two very full days.

Melanie McLeod, Councillor for Division 8, is a hospital pharmacist with the Regina Qu’Appelle Health Region and Paul Melnyk, Regional Director, Pharmasave Drugs (Central) Ltd. who graciously agreed to give their review with hospital and community practice (respectively) in mind.



Community **by Paul Melnyk**

As professionals, the most important point to remember is the fact that all pharmacists abide by a code of ethics and HIPA or PIPEDA **should not change** the manner in which you conduct yourself. Continue to act with the best interest of the patient in mind and don’t hesitate to solicit ideas from colleagues if you are concerned about breaching the privacy of a client.

Some changes relating to the collection, use, disclosure and disposal of personal health information may be necessary to ensure privacy of a client. Here are some tips to get your retail location better focused on privacy:

1. Policy and Procedures

Every chain or store should have their own policy and procedure manual. Please review it and ensure your location has assigned a privacy officer to manage the program.

2. Education of Staff

This is an extremely important step. Obviously, certain staff members need to be better educated regarding the Act than others. Ensure the staff is aware of the Act, who the privacy officer is for your pharmacy and where private information is stored and who should or shouldn’t have access to these secure documents. Also, you may wish to have the staff sign a confidentiality agreement as a reminder of patient confidentiality.

3. Education of Clients / Patients

Ensure patients understand what their rights are and provide them with written documentation. RBSP has agreed to develop informational materials on this Act and the role that pharmacists play in terms of health care and a patient’s privacy.

4. Disclosure of Information

Disclosure is the sharing of health information. This is the most likely area in which trustees will be challenged.

Pharmacists may disclose information to anyone within the “circle of care” (e.g. pharmacist, physician, nurse, etc.) without consent as long as the information provided is in the provision of health services. For example, pharmacists may provide a medication history to a care-giver at an emergency department if a patient has an accident. Other cases where disclosure may occur without consent include: where consent is not reasonably practicable and information will clearly prevent harm to the patient, de-identified, for planning, delivering, evaluating or monitoring a program and to monitor drug use; when necessary for monitoring, preventing fraud, abusive or dangerous use of health services; to avoid or minimize danger to health or safety. Pharmacists are not required to disclose information if the situation is outside of the circle of care (e.g. accountant or family member requesting medication history). In these cases, expressed consent is necessary from the person in question to disclose information.

5. Disposal of Private Information

Shredding of material is the best way of disposing of private information. If you do not have a shredder, some companies will dispose of your information in a secure manner. Private documents that need to be stored indefinitely at the pharmacy should be placed in cabinets under lock and key. Prescription labels on vials should be blacked out or ripped off and shredded. **DO NOT DISCARD DOCUMENTS THAT CONTAIN PERSONAL**

Making It Work™ Conference

HEALTH INFORMATION IN THE GARBAGE! Password protection should be used for dispensary software to prevent access by unauthorized staff.

6. Handling Complaints

A procedure should be in place for handling complaints (e.g. complaint form, steps to prevent future problems, etc.). Regardless of how inconsequential they appear, complaints should be handled promptly by the pharmacy's privacy officer (generally within 30 days). This provides the trustee with an opportunity to handle the complaint internally. If the complaint is not handled within 30 days or is not handled satisfactorily, the complainant may contact the provincial Privacy Commissioner who may request to view the pharmacy's entire policies and procedures manual.

Hospital

by **Melanie McLeod**

The Basics

- PIPEDA does not apply to hospital pharmacists (except in rare circumstances)
- Under HIPA, the Regional Health Authority (RHA) itself rather than the hospital pharmacist is considered the "trustee" who is accountable for compliance. As employers, RHAs must ensure that all their employees, including pharmacists, comply with RHA privacy policies. In most cases, one or two designated individuals in each RHA are responsible for overseeing and implementing privacy policy (if you do not know who these individuals are in your RHA, you may want to find out). Pharmacists are bound by their Code of Ethics and instances may arise whereby the ethical obligations of the pharmacist conflict with RHA policy.

