



# ANNUAL REPORT 2015

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# Mission

The Saskatchewan College of Pharmacy Professionals regulates the profession of pharmacy to provide safe, effective, patient-centred pharmacy care in Saskatchewan.

Vision

Quality Pharmacy Care in Saskatchewan

# Values

- Visionary Leadership
- Professionalism
- "Patient First" Care
- Accountability
- Effective Communication
- Collaboration
- Education

# **Strategic Goals**

- Public Safety
- Standardized Pharmacy Services
- A Self-Regulated Profession
- Positive Image and Essential Members of the Health Care Team
- Public Policy Supporting Health
- Optimum Public Use of Pharmacy Services
- Priority and Resource Allocation

# **Key Action Areas**

- Increased Public Involvement
- Organizational Structure Review
- Practice Re-design and Regulatory Reform
- Citizenship in the Saskatchewan College of Pharmacy Professionals (SCPP)

# **105th Annual General Meeting**

#### AGENDA

April 30, 2016 Elkridge Resort, Waskesiu, Saskatchewan President: Bill Gerla Registrar: Ray Joubert

- 1.0 President's Welcome
- 2.0 Introduction of Councillors and Special Guests
- 3.0 Motion to Accept 2015 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 When I accepted the presidency, I reflected on the amount of change the profession has experienced during my 30 plus years of practice and the need for strong advocacy to ensure the profession remains relevant throughout an ever-changing environment. As a result of the historical events of this past year, I am more convinced than ever that this is true.

History was made with the proclamation of Bill 151 into force on October 5, 2015. The Bill was "An Act to amend *The Pharmacy Act, 1996* and to make consequential amendments to other Acts."

To summarize the main provisions, the Bill:

Changes the name of the Act to The Pharmacy and Pharmacy Disciplines Act; (the "Act");

2 Changes the name of the College to the Saskatchewan College of Pharmacy Professionals (SCPP);

# History was made with the proclamation of Bill 151

- 3 Authorizes:
  - **a.** SCPP to regulate pharmacy technicians as licensed members practising in an independent defined scope of practice with title protection,
  - b. pharmacists to administer drugs by injection and other routes, and,
  - c. pharmacists to order, access and use medical laboratory tests.

The Bill accomplishes a number of the College's strategic goals and supports the evolution of pharmacy care in our province. Work continues to achieve successful implementation of this legislation, but in particular I want to acknowledge the efforts of members and partners in the successful implementation of administration of drugs by injection to prepare pharmacists to administer flu vaccinations. We are grateful for the role played by the Pharmacy Association of Saskatchewan, Population Health and Drug Plan and Extended Benefits Branches of the Ministry of Health, and Continuing Professional Development for Pharmacists and medSask at the University of Saskatchewan. However, I particularly commend all members who took the training for their vision and commitment to providing this service.

I also take this opportunity to welcome pharmacy technicians to the profession. As they become registered as members and licensed to practice independently within a defined scope and with title protection, we look forward to their contributions to enhancing pharmacy practice.

# **Progress in Four Key Action Areas**

As our strategic plan is nearing the end of its time horizon and we prepare for renewal, we continue to progress with each of our key action areas. To summarize, these include:

- (1) **Increased public involvement** (to improve communications and public engagement in our decision making)
  - Engaging patients in the next phase of our minor ailments prescribing research
  - Bill 151 increases the number of public members on our Council to up to four, while we continue to explore how we can engage the public on other aspects of our operation and policy making
- (2) Organizational structure review (to meet the needs of members and the public and to reduce the burden of discipline on SCPP)
  - We are examining how regulated pharmacy technicians are elected to serve on Council
  - Continued streamlining our complaints management with an online submission and management process and the use of alternative dispute resolution
  - Achieved our target reserve fund to cover catastrophic discipline costs
  - Continued publication of discipline decisions and orders in a publicly accessible database maintained by the Canadian Legal Institute
  - Continued refinement of our Council "knowledge-based strategic decision-making" model
- (3) **Practice re-design** (to focus on quality so that pharmacy practice effectively meets public needs) and regulatory reform (to ensure that our governing legislation, standards and policies are contemporary and support the profession)
  - Implementing scope of practice expansion (administration of drugs by injection and other routes; ordering, accessing and using medical laboratory tests; remaining prescriptive authority elements)
  - Examining strategies to effectively incorporate pharmacy technicians into practice
  - Continued participation in planning and implementation of PIP CeRx integration with pharmacy systems
  - Participation in the PIP Quality Improvement Project
  - Hiring a Primary Health Care Coordinator to advance the role of the pharmacist in primary care
  - COMPASS pilot project support has exceeded our expectations as we extended Phase II of our pilot project into Phase III to increase recruitment from 80 to 120 participating pharmacies

(4) Citizenship in SCPP (to have a more engaged membership)

- Refined our social media strategy for members only
- Website functionality improvements continue to more actively engage members
- Email communications continued
- Continued regional and other educational meetings (e.g. administration of drugs by injection update) in partnership with the Pharmacy Association of Saskatchewan (PAS), with members able to join by telehealth, webinar or in person

#### Other highlights from the Key Action Areas during the year include:

- Completed new regulatory bylaws pursuant to the new *Act*, in particular:
  - Registration and licensing requirements for pharmacy technicians
  - Standards of competency for pharmacists administering drugs along with certification requirements for administration by injection
  - Standards of competency and practice for pharmacists accessing, ordering, using, interpreting and conducting medical laboratory tests
  - Drug scheduling by reference to the National Association of Pharmacy Regulatory Authorities Model Drug Schedule III
- Published policy statements and guidance documents for members respecting the foregoing
- Supported an ad hoc working group to develop strategies to play a lead role in preventing prescription drug abuse
- Continued to monitor developments in other provinces banning rewards and inducements on the purchase of prescriptions
- Continued developing strategies to address professional service quotas
- Continued to plan for implementation of prescriptive authority for pharmacists by planning to add the remaining minor ailments conditions, along with oral contraceptives as adjunct to emergency contraception and smoking cessation agents as adjuncts to established smoking cessation programs
- Continued regular meetings with PAS and the Saskatchewan Branch of the Canadian Society of Hospital Pharmacists

During 2016, we plan to undertake a strategic planning session to review and revise our plan that is expiring.



### **Progress in Strategic Goals**

As Council continues to refine our "knowledge-based strategic" decision-making framework, our former Ends have become strategic goals that we monitor at each meeting. We routinely examine results we expect to achieve, for whose benefit and at what cost. These goals are summarized in this report's covering pages.

We continue to use councillor reports on public and member linkage opportunities to adjust our priorities. An example of this was Council's adjustments to our policies respecting administration of drugs to reflect member and public feedback.

The following demonstrates other ways in which we are achieving these goals:



#### (1) Priority and Resource Allocation

Council continued to prioritize resource allocation to the three highest priorities (public safety, standardized pharmacy services and pharmacist as a member of the health care team). We continue to meet or exceed restricted and unrestricted reserve targets to help fund unforeseen, unprecedented or extenuating circumstances.

Council continues to examine how regulatory barriers can be reduced or eliminated. We welcomed Chet Mack, pharmacist, and Mark Hawkins, public member, of Regina as new councillors and Darren Bogle as the new student representative. We also welcomed Lyndsay Ratzlaff and Jonina Code as pharmacy technician/assistant observers. We recognized the contributions of Barbara deHaan whose term expired as public member, Barry Lyons as he concluded his term as past president, Jarron Yee as his term for Division 5 ended, and Karolina Koziol as student observer.

#### (2) Public Policy Supporting Health

As mentioned earlier, we added staff to enhance the role of the pharmacist in primary health care.

(3) Optimum Public Use of Pharmacy Services and the Pharmacist as a Member of the Health Care Team

Council continues our involvement with the Pharmacy Coalition on Primary Care, with ongoing liaison with the Primary Health Services Branch of Saskatchewan Health and other stakeholders to promote pharmacists as effective members of primary health care teams.

Council continues to examine how regulatory barriers can be reduced or eliminated. Bill 151 has addressed some of these barriers.

The College actively participates in the advisory committee and working groups developing the Pharmaceutical Information Program and other e-health strategies.

#### (4) Public Safety

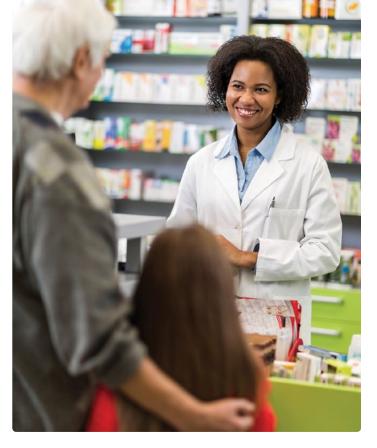
This End includes our role to ensure competent, ethical pharmacists and public recourse for unsafe or unethical care. Our Complaints and Discipline Committees were very active during the year and more information can be found in the Registrar's report.

A major development was the extension of Phase II of our COMPASS pilot project due to other priorities shifting member focus away from the pilot. It is developing as a demonstration model as we intend to implement the program provincewide based upon our learnings from the pilot.

#### (5) A Self-Regulated Profession

We partnered with PAS in their regional and educational meetings to reach members on important regulatory issues.

We continue to offer the designation of Members Emeriti at our annual general meeting, and have added the new Emerald Award to recognize long-term service as a pharmacist.



#### (6) Positive Professional Image

Achieving this goal includes dialogue within our profession and with others, in particular medicine, to cooperatively resolve issues of mutual concern. This included continued dialogue with the Prescription Review Program funding partners (i.e. College of Physicians and Surgeons of Saskatchewan, the College of Dental Surgeons of Saskatchewan, Saskatchewan Health and the Saskatchewan Registered Nurses' Association). These discussions enhance our role under the program.

We met with the Board of PAS to share information respecting issues of mutual interest, mostly relating to strategize on how to manage our evolving scope of practice and other changes within the profession.

