



SASKATCHEWAN
COLLEGE OF
PHARMACY
PROFESSIONALS

ANNUAL REPORT 2016

**Serving the public interest
by regulating the profession
of pharmacy to provide safe,
competent pharmacy care
in Saskatchewan.**



SCPP's New Mission, Vision, Values and Goals



Council met on February 24, 2016 and June 2, 2016, to develop the strategic plan for the College going forward to 2019. Council discussed what success would look like for members, pharmacies, the public and government. The existing mission, vision, values and goals of the organization were revised to reflect the next three years' focus.

Mission:

The Saskatchewan College of Pharmacy Professionals serves the public interest by regulating the profession of pharmacy to provide safe, competent pharmacy care in Saskatchewan.

Vision:

Advancing quality pharmacy care for a healthier Saskatchewan.

Values:

- Professionalism
- Accountability
- Visionary Leadership
- Collaboration
- Education

The College's senior management team examined the five highest priorities and began work to operationalize these goals. Council approved the following goals and their rankings at the September 22, 2016, meeting.

Goals:

- Goal 1 – Advancing Public Safety in Pharmacy Services
- Goal 2 – Ensuring Priorities and Resources are Aligned to Achieve Goals
- Goal 3 – Maintaining a Self-Regulated Profession
- Goal 4 – Increasing Recognition of Pharmacy Professionals as Essential Members of the Health Care Team
- Goal 5 – Supporting Health Care Public Policy

106th Annual General Meeting



AGENDA

May 6, 2017
TCU Place, Saskatoon
President: Bill Gerla
Registrar: Ray Joubert

- 1.0 President's Welcome
- 2.0 Introduction of Councillors and Special Guests
- 3.0 Motion to Accept 2016 Minutes as Printed and Distributed
- 4.0 Business Arising from the Minutes
- 5.0 Memorial to Deceased Members
- 6.0 Reports
 - 6.1 President's Annual Report
 - 6.2 Registrar's Report
 - 6.3 Auditor's Report/Report of the Finance and Audit Committee
 - 6.4 Consideration of Annual Report as Printed and Distributed
 - 6.5 College of Pharmacy and Nutrition Report
- 7.0 New Business
- 8.0 Adjournment

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Report of the President



Bill Gerla
President

I am pleased to report on my second term as President.

When I accepted the challenge of a second consecutive term as President, I reflected on the need for stability during this period

of unprecedented change. This report summarizes how Council has successfully navigated the changes arising from the proclamation of Bill 151 and the adoption of a new strategic plan.

Last year, I reported on the scope of this new legislation. Since then, the College has made significant progress with its implementation. During 2016, we:

- Incorporated our new name into all aspects of our operation. This included adopting a new logo into our visual identity. It will be introduced in stages during 2017;
- Welcomed regulated pharmacy technicians as licensed members practising in an independent and defined scope of practice with title protection. While further details can be found in the Registrar's report, we dedicated the August 2016 newsletter to describe their role and scope;
- Continued to advance pharmacists' ability to administer drugs by injection and other routes. We again commend and congratulate members who have undertaken this challenge, including pharmacists' exemplary role in administering flu vaccinations; and
- Began establishing the groundwork for pharmacists to order, access and use medical laboratory tests, and conduct point-of-care testing.

I also reported on progress of our strategic key action areas. We will continue to leverage the accomplishments in those areas as we implement our new strategic plan. These include:

- Increased public involvement to improve communications and public engagement in our decision making;
- Organizational structure review to meet the needs of members and the public and to reduce the burden of discipline on SCPP;
- Practice re-design to focus on quality so that pharmacy practice effectively meets public needs; and
- Citizenship in SCPP to have a more engaged membership.

Due to other priorities, progress on playing a lead role in preventing prescription drug abuse was less than expected. However, events during the year such as the non-prescription availability of naloxone, have elevated this goal's priority for 2017 and beyond.

Council completed the development of a new Strategic Plan for the 2016–2019 term. Our new strategic direction, vision, mission, values and goals are expressed in the cover pages to this report. Our priorities are in the following order:

Goal 1: Advancing Public Safety in Pharmacy Services

Objectives:

- Increased use of standardized quality assurance process
- Introduce competency assurance program to support quality assurance

Goal 2: Ensuring Priorities and Resources are Aligned to Achieve Goals

Objectives:

- Implement a comprehensive performance management system

Goal 3: Maintaining a Self-Regulated Profession

Goal 4: Increasing Recognition of Pharmacy Professionals as Essential Members of the Health Care Team

Goal 5: Supporting Health Care Public Policy

Late in 2016 and into 2017, Council and administration began finalizing the operational plans to achieve the first two priorities:

- Approved the final reports of the three phase COMPASS™ pilot project and the business case for introduction of this continuous quality assurance program in all community pharmacies, and,
- Considered how we might approach reviewing our continuing professional development requirement for pharmacist and pharmacy technician licensure, and examining a competency assurance requirement.

Other highlights of 2016 include:

- Continued to monitor developments in other provinces banning rewards and inducements on the purchase of prescriptions;
- Continued to develop strategies to address professional service quotas, including examining a framework to restore professional autonomy;
- Approved bylaw amendments to include patient self-care within the prescriptive authority for minor ailments category. This was followed by continuing to plan for adding the remaining minor ailments conditions, along with oral contraceptives and smoking cessation agents;
- Completed drug scheduling by reference to the National Association of Pharmacy Regulatory Authorities (NAPRA) model drug schedules;
- Approved in principle, bylaws for stakeholder consultation requiring private patient care areas in all pharmacies;
- Approved in principle, bylaws specifying eligibility and requiring a minimum amount of practice experience for new pharmacy managers;
- Approved practice guidelines for the role of the pharmacist and pharmacy technician in Medical Assistance in Dying;
- Approved a joint position statement in principle for stakeholder consultation with the Saskatchewan Dieticians Association (SDA) in collaboration between the two professions respecting nutritional and dietary products;
- Worked with the Pharmaceutical Information Program (PIP) Quality Improvement Program to support PIP data quality. This resulted in hiring pharmacist Perry Hermanson as PIP Data Quality Facilitator;
- Established a building committee to address the space needs of the office. This resulted in the approval of the committee's recommendation to relocate to leased premises in Sherwood Place in Regina, and to continue examining the disposition of our office condominium in a manner consistent with our non-profit status. Further details will be announced in 2017;
- Approved in principle, the NAPRA model compounding standards with an implementation strategy to follow;



- Continued regular meetings with officers of the Pharmacy Association of Saskatchewan (PAS) and the Saskatchewan Branch of the Canadian Society of Hospital Pharmacists (CSHP);
- Continued to refine our “knowledge-based strategic” decision-making framework. This includes regular environmental scanning and councillor reports on public and member linkage opportunities to adjust our strategies and priorities;
- Continued our involvement with the Pharmacy Coalition on Primary Care;
- Continued as a partner in the Prescription Review Program with the College of Physicians and Surgeons of Saskatchewan (CPSS), the College of Dental Surgeons of Saskatchewan (CDSS), the Saskatchewan Registered Nurses’ Association (SRNA) and Saskatchewan Health;
- Hosted the annual Convocation Luncheon to welcome the Pharmacy Class of 2016 into the profession;
- Represented at the College of Pharmacy and Nutrition White Coat Ceremony welcoming first year students into the profession, and the Academic Awards Ceremony to recognize student achievements;
- Met jointly with PAS and the national executive of CSHP while they held their annual meeting in Regina;
- Served on the Program Advisory Committee for the Pharmacy Technician Training Program at Saskatchewan Polytechnic;
- Continued as a member of the National Association for Pharmacy Regulatory Authorities (NAPRA);
- Represented SCPP at the Canadian Pharmacists’ Association (CPhA) annual conference in Calgary;
- Attended and spoke at the National Association of Boards of Pharmacy (NABP) elected officers forum in Chicago; and
- As we bid farewell to Pamela Anderson, we welcomed George Thomas and Michael Lummerding as new public members on Council. We also welcomed pharmacists Kyla Jackson, Paul Melnyk, and Marilyn Younghans as they were elected to Council from Divisions 2, 4 and 8 respectively. Leah Perrault was re-elected by acclamation from Division 6. We extend our appreciation to retiring Councillors Sheldon Ryma and Tamara Lange for their service. Steven Kary replaced Darren Bogle as student observer on Council.

As this is a summary of our accomplishments during 2016, further details can be found in newsletters and other publications at www.saskpharm.ca.

We could not have accomplished as much without the teamwork and collaboration from Council, staff, committees, appointees, members, Ministry of Health, government and other health-related organizations. I am honored to have served as president of the College. I extend my appreciation to the foregoing for their support in achieving our new mission in pursuit of our vision during these challenging times of change.

Respectfully submitted,

Bill Gerla,
President

Report of the Registrar



R. J. Joubert
Registrar-Treasurer

President Gerla and members of the College:

I am pleased to present my thirty-third report as Registrar-Treasurer. This report describes how the office contributes towards achieving the College's vision, mission, strategic goals and strategic direction established by Council.

As the secretariat and treasury for SCPP, this office provides administrative support for Council and committees and the activities outlined in the President's report. We also manage issues, communications and our statutory obligations. The latter include registration and licensing, and monitoring and enforcement activities such as field operations, consisting of routine and special evaluation of pharmacies and investigation of complaints. The office completed the management of Phases II and III of our COMPASS™ pilot project, a continuous quality assurance process for community pharmacies. We act as liaison between Council, committees and members, government, the public, other professional organizations, the pharmaceutical industry and other stakeholders.

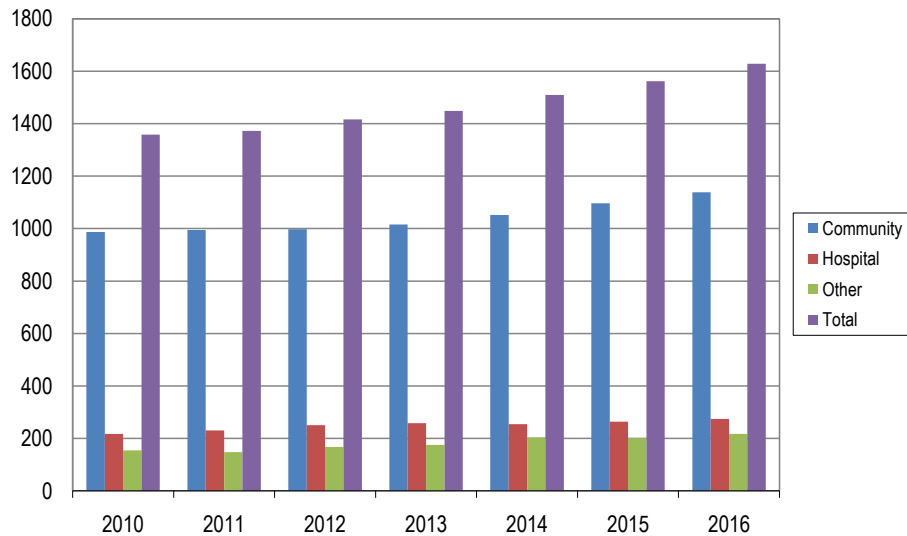
Highlights from the tables and charts that follow:

- Overall our financial position is healthy. Our assets grew by 2.95% to \$3,020,127. Increasing numbers of members, in particular new pharmacy technicians, and pharmacies, with financial control strategies to achieve budget targets, such as restraining costs in areas directly under our control, results in a modest operating surplus of \$46,080. The accumulation of surpluses over the last few years has helped in sustaining our catastrophic discipline cost and operating reserve fund targets to enhance our financial stability. Membership growth continues with a continued high proportion of Saskatchewan graduates, and for the third year in a row, a record number of graduates from other jurisdictions became registered, both exceeding attrition. We continue to monitor the sustainability of this latter trend as it seems to be resulting from the impending conclusion of the alternative registration pathway for pharmacy technicians who have not graduated from CCAPP accredited programs;
- We are pleased to continue to acknowledge the registration and licensure of 82 pharmacy technicians;
- Pharmacy openings exceed closures, continuing the upward trend in the overall number of pharmacies;
- The number of routine pharmacy evaluations has decreased due to other priorities such as investigating complaints, transitioning to COMPASS™ and assisting with issues management and member inquiries on a wide variety of topics;
- Professional Practice Review Indicators – please refer to the Field Officer reports on the pages that follow;

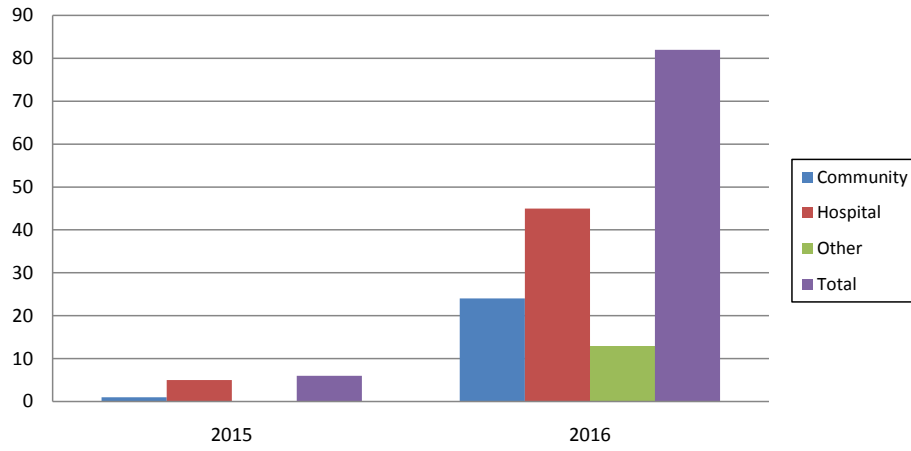
- The number of formal complaints referred to the Complaints Committee continues to grow in number and complexity. The number of informal complaints not referred to the Complaints Committee, but handled administratively, is also growing in number and complexity. As a result:
 - We have implemented a quality assurance survey for formal complaints. Although the responses from complainants and members/proprietors was very low (13 out of 71 and 29 out of 72 respectively) compromising the reliability of the results, there was a sharp difference in overall satisfaction between the two groups. Overall the complainants were very dissatisfied, while the members/proprietors were very satisfied with the process. While we are concerned with survey bias as not many satisfied complainants responded, we are considering adjustments to the process and survey to improve satisfaction;
 - For informal complaints, we are implementing a more deliberate monitoring process;
 - We continue to be concerned with the large proportion of complaints related to attitude and behaviour that suggest active monitoring should continue with corrective strategies to be considered if this is the trend; and
 - Active monitoring of trends led to establishing a fitness to practise process to which two cases were referred.