- HIPA applies to any personal health information you gather about a patient. When this information is disclosed within the "Circle of Care" (i.e. among other health care professionals in the course of providing patient care) consent from the patient is not required. You need to obtain consent from the patient with disclosing personal health information about a patient to a non-trustee or trustee that is not within the circle of care.
 - *Example:* a family member of a patient is considered a non-trustee. You can only discuss the personal health information of your patient with the family member if you have that patient's consent.
 - *Example:* a friend of the patient happens to be a physician (but is not involved in the care of the patient) discussing the personal health information of this patient to the friend would require consent of the patient.
 - *Example:* Seamless care activities between hospital pharmacists and community pharmacists usually do not require the consent of the patient because these activities are considered to be necessary in the course of providing patient care.
- HIPA allows patients the right to access all records that contain their personal health information and therefore, any personal health information that is kept on a patient (such as monitoring forms) must be stored in a way that is secure, readable, and retrievable. The HIPA Regulations (currently in draft form only) will specify the length of time that records must be kept. The draft regulations suggest a six year retention period, or age of majority plus two years for minors (whichever is longer).
- Discussions with other health care professionals (monitoring sessions, peer discussions) should occur in private locations only. Whenever possible, de-identifiable information should be used when disclosing the personal health information of a patient to another professional within the circle of care for that patient.
- All unnecessary paper that contains personal health information should be shredded and placed in confidential bins.

As you can see from the above comments there are many similarities between the different practice sites. Whatever steps the individual pharmacy manager or head of the department decides to implement is up to them but it is important to know that you must do something, begin the process and keep your staff informed.

It is also imperative that the pharmacy (community or hospital) has in place confidentiality agreements with all vendors and suppliers that may have access to personal health information. The implementation of such agreements is the responsibility of the trustee not the contracted supplier.



Wholesale Activity Without Establishment Licence

[The following information was extracted from the November 16, 2004, Health Canada bulletin entitled, "Obligations of Pharmacists under the *Food and Drugs Act* and *Food and Drug Regulations*".]

In February and March 2004, inspections were conducted to verify compliance of Canadian pharmacies selling prescription drugs via the Internet and other forms of distance-dispensing, with the *Food and Drugs Act (Act)* and *Food and Drug Regulations (Regulations)*. During the inspections, several violations were noted.

One of the violations included evidence being presented of significant wholesaling activity by pharmacies that did not have the necessary Establishment Licence to act as a wholesaler. (*Regulations C.01A.004*)

There was no evidence that any of the 11 sites were engaged in any activities that would be subject to or in violation of the *Food and Drug Regulations* Division 1A Establish-

ment Licensing requirements. Evidence was presented that there was significant wholesaling activity by some pharmacies supplying some of the inspected pharmacies. These supplying pharmacies did not have the required Establishment Licence to wholesale drugs. This is a violation of C.01A.004 of the *Food and Drug Regulations*. "Wholesale" is defined in C.01A.001 of the *Food and Drug Regulations* as to sell any drug listed in Schedule C or D to the Act or in Schedule F to the *Regulations*, a controlled drug as defined in G.01.001(1), or a narcotic as defined in the *Narcotic Control Regulations*, other than at retail sale, where the seller's name does not appear on the label of the drug.

C.01A.004. (1) *Subject to subsection (2), no person shall, except in accordance with an establishment licence,*

(a) *fabricate, package/label, distribute as set out in section C.01A.003, import or wholesale a drug*

An Establishment Licence is issued after a firm has been inspected and the firm has demonstrated that it has fulfilled the applicable requirements of the Good Manufacturing Practices as described in Division 2 of the *Food and Drug Regulations*. This requirement is necessary to ensure that products entering the drug distribution chain are adequately stored, transported, and can be effectively recalled from the market.

Pharmacies engaging in the practice of the wholesale of Schedule F drugs require an Establishment Licence. Pharmacies wishing to obtain an Establishment Licence should contact the Health Products and Food Branch Inspectorate Establishment Licensing Unit at 613-954-6790 or visit the website at: http://www.hc-sc.gc.ca/hpfb-dgpsa/inspectorate/establishment_licences_e.html for information regarding how to obtain the required site licence.