#### Other general highlights of 2015 include:

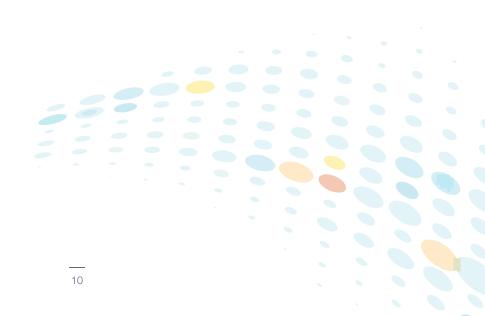
- Hosted the annual Convocation Luncheon to welcome the Pharmacy Class of 2015 into the profession
- SCPP was represented at the College of Pharmacy and Nutrition White Coat Ceremony in November welcoming first year students into the profession, and the Academic Award Ceremony in January to recognize student achievements
- Continued attempts towards a closer liaison with the Saskatchewan Branch of the Canadian Society of Hospital Pharmacists
- Continued to search for representation on the Senates of the Universities of Regina and Saskatchewan
- We serve 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) Centennial Conference in Ottawa

This is a summary of our accomplishments during 2015. 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 honoured to have served as president of the College. I extend my appreciation to the foregoing for their support in achieving our mission of "regulating the profession of pharmacy to provide safe, effective, patient-centred pharmacy care in Saskatchewan."

Respectfully submitted,

Bill Gerla, President



# **Report of the Registrar-Treasurer**



R. J. Joubert Registrar-Treasurer

President Gerla and members of the College:

I am pleased to present my thirty-first 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 includes 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 is managing 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:

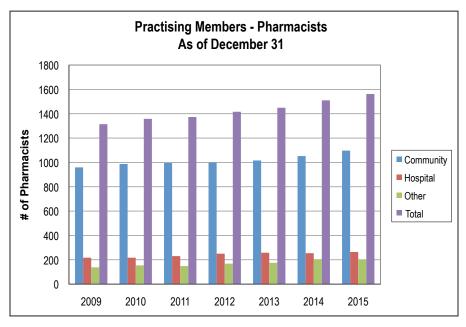
 Overall our financial position is healthy. Increasing numbers of members and pharmacies, with financial control strategies to achieve budget targets, such as restraining costs in areas directly under our control, results in a healthy operating surplus of \$185,567. The accumulation of surpluses over the last few years has helped in achieving 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 second year in a row, a record number of graduates from other jurisdictions became registered, both exceeding attrition For the first time, we are pleased to acknowledge the registration and licensure of six pharmacy technicians

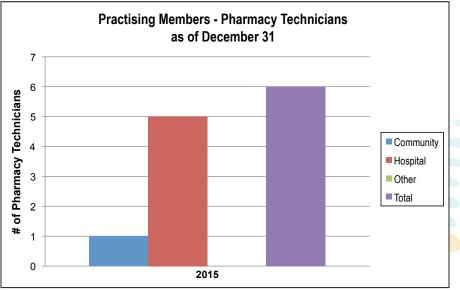
- For the first time, we are pleased to acknowledge the registration and licensure of six pharmacy technicians
- Pharmacy openings exceed closures, continuing the upward trend in the overall number of pharmacies
- The number of routine pharmacy evaluations have decreased due to other priorities such as investigating complaints, managing COMPASS<sup>™</sup> and assisting with our new legislation, in particular pharmacists being authorized to administer drugs by injection
- Professional Practice Review Indicators (see page 17 for a list of the indicators)
  - We remain concerned with indicator #1 where we observe that information gathering and documentation still require improvement. We continue to search for causative factors and pursue remedial strategies such as education
  - Indicator #8 continues to create an opportunity to align with health system expectations for safe patients and workplaces. We will continue to leverage these

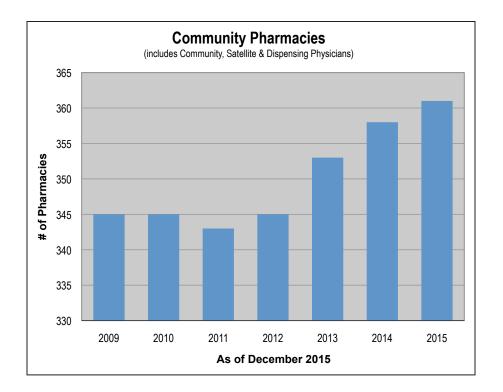
results to promote medication safety and safe medication practices within our COMPASS™ pilot project extended to Phase III by adding 40 pharmacies

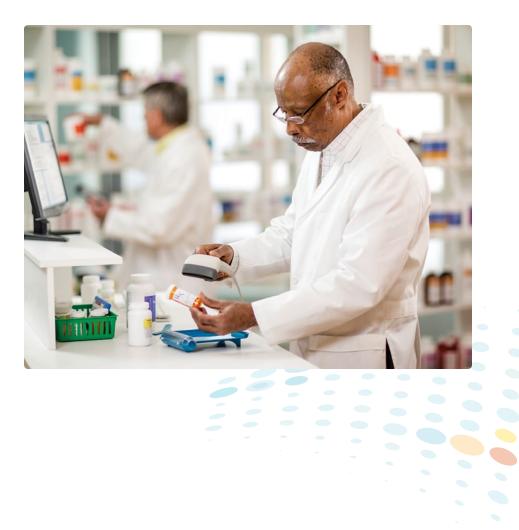
- The remaining indicators show encouraging results
- The number of complaints by allegation sustained the significant increase experienced in 2014, including the increases in these two years. We hope that the decline in the breach of privacy category will continue and we will monitor closely the complaints in the miscellaneous category for important insights. For example, active monitoring of trends has led to establishing a fitness to practise policy and process as an option within Alternative Dispute Resolution. The policy creates the opportunity for remediation with mutually agreed conditions without formal discipline

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



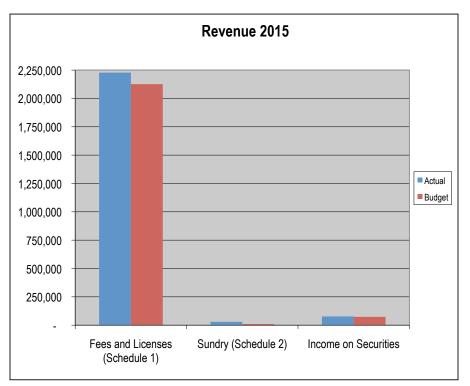


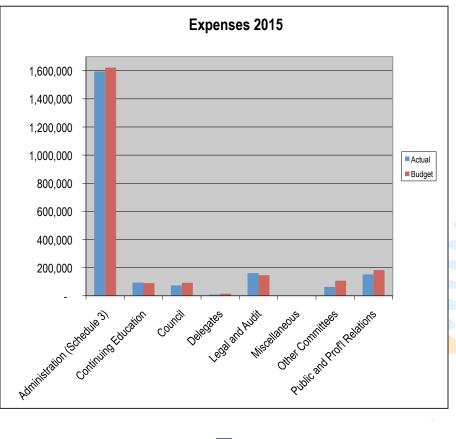




# **Financial**

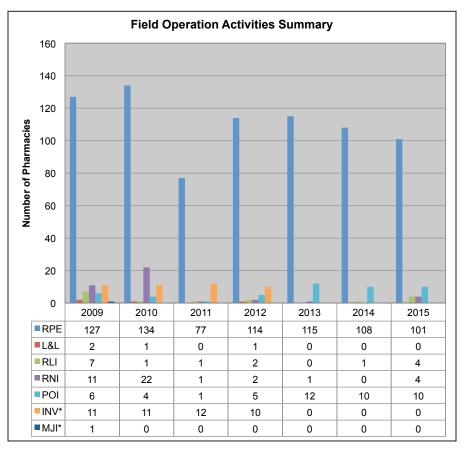
Please refer to the audited statements at the end of this report for further information and also to **Appendix B** for a more detailed comparison of our actual experience with budget. The following graphs summarize our performance:





#### **Field Operations**

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



#### 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.)
- MJI = Multi-jurisdictional investigation involving the RCMP

## Field Officers' Report of Pharmacy Practice Reviews for 2015

Fifty Pharmacy Practice Reviews were completed in the south of the province and 51 were completed in the north, for a total of 101 pharmacy visits.

Each year, the field officers review a standard set of questions with the pharmacy manager, pharmacist and pharmacy staff during their visits. These visits can last from three hours to an entire day depending upon the pharmacy operations. Nine indicators are rated for each pharmacy. Each year the questions change to reflect current practice issues. The 2015 questions are detailed below.

Results from the visits indicate that in the majority of cases, pharmacies are providing adequate pharmaceutical care to their patients. There is always room for improvement and we try our best to provide tips and suggestions during visits. As in previous years, we find that pharmacists are not documenting all relevant information regarding their patients. Information regarding the patients' medical conditions, symptoms being treated, over the counter medication and relevant social history are reviewed and discussed as critical areas of documentation. Only 22% of pharmacists are adequately documenting information relevant to the patient's ongoing care.

**The Model Standards of Practice for Canadian Pharmacists, 2009** are the <u>minimum</u> standards for the practice of pharmacy in Canada and have been adopted by the Saskatchewan College of Pharmacy Professionals as our practice standards. A general standard within the NAPRA Model Standards of Practice for Canadian Pharmacists, 2009 states:

"Pharmacists provide evidence of application of their medication and medication-use expertise through documentation."

Without this documentation, it is more difficult to provide the best possible medication therapy and to monitor the patient's ongoing progress towards treatment goals.

We are also encouraging pharmacists to spend more time interacting with patients when they obtain refills of chronic medication to ensure therapies are having their intended outcomes.

In 2015, we rated the following indicators by asking several supplemental questions. **Results** are provided for those pharmacies in compliance with an indicator of 3 – Indicator has most/complete activity/compliance (75%).