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

**Practising Members - Pharmacists
as of December 31**

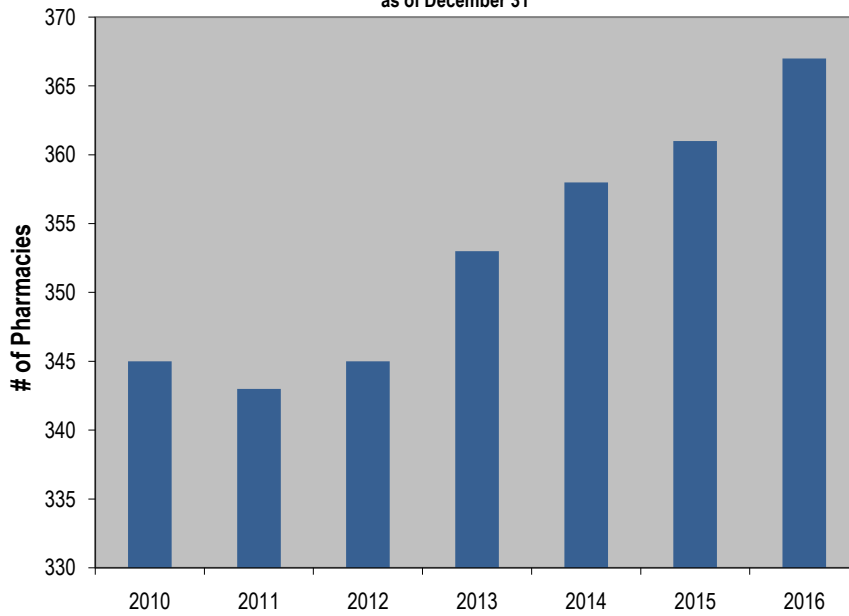


Practising Members - Pharmacy Technicians as of December 31



Community Pharmacies

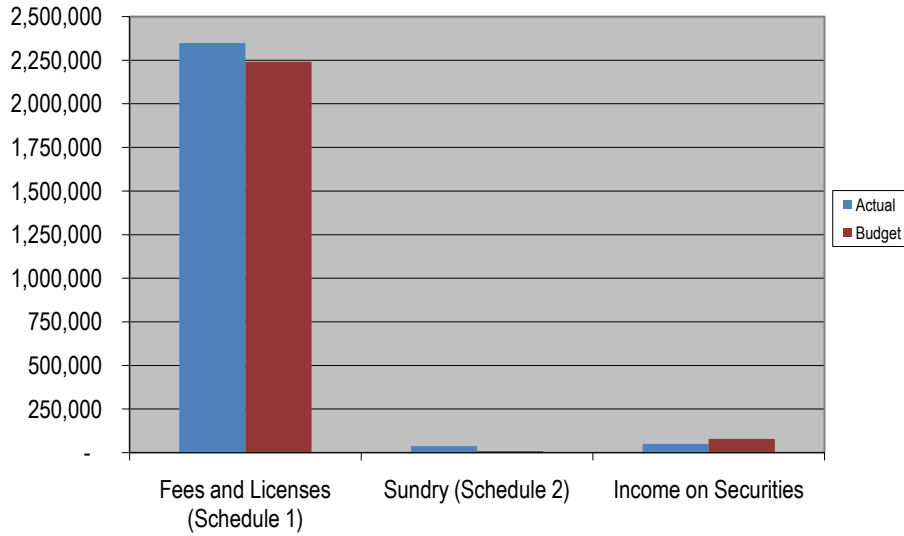
(includes Community, Satellite & Dispensing Physicians)
as of December 31



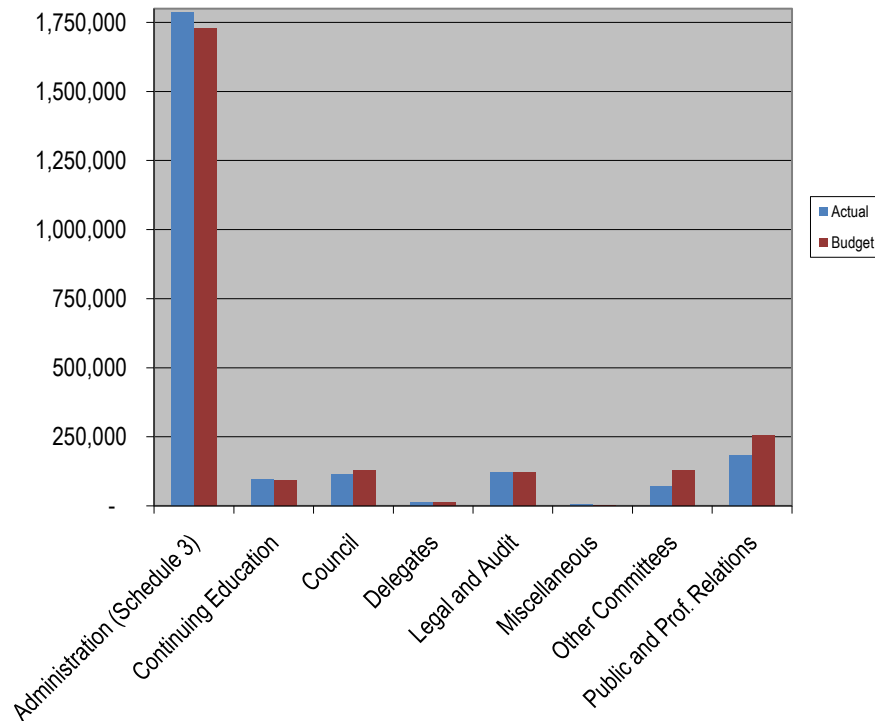
Financial

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

Revenue 2016



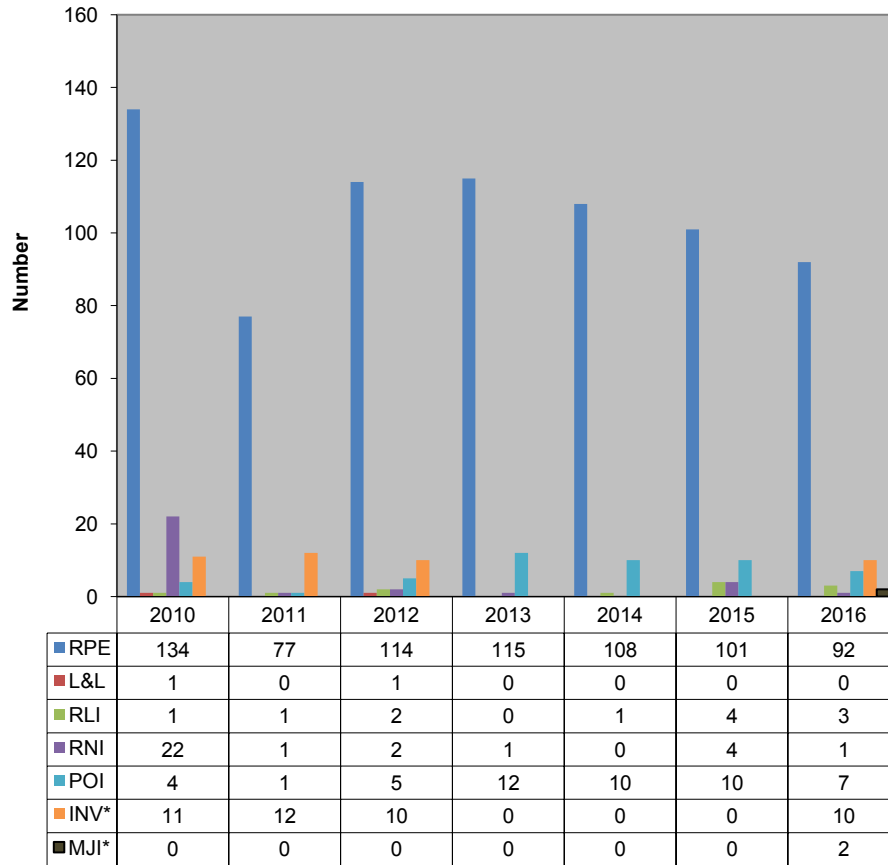
Expenses 2016



Field Operations

Pharmacy Practice Reviews continue to be divided between Jeannette Sandiford in the south and Lori Postnikoff in northern Saskatchewan. Regular activities are summarized as follows:

Field Operations Activities Summary



Key:

- RPE = Routine pharmacy evaluations
- L&L = Lock and Leave inspections
- RLI = Relocation inspections
- RNI = Renovation inspection
- POI = Pre-opening inspections
- INV = New investigations requiring travel to the pharmacy locations to conduct a review of the records and/or an interview of the member(s)/or members of the public or affected agencies (such as home care, etc.)
- MJJ = Multi-jurisdictional investigation involving the RCMP

Summary

Field Officers no longer routinely visit pharmacies undergoing renovations or lock and leave installations. However, 21 renovations and five lock and leave installations were approved in 2016 via written undertaking. These renovations and lock and leave installations will be reviewed during routine pharmacy visits.

Not all pharmacies that opened in 2016 could be visited for a pre-opening inspection. Two new pharmacies were opened via an undertaking and agreement process with the College. Three of the six relocations were also approved by the same process.

Field Officers Report of Pharmacy Practice Reviews for 2016

In 2016, the field officers visited 92 pharmacies to conduct professional practice reviews. Fifty-six visits were completed in northern Saskatchewan and 36 visits were completed in the south of the province. Field Officer Jeannette Sandiford conducted four visits with the COMPASS™ pilot project pharmacies.

The rating scale for the indicators was revised to be more aligned with the COMPASS™ Medication Safety Self-Assessment (MSSA):

- A – No activity/evidence
- B – Discussed for possible implementation
- C – Partial implementation or activity
- D – Implemented for some patients
- E – Implemented for all patients



The ratings 1 to 4 remained the same as follows:

- (1) Indicator has no activity/compliance – improvement required (WRITTEN ACTION PLAN within 60 days)
- (2) Indicator has some activity/compliance – improvement required (WRITTEN ACTION PLAN within 120 days)
- (3) Indicator has most/complete activity compliance
- (4) Indicator was not observed/discussed

Revisions were made to the report in 2016, which included the following new indicators:

- Indicator #5. Pharmacists, when utilizing an advanced scope of practice (injection/lab value interpretation) apply medication use expertise and knowledge.
- Indicator #7. There is a formal system in place in the pharmacy that identifies and resolves all issues involving medication errors, near misses and unsafe practices. All pharmacy staff are aware of the applicable policies and procedures. Quality improvement processes are in place.
- Indicator #7 was expanded for pharmacies. The first Key Element was measured with all pharmacy visits and Key Elements 2 through 4 were measured in COMPASS™ pilot project pharmacies.
 - Key Element #1. Managing Medication Errors: Manages known, alleged and suspected medication errors that reach the patient consistent with the best practices. Review pharmacy policy and procedure manual to ensure procedure for dealing with medication errors is outlined.
 - Key Element #2. Reporting Medication Errors: Enables and requires anonymous reporting of medication errors to an independent, objective, third-party organization for population of a national aggregate database from which learnings arising from trends and patterns can be communicated across the profession.
 - Key Element #3. Completing a Medication Safety Self-Assessment (MSSA): Requires completion of a medication safety self-assessment annually.
 - Key Element #4. Implementing a Continuous Quality Improvement (CQI) Plan: Encourages open dialogue on medication incidents between pharmacy staff and management through quarterly review of the pharmacy's aggregate medication incident data (e.g. total number of incidents, type of incidents, etc.) and monitoring the progress of the resulting CQI plan from the medication safety self-assessment and medication incident analysis discussed at the quarterly meeting.

- Indicator #8. Pharmacists, when providing patient care as part of medication therapy management, obtain the necessary patient consent, document their concerns adequately and perform the necessary follow up to ensure optimal patient safe.
- Indicator #9. Failed Transactions: Ensure all information provided to electronic databases e.g. PIP viewer, is accurate and complete.

Reporting from 2013 to 2016 is provided in the chart below.