Verified Internet Pharmacy Practice Sites (VIPPS™) Program

Launched in 1999 by the National Association of Boards of Pharmacy (NABP®), this program is designed to assist consumers in identifying legitimate online pharmacies. The program has been adopted by the National Association of Pharmacy Regulatory Authorities (NAPRA) to provide Canadian consumers an easy way to recognize pharmacies that are legally operating and meet the VIPPS™ standards of practice in Canada. This program is supported by the Canadian Pharmacists Association, the Canadian Association of Chain Drugstores and NAPRA's member provincial and territorial licensing bodies. To become VIPPS™ certified, pharmacies must:

- Be licensed to operate by a Canadian regulatory body

- Meet 27 rigorous criteria
- Pass an on-site inspection
- Submit written policies and procedures that support ongoing compliance with VIPPS™ standards

NAPRA receives calls and emails from consumers asking for information regarding pharmacies providing internet service. VIPPS™ certified pharmacies must display the VIPPS™ hyperlink seal which gives the consumer access to verified, accurate information regarding the pharmacy. Information on VIPPS™ certified pharmacies will also be available on the NAPRA website so consumers can search for pharmacies that meet their specific needs. The pharmacies which are VIPPS™ certified meet strict criteria in the following areas:

- Privacy safeguards
- Consultation with patients
- Notification of delay in delivering medications
- Processes to inform patients about drug recalls
- Information on proper disposal of expired or unused medications
- Valid pharmacist licences
- Assurance that pharmacists are practising in accordance with recognized Canadian standards and laws.

More information can be found at the NAPRA website at www.napra.ca or by contacting info@napra.ca. The National Association of Pharmacy Regulatory Authorities, on behalf of its members, asks that all pharmacies using the Internet consider the VIPPS™ Program as part of their certification process.

Findings of Investigation into the Disclosure of Health Information

[The following is information that has been edited for length, from an excerpt from the Alberta Information and Privacy Commissioner's Report on the Investigation into the Disclosure of Health Information ... Investigation Report H2002-IR-002.]

In the September 2004 edition of the SCP Newsletter, the article, "A Cautionary Note for Pharmacists and other Trustees" addressed the issue of a civil action launched in the Provincial Court of Alberta in Action #PO 49010043 (Calgary), wherein a woman alleged that her pharmacist disclosed her personal health information to her estranged husband without her consent. The disputed claim alleged that the Defendants breached Alberta's Health Information Act.

Investigation Findings

1. Did the Custodians disclose individually identifying health information in contravention of the HIA?

- The Custodians disclosed the Complainant's individually identifying health information without her consent. The disclosure of

the Complainant's health information was in contravention of the HIA.

The custodians did not obtain the Complainant's consent prior to the disclosure, and ... there is no provision in the HIA that allowed for the disclosure without consent.

2. Did the Custodian take reasonable steps to protect the Complainant's health information in accordance with section 60(1)(a) of the HIA?

- The Custodians did not take reasonable steps to protect confidentiality and privacy of the Complainant's health information in accordance to section 60(1)(a) of the HIA.

3. Did the Custodians establish or adopt policies and procedures that would facilitate implementation of the HIA as required by section 63(1) of the HIA?

- The custodians did not meet the requirements of section 63(1) of the HIA.

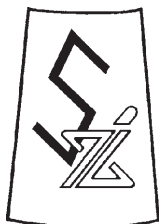
The custodians advised that they had an awareness of the HIA based on a brief review of information they received, and that, prior to this complaint, had not determined how the HIA affected them and what they had to do to facilitate its implementation.

Recommendations

The custodians agreed to accept the recommendation to provide the Commissioner, within one month, a copy of a comprehensive plan that will facilitate implementation of the HIA at their pharmacy.

The custodians have also agreed, within three months of this report, to provide the Commissioner with a copy of their adopted policies and procedures that reflect the provisions and requirements of the HIA. These policies are to provide for a process for responding to requests for access to health information, as well as those needed to ensure compliance with the confidentiality and privacy provisions of the HIA.