- Pharmacists are obtaining and documenting all relevant patient information to be able to provide the most appropriate and best possible medication therapy for the patient. #3 – 22%
- 2 Based on gathered and documented patient information, the pharmacists are assessing the medication therapy, identifying and resolving drug related problems, documenting care provided and providing the best possible medication therapy for the patient. #3 – 97%
- **3** The pharmacists are providing best possible medication therapy for the patient by providing appropriate patient education. #3 94%
- A Pharmacists are prescribing when in the best interest of the patient to do so. #3 97%
- 5 Pharmacists are prescribing in accordance with the SCPP\* bylaw. #3 96%
- 6 Pharmacy personnel are being used effectively and support safe medication practices within the optimal workflow. #3 98%
- 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. #3 75%
- Brug inventory is being maintained to ensure the safe dispensing of medications.
   #3 97%
- 9 All prescriptions reviewed during PPR and all record keeping requirements are being met to prevent prescription misuse, abuse and diversion. #3 98%
  - \* With the proclamation of the new Act, *The Pharmacy and Pharmacy Disciplines Act* on October 5, 2015, the Saskatchewan College of Pharmacists (SCP) changed its name to the Saskatchewan College of Pharmacy Professionals (SCPP).

Another focus of the practice reviews is quality assurance and quality improvement. We determine if the pharmacy has a formal process for medications incident reporting in place and if the pharmacists employed in the pharmacy are encouraging all of their pharmacy staff to become involved in the process to determine the contributing factors of the incident to implement changes to prevent similar incidents from occurring in the future.

Ongoing monitoring of trends is also encouraged so that system changes (such as staffing, lighting, workflow, etc.) can be implemented to provide the safest possible patient care.

SCPP's field officers Jeannette Sandiford and Lori Postnikoff would like to thank all of the pharmacists and support staff visited this year for their hospitality and their cooperation.

The ratings are summarized as follows:

**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		2015	2014	2013	2012
Number of Pharmacies		101	108	115	114
Indicator	Rating	%	%	%	%
1) Information gathering and documentation	1	0	0	0	0
	2	78	65	80	72
	3	22	35	20	28
	4	0	0	0	0
2) Patient information utilization	1	0	0	0	0
	2	1	4	9	12
	3	97	96	91	88
	4	2	0	0	0
3) Medication therapy through patient education	1	0	0	0	0
	2	0	2	4	3
	3	94	98	96	97
	4	6	0	0	0
4) Prescribing in best interest of patient	1	0	0	0	0
	2	1	0	4	0
	3	97	99	92	97
E) Describition and the fail of the large	4	2	1	4	3
5) Prescribing according to bylaws	1	0	0	1	0
	2	1 96	0	2	5
	3 4	90 3	95 5	96 1	87
6) Effective use of personnel	4	0	0	0	8 0
o) Enective use of personner	2	0	6	3	0
	3	98	94	97	100
	4	2	0	0	0
7) Formal system for medication incidents	1	0	0	0	0
	2	23	19	38	4
	3	75	80	62	96
	4	2	1	0	0
8) Safe drug inventory maintenance	1	0	0	0	0
	2	1	0	1	2
	3	97	100	99	98
	4	2	0	0	0
9) Prescription and record keeping review	1	0	0	0	0
	2	0	0	1	0
		00	00	00	100
	3	98	98	99	100

#### Other field operation activities include:

- Both Jeannette Sandiford and Lori Postnikoff participated in Council meetings, conferences and convocation ceremonies. They actively collaborate with their counterparts in other provinces
- Jeannette Sandiford is our administrative lead resource for the COMPASS<sup>™</sup> pilot project and serves on the Pharmaceutical Information Program Quality Improvement Project Steering Committee. This has resulted in the COMPASS<sup>™</sup> pilot pharmacies testing and adopting some PIP data quality improvement strategies
- 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
- Oversees our communications strategies, including our member-based social media platform
- Supports the Registration and Licensing Policies, Awards and Honours, and Professional Practise committees. The latter resulted in:
  - Visiting telepharmacy sites in North Dakota to develop our policy for Saskatchewan
  - Policies on emergency preparedness, needlestick injuries and private counselling areas
- Serves on the National Committee on Regulated Pharmacy Technicians and on the National Advisory Committee on Pharmacy Practice (NACPP)
- 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
- Works 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**

In March, SCPP welcomed Kristjana Gudmundson as our Primary Health Care Coordinator and she began a two-year term. To summarize progress to year end:

- Introduction of the Primary Health Care Coordinator position to members, other pharmacy associations and key stakeholders
- Introduction to administration of SCPP.
- Assisting with member inquiries around expanded scope of practice
  - Primarily with injections

The timeline and order of some of the deliverables for the Primary Health Care Coordinator have been altered especially due to the work required for the expanded scope of practice arising from proclamation of Bill 151. Strategies are in place to address the unfulfilled goals.

# **Complaints**

The disposition of the complaints files is summarized as follows:

COMPLAINTS SUMMARY	b/f 2014	March	* <b>April</b> Teleconference	June	* <b>July</b> Teleconference	Sept	Nov	* <b>Dec</b> Teleconference	Total 2015
# of New Complaint Files		12		10		7	8		37
# of Complaint Files Closed		3	•1	(**1)12		9	(•1) 5		32
# of Complaint Files referred to Discipline				†2			1		2
# of Complaint Files referred to Alternative Dispute Resolution Process (ADR)	**1	•1		•1	† <sub>1</sub>		1		4
# of Complaint Files Open for Investigation	5	13		8		6	7		7

#### 2015 Total Number of New Complaint Files Received and First Reviewed by the Complaints Committee: 37

- \* special teleconference convened for existing file(s) requiring immediate action; no new files reviewed
- \*\* file referred to ADR in December 2014; file closed in June 2015
- file referred to ADR in March 2015; file closed in April 2015
- •• file referred to ADR in June 2015; file closed in November 2015
- 1 file originally referred to Discipline in June 2015; decision to refer file to Discipline reconsidered and a new motion to refer to ADR made in July 2015

	b/f 2014	March	* <b>April</b> Teleconference	June	* <b>July</b> Teleconference	Sept	Nov	* <b>Dec</b> Teleconference	Total 2015
Professional Incompetence									
Alcohol/Drug Abuse		1							1
Medication Errors		2		3		4	3		12
Prescription Transfers									
Inappropriate Product Selection									
Adverse Drug Reaction (otc)							1		1
Privacy/Pharmacy Assistant		4							4
Miscellaneous/Other		3		1					4
Professional Misconduct									
Bylaws/Standards/Guideline/Ethical Infractions		2		3			2		7
Communication/Unprofessional Behaviour		10		6		4	6		26
Record Keeping		2		1		1			4
Unsupervised Assistant		2							2
Prescription Short Fills									
Pharmacist Not on Duty									
Dispensing Without Authority		1					1		2
Breach of Confidentiality/Privacy		5		2					7
Refusal to Fill		2					1		3
Patient's Right to Choose Pharmacy				1					1
Adverse Drug Reaction (otc)							1		1
Privacy/Pharmacy Assistant		4							4
Miscellaneous/Other		3		2			2		7
Proprietary Misconduct									
Advertising									
Bylaws/Standards/Guideline/Ethical Infractions		1		2			1		4
Billing Irregularities/Overcharging		2							2
Patient's Right to Choose Pharmacy				1					1
Miscellaneous/Other		2		2			1		5
TOTAL ALLEGATIONS		<sup>+†</sup> 46		<sup>††</sup> 24		†† <b>9</b>	<sup>††</sup> 19		<sup>††</sup> 98

tt more than one allegation in one file

TYPE OF COMPLAINT BY ALLEGATION	2009	2010	2011	2012	2013	2014	2015
Advertising	0	0	0	1	0	0	0
Alcohol/Drug Abuse	0	0	0	0	1	2	1
Communication/Unprofessional Behavior	8	19	11	12	8	24	26
Medication Errors	12	9	5	27	8	11	12
Record Keeping	0	0	0	1	1	1	4
Bylaws/Standards/Guideline/Ethical Infractions	7	5	1	1	4	7	11
Prescription Transfers	0	0	1	1	1	2	0
Billing Irregularities/Overcharging	2	4	3	5	1	4	2
Inappropriate Product Selection	1	0	0	0	0	1	0
Unsupervised Assistant	1	1	0	0	2	4	2
Prescription Short Fills	0	0	0	1	4	4	0
Pharmacist Not on Duty	3	1	0	0	0	1	0
Dispensing Without Authority	2	2	1	1	1	2	2
Breach of Confidentiality/Privacy	2	4	3	6	11	6	7
Adverse Drug Reaction (otc)	-	-	-	-	2	0	2
Refusal to Fill	_	-	_	-	7	4	3
Patient's Right to Choose Pharmacy	-	-	-	-	5	6	2
Privacy/Pharmacy Assistant	_	_	_	_	_	4	8
Miscellaneous/Other	2	2	9	7	2	12	16
TOTAL	40	49	*35	*63	*58	*95	*98

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

#### Authority

Under *The Pharmacy Act, 1996,* and following proclamation of Bill 151 effective October 5, 2015, under *The Pharmacy and Pharmacy Disciplines Act,* the Complaints Committee investigates all complaints received in writing and under certain circumstances, verbal complaints.

#### **Alternative Dispute Resolution (ADR)**

Prior to completing an investigation, as outlined in the SCPP Regulatory Bylaws, the file may be sent to an Alternative Dispute Resolution (ADR) process. Once an investigation has been concluded, the Complaints Committee recommends the file be closed or be referred to the Discipline Committee for consideration at a hearing. We continue to have good success with the ADR process thanks to the excellent resources of the Dispute Resolution Office, Ministry of Justice mediators.

#### Statistics

In 2015, the Complaints Committee reviewed 37 new complaints and five files were carried forward from 2014. Thirty two files were closed in 2015.

There were two files referred to discipline in 2015. Also, there were four files referred to ADR in 2015 of which two files are ongoing.

Of the files reviewed by the Complaints Committee in 2015, seven files remain open for investigation.

The Discipline Committee did not convene any hearings in 2015. As of the end of 2015, there were two pending discipline proceedings to be completed in 2016.



#### Trends

The Complaints Committee continues to monitor and report on trends to Council as they are observed and evolve. In 2015, the Complaints Committee continued to monitor an increase in the number of complaints alleging communication/unprofessional behaviour.

Other notable trends observed by the Complaints Committee in 2015 involved an increase in the number of complaints in which it is alleged the member refused early refills for Prescription Review Program drugs. The Complaints Committee recommended education to the membership through a newsletter article, which was published in the October 2015 issue of SCOP*e*.