NOTE: Eight new categories have been added to the chart. SSCP is no longer reporting on three categories. Please see the 2015 Annual Report for statistics related to:

- Prescribing According to Bylaws
- Safe Drug Inventory Maintenance
- Prescription and Record-Keeping Review

Practice Review Ratings for Indicators:

- (1) Indicator has no activity/compliance – improvement required (ACTION PLAN)
- (2) Indicator has some activity/compliance – improvement required (ACTION PLAN)
- (3) Indicator has most/complete activity/compliance
- (4) Indicator was not observed/discussed

Year		2013	2014	2015	2016
Number of Pharmacies		114	115	108	101
Indicator	Rating	%	%	%	%
1) Information Gathering and Documentation	1	0	0	0	0
	2	80	65	78	75
	3	20	35	22	24
	4	0	0	0	1
2) Patient Information Utilization	1	0	0	0	0
	2	9	4	1	12
	3	91	96	97	87
	4	0	0	2	0
	n/a	0	0	0	1
3) Medication Therapy Through Patient Education	1	0	0	0	0
	2	4	2	0	3
	3	96	98	94	97
	4	0	0	6	0
4) Prescribing in Best Interest of Patient	1	0	0	0	0
	2	4	0	1	1
	3	92	99	97	95
	4	4	1	2	2
	n/a	0	0	0	2
5) Applying Advanced Scope of Practice (NEW)	1				0
	2				0
	3				77
	4				22
	n/a				1
6) Effective Use of Personnel	1	0	0	0	0
	2	3	6	0	10
	3	97	94	98	90
	4	0	0	2	0

Continued from previous page

Year		2013	2014	2015	2016
Number of Pharmacies		114	115	108	101
Indicator	Rating	%	%	%	%
7) Formal System for Medication Incidents					
7.1 Managing medication errors (NEW)	1				0
	2				6
	3				92
	4				1
	n/a				1
7.2 Reporting medication errors (NEW)	1				0
	2				9
	3				18
	4				49
	n/a				24
7.3 Completing MSSA (NEW)	1				0
	2				11
	3				16
	4				49
	n/a				24
7.4 Implementing a CQI plan (NEW)	1				1
	2				16
	3				7
	4				74
	n/a				2
8) Medication Therapy Management Ensures Optimal Patient Care (NEW)	1	0	0	0	0
	2	1	0	1	13
	3	99	100	97	76
	4	0	0	2	11
9) PIP Viewer is Accurate and Complete (NEW)	1				1
	2				33
	3				51
	4				14
	n/a				1
10) Drug Distribution Ensures Safe Dispensing (NEW)	1				0
	2				0
	3				99
	4				0
	n/a				1

In 2016, Indicator #1 stayed constant and is reported below as:

- Rating of 2 – 75 pharmacies of 92 or 82% versus 77% in 2015 and 60% in 2014
- Rating of 3 – 24 pharmacies of 92 or 26% versus 22% in 2015 and 32% in 2014

The field officers remained concerned about a downward trend regarding documentation of relevant patient information being recorded in the patient's profile.

It would seem counterintuitive that the rating for Indicator #2 would have a consistently higher percentage of ratings of 3, when it should be dependent upon indicator #1. However, when questioned, pharmacists were aware of their patient's history and medication management.

New indicators were developed as reported above.

The new indicator #7 was developed to assess not only whether a formal CQI program existed within the community pharmacy, but also to allow the field officers an opportunity to assess pharmacies participating in the COMPASS™ pilot project. Both COMPASS™ and non-COMPASS™ pharmacies were evaluated on Key Element #1, which is an indicator of how well pharmacies are managing known, alleged and suspected errors.

Pharmacies consistently scored well in this area, indicating that when an error became apparent to the pharmacy staff, they would manage it based on best practices. Key Elements #2 to #4 apply, for the most part, to COMPASS™ pharmacies. Therefore the majority of ratings were 4's or n/a, which means the elements were not observed or discussed because the majority of PPR's were completed at non-COMPASS™ pharmacies.

Of the COMPASS™ pharmacies assessed, medication error reporting was completed regularly. However, the MSSA was not being completed as regularly, and even to a lesser extent was implementing and monitoring a CQI plan. Improvements in these two areas are expected once more pharmacy staff members are trained and a standardized CQI program becomes a requirement.

We have begun monitoring the pharmacists' expanded scope of practice through indicator #5 and indicator #8.

- Indicator #5. Pharmacists, when utilizing an advanced scope of practice (injection/lab value interpretation), apply medication use, expertise and knowledge.
- Indicator #8. Pharmacists, when providing patient care as part of medication therapy management, document their concerns adequately and perform the necessary follow up to ensure optimal patient care.

We are pleased to report that most pharmacists with an expanded scope of practice and medication therapy management are practising in compliance.

The final addition to the review process has been to assess PIP data quality. Through reviews, SCPP is raising awareness for the need of accurate data to be entered into PIP. Ensuring that failed transaction reports are monitored daily for information that was "failed to be captured" is one part of the Quality Improvement Program (QIP) initiative developed by eHealth, and which the College supports.

The field officers would like to thank the 92 pharmacy managers and their staff for graciously accommodating them during the 2016 professional practice reviews.



Other Field Operation activities:

- Both Jeannette Sandiford and Lori Postnikoff participated in Council meetings, conferences and convocation ceremonies. They actively collaborate with their counterparts in other provinces.
- They undertook change management courses to assist with transitioning to new roles under COMPASS™.
- As our administrative lead for COMPASS™, Jeannette Sandiford worked with the steering committee and external consultants to prepare the business case and implementation strategy approved by Council.
- Lori Postnikoff, Complaints Director, continues to investigate complaints, usually requiring interviews or visits, and acts a resource for the Complaints Committee.
- Lori also serves on the College of Physicians and Surgeons Opioid Advisory Committee and teaches federal law to University of Saskatchewan pharmacy students.

**Assistant Registrar**

Jeanne Eriksen is our Assistant Registrar and in this role:

- Oversees our registration, licensing and pharmacy permit system;
- Coordinates drug scheduling changes and bylaw amendments;
- Oversees our communications strategies, including our member-based social media platform, newsletters, bulletins, advisories, annual report and reference manual content;
- Supports the Registration and Licensing Policies, Awards and Honours, Fitness to Practise and Professional Practise committees. These activities result in preparing reports and important recommendations to Council. For example:
 - Pharmacy technicians' scope of practice and continuing education/competency requirements
 - Patient private care area and specifications
 - Pharmacy manager eligibility requirements
 - Remote pharmacy service provision
 - Policies on emergency preparedness and needlestick injuries
- Continued the review of our Appraisal Training and Assessment (ATA) process for international pharmacy graduates and former members returning to practice;
- Serves on the National Committee on Regulated Pharmacy Technicians and on the National Advisory Committee on Pharmacy Practice (NACPP);
- Represents SCPP on the Pharmacy Association of Saskatchewan (PAS) Professional Practice Committee and the Conference Committee;
- Serves on the Saskatchewan Polytechnic Pharmacy Technician Program Advisory Committee;
- Represents SCPP on the Continuing Professional Development for Pharmacists Advisory Committee and the Structured Practice Experiences Program Advisory Committee;
- Worked with the Ministries of the Economy, Labour Relations and Workplace Safety, and Health on finding solutions to the suspension of our program to assess the competencies of International Pharmacy Graduates and pharmacists returning to practice.

Primary Health Care Coordinator

Kristjana Gudmundson continued her term as Primary Health Care Coordinator. To summarize progress:

- Implemented concrete measures to accomplish the recommendations from Dr. Losinski's report.
- Developed strategies to incorporate pharmacists in Chronic Disease Management Quality Improvement Project (CDM-QIP).
 - Build networks and relationships within the profession, and with other professions and their organizations, the Regional Health Authorities (RHAs) to:
 - ♦ Build awareness of pharmacy services in their planning for primary care teams
 - ♦ Facilitate connections between pharmacists and stakeholders in planning and delivery of primary care services
 - ♦ Explore how pharmacists and these stakeholders can collaborate in achieving health system goals, in particular respecting chronic disease management and integrating pharmacy specific targets, measures and outcomes
 - ♦ Explore how pharmacists are contributing, or can improve contributions to primary care sites, innovation sites and Community Emergency Centers
 - Explore where pharmacists are contributing, or are improving their contributions to the delivery of primary care in their practices or sites that are not necessarily funded by the public system
 - Develop spread strategies for pharmacy service models both within and outside of the publicly funded health system
- Identified and promoted models of teamwork.
- Considered other strategies to enhance the contributions of pharmacists to primary health care or enhance the role of the pharmacist as a valued member of the health care team.
- Participated in diabetes and rheumatology projects.
- Conducted research, prepared documents and assisted members with inquiries respecting expanded scope of practice, especially administration of drugs by injection.
- Assumed a greater support role for the Pharmacy Coalition on Primary Care.

Complaints

The disposition of the complaints files is summarized as follows:

COMPLAINTS SUMMARY	January	May	Sept	**Sept teleconference	• Nov teleconference	Dec	Total 2016
# of New Complaint Files	2	13	17			6	38
# of Complaint Files Closed	2	12	14			4	32
# of Complaint Files referred to Discipline	1	3	1 *.1				5 (-1)
# of Complaint Files referred to Alternative Dispute Resolution Process (ADR)	0		0	2		1	3
# of Complaint Files Open for Investigation							7 (**+5)

- * In September a file referred to Discipline in May was reviewed and closed.
- ** The September teleconference reviewed 2 files for immediate referral to an ADR process.
 - The November teleconference was to initiate an investigation of two new files.
 - Five files were opened in 2016 after the December meeting.

2016 Total Number of New Complaint Files Received and First Reviewed by the Complaints Committee: 38

	Jan	May	Sept teleconference	Nov teleconference	Dec	Total 2016
Professional Incompetence						
Alcohol/Drug Abuse	0	1	1	0	0	2
Medication Errors	8	4	1	2	2	17
Prescription Transfers	0	0	0	0	0	0
Inappropriate Product Selection	0	0	0	0	0	0
Adverse Drug Reaction (otc)	0	0	0	0	0	0
Privacy/Pharmacy Assistant	0	0	0	0	0	0
Miscellaneous/Other	3	2	1	3	2	11
Professional Misconduct						
Bylaws/Standards/Guideline/Ethical Infractions	0	6	1	2	0	9
Communication/Unprofessional Behaviour	10	13	2	2	3	30
Record Keeping	0	1	0	0	0	1
Unsupervised Assistant	0	0	0	0	0	0
Prescription Short Fills	2	0	0	0	0	2
Pharmacist Not on Duty	0	0	0	0	0	0
Dispensing Without Authority	2	0	0	0	0	2
Breach of Confidentiality/Privacy	3	2	0	1	1	7
Refusal to Fill	1	2	0	0	0	3
Patient's Right to Choose Pharmacy	0	0	0	0	0	0
Adverse Drug Reaction (otc)	0	0	0	0	0	0
Privacy/Pharmacy Assistant	0	0	0	0	0	0
Miscellaneous/Other	2	3	2	2	0	9
Proprietary Misconduct						
Advertising	0	2	0	0	0	2
Bylaws/Standards/Guideline/Ethical Infractions	2	3	0	0	0	5
Billing Irregularities/Overcharging	0	1	0	0	0	1
Patient's Right to Choose Pharmacy	0	0	0	0	0	0
Miscellaneous/Other	0	2	1	1	0	4
TOTAL ALLEGATIONS						*105

*more than one allegation in one file

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

TYPE OF COMPLAINT BY ALLEGATION	2010	2011	2012	2013	2014	2015	2016
Advertising	0	0	1	0	0	0	2
Alcohol/Drug Abuse	0	0	0	1	2	1	2
Communication/Unprofessional Behavior	19	11	12	8	24	26	30
Medication Errors	9	5	27	8	11	12	17
Record Keeping	0	0	1	1	1	4	1
Bylaws/Standards/Guideline/Ethical Infractions	5	1	1	4	7	11	9
Prescription Transfers	0	1	1	1	2	0	0
Billing Irregularities/Overcharging	4	3	5	1	4	2	1
Inappropriate Product Selection	0	0	0	0	1	0	0
Unsupervised Assistant	1	0	0	2	4	2	0
Prescription Short Fills	0	0	1	4	4	0	2
Pharmacist Not on Duty	1	0	0	0	1	0	0
Dispensing Without Authority	2	1	1	1	2	2	2
Breach of Confidentiality/Privacy	4	3	6	11	6	7	7
Adverse Drug Reaction (otc)	-	-	-	2	0	2	0
Refusal to Fill	-	-	-	7	4	3	3
Patient's Right to Choose Pharmacy	-	-	-	5	6	2	0
Privacy/Pharmacy Assistant	-	-	-	-	4	8	0
Miscellaneous/Other	2	9	7	2	12	16	29
TOTAL	49	*35	*63	*58	*95	*98	*105

*Type of Complaint by Allegation total exceeds the number of actual complaint files due to more than one allegation per file in some of the complaint files

Report of the Complaints Committee

The Complaints Committee operates as a Committee of the College pursuant to *The Pharmacy and Pharmacy Disciplines Act* and derives its authority as stated in section 28:

Investigation

28(1) Where the complaints committee is requested by the council to consider a complaint or is in receipt of a written complaint alleging that a member is guilty of professional misconduct or professional incompetence, or that a proprietor is guilty of proprietary misconduct, the committee shall:

- (a) review the complaint; and
- (b) investigate the complaint by taking any steps it considers necessary, including summoning before it the member or proprietor whose conduct is the subject of the complaint.

(2) On completion of its investigation, the complaints committee shall make a written report to the discipline committee recommending:

- (a) that the discipline committee hear and determine the formal complaint set out in the written report; or
- (b) that no further action be taken with respect to the matter under investigation.

(3) The formal complaint set out in a written report made pursuant to clause (2)(a) may relate to any matter disclosed in the complaint received pursuant to subsection (1) or the investigation conducted pursuant to subsection (1).