Saskatchewan Branch CSHP – AGM



The Saskatchewan Branch of the Canadian Society of Hospital Pharmacists held their Annual General Meeting on October 23-24 in Moose Jaw, at the lovely Temple Gardens Mineral Spa. During the awards luncheon on October 23, several branch members were presented awards for outstanding achievements in hospital pharmacy.

Awards presented were as follows:

Pharmacist of the Year Award (sponsored by Apotex Inc) – Brenda Thiessen, Saskatoon;

J.L. Summers Achievement Award (sponsored by Merck Frosst Canada & Co.) – Yvonne Shevchuk of the College of Pharmacy and Nutrition, U of S;

Saskatchewan Branch CSHP Pfizer Merit Award (sponsored by Pfizer Canada Inc.) – Barb Evans, Patrick Robertson, Piera Calissi and Jane Richardson of the Saskatoon Health Region;

Past President's Award (sponsored by Pharmaceutical Partners of Canada Inc.) – Monica Lawrence of Regina;

Betty C. Riddell Award for Pharmacy Practitioner Excellence (sponsored by SK Branch CSHP) – Barry Lyons of Nipawin;

Orest Buchko Hospital Pharmacy Award (sponsored by SK Branch CSHP) – Bonnie Rasmussen, currently a hospital pharmacy resident in Regina;

Pfizer Residency Award (sponsored by Pfizer Canada Inc.) – Jennifer Carvell of Regina;

Pharmaceutical Care Award (sponsored by SK Branch CSHP) – Bonnie James of Moosomin.

FULL-TIME PHARMACIST POSITION AVAILABLE

Crescent IDA Drugs/Cedar Pharmacy currently has an opening for a full-time pharmacist. We are located in Lac La Biche, Alberta, situated a short 2.5 hour drive northeast of Edmonton in the picturesque Lakeland region. Lac La Biche is a thriving, multi-cultural community surrounded by an abundance of lakes, parks, and trails, and is an outdoor enthusiast's dream come true.

Our pharmacies serve a population of approximately 10,000 including the town and surrounding area. As a staff pharmacist, you will have the opportunity to interact with clientele of all ages and walks of life. You will also have the opportunity to expand on your hospital pharmacy knowledge, as we hold the contract for the local health care center.

"As a staff pharmacist for the past 11 years, the management of Crescent IDA Drugs/Cedar Pharmacy has allowed me the flexibility I require with my family, while providing me with a competitive salary and benefit package."

Stacey Krajci, BSP '93

If a position as a staff pharmacist in this progressive community environment sounds right for you, please submit your resume by fax or e-mail to:

Crescent IDA Drugs/Cedar Pharmacy
Lac La Biche, AB

PH: 780-623-4151

FAX: 780-623-2030

Email: smiley@telusplanet.net

We encourage any pharmacists including 2005 grads to apply for this position. The position will commence as soon as the successful applicant is available to start.

For more information on the Lac La Biche area, visit:
www.laclabicheregion.ab.ca

PHARMACIST

If you are a positive, energetic person looking for an opportunity to advance your career, look no further!

Freson IGA, an Alberta owned and operated company offers above industry-average compensation, a comprehensive benefit package, flexible hours and a performance-based bonus.

Pharmacists focused on building relationships and developing an important role in their local community are encouraged to apply.

Please send resume to:

Leslie Brecht
Director Human Resources
Freson Market Ltd.
9020 – 90th Street
Peace River, AB T8S 1Z4
Fax: (780) 624-1349
Email: lbrecht@freson.com



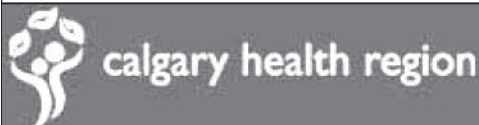
PHARMACIST WANTED

Full or Part-Time

Pharmasave, Glencairn Shopping Centre, Regina

Pharmasave #420 is an independent company founded in Regina in 1991. We are seeking pharmacists who wish to pursue job satisfaction, professional advancement and opportunity for business partnership.