The Complaints Committee also reported a trend in which pharmacy assistants/unlicensed technicians are playing a larger role in complaints, often requiring a statement be obtained from a pharmacy assistant/unlicensed technician regarding his/her role in and/or knowledge of a complaint. As pharmacy assistants/unlicensed technicians are not regulated by the College, the Complaints Committee is not able to request a statement directly from a pharmacy assistant/unlicensed technician and must facilitate obtaining such a statement via the pharmacy manager.

The Complaints Committee also noticed a trend in which complaints are becoming more complex in nature requiring the investigator to gather responses and statements from several parties and to interview multiple individuals before the Complaints Committee has all the information necessary to make a decision on a file. The Complaints Committee will continue to monitor these trends and will make improvement recommendations on a case-by-case basis.

#### **Changes to Regulatory Bylaws Regarding Complaints**

Following proclamation of Bill 151 on October 5, 2015, and approval of the new SCPP Regulatory Bylaws on October 16, 2015, administration for the Complaints Committee completed all necessary changes and updates to external (website, electronic Complaints Form, etc.) and internal documents with respect to the name change of the College and references to the new Act and Bylaws.

#### **Quality Assurance Survey**

Moving into 2016, administration is currently in the process of developing a Quality Assurance Survey. There will be questionnaires for both complainants and members. Completing the survey will be voluntary for complainants/members. The information gathered will be used to make quality and time efficiency improvements to communication between the College and the complainant/member during the course of a complaint investigation.

#### **Other Electronic Updates**

Also ongoing in 2016, will be improvement updates to the electronic complaints reporting system in the in1touch secure database.

We would like to thank all members who have been contacted in 2015 in regards to the Complaints process for their prompt and continued response to the Committee.





# **COMPASS™**

The Saskatchewan College of Pharmacy Professionals (SCPP) engaged in a second phase of the COMPASS<sup>™</sup> (**COM**munity **P**harmacists **A**dvancing **S**afety in **S**askatchewan) Continuous Quality Assurance (CQA) pilot project from January 1 to December 31, 2015.

#### **Purpose of Phase II**

The purpose of the second phase of the pilot was to include more pharmacies in the COMPASS<sup>™</sup> pilot as a scaling up strategy, increase public awareness of COMPASS<sup>™</sup> and develop a field officer assessment tool to evaluate continuous quality assurance activities in community pharmacies.

#### Standardized Continuous Quality Assurance (CQA) Tools

As in Phase I, the Phase II COMPASS<sup>™</sup> pharmacies utilized the standardized continuous quality assurance tools developed by ISMP Canada. These included:

- CPhIR (Community Pharmacy Incident Reporting) system (http://www.cphir.ca) for reporting medication errors and near misses (medication incidents)
- MSSA (Medication Safety Self-Assessment) tool (http://www.ismp-canada.org/mssaf) for identifying proactively any potential safety issues
- 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 second phase of the pilot started with 84 Saskatchewan volunteer pharmacies. By the end of November 2015, an additional five pharmacies volunteered, bringing the total of number of participating pharmacies to 89.

# Training

Prior to the second phase of the pilot, each COMPASS<sup>™</sup> pharmacy was asked to ensure that at least one staff member attend a training session providing information on medication safety, as well as hands-on training with the online COMPASS<sup>™</sup> tools. Participant evaluations of this program as gathered by Continuing Professional Development for Pharmacists (CPDP) were generally positive, but did provide some suggestions that will be taken into consideration when facilitating any further COMPASS<sup>™</sup> training. For those pharmacies that were not able to send someone to the training in person, an online version was made available through CPDP.

A second training session was held at the Pharmacy Association of Saskatchewan (PAS) annual conference. The content of this training session was very similar to the first training session.

### Timeline

A timeline was provided to each pharmacy manager, outlining the pilot project and the expectations about when the pharmacy should have completed or employed each of the tools. The timeline also provided deadlines for the entire pilot project.

#### Survey

During the first three months of the second phase, SCPP monitored each pilot pharmacy's ability to meet the defined deadlines for utilizing the CQA tools. SCPP's fourth-year SPEP student was then asked to develop and administer a survey to those pharmacies that had not yet met the timelines. Pharmacies that were not able to be contacted by the SPEP student were contacted by the Project Lead.

#### **Survey Findings**

The findings of the survey indicated that most of the pharmacies were having trouble finding time to get started and/or their lead person (pharmacy manager) had changed so were having to regroup before they could get started. Overwhelmingly, 98 per cent of those pharmacies surveyed, even if they hadn't engaged in any of the activities or completed any of the deadlines, thought the pilot was worthwhile and 93 per cent of the pharmacies surveyed planned to participate fully in the pilot. Some of the barriers to implementing and using the COMPASS<sup>™</sup> tools were high workload, adapting to staff changes and getting everyone together to meet—either to complete the MSSA or to have the quarterly meeting.

### **ISMP Canada Support**

Throughout the second phase of the pilot, each pharmacy was contacted on a regular basis by ISMP Canada to ensure there weren't any 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.

#### FAQs

A list of frequently asked questions (FAQs) was compiled by the ISMP Canada staff from questions that were asked by the pilot pharmacies. These FAQs will be posted on the SCPP website under the COMPASS<sup>™</sup> tab and will be used to identify possible learning opportunities to include in future training sessions.

Some support was also provided to SCPP by an ISMP Canada employee who did some onsite visits to the pilot pharmacies. He specifically visited pilot pharmacies that had not reported incidents into the CPhIR system or completed the MSSA.

#### **Field Officer Assessment**

A paper-based field officer assessment tool was developed to assess pilot pharmacies' engagement in the pilot and utilization of the online tools. The assessment tool was fully operational by July 2015. The online version of this assessment tool will be functioning in 2016.

Initially, SCPP planned to have designated visits to all COMPASS<sup>™</sup> pharmacies. However, over the course of the pilot, the COMPASS<sup>™</sup> evaluation was incorporated into the regular Pharmacy Practice Review (PPR) schedule. Due to the current PPR schedule, not all COMPASS<sup>™</sup> pharmacies received a visit in person.

#### **Public Awareness Strategies**

Two strategies were tested during the pilot in an effort to increase public awareness of COMPASS™.

#### **Strategy One**

The first strategy was to provide COMPASS<sup>™</sup> pharmacies with promotional items, specifically COMPASS<sup>™</sup> wall stickers and postcards, which could be used as bag stuffers. This strategy had varying levels of success. Some pharmacies provided patients with the postcards, but very few of the pharmacies visited used the wall stickers.

#### **Strategy Two**

The second strategy was to have the lead person attend a health region safety conference. A display was set up at the conference to showcase COMPASS<sup>™</sup> to the attendees and to allow them to browse and ask questions. This strategy was quite successful. There was a lot of interest in the information provided at the display in conjunction with the general participation of community pharmacists at the safety-focused initiative. This second strategy may be expanded upon and pursued with other health regions.

### **Communication**

To increase communication between SCPP and the COMPASS<sup>™</sup> pharmacies, a newsletter (Directions) was developed. The communication piece provided participating pharmacies with information regarding the pilot, upcoming deadlines, relevant safety information, other initiatives that COMPASS<sup>™</sup> pharmacies were participating in (for example, PIP QIP) and any "good catches." Two newsletters were provided to COMPASS<sup>™</sup> pharmacies: one in June/ July 2015 and one in December 2015.

### **Evaluation**

At the conclusion of the second phase of the COMPASS<sup>™</sup> pilot, Todd Boyle and his researchers at St. Xavier University in Nova Scotia will be surveying the COMPASS<sup>™</sup> pharmacies to determine successes and challenges during the pilot.

### **Challenges**

There were a few challenges identified by SCPP throughout the second phase.

#### **Challenge One**

The first challenge was to ensure at least one pilot pharmacy staff member was trained on medication safety and had hands-on training with the online COMPASS<sup>™</sup> tools. Although there were many possible training opportunities—in person, online, CPhIR website training modules—it was difficult to keep track of who was trained and who wasn't. While an attempt was made to ensure at least one pharmacy staff member did participate in the training, there were some pharmacies that did not take part in any of the available training.

#### Challenge Two

The second challenge was the high number of pharmacy manager/owner changes in the pilot pharmacies throughout the year. The high turnover gave rise to emails being sent to the wrong person, resulting in missing critical information. The lack of continuity also had a negative impact on the effort made by remaining staff members to participate in the pilot. In some cases, the turnover delayed the COMPASS<sup>™</sup> start date of the pilot pharmacy. Evidence suggests that some pharmacies were never able to fully participate in the pilot.

#### **Challenge Three**

The third challenge was the timing of the second phase of the pilot. During the second and third quarters of the pilot, pharmacists were participating in educational programs to prepare themselves for changes in their scope of practice, especially immunizations. During PPR visits, pharmacists expressed the extra training needed had a large impact on time and workload, resulting in difficulty getting staff trained and engaged in the process.

# **Statistics**

The statistics from the pilot regarding the reporting of incidents were promising. The number of pilot pharmacies that completed their MSSA was 64. As well, 80 quarterly meetings were held.

Total # of Incidents Reported = 4633

The top four types of incidents:

- Incorrect dose/frequency = 1099
- Incorrect quantity = 919
- Incorrect drug = 692
- Incorrect prescriber = 409

Outcomes of reported incidents are as follows:

- NO ERROR = 3796
- NO HARM = 790
- HARM = 47

# **Next Steps**

When the second phase of COMPASS<sup>TM</sup> started, one of the objectives was to increase the number of Saskatchewan pilot pharmacies using the COMPASS<sup>TM</sup> tools from 10 pharmacies to at least 80. In the end, 84 pharmacies stepped up to volunteer for Phase II. Although the pilot pharmacies were eager to participate and many have begun to use the tools and incorporate safety in their pharmacies, there is still more that can be done to ensure the COMPASS<sup>TM</sup> pharmacies fully employ all the tools needed to begin to change the culture of safety within Saskatchewan pharmacies.