(4) The complaints committee shall provide, or cause the registrar to provide, a copy of a written report made pursuant to clause (2)(b) to:

- (a) the council;
- (b) the person, if any, who made the complaint; and
- (c) the member or proprietor whose conduct is the subject of the complaint.

Statistics

The Complaints Committee reviewed a total of 46 files in 2016.

Eight files were carried over from 2015 and completed as follows:

- No further action: of those eight files, five files were closed (one file – no written complaint received)
- Discipline: of those eight files, three files were referred to discipline (one of the files referred to discipline was re-examined later in 2016 and closed)

The Complaints Committee met for its final meeting of the year on December 7, 2016, at which time 38 files had been opened in 2016.

No further action:

- Of the 38 files reviewed by the Complaints Committee in 2016, 27 files were closed (six files were closed when no written complaint was received and two files were closed at the request of the complainant)

Forty-three files were opened by the end of 2016. Five files have yet to be reviewed by the Committee.

Discipline

Two files were initially referred to discipline, but one file was brought back to the Committee for further review and discussion, and the file was subsequently closed. Therefore only one file will be the subject of a discipline hearing scheduled for February 2017.

Alternative Dispute Resolution (ADR)

- Two files were referred together for an ADR process involving an agreement with the College. They were referred to mediation (The Dispute Resolution Office, Ministry of Justice)
- One file was referred to the new Fitness to Practise Committee

Summary of Activities and Decisions of the Committees

Discipline Committee

The Discipline Committee heard two files in 2016 (both referred to discipline in 2015) and the decisions and orders can be found on CanLII website at <https://www.canlii.org/en/sk/skcppdc/>.

Complaints Committee

Alternative Dispute Resolution

Alternative Dispute Resolution processes continued to be employed by the Complaints Committee. The committee feels that the processes help achieve the goals of peer review, member education and remediation. The newly formed Fitness to Practise Committee is a new initiative of the College within the ADR process. The committee is designed to ensure that members who may have a physical or medical health issue that is affecting their ability to practice are afforded the consideration required to address their personal or health issues while the committee and the College ensure that the safety of the public is maintained.

The committee also rescinded a motion to refer a file to discipline. After review, they believed the best outcome would be achieved through a mediated Alternative Dispute Resolution process with the assistance of a qualified mediator from The Dispute Resolution Office of the Ministry of Justice, the member and the complainant.

Method of Complaint

The committee affords each complainant who contacts the College by phone, the opportunity to submit a written complaint. Some complainants choose not to submit a written complaint and the Complaints Committee will discuss the verbally recorded conversation and may choose to close the file with no further action. Alternatively, if the committee feels the matter is serious, they may investigate the verbal complaint, or close the file and request that the Registrar examine the information and submit a formal complaint. In 2016, the latter occurred with two separate complaint allegations.

Results of an Investigation

The committee also affords all complainants an opportunity to review the results of the investigation if a file is closed by sending a copy of the report to the complainant, which is written as per sections 28(2)(b) and 28(4)(b).

In 2016, one file was reviewed when new information was provided by the complainant after the file had been closed. It was determined that a new file would be opened for further investigation of the new information.

Two files were closed and referred to Council for further review and policy decisions as they were found to be beyond the scope of the Committee.



Trends

The Complaints Committee continues to monitor trends and report to Council.

- Communication/Behavior concerns were found to be part of the allegation in 28 files and 17 files were regarding a medication error.
- Pharmacy assistants are playing a larger role in the complaint investigation, often requiring an explanation of their role and/or knowledge of the complaint allegation.
- Complaint investigations are becoming more complex in nature, requiring responses, statements, interviews and/or documentation from several pharmacy staff members, as well as from other sources such as hospital staff and hospital records.

Quality Survey

In November 2016, the College sent a survey designed to evaluate the quality of the complaint process to all complainants and members who were the subject of a complaint between the years 2014 to 2016. The survey will help the Complaints Committee enhance procedures and improve the quality of the complaints process. The surveys will continue to be sent after the resolution of each complaint to monitor ongoing quality improvement processes.

The Complaints Committee has worked very hard this year, reviewing documentation, interviews and other factual information provided through the investigation process. SCPP would like to thank each and every member of the committee for their dedication and hard work through 2016.



COMPASS™

SCPP engaged in a third phase of the COMPASS™ (COMmunityPharmacists Advancing Safety in Saskatchewan) Continuous Quality Assurance (CQA) pilot project from January 1 to December 31, 2016.

Purpose of Phase III

The purpose of the third phase was to:

- review the issues and challenges identified by COMPASS™ pharmacies;
- develop and implement strategies and processes to assist those COMPASS™ pharmacies having difficulty getting started and maintaining momentum due to pharmacy manager turnover;
- develop an implementation plan to make participation in COMPASS™ a permit requirement; and
- develop an online field officer assessment tool to evaluate continuous quality assurance activities in community pharmacies.

Standardized Continuous Quality Assurance (CQA) Tools

As in Phase I and II, Phase III COMPASS™ pharmacies used the standardized continuous quality assurance tools developed by ISMP Canada. These included:

- Community Pharmacy Incident Reporting (CPhIR) system (<http://www.cphir.ca>) for reporting medication errors and near misses (medication incidents);
- Medication Safety Self-Assessment (MSSA) tool (<https://www.ismp-canada.org/lmssa>) for identifying proactively any potential safety issues; and
- Continuous Quality Improvement (CQI) tool for developing the agenda for quarterly safety meetings and developing and monitoring the pharmacy improvement plan.

SCPP covered the cost of the subscription for the tools for all the pilot pharmacies for the duration of this phase.

Number of Participating Pharmacies

The third phase of the pilot started with 121 Saskatchewan volunteer pharmacies. Between pharmacies coming on board in 2016 and those that left the pilot, there were 119 participating pharmacies at the end of 2016.

Training

During the third phase of the pilot in March and April 2016, four webinars were offered to new and existing COMPASS™ pharmacies. The goal of the training was to provide information on medication safety, as well as hands-on training with the online COMPASS™ tools. Participant evaluations of this program as gathered by ISMP Canada were generally positive, but did provide some suggestions that will be taken into consideration when facilitating any further COMPASS™ training. One of the webinar training sessions was converted to a YouTube video by ISMP Canada and can be accessed at https://youtu.be/9MyY2_BKH9E.

Surveys

A phone survey was completed by the College during the third phase of COMPASS™. Its purpose was to obtain feedback on the current use of the tools, training taken regarding COMPASS™, thoughts on future training, barriers to implementation, attitudes towards COMPASS™ and anticipation of future use. Overall, the people interviewed were very positive about COMPASS™ and about their anticipated use of the COMPASS™ tools in the future. However, it was apparent that not all pharmacies were using the tools to their full potential. Strategies will need to be developed to help members to be more aware of the importance of utilizing all the tools.

The results of this survey can be accessed at:

http://scp.in1touch.org/uploaded/web/Directions_Vol2_Issue2_Nov2016.pdf.

ISMP Canada Support

Throughout the third phase of the pilot, each pharmacy was contacted on a regular basis by ISMP Canada to ensure there weren't issues or questions regarding the use of the tools. ISMP Canada also provided a great deal of support to the pilot pharmacies on how to report incidents, access username/passwords, enter MSSA results and answer questions.

Field Officer Assessment Tool

Work was started on converting the current paper-based field officer assessment tool to an online version. The online assessment tool is expected to be fully operational by April 2017.

Communication

To facilitate communication between SCPP and the COMPASS™ pharmacies, the [directions] newsletter continued to be sent out. The communication piece provided participating pharmacies with information regarding the pilot, upcoming deadlines, relevant safety information, other initiatives that COMPASS™ pharmacies were participating in, for example, PIP-QIP, and any "good catches." Two [directions] newsletters were provided to COMPASS™ pharmacies in August and November of 2016.

Evaluation

At the conclusion of the second phase of the COMPASS™ pilot, Todd Boyle and the researchers at St. Xavier University in Nova Scotia surveyed the staff at COMPASS™ pharmacies to determine successes and challenges during the pilot.

The purpose of the evaluation was:

- to assess the changes that have occurred in Saskatchewan community pharmacies by using the COMPASS™ quality improvement program; and
- to evaluate if there had been any advancement towards a culture of safety in Saskatchewan pharmacies.

The findings of the report were very positive. The most significant improvements were an increase in openly discussing medication incidents and the development of a supportive (versus blame) reporting culture. The quantitative and qualitative data highlight that the most significant improvements during COMPASS™ use were culture based and included:

- staff more openly talking about medication incidents;
- staff routinely discussing ways to prevent medication incidents from happening again; and
- staff adopting the view that incident discussions are learning, and not blame and shame, opportunities.

In addition to cultural changes, improvements have occurred that are more process focused, such as a better understanding of where medication incidents are most likely to occur and the feeling of enhanced safety.

The report regarding the results of this survey, as well as recommendations and next steps can be accessed on the College website at: An Assessment of the COMPASS™ Quality Improvement Initiative: A Summary of Key Findings (<http://scp.in1touch.org/uploaded/web/files/SCPP-COMPASS%20Report-2016-FINAL-%20PHARMV2.pdf>).

Statistics

The statistics from the pilot regarding the reporting of incidents were promising. Seventy-three pilot pharmacies completed their MSSA. As well, 90 quarterly meetings were held.

Total # of Incidents Reported = 7115

The top five types of incidents:

- Incorrect dose/frequency = 1772
- Incorrect quantity = 1314
- Incorrect drug = 1040
- Incorrect strength/concentration = 565
- Incorrect prescriber = 564

Outcomes of reported incidents are as follows:

- NO ERROR = 5743
- NO HARM = 1290
- HARM = 82

Next Steps

In September 2016, the COMPASS™ Steering Committee was asked to prepare a business case and implementation plan for COMPASS™ to become the standardized continuous quality improvement (CQI) program in Saskatchewan pharmacies. The business case and implementation plan were presented to the SCPP Council at the November 2016 meeting and both were approved in principle.

The business case recommended that COMPASS™ be implemented as a permit requirement starting the 2017-2018 permit year. The COMPASS™ program requirements recommended include:

- Reporting quality related events (QREs) anonymously to an independent, objective third party organization for population of a national aggregate database;
- Completing a medication safety self-assessment biennially;
- Developing and monitoring the progress of an improvement plan at CQI meetings;
- Holding CQI meetings to provide staff education, discuss QRE's, complete the MSSA, and develop and monitor the improvement plan. It is recommended that pharmacy staff meet no less than annually; and
- Designating an individual to be the Quality Improvement (QI) coordinator at each pharmacy.

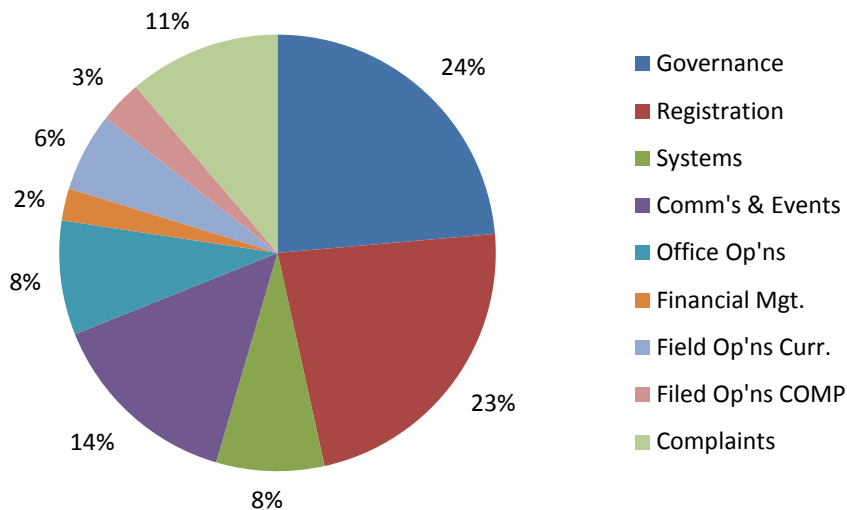
Currently, the ISMP Canada Community Pharmacy Incident Reporting (CPhIR) system, Medication Safety Self-Assessment (MSSA) tool and the Continuous Quality Improvement (CQI) tool allow community pharmacies to meet all of the above program requirements.

The next step will be the development and approval of the bylaws at the February 2017 Council meeting.

The name of COMPASS™ will also be reviewed to be more inclusive of the other members of the pharmacy team that will also be participating in COMPASS™, such as pharmacy technicians and pharmacy assistants.

Other Activities of the Registrar's Office

- Developed operational plans for the two priority goals under our new 2016-19 strategic plan. This included a performance management and development system for Council and staff. As a first step, we defined staff responsibilities within functional units and estimated the amount of time devoted to each. The results are:



Each unit will develop objectives to meet these two priorities that will be measured over time to demonstrate how much administration is focused on Council's priorities.