For more information, please contact Henry Tsang
1695 Dewdney Avenue East, Regina, SK S4N 4N6
Telephone: 306-791-7878
Facsimile: 306-791-4570



PHARMACISTS ...

The Alberta Poison and Drug Information Service (PADIS) is seeking Pharmacists to join our multi-disciplinary team of pharmacists, nurses and physicians. With additional on-site training, your work as a **PADIS Clinical Information Resource Specialist** will have you:

- Practice clinically in the areas of toxicology and provision of pharmaceutical care via telephone consultations through-out Alberta and Saskatchewan.
- Apply evaluation, critical thinking, problem-solving and communication skills in the delivery of evidence-based care to the public and with health care professionals.
- Work in a supportive, performance-oriented, clinical environment.
- Develop skills in self-management, project management, and participate in clinical education outreach, research and prevention programs.

Experience such as Residency in Hospital Pharmacy, Hospital Pharmacy or five years of retail pharmacy will be considered.

For more information contact 403-944-1414 or padis.admin@calgaryhealthregion.ca. Submit resume to: PADIS, Foothills Medical Centre, 1403 – 29th Street NW, Calgary, Alberta T2N 2T9; Fax 403-944-1472. Visit our website at www.calgaryhealthregion.ca

Commitment to Care Awards – Pharmacy Practice

Carolyn Scarfe of Saskatoon received the 2004 Commitment to Care Award in Patient Care awarded by the journal, *Pharmacy Practice*. An Honorable Mention in the Health-Promotion Category also went to Carolyn for her work with senior citizens in Saskatoon. Congratulations Carolyn for your commitment to your profession and the dedication you show to your patients and clients.

Congratulations to the fifty pharmacists from thirty-three pharmacies across Saskatchewan led by Jeff Taylor and Bill Semchuk on being awarded this year's Commitment to Care Award for Health-Promotion. The Pharmacists Intervention in Risk Reduction (PIRR) study conducted from 2001 to 2003 looked at the role of the pharmacist in preventing cardiovascular disease. For more information on PIRR please contact: Michelle Deschamps, Project Coordinator (306) 966-1997 or Bill Semchuk, Project Coordinator (306) 766-4010.



National Association
of Pharmacy
Regulatory Authorities

NAPRA Executive Director Named

NAPRA President Lois Cantin has announced effective October 15, 2004, Mr. Ken Potvin is appointed to the position of Executive Director of NAPRA.

Excerpts from the original notice:

"Ken's diverse background includes leadership roles in industry, associations, and both hospital and community pharmacies. Ken received a Bachelor of Science, Pharmacy from the University of Toronto in 1983, and earned a Master's in Epidemiology from the University of Ottawa in 2000."

We are pleased to welcome Ken to his new role with NAPRA and are confident that the organization will continue to grow and strengthen under his leadership."

Please join the SCP Council and staff to welcome Ken to the NAPRA family.

Copying Prescriptions in the Event of a Court Matter

In the event that original prescriptions are required pursuant to a court matter, it is essential that the pharmacist retain/request a copy of the prescriptions removed from the premises as part of a subpoena.



Update – U of S Senate Members

In the Council Highlights section of the November 2004 SCP Newsletter edition, members of the SCP who are representatives to the U of S Senate were cited. Since that time, we have learned that Joan Bohn was also elected to the U of S Senate for the July 1, 2003, to June 30, 2006, term as a member at large. Thank you, Joan, for your commitment to the University of Saskatchewan.

Hydromorphone/Morphine Event

We wish to inform you of an ISMP (Institute for Safe Medication Practices) report regarding the medication mix-up which occurred in Red Deer in June of 2004. In this case hydromorphone rather than morphine was administered to the patient. Unfortunately the patient died as a result of the mix-up. We offer this information as an opportunity to improve the safety of our own systems.