#### **ISMP Statistics**

Information from ISMP Canada indicated that:

- 13 COMPASS™ pharmacies have not entered an incident
- 32 COMPASS™ pharmacies have not yet fully completed their MSSA
- 46 pharmacies have not yet held their first quarterly meeting

The above statistics require further investigation and strategy development to help ensure the COMPASS<sup>™</sup> pharmacies are comfortable with and are fully using all the tools.

#### Third Phase

Considering this information and the challenges that were identified during Phase II, the SCPP Council has decided there should be a third phase of COMPASS<sup>™</sup>. This third phase will provide the opportunity to fully understand the challenges/barriers and implement strategies to address these barriers. The SCPP Council has also decided that the number of pharmacies involved in COMPASS<sup>™</sup> will be increased to at least 120. As soon as the additional pharmacies have been recruited, the third phase of the pilot will begin.

The purpose of the third phase will be to:

- Review the issues and challenges that have been identified by the 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

By ensuring the current COMPASS<sup>™</sup> pharmacies are successful at using the tools, we will start to see concrete evidence of the benefits that can be realized to the whole system. As well, by increasing the number of pharmacies included in the pilot, more pharmacies will have access to the tools and the opportunity to become comfortable with them.

# Other Activities of the Registrar's Office

- Refined our operational plans under our 2012-15 strategic plan and prepared for our strategic plan review
- Held several meetings with the Ministry of Health to prepare for Bill 151 and the consequential bylaws
- Implemented "Advanced Method Certification," which authorizes pharmacists to administer drugs by injection
- Published six regular editions of SCOPe, our e-newsletter, plus four special newsletter editions dealing with administration of drugs; ordering, accessing, using and interpreting medical laboratory tests; and pharmacy technicians (two editions); along with extensive supportive policy statements and guidelines posted on our website
- Planned our 104th Annual General Meeting in Regina in conjunction with the PAS Conference
- Joined PAS in their regional meetings, plus 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 refinement of our in1touch information collection and data processing system for pharmacy technician registration and licensure, Advanced Method Certification and of our professional practice review process
- Implemented drug scheduling by reference to the National Model Drug Scheduling Process, which will automatically update our drug Schedule III with the National Drug Scheduling Advisory Committee recommendations

- Actively involved in the PIP CeRx Integration Advisory Committee and the PIP Quality Improvement Project
- 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) 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
- Policy development and issues management required considerable staff involvement in research, coordinating and drafting documents, especially with the introduction of Bill 151
- Continued to liaise with the funding partners of the Prescription Review Program
- Provided administrative support to Council and the Audit and Finance Committees
- Finalized guidelines on healthcare directives and substitute decision makers
- Contributed to various inquiries into the role of the pharmacist in physician assisted dying



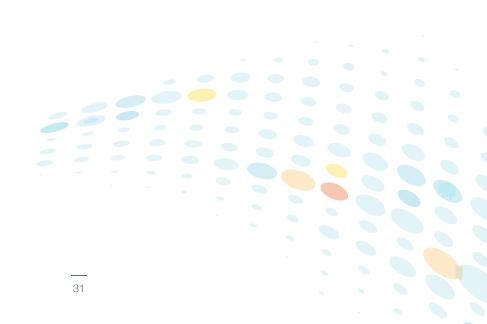
#### Conclusion

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 Jeanne Eriksen, Pat Guillemin, Christina MacPherson (on leave), Cheryl Wyatt, Darlene King, Heather Neirinck, Lori Postnikoff, Jeannette Sandiford, Audrey Solie, Amanda Stewart, Andrea Crain, Denise Carr and Kristjana Gudmundson for their dedication, hard work and excellent support. The College is fortunate to have such gifted staff.

bei

Respectfully submitted, R. J. Joubert, Registrar-Treasurer



Membership Statistics								
As of December 31	2008	2009	2010	2011	2012	2013	2014	2015
Practising Members								
Community:	942	959	987	995	996	1016	1049	1097
Hospital:	205	217	217	230	250	258	254	264
Conditional Licences:	1	1	3	3	2	5	3	6
Others Practising:	131	137	151	145	168	175	204	201
3								
TOTAL PRACTISING:	1279	1314	1358	1373	1416	1454	1510	1568
Non Practising	62	57	56	50	43	45	42	43
Retired	67	69	76	90	93	97	99	47
Associate	76	72	69	60	55	51	48	104
TOTAL MEMBERS:	1484	1512	1559	1573	1607	1641	1699	1762
Pharmacies								
Community:	330	330	330	328	330*	337	343	346
Satellite:	8	8	8	8	8	8	8	8
Dispensing Physician:	7	7	7	7	7	7	7	7
Internet:	0	0	0	0	0	0	0	0
TOTAL PHARMACIES:	345	345	345	343	345*	352	358	361

# **Appendix A**

\*Adjusted 2012 statistics according to renewal.

#### Pharmacy Changes During 2015

- 10 Openings
- 7 Closures
- 77 Manager Changes
- 26 Pharmacy Ownership Changes
- 13 Corporate Share Purchases
- 17 Trade Name Changes
- 6 Relocations
- 14 Renovations
- 5 Lock and Leave Permits Issued
- 29 Lock and Leave Amendments

# Prescriptive Authority – % of Licensed Pharmacists

Post-Coital Contraception

Qualified to prescribe Emergency

78%

Prescriptive Authority Level I Trained 100%

Prescriptive Authority Minor Ailments Trained 91%

#### **Registration and Membership Statistics 2015**

- 61 Inquiries for International Pharmacy Graduates (IPGs)
- 22 IPGs in appraisal training/assessment process

#### **Total Pharmacist Registration: 130**

- Saskatchewan BSP Graduates: 74
- 56 Registered as Conditional Practising18 Registered as Practising
- Candidates from Other Jurisdictions: 54
- 38 Candidates from other Canadian Provinces 16 IPGs

Reinstatements: 2

Total Membership Terminations: 67 32 Non Payment of Dues 35 By Request Members Deceased: 3 Converted to Retired Membership: 18

#### **Total Pharmacy Technician Registration: 6**

- 0 Saskatchewan Polytechnic Graduates
- 4 Candidates from Other Jurisdictions
- 1 Non-CCAPP Graduates
- 1 CCAPP Graduate

# Appendix B

Financial: For the Fiscal Year Ended December 31, 2015										
		Actual	Budget	Variance	Comments					
REVENUE										
Fees and Licences (Schedule	<u>1)</u>									
Pharmacy permit amendment	S	16,520	5,400	11,120	Higher activity than anticipated					
Non-Practising members		53,680	54,930	(1,250)						
Other fees		53,480	34,100	19,380	Higher jurisprudence exams than anticipated					
Pharmacy permits		518,246	507,594	10,652						
Practising members (licences	:)	1,525,205	1,480,151	45,054						
Registration		60,610	43,880	16,730	Higher registrations than anticipated					
	Sub-total	2,227,741	2,126,055	101,686						
Sundry (Schedule 2)										
Expense recoveries		3,148	7,518	(4,370)						
Other		9,356	2,711	6,645	Write off of a receivable					
Recovery of discipline costs		17,000		17,000	Unbudgeted due to policy					
	Sub-total	29,504	10,229	19,275						
Realized and unrealized		76,833	73,502	3,331						
income on securities		0.004.070	0 000 700	404.000						
	Total	2,334,078	2,209,786	124,292						
EXPENSES										
Administration (Schedule 3)										
Accounting		17,798	16,757	1,041						
Automobile (lease)		9,355	7,764	1,591						
Building operations		34,055	32,295	1,760						
Employee benefits		125,555	125,775	(220)						
Equipment rental/maint./soft	ware	75,371	126,541	(51,170)	Major system upgrade delayed to 2016					
General office		150,967	98,168	52,799	Includes COMPASS™ costs					
Postage		10,178	9,977	201						
Printing and stationery		20,077	7,426	12,651						
Registrar and inspector		96,074	91,337	4,737	Higher travel					
Salaries		1,036,543	1,088,600	(52,057)						
Telephone and fax		19,008	17,106	1,902	Phone system upgrade					
	Sub-total	1,594,981	1,621,746	(26,765)						
Continuing education		93,900	90,300		Reflects increase in practising members					
Council		73,706	92,533		Strategic planning deferred to 2016					
Delegates		9,036	14,690	(5,654)	Lower out of province attendance					
Legal and audit		161,200	146,337	14,863	Increased corporate and complaints needs					
Miscellaneous		545	-	545						
Other committees		63,266	106,794	(43,528)	Lower committee activity					
Public and professional relati	ons	151,877	182,530	(30,653)	No public education campaign/NAPRA lower					
	Total	2,148,511	2,254,930	(106,419)						
Excess of revenues over e	xpenses	185,567	(45,144)	230,711						

# 2015-2016 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 Sheldon Ryma Geoff Barton Tamara Lange Chet Mack Kishor Wasan, Ex-Officio Pamela Anderson (P) Mark Hawkins (P) Darren Bogle (A) Jonina Code (A) Lyndsay Ratzlaff (A)

# Committees

### Audit

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

### Awards and Honours

Bill Paterson \* Zack Dumont Monica Lawrence Bridget Zacharias Jeanne Eriksen (A)

#### Complaints

Leah Perrault \* (until October 2015) Kim Borschowa Bev Brooks (until July 2015) Stan Chow George Furneaux \* (acting) Darryl Leshko Janet Markowski Barb deHaan (P) (until June 2015) Lori Friesen (effective December 2016) Michael Hewitt (effective December 2016) Lori Postnikoff (A) Amanda Stewart (A)

#### Discipline

Mike Davis \* Janet Bradshaw Brad Cooper Bill Gerla (until October 2015) Christine Hrudka Spiro Kolitsas (until October 2015) Pamela Anderson (P) Ray Joubert (A)

### **Pharmacy Coalition on Primary Care**

Ray Joubert \* Myla Wollbaum Dawn Martin Kim Borschowa Derek Jorgenson Darcy Lamb Shannan Neubauer Brenda Schuster Yvonne Shevchuk

#### **Professional Practice**

Geoff Barton \* Kelly Babcock Karen Jensen Deven Johnson Don Kuntz Sue Mack-Klinger Lindsey McComas Bindu Shebi George Myla Wollbaum Jeanne Eriksen (A) Kristjana Gudmundson (A)

#### **Registration and Licensing Policies**

Mike Davis \* Sharon Lyons Glenn Murray Carol Pannell Kimberley Smith Jeanne Eriksen (A)

### **Appointees**

Canadian Council on Continuing Education in Pharmacy (CCCEP) Lisa Bagonluri

**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 Doug Spitzig

## Staff

**Registrar-Treasurer** Ray Joubert

**Assistant Registrar** Jeanne Eriksen

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

#### Primary Health Care Coordinator

Kristjana Gudmundson

#### **Administrative Staff**

Denise Carr Andrea Crain (on leave Jan-Aug) Pat Guillemin Darlene King Christina McPherson (on leave Aug-Dec) Heather Neirinck Audrey Solie Amanda Stewart Cheryl Wyatt

# 104th Annual General Meeting

Saturday, April 25, 2015

DoubleTree by Hilton Hotel & Conference Centre Regina 10:15 am Chairman – Spiro Kolitsas

#### 1 Welcome and Opening Remarks

Chairman Kolitsas called the meeting to order and welcomed those members present to the 104<sup>th</sup> Annual General meeting of the Saskatchewan College of Pharmacists.