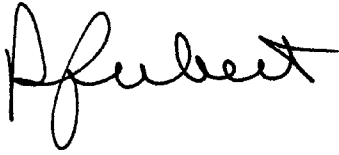
- Published six regular editions of SCOPe, our e-newsletter; one edition was specifically dedicated to pharmacy technicians
- Completed updating the documents in our Reference Manual
- Planned our 105th Annual General Meeting at the Elk Ridge Resort in conjunction with the Pharmacy Association of Saskatchewan (PAS) Conference
- Joined PAS in their special webinars on administration of drugs by injection
- Continued collaboration with the College of Pharmacy and Nutrition to facilitate professional development activities for members, in particular the design and delivery of our privacy officer re-certification, minor ailments, oral contraception and smoking cessation agent prescriptive authority for pharmacists and administration of drugs by injection training sessions
- Continued electronic data collection and submission to the Canadian Institute for Health Information (CIHI) "Pharmacist Database Project"

- Continued to electronically submit member and pharmacy data to the Provider Registry System of Saskatchewan Ministry of Health
- Continued the development of our in1touch information collection and data processing system for our pharmacy professional practice review process.
- Began development of improvements to our website.
- Completed drug scheduling by reference to the National Model Drug Scheduling Process, which will automatically update our drug Schedule I, II and III with the National Drug Scheduling Advisory Committee recommendations.
- Actively involved in the PIP CeRx Integration Advisory Committee and the PIP Quality Improvement Project. We engaged Perry Hermanson in a term position as PIP Data Quality Facilitator. Co-located with the eHealth Saskatchewan PIP Team, his mandate is to work with pharmacy managers and staff and other critical partners to achieve meaningful improvements in the quality of the data in the PIP system.
- Continue to participate in collaborative initiatives like the Network of Interprofessional Regulatory Organizations (NIRO), joint Board/Council meetings with the Pharmacy Association of Saskatchewan (PAS), Canadian Society of Hospital Pharmacists (CSHP) and the Prescription Review Program. NIRO consists of representatives from the governing bodies for all health professions and Saskatchewan Health and meets twice per year to share information and discuss issues of mutual interest.
- Collaborated with the Prescription Review Program administration by corresponding with members when the program criteria indicated that a letter be sent to members requesting an explanation.
- Continued to chair and support the Pharmacy Coalition on Primary Care.
- As a founding and funding partner in the Saskatchewan Institute of Health Leadership, continued liaison and sponsorship of one candidate.
- The Registrar is a member of the Council of Pharmacy Registrars of Canada (CPRC), which is an advisory committee to the Board of Directors of the National Association of Pharmacy Regulatory Authorities (NAPRA). CPRC coordinates activities amongst our respective organizations and advances issues to the Board for policy resolution. This involved attending four meetings during the year and participating on various committees.
- Staff members continue our strong relationship and liaison with the College of Pharmacy and Nutrition. We continued to teach law and ethics, and conducted guest lectures on a variety of professional issues. This liaison also includes serving on the Advisory Board of medSask Drug Information Service and the Continuing Professional Development for Pharmacy Professionals (CPDPP) Unit.
- Policy development and issues management required considerable staff involvement in research, coordinating and drafting documents.
- Continued to liaise with the funding partners of the Prescription Review Program.
- Provided administrative support to Council and the Audit and Finance Committees.
- Finalized a joint statement with the Saskatchewan Dietitians Association and Dietitians Canada on interprofessional collaboration.
- Contributed to a provincial working group developing protocols for Medical Assistance in Dying in the province.

Conclusion

On behalf of all staff, I extend our sincere appreciation to President Gerla and members of Council and all committees and appointees for your vision, leadership, loyalty and dedication. We acknowledge and sincerely appreciate the sacrifices you have made to serve the College. You have contributed significantly to our successes this year. We are privileged to work with such competent and dedicated volunteers.

Sincere thanks are also extended to Dawn Martin and staff of PAS for their cooperation on issues of mutual interest, and to SCPP staff who worked so hard for us during the year (Jeanne Eriksen, Pat Guillemain, Christina MacPherson, Cheryl Wyatt, Darlene King, Heather Neirinck, Lori Postnikoff, Jeannette Sandiford, Audrey Solie, Amanda Stewart, Andrea Crain, Denise Carr, Tami Schwebius, Brittany Sharkey, Perry Hermanson and Kristjana Gudmundson) for your dedication and excellent support. The College is fortunate to have such gifted staff.

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

Respectfully submitted,
R. J. Joubert, Registrar

Appendix A

Membership Statistics		2009	2010	2011	2012	2013	2014	2015	2016
As of December 31									
PHARMACIST									
Practising									
	Community:	959	987	995	996	1016	1049	1097	1128
	Hospital:	217	217	230	250	258	254	264	274
	Other:	137	151	145	168	175	204	201	217
	Conditional:	1	3	3	2	5	3	6	10
	Total Practising	1314	1358	1373	1416	1454	1510	1568	1629
Non Practising		57	56	50	43	45	42	43	46
Retired		69	76	90	93	97	99	104	102
Associate		72	69	60	55	51	48	47	44
PHARMACY TECHNICIAN*									
Practising Members									
	Community:							3	24
	Hospital:							3	45
	Other:							0	13
	Conditional:							0	0
	Total Practising							6	82
TOTAL MEMBERS:		1512	1559	1573	1607	1641	1699	1762	1903
Pharmacies									
	Community:	330	330	328	330†	337	343	346	351
	Satellite:	8	8	8	8	8	8	8	9
	Dispensing Physician:	7	7	7	7	7	7	7	7
	Internet:	0	0	0	0	0	0	0	0
TOTAL PHARMACIES:		345	345	343	345†	352	358	361	367

* Regulation of pharmacy technicians did not begin until October 2015

†Adjusted 2012 statistics according to renewal.

Pharmacy Changes During 2016

- 9 Openings
- 3 Closures
- 59 Manager Changes
- 24 Pharmacy Ownership Changes
- 7 Corporate Share Purchases
- 11 Trade Name Changes
- 6 Relocations
- 21 Renovations
- 5 Lock and Leave Permits Issued
- 14 Lock and Leave Amendments

Prescriptive Authority –

% of Licensed Pharmacists

- 80% Qualified to Prescribe Emergency Post-Coital Contraception
- 100% Prescriptive Authority Level I Trained
- 95% Prescriptive Authority Minor Ailments Trained

Registration and Membership Statistics 2016

- 90 Inquiries for International Pharmacy Graduates (IPGs)
- 9 IPGs in appraisal training/assessment process

Pharmacist

Total Registration: 132

Saskatchewan BSP Graduates: 71

57 Registered as Conditional Practising

14 Registered as Practising

Candidates from Other Jurisdictions: 54

45 Candidates from other Canadian Provinces

9 International Pharmacy Graduates

Reinstatements: 7

Total Terminations: 79

54 Non Payment of Dues

25 By Request

Members Deceased: 3

Converted to Retired Membership: 13

Pharmacy Technician

Total Registration: 77

Saskatchewan Polytechnic Graduates: 6

Non-CCAPP Graduates: 28

CCAPP Graduates: 36

Candidates from Other Jurisdictions: 6

Reinstatements: 1

Total Terminations: 1

Appendix B

Financial: For the Fiscal Year Ended December 31, 2016				
	Actual	Budget	Variance	Comments
REVENUE				
<i>Fees and Licences (Schedule 1)</i>				
Pharmacy permit amendments	9,590	16,200	(6,610)	Most included with permit renewal
Non-Practising members	56,237	53,428	2,809	Higher conversions from practising
Other fees	62,082	36,675	25,407	Higher number of jurisprudence exams
Pharmacy permits	519,505	517,615	1,890	As projected marginal growth
Practising members (licences)	1,614,004	1,558,853	55,151	More technicians, pharmacists
Registration	86,580	57,735	28,845	More technicians, pharmacists/out of province
Sub-total	2,347,998	2,240,506	107,492	
<i>Sundry (Schedule 2)</i>				
Expense recoveries	2,378	5,005	(2,627)	Less expense recoverable travel
Other	6,718	4,043	2,675	Higher attendance Convocation luncheon
Recovery of discipline costs	28,000	-	28,000	Policy to not budget
Sub-total	37,096	9,048	28,048	
Investment Income	50,777	78,623	(27,846)	Decreased bond market and principal
Total	2,435,871	2,328,177	107,694	
EXPENSES				
<i>Administration (Schedule 3)</i>				
Accounting	18,428	17,373	1,055	
Automobile (lease)	15,016	14,343	673	
Building operations	33,442	33,215	227	
Employee benefits	123,198	155,449	(32,251)	No benefits during new staff probation
Equipment rental/maint./software	83,823	115,183	(31,360)	System and web site upgrades delayed to 2017
General office	161,178	146,260	14,918	Higher credit card, staff recruitment costs
Postage	14,239	8,383	5,856	Higher usage
Printing and stationery	23,977	8,531	15,446	Higher printing costs to replace depleted inventory
Registrar and inspector	134,965	106,594	28,371	Added travel, some COMPASS™
Salaries	1,157,476	1,102,817	54,659	New staff
Telephone and fax	19,453	20,657	(1,204)	
Sub-total	1,785,195	1,728,805	56,390	
Continuing education	96,986	93,960	3,026	More licensed members
Council	113,053	127,874	(14,821)	One less meeting than projected
Delegates	12,269	13,185	(916)	
Legal and audit	121,600	120,861	739	
Miscellaneous	5,144	1,500	3,644	
Other committees	72,248	127,540	(55,292)	Less attendance type meetings
Public and professional relations	183,296	254,624	(71,328)	Lower COMPASS activity than projected
Total	2,389,791	2,468,349	(78,558)	
Excess of revenues over expenses	46,080	(140,172)	186,252	

2016-2017 Saskatchewan College of Pharmacy Professionals

Legend

*Chairman
A = Advisory (Non-Voting)
O = Officers
P = Public Member

Council/Executive

Bill Gerla*(O)
Justin Kosar (O)
Leah Perrault (O)
Spiro Kolitsas
Shannon Klotz
Kyla Jackson
Geoff Barton
Paul Melnyk
Chet Mack
Marilyn Younghans
Kishor Wasan, Ex-Officio
Pamela Anderson (P) (ended Nov 2016)
Mark Hawkins (P)
George Thomas (P)
Darren Bogle (A) (ended June 2016)
Steven Kary (A) (began July 2016)
Jonina Code (A)
Lyndsay Brakstad (A)
Michael Lummerding (P) (began July 2016)

Committees

Audit

Bill Gerla*
Justin Kosar
Leah Perrault
Julia Bareham
Bill Paterson
Ray Joubert (A)

Awards and Honours

Bill Paterson* (ended Oct 2016)
Monica Lawrence*
Zack Dumont
Shauna Gerwing
Arlene Kuntz
Bridget Zacharias
Jeanne Eriksen (A)

Complaints

George Furneaux*
Kim Borschowa
Stan Chow
Lori Friesen
Michael Hewitt
Darryl Leshko
Janet Markowski
Barbara deHaan (P)
Lori Postnikoff (A)

Discipline

Mike Davis*
Janet Bradshaw
Brad Cooper
Dean German
Christine Hrudka
Michael Lummerding (began Feb 2017)
Peyman Nemati
Marshall Salloum
Tyler Sutter
Pamela Anderson (P) (ended Nov 2016)
Ray Joubert (A)

Pharmacy Coalition on Primary Care

Kristjana Gudmundson* (ended Jan 2017)
Kim Borschowa
Derek Jorgenson
Darcy Lamb
Shannan Neubauer
Brenda Schuster
Yvonne Shevchuk
Myla Wollbaum

Professional Practice

Geoff Barton *
Kelly Babcock
Kristjana Gudmundson (ended Jan 2017)
Karen Jensen
Deven Johnson
Don Kuntz
Tamara Lange
Sue Mack-Klinger
Lindsey McComas
Bindu George
Myla Wollbaum
Jeanne Eriksen (A)
Brittany Sharkey (A)

Registration and Licensing Policies

Mike Davis* (ended Oct 2016)
Kim Borschowa
Danielle Larocque
Andrea Lockwood
Sharon Lyons
Glenn Murray
Carol Pannell
Maitrik Patel
Kimberley Smith (ended Oct 2016)
Jeanne Eriksen (A)

Appointees

Canadian Council on Continuing Education in Pharmacy (CCCEP)

Lisa Bagonluri (ended Aug 2016)
Danielle Larocque (started Sept 2016)

Council of Pharmacy Registrars of Canada (CPRC)

Ray Joubert

National Association of Pharmacy Regulatory Authorities (NAPRA)

Barry Lyons
Ray Joubert

Pharmacy Examining Board of Canada (PEBC)

Karen McDermaid

University of Saskatchewan Senate

Christine Hrudka

University of Regina Senate

Bill Paterson

Staff

Registrar

Ray Joubert

Assistant Registrar

Jeanne Eriksen

Field Officers

Lori Postnikoff (Complaints Director)
Jeannette Sandiford (Project Lead – COMPASS™)

Primary Health Care Coordinator (contract)

Kristjana Gudmundson (ended January 2017)

PIP Data Quality Facilitator (contract)

Perry Hermanson (until December 2017)

Administrative Staff

Denise Carr
Andrea Crain (ended Aug 2016)
Pat Guillemin
Darlene King
Christina McPherson (returned Sept 2016)
Heather Neirinck
Tami Schwebius (started Jan 2017)
Brittany Sharkey (started Oct 2016)
Audrey Solie
Amanda Stewart (ended Dec 2016)
Cheryl Wyatt

Minutes of the 105th Annual General Meeting

Saturday, April 30, 2016

Elkridge Resort, Waskesiu, Saskatchewan

10:15 am

Chairman – Bill Gerla

1. Welcome and Opening Remarks

Chairman Gerla called the meeting to order and welcomed those members present to the 105th Annual General meeting of the Saskatchewan College of Pharmacy Professionals.

2. Introduction of Councillors and Special Guests

Chairman Gerla of Humboldt introduced the Council members as follows: President-Elect, Justin Kosar, Saskatoon; Vice-President, Leah Perrault, Swift Current; Past-President, Spiro Kolitsas, Regina; Councillors: Shannon Klotz, Estevan; Sheldon Ryma, Prince Albert; Geoff Barton, Meadow Lake; Tamara Lange, Saskatoon; Chet Mack of Regina; Ex-Officio, Dean Kishor Wasan, Saskatoon; Pamela Anderson, Public Member, Regina and Darren Bogle, Student Observer, Saskatoon.