"On June 6, 2004 a fatal medication incident occurred at Red Deer Regional Hospital Centre in Alberta. A 69-year old patient received *hydromorphone* 10 mg by intramuscular (IM) injection instead of *morphine* 10 mg as intended. The patient experienced cardio-pulmonary arrest in the family car while being driven home by his daughter. His family transported him to the nearest hospital where he expired despite resuscitation efforts in the emergency department."

To view the ISMP report please access the ISMP-Canada website www.ismp-canada.org and select Bulletin Volume 4 Issue 6 June 2004.

E-Link Web Mail

SCP Members ... Have you signed up for E-Link web-mail service yet?

If not, contact Cheryl Klein
at the SCP office
to get started today!

Phone: 306-584-2292

Email:
cheryl.klein@saskpharm.ca



SASKATCHEWAN COLLEGE OF PHARMACISTS

94th

Annual General Meeting

To be held in
conjunction with the

RBSP 4th Annual Conference and General Meeting

April 8 to 10, 2005

Regina Inn

1975 Broad Street
Regina, Saskatchewan

Watch for further details
coming in early 2005

Mark your calendars now!



Awards and Honours Committee

Member Recognition



Deadline for SCP Award Nominations

Each year during the annual conference, members are recognized for contributions to the profession and to their communities. The joint SCP and RBSP Awards and Honours Committee invites you to nominate a colleague(s) who has made significant contributions to his/her profession and community, and is justly deserving of a College Award. The deadline for receipt of the nomination of a colleague(s) for an SCP Award is **January 31, 2005**. The following criteria will assist you in contemplating your nominations. In all cases, the selection will be approved by the SCP Council, following recommendation from the Awards and Honours Committee.

Award of Merit

Recognizes any person, who is not a member of the College, who through their active participation has promoted the SCP and/or the profession of pharmacy in Saskatchewan.

- Nominee must have contributed to the active promotion of the SCP or to the profession of pharmacy either on a local, provincial or national level.
- Nominee may not be a member of SCP
- Nomination papers must be accompanied by a summary of the qualifications consistent with the terms of reference.

Certificate of Recognition

Presented to the retiring presidents, councillors, and committee members of the SCP for their dedication and contributions to the SCP Council.

- Nominee(s) must have made a special contribution to the SCP either on a local, provincial, or national level.
- Nominee(s) must be a member in good standing of the SCP
- Nomination papers must be accompanied by a summary of the qualifications of the nominee consistent with the terms of reference.

Honorary Life Member Award

Recognizes a member of the Saskatchewan College of Pharmacists for outstanding contributions to the profession and/or the SCP beyond the normal call of professional or voluntary obligations.

An Honorary Life Member Award may be granted in recognition of:

- Outstanding contribution to the SCP; and/or
- A distinguished record of service to the SCP; and/or
- Specific achievements that enhanced the profession; and/or
- Long-term service to the profession with a distinguished record; and/or
- A distinguished record of professional service to the community;

- Nominee must have made a special contribution to the SCP either on a local, provincial or national level;
- Nominee(s) must be a member(s) in good standing of the SCP;
- Nomination papers must be accompanied by a summary of the qualifications of the nominee consistent with the terms of reference.

**Honorary Life Members will have their annual personal membership fees waived, but are responsible for all other conditions of membership.*

Honorary Member Award

Recognizes any person who is not a member of the SCP for outstanding contributions to the profession and/or the SCP beyond the normal call of professional or voluntary obligations.

An Honorary Member award may be granted in recognition of:

- An outstanding single contribution to the SCP; and/or
- A distinguished record of service to the SCP; and/or
- A single specific achievement that enhanced the profession; and/or
- Long term service to the profession with a distinguished record; and/or
- A distinguished record of professional service to the community;
- Nominee must have made a special contribution to the SCP either on a local, provincial, or national level;
- Any person who is not a member of the SCP may be nominated;
- Nomination papers must be accompanied by a summary of the qualifications of the nominee consistent with the terms of reference.

Presidential Citation

Recognizes an SCP member who has made special contributions to pharmacy, but who does not qualify for any other SCP Awards.