#### 2 Introduction of Councillors and Special Guests

Chairman Kolitsas of Regina introduced the Council members as follows: President-Elect, Bill Gerla, Humboldt; Vice-President, Justin Kosar, Saskatoon; Past-President, Barry Lyons, Saskatoon; Councillors: Shannon Klotz, Estevan; Sheldon Ryma, Prince Albert; Geoff Barton, Meadow Lake; Tamara Lange, Saskatoon; Jarron Yee of Regina; Leah Perrault, Swift Current; Ex-Officio, Dean Kishor Wasan, Saskatoon; Pamela Anderson, public member, Regina; Barbara deHaan, public member, Biggar and Karolina Koziol, student observer, Saskatoon.

Chairman Kolitsas extended a special thank you to Barry Lyons, Jarron Yee and Barbara deHaan for their years of commitment and dedication to the College, as they retire from Council. Chairman Kolitsas also thanked Karolina Koziol, Senior Stick, who represented the students over the past year. Darren Bogle will be the new senior stick for the upcoming year.

This year SCP held elections in Divisions 1, 3, 5 and 7. In Division 1, Shannon Klotz, Division 5, Chet Mack and in Division 7, Bill Gerla were elected by acclamation. We held an election for Division 3 with Geoff Barton returning to Council. We wish to thank Joshua deBakker and Jeffrey Herbert for their interest in the affairs of the College.

Special guests welcomed and introduced to the assembly were Lisa Bagonluri as SCP appointee to the Canadian Council on Continuing Education in Pharmacy and Karen McDermaid as SCP appointee to the Pharmacy Examining Board of Canada. Chairman Kolitsas also thanked Debbie McCulloch who is retiring as appointee to the National Association of Pharmacy Regulatory Authority and reported that Barry Lyons will be appointed at the NAPRA meeting that was being held the same weekend in Ottawa.

#### 3 Motion to Accept 2014 Minutes as Printed and Distributed

#### MOTION: B. Seifert / C. Perentes

THAT the Minutes of the 103rd Annual General Meeting of Saskatchewan College of Pharmacists, held on Saturday, May 31, 2014 in Saskatoon, be adopted as printed and distributed.

CARRIED

#### 4 Business Arising from the Minutes

There was no business arising from the minutes.

#### **5** Memorial to Deceased Members

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

John Boland, BSP 1960 Geraldine Donohue, BSP 1968 Howard Geddes, BSP 1949 Laurene Hardstaff, BSP 1949 David Heggie, BSP 1969 David (Ross) Irvine, BSP 1956 Kris (Yeongching) Joie, BSP 1984 Thordy Kolbinson, BSP 1954 Bob Lansdall, BSP 1979 George Little, BSP 1950 William Rebeyka, BSP 1950 Robert Roberge, BSP 1951 Murray Rousay, BSP 1974 Connie Spencer, BSP 1972 Laurie Uriarte, BSP 1982 Connie Warkentin, BSP 1983

#### 6 Reports

#### 6.1 President's Annual Report

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

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

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

MOTION: S. Ryma / A. Lamb

THAT the President's report be accepted as presented.

#### CARRIED

Chairman Kolitsas resumed the Chair.

#### 6.2 Registrar's Report

Chairman Kolitsas 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. There were no questions.

MOTION: L. Perrault / J. Bradshaw

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

#### CARRIED

#### 6.3 Auditor's Report

Chairman Kolitsas 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, 2014. He directed those assembled to the Auditor's report and audited financial statements for 2013-2014 published in the Annual Report beginning on page 35.

MOTION: G. Furneaux / C. Perentes

THAT the audited Financial Statement of the College for fiscal period ended December 31, 2014, be approved as printed and distributed.

#### CARRIED

#### 6.4 Consideration of Annual Report as Printed and Distributed

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

MOTION: Y. Shevchuk / K. McDermaid

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 31.

#### 7 New Business

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

#### 8 Concluding Remarks

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

#### 9 Adjournment

Chairman Kolitsas declared the Annual General Meeting adjourned.

S. Kolitsas, President

R.J. Joubert, Registrar

# **College of Pharmacy and Nutrition**

Proud of Our Tradition and Home of Research and Practice Innovation 2015 Annual Report to the Saskatchewan College of Pharmacy Professionals

#### **University News**

#### Welcome President Stoicheff

Congratulations to **Dr. Peter Stoicheff** who has been appointed president by the University of Saskatchewan's Board of Governors. The five-year term began October 24, 2015, when Dr. Stoicheff was installed as president and vice-chancellor at the university's fall convocation.

#### **College News**

#### **Entry to Practice Doctor of Pharmacy**

Our entry to practice PharmD Program has been formally approved by the University Council. This is a major milestone for the College and everyone involved deserves congratulations for their time and efforts on making this happen. A special thank you to Linda Suveges, Yvonne Shevchuk, and Shauna Gerwing for leading the process. Work on the curriculum is on schedule and the new program is set to accept its first students in fall 2017.

#### American Association of Pharmaceutical Science Video

The College of Pharmacy and Nutrition was one of ten pharmacy schools selected in a global search for this year's American Association of Pharmaceutical Scientists video series. This prestigious opportunity was granted to the College due to our strengths in research and the leadership opportunities we provide to our students. You can watch the video by visiting our website at: www.usask.ca/pharmacy-nutrition.

#### **Clara Hughes at Pharmacy Professional Enhancement Day**

On Tuesday, October 6, Olympian Clara Hughes spoke to a crowd of over 400 people in TCU Place at the largest Pharmacy PED to date. Clara spoke about her personal struggles with mental health, and provided an inspiring message for future healthcare professionals. This year's Pharmacy PED was a joint effort between the College and the Saskatchewan Pharmacy and Nutrition Students Society.

#### Academic Program

Eighty-four students received the BSP at Spring 2015 Convocation, and 21 students the BSc (Nutrition) degree. Applications to the pharmacy program this year totaled 524. Enrolment in the BSP is 351, with 90 students in Year 1, 87 in Year 2, 89 in Year 3 and 85 in Year 4; and 96 in nutrition, with 28 students in Year 1, 25 in Year 2, 26 in Year 3 and 18 in Year 4.

### **Faculty and Staff News**

#### **Awards & Recognition**

- **Dr. Bruce Schnell** received an honorary Doctor of Science degree at the 2015 convocation ceremony.
- Dr. Susan Whiting was named Distinguished Professor at the University of Saskatchewan.
- **Dr. Kishor Wasan** and his colleagues were presented with a recognition award from the Members of the American Association of Pharmaceutical Scientists Global Health Focus Group for their work on supporting, educating and training young scientists as global health professionals.
- The recently retired **Jacqueline Huck** was recognized as an honourary member of the U of S Alumni Association at the Alumni Achievement Awards.
- **Dr. Adil Nazarali** was selected to receive the 2015 Provost's College Teaching Award for the College of Pharmacy and Nutrition.
- The Royal Pharmaceutical Society of Great Britain has designated **Dr. Adil Nazarali** as a Fellow of the Society for his distinction in the Profession of Pharmacy.

#### Retirements

- Congratulations to **Dr. David Hill** on his recent retirement. He received the honourary title Professor Emeritus upon his retirement from the University of Saskatchewan effective August 1, 2015. Thank you for your years of service, Professor Hill.
- Congratulations to **Merry Beazley** on her retirement. Merry served as Executive Assistant to the Dean since 1987. **Shannon Wiens** has been appointed Administration and Planning Specialist to continue to fill this role.
- Congratulations to **Jacqueline Huck** on her retirement. She served as Secretary to the Dean for nearly 30 years. **Sandy Knowles** has been appointed as Executive Assistant to the Dean to continue to fill this role.

#### Appointments

- **Dr. Yvonne Shevchuk** has been reappointed as the Associate Dean Academic for a second five-year term from July 1, 2015 to June 30, 2020.
- **Dr. Kerry Mansell** has been appointed as Assistant Dean, Division of Pharmacy in the College of Pharmacy and Nutrition for a three-year term effective July 1, 2015.
- **Dr. Carol Henry** has been appointed as the Assistant Dean, Division of Nutrition and Dietetics effective July 1, 2015 for a three-year term.
- **Dr. Fred Remillard** was reappointed as Associate Dean of Research and Graduate Affairs for one additional year to June 30, 2016.
- Dr. David Blackburn was promoted to Full Professor as of July 1, 2015.

- **Dr. Kishor Wasan** has been selected as the newest jury member for the Prix Galien Canada. He replaced **Dr. Jim Blackburn** as the prairie representative on the jury.
- **Dr. Kishor Wasan**, was elected as the New Chair of the Council of Deans of Pharmacy of Canada (AFPC Council of Deans) for 2015/2016.

#### **Graduate Studies and Research**

#### Academic Program

The College continues to have strong graduate programs, with 39 PhD students, 24 Master's students and one visiting research student registered in fall 2015. 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.