Chairman Gerla extended a special thank you to Tamara Lange and Sheldon Ryma for their years of commitment and dedication to the College, as they retire from Council. Chairman Gerla also thanked Darren Bogle, Senior Stick, who represented the students over the past year. Steven Kary will be the new senior stick for the upcoming year.

This year S CPP held elections in Divisions 2, 4, 6 and 8. In Division 2, Leah Perrault and in Division 6, Kyla Jackson were elected by acclamation. We held an election for Division 4 with Paul Melnyk elected to Council. We wish to thank Tamara Lange for her continued interests in the affairs of the College. Marilyn Youngmans was appointed by Council as authorized in the Bylaws for Division 8.

Special guests welcomed and introduced to the assembly were Lisa Bagonluri as S CPP appointee to the Canadian Council on Continuing Education in Pharmacy, Barry Lyons as S CPP appointee to the National Association of Pharmacy Regulatory Authorities and Karen McDermaid as S CPP appointee and recently elected as President to the Pharmacy Examining Board of Canada.

3. Motion to Accept 2015 Minutes as Printed and Distributed

MOTION: A. Smycniuk / T. Lange

THAT the Minutes of the 104th Annual General Meeting of Saskatchewan College of Pharmacists, held on Saturday, April 25, 2015 in Regina, be adopted as printed and distributed.

CARRIED

4. Business Arising from the Minutes

There was no business arising from the minutes.

5. Memorial to Members who we have lost this year

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

Raymond Bannister, BSP 1958
 Jeffery Belhumeur, BSP 2008
 Sarah Boardman, BScPharm 2010
 Margaret (Jean) Crocker, BSP 1947
 James (Gordon) Duff, BSP 1953
 Richard (Dick) Henders, BSP 1956
 Scott Henders, BSP 1953
 Richard Johnsrude, BSP 1952

Daniel (Dan) Keeler, BSP 1956
 Thomas Litowski, BSP 1966
 Patrick MacCuish, BSP 1957
 Nadine Miller, BSP 1993
 Randall (Randy) Sigurdson, BScPharm 1982
 Kenneth (Ken) Stewart, BSP 1955
 Raymond Yurkowski, BSP 1954

6. Reports

6.1 President's Annual Report

President-Elect Justin Kosar assumed the chair, introduced President Gerla and invited him to present the Annual Report.

President Gerla referred members to his published report beginning on page 5 of the printed Annual Report, which summarizes the activities of the College and demonstrates how we monitor and evaluate performance according to the strategic goals.

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

MOTION: A. Kuntz / S. Kolitsas

THAT the President's report be accepted as presented.

CARRIED

Chairman Gerla resumed the Chair.

6.2 Registrar's Report

Chairman Gerla invited the Registrar, Ray Joubert, to present his report. Mr. Joubert referred to his printed report beginning on page 10 of the Annual Report, which includes statistical information and projections.

Mr. Joubert invited questions from the floor arising from his published report. After questions seeking clarification of the financial report including fees and how the reserve funds are being used, there were no further questions.

MOTION: L. Perrault / J. Bradshaw

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

CARRIED

6.3 Auditor's Report

Chairman Gerla invited Ray Joubert to present the Auditor's report and answer questions respecting the published Audited Financial Statements for the fiscal year ended December 31, 2015. He directed those assembled to the Auditor's report and audited financial statements for 2014-2015 published in the Annual Report beginning on page 45.

MOTION: K. Borschowa / L. Rhode-Neuman

THAT the audited Financial Statement of the College for fiscal period ended December 31, 2015, be approved as printed and distributed.

CARRIED

6.4 Consideration of Annual Report as Printed and Distributed

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

MOTION: M. McLeod / C. Mack

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

CARRIED

6.5 College of Pharmacy and Nutrition Report

Dean Kishor Wasan highlighted his report as printed in the Annual Report on page 39.

7 New Business

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

8 Concluding Remarks

Chairman Gerla thanked those present for attending and thanked members of all committees for their work.

9 Adjournment

Chairman Gerla declared the Annual General Meeting adjourned at 10:57 am.



B. Gerla, President

R. J. (Ray) Joubert, Registrar

College of Pharmacy and Nutrition

*Proud of Our Tradition and
Home of Research and Practice Innovation*
2016 Annual Report to the
Saskatchewan College of Pharmacy Professionals

University News

New Chancellor

Congratulations to Roy Romanow, former Premier of Saskatchewan, who began as the 15th chancellor of the University of Saskatchewan on November 1, 2016. As chancellor, Romanow will preside at university convocation ceremonies, confer degrees, chair University Senate and serve on the U of S Board of Governors.

College News

Entry to Practice Doctor of Pharmacy

After receiving U of S Senate confirmation on Saturday, April 23, the new Doctor of Pharmacy program has been officially announced to the public. The University of Saskatchewan will launch a Doctor of Pharmacy program in fall 2017 to replace the Bachelor of Science in Pharmacy.

The new program is designed to provide the skills and knowledge necessary for pharmacists to practice as their roles in the healthcare system expand. The curriculum will include 40 weeks of experiential learning, with 32 weeks of advanced practice in the fourth year. The first three years of the program include two four-week practice experiences, as well as smaller weekly opportunities.

Nutrition Accreditation

Our nutrition program has received seven year full accreditation status (2015-2022) for both our academic and practicum components of our program. Congratulations to **Drs. Shawna Berenbaum** and **Carol Henry**, and their team, for all their leadership and dedication throughout the process.

Academic Program

Eighty-seven students received the BSP at Spring 2016 Convocation, and 18 students the BSc (Nutrition) degree. Applications to the pharmacy program this year totaled 480. Enrolment in the BSP is 350, with 90 students in Year 1, 86 in Year 2, 86 in Year 3 and 88 in Year 4; and 103 in nutrition, with 28 students in Year 1, 25 in Year 2, 24 in Year 3 and 26 in Year 4.

Faculty and Staff News

Awards & Recognition

- **Dr. Fred Remillard** was named Pharmacy Association of Saskatchewan's Pharmacist of the Year for 2016.
- **Dr. Susan Whiting** has been named a Fellow of the Canadian Academy of Health Sciences for her contributions to the promotion of health science.
- **Dr. Jane Alcorn** received the Distinguished Graduate Supervisor Award at the Fall Convocation Ceremony.

- **Dr. Jaris Swidrovich** was awarded the Saskatchewan College of Pharmacy Professionals' Presidential Citation.
- **Dr. Azita Haddadi** has been named one of the RBC Top 25 Canadian Immigrant Awards.
- **Dr. Holly Mansell** was awarded the 2016 Provost's College Award for Outstanding Teaching for the College.
- **Dr. Yvonne Shevchuk**, and her colleagues, were awarded the 2016 Provost's Prize for Innovative Practice in Collaborative Teaching and Learning.
- **Dr. Shawna Berenbaum** received a Teaching Excellence Award from the USSU.
- **Dr. Jaris Swidrovich** received the 2015-16 USSU Engaged Young Alumni Award.

Appointments

- **Dr. Jane Alcorn** has been appointed Associate Dean, Research and Graduate Affairs.
- **Dr. Holly Mansell** has been reappointed as Assistant Professor.
- **Dr. Charity Evans** has been reappointed as Assistant Professor.
- **Dr. Azita Haddadi** has been promoted with tenure to Associate Professor.
- **Dr. Jason Perepelkin** has been promoted with tenure to Associate Professor.
- **Dean Kishor Wasan** was named Secretary to the board of the Canadian Academy of Health Sciences for a two year term.
- **Dr. Jane Alcorn** has been named to the Saskatchewan Health Research Foundation Board of Directors.
- **Dr. Jaris Swidrovich** has been elected as a member-at-large on the University Council.

Graduate Studies and Research

Academic Program

The College of Pharmacy and Nutrition continues to have strong graduate programs, with 37 PhD students and 32 Master's students registered in fall 2016. Many of our students have been recognized for their academic and research excellence, receiving scholarships, poster prizes and other prestigious awards from College, University, and national sources over the past year.

Grants

- **Dr. Anas El-Aneed** was awarded \$190,000 over three years from the Saskatchewan Ministry of Agriculture's Agriculture Development Fund to study high value bioactives and vitamins from canola crush waste stream.
- **Dr. Kishor M. Wasan** was awarded \$119,856 over three years from the Saskatchewan Health Research Foundation for his project titled "Chronic in vivo study of lanthanide compounds in an osteoporosis model (OVX rat) for the treatment of bone density disorders."
- **Hassan Vatanparast** is part of a \$1.5 million 38-month project funded by the Public Health Agency of Canada entitled: "Achieving Healthier Weights in Canada's Communities". This is the third phase of the Healthy Start/Départ Santé project led by the Réseau Santé en Français de la Saskatchewan.
- **Dr. Jonathan Dimmock** received a 3-year \$270,000 grant from the Maunders McNeil Foundation for the project entitled "Creation of tumour-selective compounds"
- **Dr. Ekaterina Dadachova** was awarded \$340,837.50 USD from the Defense Threat Reduction Agency for the projected title *Investigation of radiation resistance mechanisms in melanised fungi*.

Fedoruk Chair in Radiopharmacy

Welcome to **Dr. Ekaterina (Kate) Dadachova** who has joined the University of Saskatchewan as a professor of pharmacy in the College of Pharmacy and Nutrition and as the Fedoruk Centre for Nuclear Innovation Chair in Radiopharmacy.

The Sylvia Fedoruk Canadian Centre for Nuclear Innovation has provided \$5 million to build capacity for nuclear medicine and imaging research in Saskatchewan. The grant includes \$3.5 million to recruit leading researchers to the province and establish academic research programs, as well as up to \$1.7 million for research equipment and infrastructure. \$1.3 million of this grant will support the Fedoruk Chair in Radiopharmacy for a period of 5 years, including graduate students and start-up costs.

Saskatchewan-GlaxoSmithKline Research Chair in Drug Discovery and Development

The University of Saskatchewan is actively recruiting for the Saskatchewan-GlaxoSmithKline Research Chair in Drug Discovery and Development. The chair is made possible through an endowment funded by GlaxoSmithKline, through its Pathfinders Fund for Leaders in Canadian Health Science Research and by the Canadian Institutes of Health Research, the Government of Saskatchewan, SaskTel, the University of Saskatchewan, and the College of Pharmacy and Nutrition.

Service Activities

Continuing Professional Development for Pharmacy Professionals

Congratulations to **Dr. Charity Evans** who is the new Director of Continuing Professional Development for Pharmacy Professionals. We would like to thank **Dr. Linda Suveges** for her years of service to this position and wish her all the best in her well-deserved retirement.

Congratulations to **Danielle Larocque** who has been appointed as the first Associate Director of CPDPP. The CPDPP program is undergoing significant renewal, including an updated focus and enhanced role to develop, implement, support and evaluate lifelong learning opportunities for pharmacists and pharmacy technicians, primarily within the province of Saskatchewan. This new Associate Director position will play a critical role in successfully achieving this goal while overseeing the operations of the CPDPP office.

medSask, Your Medication Information Service

Between April 1, 2015 and March 31, 2016, the medication information service received a total of 7893 queries: 3049 from healthcare professionals and 4844 from consumers, which is an increase of 370 queries (5 %) compared to the previous year's total.

Medication Assessment Centre

The Medication Assessment Centre received the Patient Care Enhancement Award from the Canadian Society of Hospital Pharmacists on January 31 in Toronto. MAC received the award based on their submission which highlighted how the centre provides easy access for patients to medication assessments, while helping both healthcare professionals and students learn more about medication therapy.

Communications, Alumni Relations, and Development

Communications

News and information from the College is posted to our website and social media on a regular basis, and you can stay connected to us with the following links.

Website: pharmacy-nutrition.usask.ca

Facebook: www.facebook.com/usaskPharmNut

Twitter: www.twitter.com/usaskPharmNut

Instagram: www.instagram.com/usaskPharmNut

The College releases its **Dean's Newsletter** every two months, which summarizes all of our news and events. The newsletter is posted to our website and social media, and emailed to our alumni. If you haven't received the newsletter in 2016, please contact **Kieran Kobitz**, Communications and Alumni Relations Specialist, at kieran.kobitz@usask.ca to update your email address and other contact information.

Alumni Events

The college held its annual alumni events throughout 2016, including Sask Night at the Canadian Pharmacists Association Conference in Calgary, the dessert and hospitality suite at the Pharmacy Association of Saskatchewan Conference at Elk Ridge Resort, and the hospitality suite at the Dietitians of Canada Conference in Winnipeg.

The college also visited Vancouver and Calgary to connect with local alumni at smaller, more personal gatherings. Dates and locations for our upcoming alumni events in 2017 will be announced in our newsletter, on our website, and on social media.