#### **College Research Day**

On November 10, the College held a Research Day at the Western Development Museum, which included 11 oral presentations, over 50 research posters and an inspiring keynote address. The research presented during the day included applied and bench sciences in both pharmacy and nutrition, and gave our graduate students and faculty the opportunity to learn more about each other's work.

Thank you to keynote speaker **Dr. D. Lynn Kirkpatrick** (BSP, 1978; PhD, 1981) for joining us for the day. Dr. Kirkpatrick's career has focused on cancer drug discovery and development, and she now heads the biotechnology company PHusis Therapeutics.

#### **NSERC Grants**

• **Dr. Hector Caruncho** - Reelin regulation of the crosstalk between the Immune and Nervous systems – \$24,000

This research explores the role of reelin, a protein expressed both in brain and blood plasma, in regulating immune and neural plasticity and in facilitating the crosstalk between the immune and nervous systems.

• Dr. Ed Krol – Toxicity and Biological Reactivity of Naturally Occurring Polyphenols – \$20,000

Dr. Krol's research program explores the structure and chemical reactivity of naturally occurring polyphenols to better understand the effectiveness of natural health products.

 Dr. Ildiko Badea – Engineering functionalized diamond nanoparticles for intracellular delivery of nucleic acids – \$30,000

Dr. Badea is seeking to understand how the structure-activity relationship of novel nanomaterials such as nanodiamonds and their cargo of genetic materials can influence delivery efficiency and mechanism of toxicity.

• **Dr. Anas El-Aneed** – Mass spectrometric approaches to assess the biodistribution and fate of cationic surfactants used as drug delivery nanoparticles – \$20,000

The goal of Dr. El-Aneed's research program is to develop new approaches to explore how the cellular fate of certain drug delivery nanoparticles is responsible for their cytotoxic behavior.

### **IDRC Grant**

**Dr. Carol Henry** received \$1.76 million towards a \$3.85 million project with her colleagues in Ethiopia to bring higher-yielding, more nutritious chickpea and bean varieties to more than 70,000 farming households. **Drs. Gordon Zello** and **Susan Whiting** are also part of this important project.

#### Canada First Research Excellence Fund

Congratulations to **Drs. Carol Henry**, **Susan Whiting** and **Anas El-Aneed**, who are part of the team awarded \$37.2 million over seven years by the Canada First Research Excellence Fund for leading-edge research and technology that will transform crop breeding and provide innovative solutions to national and global food security.

#### College leads development of new \$2 million innovation fund

A consortium of Saskatchewan's leading innovation organizations have come together with The Centre for Drug Research and Development to establish a new \$2 million CDRD-Saskatchewan Innovation Fund. The fund will support and accelerate the commercialization of cutting-edge early-stage health technologies stemming from the province's top research institutions.

#### \$5 Million Endowed Chair in Rational Drug Design

The endowment fund for the Saskatchewan-GlaxoSmithKline Research Chair in Rational Drug Design was granted to the College as part of GlaxoSmithKline's \$25 million Pathfinders Fund for Leaders in Canadian Health Science Research. The pathfinder program was established to help Canada become a world leader in research and development. It encourages health science research and fosters innovation in Canadian Universities.

#### Fedoruk Radiopharmacy

The Fedoruk Chair in Radiopharmacy will be an Enhancement Chair, made possible through a generous grant from the Sylvia Fedoruk Canadian Centre for Nuclear Innovation at the University of Saskatchewan. The Fedoruk Centre has provided \$5 million to build capacity for nuclear medicine and imaging research in Saskatchewan.

#### **Service Activities**

#### **Continuing Professional Development for Pharmacists**

In 2015, CPDP trained nearly 900 pharmacists to administer medications and flu vaccine by injections. Thank you to the Pharmacy Association of Saskatchewan for providing \$350,000 in funding to train pharmacists to administer injections.

#### medSask, Your Medication Information Service

The medSask 40th Anniversary Celebration took place on March 26. The College was excited to announce that medSask has received increased funding: approximately \$300,000 from the Saskatchewan Ministry of Health and \$100,000 from the Saskatchewan College of Pharmacy Professionals.

#### **Medication Assessment Centre**

MAC and the non-profit charity Student Wellness Initiative Toward Community Health (SWITCH) have teamed up to improve health care in Saskatoon's core neighbourhoods. Dr. **Jaris Swidrovich** provides medication assessments for SWITCH patients on a weekly basis as a satellite clinic of MAC.

#### **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. We're currently working on updating our website, which will launch mid-2016.

Website: www.usask.ca/pharmacy-nutrition 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 2015, please contact **Kieran Kobitz**, Communications and Alumni Relations Specialist, at kieran.kobitz@usask.ca to update your email address and other contact information.

#### **Dean's Celebration Tour**

**Dean Wasan**, **Andy Collin**, Development Officer, and **Kieran Kobitz** have been busy visiting pharmacists and dietitians in Saskatoon, and hosting alumni receptions in Calgary and Edmonton.

Tentative destinations on the tour during 2016 include Regina, Yorkton, and Calgary. Dates and locations will be announced in our newsletter, on our website event calendar, and on social media.

### **Concluding Remarks**

Our faculty, staff, and students were all very busy in 2015, and 2016 promises to be just as busy and exciting. We've reconnected with alumni, reached a major milestone with the PharmD, 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 2016 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, 2015





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

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

#### **INDEPENDENT AUDITOR'S REPORT**

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

We have audited the accompanying financial statements of **Saskatchewan College of Pharmacy Professionals**, which comprise the statement of financial position as at December 31, 2015, 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, 2015, 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, Chartered Accountants Licensed Professional Accountants

April 29, 2016 Regina, Saskatchewan

## SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

**Statement of Financial Position** 

As at December 31, 2015

		2015 Capital and Intangible				
	Operating Fund	Operating Asset		Total		2014 Total
CURRENT ASSETS						
Cash	\$ 50,992	\$	-	\$ 50,992	\$	235,193
Marketable securities (Note 3)	2,556,664		105,610	2,662,274		2,239,865
Accounts receivable	9,811		-	9,811		61,482
Due from the SCP Centennial Scholarship Fund Inc. (Note 11)	6,609		-	6,609		6,372
Prepaid expenses	17,701		-	17,701		12,743
	2,641,777		105,610	2,747,387		2,555,655
CAPITAL ASSETS (Note 4)		×	181,156	181,156		211,332
INTANGIBLE ASSETS (Note 5)	-		4,957	4,957		24,787
	\$ 2,641,777	\$	291,723	\$ 2,933,500	\$	2,791,774
CURRENT LIABILITIES						
Accounts payable (Note 6)	\$ 85,013	\$	-	\$ 85,013	\$	119,194
Government remittances payable	19,190		-	19,190		16,724
Fees and licences collected in advance	1,264,382		-	1,264,382		1,220,549
Current portion of obligations under capital leases (Note 7)	· · ·		3,717	3,717		7,760
	1,368,585		3,717	1,372,302		1,364,227
OBLIGATIONS UNDER CAPITAL LEASES (Note 7)	-		2,518	2,518		6,675
	1,368,585		6,235	1,374,820		1,370,902
FUND BALANCES						
Invested in capital and intangible assets	-		179,878	179,878		221,684
Externally restricted for building development	-		105,610	105,610		99,670
Unrestricted	1,273,192		-	1,273,192		1,099,518
	1,273,192		285,488	1,558,680		1,420,872
	\$ 2,641,777	S	291,723	\$ 2,933,500	\$	2,791,774

See accompanying notes

Approved by Council

Councillor

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Councillor

## SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

## **Statement of Operations and Changes in Fund Balances**

Year ended December 31, 2015

	Operating Fund 2015	 Operating Fund 2014	Intai As Fu	al and ngible sset ind )15	apital and ntangible Asset Fund 2014	Total 2015	 Total 2014
REVENUES							
Fees and licences (Schedule 1)	\$ 2,227,741	\$ 2,130,514	s		\$ -	\$ 2,227,741	\$ 2,130,514
Sundry (Schedule 2)	29,504	55,885		-	-	29,504	55,885
Realized and unrealized income	,	i i				,	,
on marketable securities (Note 3)	76,833	129,188		6,818	7,488	83,651	136,676
	2,334,078	2,315,587		6,818	7,488	2,340,896	2,323,075
EXPENSES							
Administration (Schedule 3)	1,594,981	1,465,029		_	-	1,594,981	1,465,029
Amortization	-	-		53,978	59,121	53,978	59,121
Continuing education	93,900	90,360		-	-	93,900	90,360
Contribution		300,000		-	-	-	300,000
Council	73,706	67,150		-	-	73,706	67,150
Delegates	9,036	1,287		-	-	9,036	1,287
Interest	-	-		599	1,271	599	1,271
Legal and audit	161,200	141,486		-	-	161,200	141,486
Miscellaneous	545	7,459		-	-	545	7,459
Other committees	63,266	67,351		-	-	63,266	67,351
Public and professional relations	151,877	155,476		-	-	151,877	155,476
	2,148,511	2,295,598		54,577	60,392	2,203,088	2,355,990
Excess (deficiency) of revenues over expenses	185,567	 19,989		(47,759)	 (52,904)	 137,808	 (32,915)
<b>Fund balance, beginning of year</b> Interfund transfers (Note 8)	1,099,518 (11,893	1,119,251 (39,722)	í	321,354 11,893	334,536 39,722	1,420,872 -	1,453,787
FUND BALANCE, END OF YEAR	\$ 1,273,192	1,099,518	\$	285,488	\$ 321,354	\$ 1,558,680	\$ 1,420,872

See accompanying notes

## SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS Statement of Cash Flows

Year ended December 31, 2015

	 2015	 2014
CASH FLOWS FROM (USED IN)		
OPERATING ACTIVITIES		
Excess of revenues over expenses	\$ 137,808	\$ (32,915)
Items not affecting cash		
Amortization	53,978	59,121
Realized and unrealized (income) loss on		
marketable securities	(83,651)	(136,676)
Net change in non-cash working capital balances (Note 9)	58,594	34,609
	166,729	(75,861)
CASH FLOWS FROM (USED IN) FINANCING ACTIVITIES Repayment of demand loan	<u>-</u>	(1,249)
CASH FLOWS FROM (USED IN) INVESTING ACTIVITIES		
Capital asset purchases	(3,974)	(24,104)
Purchase of marketable securities	(1,850,000)	(1,050,000)
Redemption of marketable securities	1,511,242	1,410,446
Capital lease principal payments	(8,198)	(13,916)
	(350,930)	322,426
INCREASE IN CASH DURING THE YEAR	(184,201)	245,316
CASH (BANK INDEBTEDNESS), BEGINNING OF YEAR	235,193	(10,123)
CASH, END OF YEAR	\$ 50,992	\$ 235,193

See accompanying notes

#### 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. Effective October 5, 2015 in accordance with Bill 151, the College changed its name from Saskatchewan College of Pharmacists.

#### 2. SIGNIFICANT ACCOUNTING POLICIES

#### **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:

a) Operating Fund

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

b) 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 interest income earned on the investment of contributions and is reduced by amortization and interest on related lease obligations.

#### Use of estimates

The preparation of financial statements in conformity with Canadian accounting standards for notfor-profit organizations 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.

#### Cash

Cash consists of cash on hand and balances with banks.

#### **Revenue recognition**

Fees are recorded as revenue over the applicable membership period or when services are performed, measurable, and collectability is assured. Fees and licences received in advance are recorded as fees and licences collected in advance and recognized into revenue during the appropriate period.

#### 2. SIGNIFICANT ACCOUNTING POLICIES (continued)

#### **Revenue recognition (continued)**

Fees and licences collected in advance at December 31, 2015 relate to the membership year July 1, 2015 through June 30, 2016 and to the permit year December 1, 2015 through November 30, 2016.

#### **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.

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 interest income or 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.

#### 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.

#### 2. SIGNIFICANT ACCOUNTING POLICIES (continued)

#### 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.

#### **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

#### Intangible assets

Intangible assets are accounted for at cost. Amortization is based on their estimated useful life using the straight line method over the following period:

Software	5 years
----------	---------

#### 2. SIGNIFICANT ACCOUNTING POLICIES (continued)

#### 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.

#### **3. MARKETABLE SECURITIES**

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

Operating Fund	2015	2014		
	Fair Value	I	Fair Value	
Cash equivalents Fixed income	\$ 127,644 2,429,020	\$	125,296 2,014,899	
	\$ 2,556,664	\$	2,140,195	
Capital and Intangible Asset Fund	2015		2014	
	Fair Value	Fa	ir Value	
Fixed income Equities	\$ 63,022 42,588	\$	61,897 37,773	
	\$ 105,610	\$	99,670	
Total	<u>2015</u>		2014	
	Fair Value	<u> </u>	Fair Value	
Cash equivalents Fixed income Equities	\$ 127,644 2,492,042 42,588	\$	125,296 2,076,796 37,773	
	\$ 2,662,274	\$	2,239,865	

There were unrealized losses in the current year of \$17,716 (unrealized gains in 2014 of \$41,881) included in realized and unrealized income on marketable securities.

#### 4. **CAPITAL ASSETS**

			2015				2014
	Cost	-	cumulated nortization	N	et Book Value	N	let Book Value
Land	\$ 15,000	\$	-	\$	15,000	\$	15,000
Building	336,039		262,610		73,429		84,631
Equipment	255,764		243,422		12,342		15,350
Equipment under capital							
lease	14,704		8,715		5,989		15,666
Furniture and fixtures	94,903		83,110		11,793		13,684
Leasehold improvements	87,943		25,340		62,603		67,001
	\$804,353	\$	623,197	\$	181,156	\$	211,332
INTANGIBLE ASSETS			$\langle \rangle$				

#### 5. **INTANGIBLE ASSETS**

6.

		2015				20	)14
		Accumulated	Net	Book		Net	Book
	Cost	Amortization Value			Va	ılue	
Software	\$ 99,150	\$ 94,193	\$	4,957	\$		24,787
ACCOUNTS PAYA	DIE						
	ABLE			2015			2014
Trade			\$	<u>2015</u> 60,34	9	\$	
			\$			\$	2014 94,530 24,664

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.

#### 7. OBLIGATIONS UNDER CAPITAL LEASES

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

2016	\$ 3,813
2017	2,750
	6,563
Less amount representing interest	(328)
	6,235
Less current portion	(3,717)
	\$ 2,518

#### 8. INTERFUND TRANSFERS

Amounts transferred from the Operating Fund of \$11,893 (2014 - \$39,722) 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

	 2015		2014
DECREASE (INCREASE) IN ASSETS			
Accounts receivable	\$ 51,671	\$	(52,684)
Due from the SCP Centennial Scholarship Fund Inc.	(237)		(5,927)
Prepaid expenses	(4,958)		6,154
INCREASE (DECREASE) IN LIABILITIES			
Accounts payable	(34,181)		43,908
Government remittances payable	2,466		1,330
Fees and licences collected in advance	43,833		41,828
	\$ 58,594	\$	34,609

#### **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.

#### 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.

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

Year ended December 31, 2015

	2015	
Amendments	\$ 16,520	\$ 23,830
Non-practising members	53,680	54,093
Other fees	53,480	53,230
Pharmacy (permits)	518,246	497,073
Practising members (licences)	1,525,205	1,447,763
Registration	60,610	54,525
	\$ 2,227,741	\$ 2,130,514

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

Year ended December 31, 2015

	 2015		2014		
Expense recoveries	\$ 3,148	\$	-		
Other	9,356		4,385		
Recovery of discipline costs	17,000		51,500		
	\$ 29,504	\$	55,885		

# SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS **Schedule of Administrative Expenditures - Schedule 3**

Year ended December 31, 2015

	2015	2014	
Accounting	\$ 17,798	\$	17,110
Automobile	9,355		5,574
Building operations	34,055		33,115
Employee benefits	125,555		119,475
Equipment rental and maintenance	75,371		66,898
General office	150,967		189,165
Postage	10,178		11,777
Printing and stationery	20,077		6,048
Registrar and inspector	96,074		96,894
Salaries	1,036,543		901,446
Telephone and fax	19,008		17,527
	\$ 1,594,981	\$	1,465,029

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#### **INDEPENDENT AUDITOR'S REPORT**

To the Directors of the SCP Centennial Scholarship Fund Inc.

We have audited the accompanying financial statements of SCP Centennial Scholarship Fund, which comprise the statement of financial position as at December 31, 2015, the statement of operations and change in net assets and cash flows for the years 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 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 audits 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 in our audits 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, 2015 and the results of its operations and its cash flows for the years then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Chartered Professional Accountants, Chartered Accountants Licensed Professional Accountants

April 29, 2016 Regina, Saskatchewan

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

As at December 31, 2015

	2015		2014	
ASSETS				
Cash	\$	8,368	\$	4,700
Marketable securities (Note 3)		292,457		296,140
	\$	300,825	\$	300,840
LIABILITIES				
Accounts payable	\$	6,859	\$	5,671
Due to the Saskatchewan College of Pharmacy Professionals		6,608		6,372
		13,467		12,043
NET ASSETS Net assets		287,358		288,797
	\$	300,825	\$	300,840
See accompanying notes				

## SCP Centennial Scholarship Fund Inc. Statement of Operations and Changes in Net Assets

Year ended December 31, 2015

		2015		2014	
REVENUE					
Contribution from the Saskatchewan College of Pharmacy Professionals	\$	-	\$	300,000	
Interest revenue		8,823		3,374	
	\$	8,823	\$	303,374	
Accounting Scholarship		10,262		6,782 2,000	
5		10,262		, , , , , , , , , , , , , , , , , , ,	
		10,262		8,782	
Excess of (deficiency of) revenue over expenditures		(1,439)		294,592	
Net assets, beginning of year		288,797		(5,795)	
Net assets, end of year	T	287,358	\$	288,797	

See accompanying notes

## SCP Centennial Scholarship Fund Inc.

## Statement of Cash Flows

Year ended December 31, 2015

	2015		2014	
CASH FLOWS FROM (USED IN)				
OPERATING ACTIVITIES				
(Deficiency of) excess of revenues over expenditures	\$	(1,439)	\$	294,592
Realized and unrealized (income)/loss on				
marketable securities		(8,823)		(3,374)
Net change in non-cash working capital balances (Note 4)		1,424		6,248
		(8,838)		297,466
INVESTING ACTIVITIES Purchase of marketable securities		-		(297,900)
Redemption of marketable securities		12,506		(297,900) 5,134
		12,506		(292,766)
INCREASE IN CASH DURING THE YEAR		3,668		4,700
CASH, BEGINNING OF YEAR		4,700		-
CASH, END OF YEAR	\$	8,368	\$	4,700
See accompanying notes				

## SCP Centennial Scholarship Fund Inc. Notes to the Financial Statements Year ended December 31, 2015

#### 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

#### Use of estimates

The preparation of financial statements in conformity with Canadian accounting standards for notfor-profit organizations 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.

#### **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, bonds and equities) which are measured at fair value. Changes in fair value are recognized in the statement of operations.

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 interest income or 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, 2015

#### 2. SIGNIFICANT ACCOUNTING POLICIES (continued)

#### 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.

#### Interest rate risk

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.

#### **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.

## SCP Centennial Scholarship Fund Inc. Notes to the Financial Statements Year ended December 31, 2015

#### 3. NET CHANGE IN NON-CASH WORKING CAPITAL BALANCES

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

Operating Fund		2015		2014	
	F	Fair Value		Fair Value	
Cash eqivalents	\$	14,527	\$	17,495	
Fixed income		277,930		278,645	
	\$	292,457	\$	296,140	

#### 4. NET CHANGE IN NON-CASH WORKING CAPITAL BALANCES

		2015	 2014
INCREASE IN LIABILITIES Accounts payable	s s	1,188	321
Due to the Saskatchewan College of Pharmacy Professionals		236	5,927
	\$	1,424	\$ 6,248

#### 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.



SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

## ANNUAL REPORT 2015

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