Development

- **Dr. Gordon J. Duff Gift**

Alumnus and former faculty member **Dr. J. Gordon Duff's** generous gift to the college includes \$25,000 for historical archival purposes, and the remaining \$260,000 is to be used at the discretion of the Dean of Pharmacy and Nutrition

- **Frank and Phyllis Abbot Legacy Fund**

On Wednesday, September 28, **Frank and Phyllis Abbott** met with Dean Kishor Wasan in Vancouver to sign the paperwork for the Frank and Phyllis Abbott Legacy Fund at the College of Pharmacy and Nutrition. The fund will support the college's priority areas, as determined by the Dean

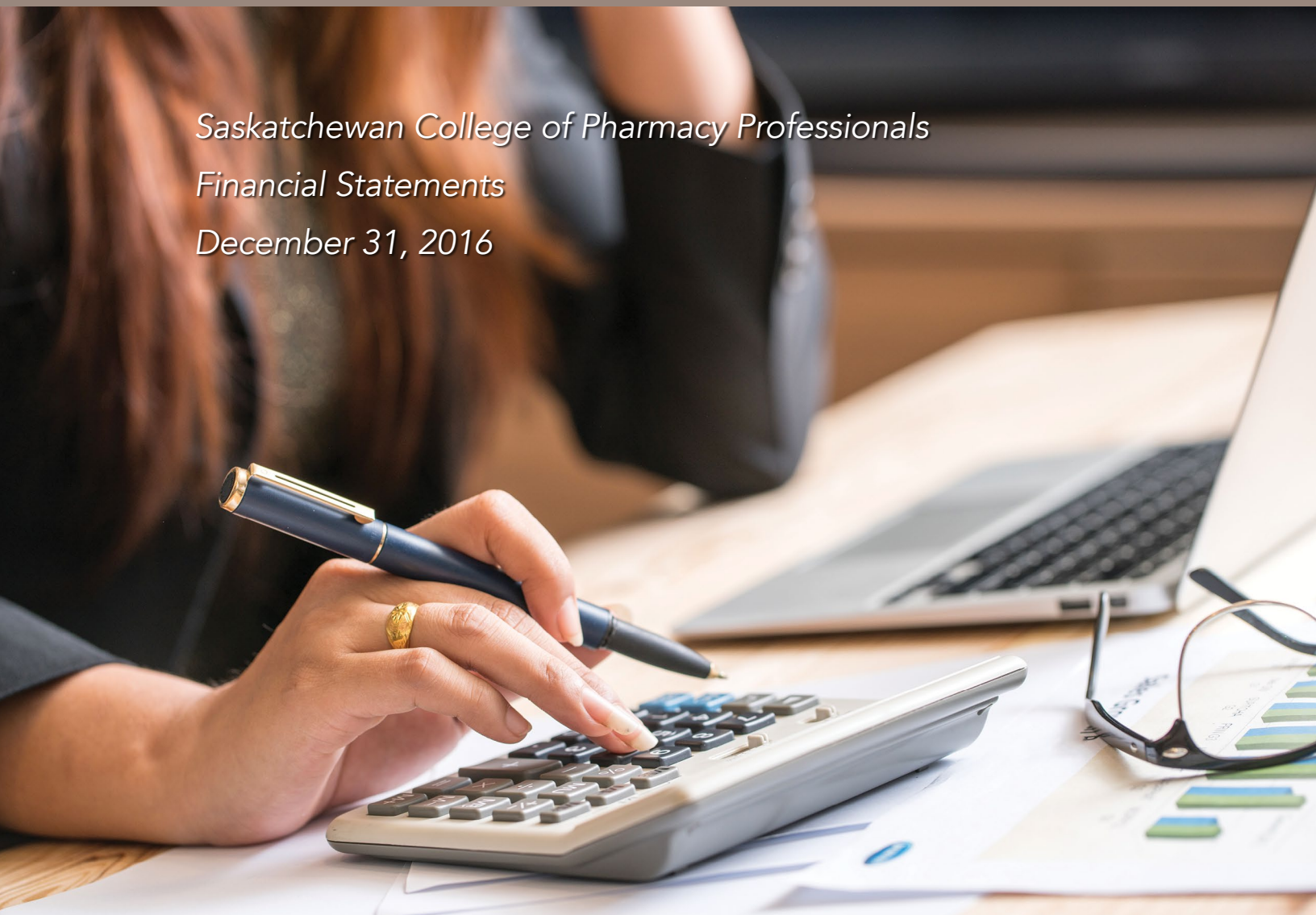
Concluding Remarks

Our faculty, staff, and students were all very busy in 2016, and 2017 promises to be just as busy and exciting. We've reconnected with alumni, we're ready to begin the new PharmD program, and our faculty and students have been recognized on the national and international level for their hard work. I look forward to continuing work in 2017 as the College grows and the pharmacy profession evolves.

This report is respectfully submitted,

Kishor M. Wasan,
Professor and Dean

*Saskatchewan College of Pharmacy Professionals
Financial Statements
December 31, 2016*





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www.deloitte.ca

Independent Auditor's Report

To the Members of **Saskatchewan College of Pharmacy Professionals**

We have audited the accompanying financial statements of Saskatchewan College of Pharmacy Professionals, which comprise the statement of financial position as at December 31, 2016, and the statements of operations and changes in fund balances and cash flows for the year then ended and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of Saskatchewan College of Pharmacy Professionals as at December 31, 2016, and the results of its operations and its cash flow for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Chartered Professional Accountants
Licensed Professional Accountants

May 5, 2017
Regina, Saskatchewan

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS**Statement of Financial Position**

As at December 31, 2016

	2016			2015 Total
	Operating Fund	Capital and Intangible Asset Fund	Total	
CURRENT ASSETS				
Cash	\$ 93,088	\$ -	\$ 93,088	\$ 178,636
Marketable securities (Note 3)	2,579,425	108,164	2,687,589	2,534,630
Accounts receivable	41,472	-	41,472	9,811
Due from the SCP Centennial Scholarship Fund Inc. (Note 11)	6,609	-	6,609	6,609
Prepaid expenses	35,606	-	35,606	17,701
	2,756,200	108,164	2,864,364	2,747,387
CAPITAL ASSETS (Note 4)	-	155,763	155,763	181,156
INTANGIBLE ASSETS (Note 5)	-	-	-	4,957
	\$ 2,756,200	\$ 263,927	\$ 3,020,127	\$ 2,933,500
CURRENT LIABILITIES				
Accounts payable (Note 6)	\$ 72,324	\$ -	\$ 72,324	\$ 85,013
Government remittances payable	22,415	-	22,415	19,190
Fees and licences collected in advance	1,345,906	-	1,345,906	1,264,382
Current portion of obligations under capital leases (Note 7)	-	2,518	2,518	3,717
	1,440,644	2,518	1,443,162	1,372,302
OBLIGATIONS UNDER CAPITAL LEASES (Note 7)	-	-	-	2,518
	1,440,644	2,518	1,443,162	1,374,820
FUND BALANCES				
Invested in capital and intangible assets	-	153,245	153,245	179,878
Externally restricted for building development	-	108,164	108,164	105,610
Unrestricted	1,315,555	-	1,315,555	1,273,192
	1,315,555	261,409	1,576,964	1,558,680
	\$ 2,756,200	\$ 263,927	\$ 3,020,127	\$ 2,933,500

Commitments (Note 10)

See accompanying notes

Approved by Council

.....
Councillor.....
Councillor

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS**Statement of Operations and Changes in Fund Balances**

Year ended December 31, 2016

	Operating Fund 2016	Operating Fund 2015	Capital and Intangible Asset Fund 2016	Capital and Intangible Asset Fund 2015	Total 2016	Total 2015
REVENUES						
Fees and licences (Schedule 1)	\$ 2,347,998	\$ 2,227,741	\$ -	\$ -	\$ 2,347,998	\$ 2,227,741
Sundry (Schedule 2)	37,096	29,504	-	-	37,096	29,504
Investment income	50,777	76,833	3,449	6,818	54,226	83,651
	2,435,871	2,334,078	3,449	6,818	2,439,320	2,340,896
EXPENSES						
Administration (Schedule 3)	1,785,195	1,594,981	-	-	1,785,195	1,594,981
Amortization	-	-	30,350	53,978	30,350	53,978
Continuing education	96,986	93,900	-	-	96,986	93,900
Contribution	-	-	-	-	-	-
Council	113,053	73,706	-	-	113,053	73,706
Delegates	12,269	9,036	-	-	12,269	9,036
Interest	-	-	895	599	895	599
Legal and audit	121,600	161,200	-	-	121,600	161,200
Miscellaneous	5,144	545	-	-	5,144	545
Other committees	72,248	63,266	-	-	72,248	63,266
Public and professional relations	183,296	151,877	-	-	183,296	151,877
	2,389,791	2,148,511	31,245	54,577	2,421,035	2,203,088
Excess (deficiency) of revenues over expenses	46,080	185,567	(27,796)	(47,759)	18,284	137,808
Fund balance, beginning of year	1,273,192	1,099,518	285,488	321,354	1,558,680	1,420,872
Interfund transfers (Note 8)	(3,717)	(11,893)	3,717	11,893	-	-
FUND BALANCE, END OF YEAR	\$ 1,315,555	\$ 1,273,192	\$ 261,409	\$ 285,488	\$ 1,576,964	\$ 1,558,680

See accompanying notes

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS**Statement of Cash Flows**

Year ended December 31, 2016

	2016	2015
CASH FLOWS FROM (USED IN)		
OPERATING ACTIVITIES		
Excess of revenues over expenses	\$ 18,284	\$ 137,808
Items not affecting cash		
Amortization	30,350	53,978
Unrealized (gain) loss on marketable securities	(2,959)	17,716
Net change in non-cash working capital balances (Note 9)	22,494	58,594
	68,169	268,096
CASH FLOWS FROM (USED IN)		
INVESTING ACTIVITIES		
Capital asset purchases	-	(3,974)
Purchase of marketable securities	(1,500,000)	(1,850,000)
Redemption of marketable securities	1,350,000	1,412,223
Capital lease principal payments	(3,717)	(8,198)
	(153,717)	(449,949)
DECREASE IN CASH DURING THE YEAR	(85,548)	(181,853)
CASH, BEGINNING OF YEAR	178,636	360,489
CASH, END OF YEAR	\$ 93,088	\$ 178,636

See accompanying notes

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

Notes to the Financial Statements

December 31, 2016

1. PURPOSE OF THE COLLEGE

Saskatchewan College of Pharmacy Professionals (the “College”) is the statutory governing and self-regulating body for the pharmacy profession in Saskatchewan. It is incorporated under the Pharmacy Act as a not-for-profit organization and is exempt from income tax under Section 149 of the Income Tax Act. E

2. SIGNIFICANT ACCOUNTING POLICIES

These financial statements have been prepared in accordance with Canadian accounting standards for not-for profit organizations. The following accounting policies are considered to be significant:

a) Fund accounting

The College follows the restricted fund method of accounting for contributions. The accounts of the College are maintained in accordance with the principles of fund accounting in order that limitations and restrictions placed on the use of available resources are observed. Under fund accounting, resources are classified for accounting and reporting purposes into funds with activities or objectives specified. For financial reporting purposes, the accounts have been classified into the following funds:

i) *Operating Fund*

The Operating Fund consists of the general operations of the College.

ii) *Capital and Intangible Asset Fund*

The Capital and Intangible Asset Fund has been established for the purpose of funding capital acquisitions and is an accumulation of direct contributions and that portion of the operating fund, which has been allocated to the fund at the discretion of the College’s Council. The fund is increased by investment income earned on the investment of contributions and is reduced by amortization and interest on related lease obligations.

b) Use of estimates

The preparation of financial statements requires management to make estimates and assumptions that affect reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the period. Actual results could differ from those estimates.

c) Cash

Cash consists of cash on hand and balances with banks.

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

Notes to the Financial Statements

December 31, 2016

2. SIGNIFICANT ACCOUNTING POLICIES (continued)

d) Revenue recognition

Fees are recorded as revenue over the applicable membership period or when the fee is fixed or determinable and collectability is reasonably assured. Fees and licenses received in advance are recorded as fees and licenses collected in advance and recognized into revenue during the appropriate period.

Fees and licenses collected in advance at December 31, 2016 relate to the membership year July 1, 2016 through June 30, 2017 and to the permit year December 1, 2016 through November 30, 2017.

e) Financial instruments

The College initially measures its financial assets and financial liabilities at fair value. The College subsequently measures all its financial assets and financial liabilities at amortized cost, except for marketable securities that are quoted in an active market (money market pool funds, bonds and equities) which are measured at fair value. Changes in fair value are recognized in the statement of operations and changes in fund balances.

Transaction costs, except for those assets measured at fair value, are added to the carrying value of the asset or netted against the carrying value of the liability and are then recognized using the effective interest method. Any premium or discount related to an instrument measured at amortized cost is amortized over the expected life using the effective interest method and recognized in net earnings as investment income or interest expense.

With respect to financial assets measured at cost or amortized cost, the College recognizes in net earnings an impairment loss, if any, when it determines that a significant adverse change has occurred during the period in the expected timing or amount of future cash flows. When the extent of impairment of a previously written-down asset decreases and the decrease can be related to an event occurring after the impairment was recognized, the previously recognized impairment loss shall be reversed in net earnings in the period the reversal occurs.

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

Notes to the Financial Statements

December 31, 2016

2. SIGNIFICANT ACCOUNTING POLICIES (continued)

f) Capital assets

Capital assets are recorded at cost. When capital assets are sold or retired, the related costs and accumulated amortization are removed from the respective accounts and any gain or loss is reflected in the statement of operations and changes in fund balances. Expenditures for repairs and maintenance are charged to operations as incurred.

Capital assets are amortized over their estimated useful lives using the following methods and rates:

Building	straight line over 30 years
Equipment	33% declining balance
Equipment under capital lease	straight line over 3 to 4 years
Furniture and fixtures	20% declining balance
Leasehold improvements	straight line over 20 years

g) Intangible assets

Intangible assets consist of software and are accounted for at cost. The software is amortized over its useful life of 5 years using the straight line method.

h) Impairment of long lived assets

When an item in capital assets no longer has any long-term service potential to the College, the excess of its net carrying amount over any residual value is recognized as an expense in the statement of operations and changes in fund balances. Write downs are not reversed.

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS**Notes to the Financial Statements**

December 31, 2016

3. MARKETABLE SECURITIES

Marketable securities consist of Canadian and International Bonds and Canadian, US, International and Global Equities. The fair values which represent the carrying values are as follows:

Operating Fund	2016	2015
	Fair Value	Fair Value
Fixed income	2,579,425	2,429,020
	\$ 2,579,425	\$ 2,429,020
Capital and Intangible Asset Fund	2016	2015
	Fair Value	Fair Value
Fixed income	\$ 68,050	\$ 63,022
Equities	40,114	42,588
	\$ 108,164	\$ 105,610
Total	2016	2015
	Fair Value	Fair Value
Fixed income	2,647,475	2,492,042
Equities	40,114	42,588
	\$ 2,687,589	\$ 2,534,630

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS**Notes to the Financial Statements**

December 31, 2016

4. CAPITAL ASSETS

	2016			2015
	Cost	Accumulated Amortization	Net Book Value	Net Book Value
Land	\$ 15,000	\$ -	\$ 15,000	\$ 15,000
Building	336,039	273,811	62,228	73,429
Equipment	255,764	247,495	8,269	12,342
Equipment under capital lease	14,704	12,202	2,501	5,989
Furniture and fixtures	94,903	85,344	9,559	11,793
Leasehold improvements	87,943	29,737	58,206	62,603
	\$ 804,353	\$ 648,589	\$ 155,763	\$ 181,156

5. INTANGIBLE ASSETS

	2016			2015
	Cost	Accumulated Amortization	Net Book Value	Net Book Value
Software	\$ 99,150	\$ 99,150	\$ -	\$ 4,957

6. ACCOUNTS PAYABLE

	2016	2015
Trade	\$ 47,660	\$ 60,349
Funds held in trust	24,664	24,664
	\$ 72,324	\$ 85,013

Funds held in trust are held on behalf of the Integrated Primary Health Care Working Group ("IPHCWG"). The College is responsible to ensure all funds are expended exclusively on primary health services workshops and education. Any unused funds may remain with the College for use by the IPHCWG and documentation regarding the actual costs will be submitted to Saskatchewan Health upon request.

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS**Notes to the Financial Statements**

December 31, 2016

7. OBLIGATIONS UNDER CAPITAL LEASES

The following is a schedule of future minimum lease payments under capital leases:

2017	2,750
	2,750
Less amount representing interest	(232)
	2,518
Less current portion	(2,518)
	\$ -

8. INTERFUND TRANSFERS

Amounts transferred from the Operating Fund of \$3,717 (2015 - \$11,893) to the Capital and Intangible Asset Fund were made in order to fund the cash outlays for capital and intangible asset acquisitions and the obligations under capital leases.

9. NET CHANGE IN NON-CASH WORKING CAPITAL BALANCES

	<u>2016</u>	<u>2015</u>
DECREASE (INCREASE) IN ASSETS		
Accounts receivable	\$ (31,661)	\$ 51,671
Due from the SCP Centennial Scholarship Fund Inc.	-	(237)
Prepaid expenses	(17,905)	(4,958)
INCREASE (DECREASE) IN LIABILITIES		
Accounts payable	(12,689)	(34,181)
Government remittances payable	3,225	2,466
Fees and licences collected in advance	81,524	43,833
	<u>\$ 22,494</u>	<u>\$ 58,594</u>

10. COMMITMENTS

The College is committed under an operating agreement relating to system support as long as the system remains in operation or until the contract is terminated. The annual aggregate commitment is \$11,700.

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

Notes to the Financial Statements

December 31, 2016

11. RELATED PARTY TRANSACTIONS

The College and the SCP Centennial Scholarship Fund Inc. are common control organizations since they have the same board of directors.

All transactions were carried out in the normal course of operations and are recorded at the exchange value. This value corresponds to the consideration agreed upon by the parties and is determined based on the costs incurred.

12. FINANCIAL INSTRUMENTS

Credit risk

The College's principal financial assets are cash, marketable securities and accounts receivable, which are subject to credit risk. The carrying amounts of financial assets on the statement of financial position represent the College's maximum credit exposure at the statement of financial position date.

The credit risk on cash and marketable securities is limited because the counterparties are chartered banks with high credit-ratings assigned by national credit-rating agencies and fixed term investments of a high credit quality. The College also limits its exposure by ensuring that it has invested in a diversified portfolio and that there is no large exposure to any one issuer.

Liquidity risk

Liquidity risk is the risk of being unable to meet cash requirements or to fund obligations as they become due.

The College manages its liquidity risk by constantly monitoring forecasted and actual cash flows and financial liability maturities, and by holding assets that can be readily converted into cash.

Accounts payable are generally repaid within 30 days.

Interest rate risk

The College is exposed to interest rate risk on its fixed and floating interest rate financial instruments. Fixed-rate instruments subject the College to a fair value risk while the floating rate instruments subject it to a cash flow risk. The College is exposed to this type of risk as a result of investments in money market pool funds and bonds.

Other price risk

Other price risk associated with investments in equities is the risk that their fair value will fluctuate because of changes in market prices. The College mitigates the risk by regularly rebalancing its portfolio and keeping the equity portfolio below 2% of the entire marketable security portfolio.

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS Schedule of Fees and Licences - Schedule 1

Year ended December 31, 2016

	2016	2015
Amendments	\$ 9,590	\$ 16,520
Non-practising members	56,237	53,680
Other fees	62,082	53,480
Pharmacy (permits)	519,505	518,246
Practising members (licences)	1,614,004	1,525,205
Registration	86,580	60,610
	\$ 2,347,998	\$ 2,227,741

Draft

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS**Schedule of Sundry Revenue - Schedule 2**

Year ended December 31, 2016

	<u>2016</u>	<u>2015</u>
Expense recoveries	\$ 2,378	\$ 3,148
Other	6,718	9,356
Recovery of discipline costs	28,000	17,000
	<u>\$ 37,096</u>	<u>\$ 29,504</u>

Draft

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS
Schedule of Administrative Expenditures - Schedule 3
Year ended December 31, 2016

	<u>2016</u>	<u>2015</u>
Accounting	\$ 18,428	\$ 17,798
Automobile	15,016	9,355
Building operations	33,442	34,055
Employee benefits	123,198	125,555
Equipment rental and maintenance	83,823	75,371
General office	161,178	150,967
Postage	14,239	10,178
Printing and stationary	23,977	20,077
Registrar and inspector	134,965	96,074
Salaries	1,157,476	1,036,543
Telephone and fax	19,453	19,008
	<u>\$ 1,785,195</u>	<u>\$ 1,594,981</u>

Draft

**SCP CENTENNIAL SCHOLARSHIP
FUND INC.**

FINANCIAL STATEMENTS

December 31, 2016



Deloitte LLP
2103 - 11th Avenue
Mezzanine Level
Bank of Montreal Building
Regina, SK S4P 3Z8
Canada

Tel: 306-565-5200
Fax: 306-757-4753
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Independent Auditor's Report

To the Directors of **SCP Centennial Scholarship Fund Inc.**

We have audited the accompanying financial statements of SCP Centennial Scholarship Fund Inc., which comprise the statement of financial position as at December 31, 2016, and the statements of operations and changes in net assets and cash flows for the year then ended and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of SCP Centennial Scholarship Fund Inc. as at December 31, 2016, and the results of its operations and its cash flow for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Chartered Professional Accountants
Licensed Professional Accountants

May 5, 2017
Regina, Saskatchewan

SCP Centennial Scholarship Fund Inc.**Statement of Financial Position**

As at December 31, 2016

	<u>2016</u>	<u>2015</u>
ASSETS		
Cash	\$ 18,120	\$ 22,895
Marketable securities (Note 3)	278,717	277,930
	\$ 296,837	\$ 300,825
LIABILITIES		
Accounts payable	\$ 8,885	\$ 6,858
Due to the Saskatchewan College of Pharmacy Professionals	6,609	6,609
	15,494	13,467
NET ASSETS		
Net assets	281,343	287,358
	\$ 296,837	\$ 300,825

See accompanying notes

Draft

SCP Centennial Scholarship Fund Inc.
Statement of Operations and Changes in Net Assets
Year ended December 31, 2016

	<u>2016</u>	<u>2015</u>
REVENUE		
Investment income	\$ 5,738	\$ 8,823
	5,738	8,823
EXPENDITURES		
Accounting and legal	9,753	10,262
Scholarship	2,000	-
	11,753	10,262
Deficiency of revenue over expenditures	(6,015)	(1,439)
Net assets, beginning of year	287,358	288,797
Net assets, end of year	\$ 281,343	\$ 287,358

See accompanying notes

Draft

SCP Centennial Scholarship Fund Inc.**Statement of Cash Flows**

Year ended December 31, 2016

	<u>2016</u>	<u>2015</u>
CASH FLOWS FROM (USED IN)		
OPERATING ACTIVITIES		
Deficiency of revenues over expenditures	\$ (6,015)	\$ (1,439)
Unrealized (gain) loss marketable securities	(787)	715
Net change in non-cash working capital balances (Note 4)	2,027	1,424
	(4,775)	700
(DECREASE) INCREASE IN CASH DURING THE YEAR	(4,775)	700
CASH, BEGINNING OF YEAR	22,895	22,195
CASH, END OF YEAR	\$ 18,120	\$ 22,895

See accompanying notes

Draft

SCP Centennial Scholarship Fund Inc.

Notes to the Financial Statements

Year ended December 31, 2016

1. PURPOSE OF THE SCHOLARSHIP FUND

The SCP Centennial Scholarship Fund Inc. (the “Fund”) is a single purpose fund with restrictions to pay scholarships and bursaries to qualified students at the College of Pharmacy and Nutrition at the University of Saskatchewan.

The Fund is registered as a Charitable Foundation with Canada Revenue Agency and is exempt from income tax.

2. SIGNIFICANT ACCOUNTING POLICIES

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations. The following accounting policies are considered to be significant:

a) Use of estimates

The preparation of financial statements requires management to make estimates and assumptions that affect reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the period. Actual results could differ from those estimates.

b) Financial instruments

The Fund initially measures its financial assets and financial liabilities at fair value. The Fund subsequently measures all its financial assets and financial liabilities at amortized cost, except for marketable securities that are quoted in an active market (money market pool funds and bonds) which are measured at fair value. Changes in fair value are recognized in the statement of operations and changes in net assets.

Transaction costs, except for those assets measured at fair value, are added to the carrying value of the asset or netted against the carrying value of the liability and are then recognized using the effective interest method. Any premium or discount related to an instrument measured at amortized cost is amortized over the expected life using the effective interest method and recognized in net earnings as investment income or interest expense.

With respect to financial assets measured at cost or amortized cost, the Fund recognizes in net earnings an impairment loss, if any, when it determines that a significant adverse change has occurred during the period in the expected timing or amount of future cash flows. When the extent of impairment of a previously written-down asset decreases and the decrease can be related to an event occurring after the impairment was recognized, the previously recognized impairment loss shall be reversed in net earnings in the period the reversal occurs.

SCP Centennial Scholarship Fund Inc.
Notes to the Financial Statements
Year ended December 31, 2016

2. SIGNIFICANT ACCOUNTING POLICIES (continued)

c) Revenue recognition

The Fund receives contributions from the Saskatchewan College of Pharmacy Professionals. These unrestricted contributions are recognized as revenue when they are received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

3. NET CHANGE IN NON-CASH WORKING CAPITAL BALANCES

Marketable securities consist of Canadian and International Bonds. The fair values which represent the carrying values are as follows:

Operating Fund	2016	2015
	Fair Value	Fair Value
Fixed income	278,717	277,930
	\$ 278,717	\$ 277,930

4. NET CHANGE IN NON-CASH WORKING CAPITAL BALANCES

	2016	2015
INCREASE IN LIABILITIES		
Accounts payable	\$ 2,027	1,188
Due to the Saskatchewan College of Pharmacy Professionals	-	236
	\$ 2,027	\$ 1,424

5. RELATED PARTY TRANSACTIONS

The Fund and the Saskatchewan College of Pharmacy Professionals are common control organizations since they have the same board of directors.

All transactions were carried out in the normal course of operations and are recorded at the exchange value. This value corresponds to the consideration agreed upon by the parties and is determined based on the costs incurred.

SCP Centennial Scholarship Fund Inc.

Notes to the Financial Statements

Year ended December 31, 2016

6. FINANCIAL INSTRUMENTS

Credit risk

The Fund's principal financial assets are cash and marketable securities, which are subject to credit risk. The carrying amounts of financial assets on the statement of financial position represent the Fund's maximum credit exposure at the statement of financial position date.

Liquidity risk

Liquidity risk is the risk of being unable to meet cash requirements or to fund obligations as they become due.

The Fund manages its liquidity risk by constantly monitoring forecasted and actual cash flows and financial liability maturities, and by holding assets that can be readily converted into cash.

Accounts payable are generally repaid within 30 days.

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The Fund is exposed to interest rate risk on its fixed and floating interest rate financial instruments. Fixed-rate instruments subject the Fund to a fair value risk while the floating rate instruments subject it to a cash flow risk. The Fund is exposed to this type of risk as a result of investments in money market pool funds and bonds.

Other price risk

Other price risk associated with investments in equities is the risk that their fair value will fluctuate because of changes in market prices. The Fund mitigates the risk by regularly rebalancing its portfolio.



ANNUAL REPORT
2016